

(Continued)

Members voted to do pass the measure out of committee.

HB3021, authored by Sen. Ben Brown, D-Oklahoma City, was also approved by members. It requires individual and group insurance policies to provide coverage for equipment, services and supplies for the treatment of diabetes. Senate staff explained that there were minor changes to the bill to help strengthen the language. The most significant changed any policies issued or renewed after Nov. 1, 1996, not policies withstanding, as previously stated in the bill.

The subcommittee did not hear the budget presentation from the Office of Juvenile Affairs.

FROM: MARTA MCCLOSKEY

DATE: 03/27/96

PREVENTION KEY IN FIGHT AGAINST CHILD ABUSE, HOUSE CHILDREN, YOUTH AND FAMILY SERVICES COMMITTEE TOLD

■(GIT) Efforts aimed at preventing child abuse are the key in the fight against what the leader of a national organization told the House's Committee on Children, Youth and Family Services is an ever growing problem in the United States.

"Prevention is the only direction we can go if we are going to deal with this serious problem," Dr. Terri Gallmeier, vice president of the National Committee to Prevent Child Abuse, told the committee members Thursday.

That, Gallmeier explained, differed from early efforts at addressing child abuse and neglect, which focused on intervention with families after the abuse occurred.

A conference last year, Gallmeier said, reexamined the problem of child abuse and came to the conclusion that while more is known, the problem is still growing, particularly the more serious forms of abuse and neglect.

Among the other conclusions drawn by the panel, Gallmeier said, were that defining child abuse is a complex problem, particularly when attempting to delineate between positive parenting in different cultural settings; that abuse statistics alone are not an effective way to measure the amount of abuse in a community, state or in the nation; that while enacting laws aimed at preventing child abuse may feel good, there is no certainty the laws impact families and decrease child abuse; that intense intervention, rather than long-term efforts, are more affective; and that it is best to start intervention programs as early as possible, including prenatal efforts.

Additionally, Gallmeier told the committee, recent studies have been able to classify families into three groups and determine what type of prevention efforts are effective for them.

The first group, she said, are the consumers, families who know they have problems and need help and know where to go to get that help.

"It is with these families," Gallmeier said, "that prevention programs have been most effective."

It is in the other two groups — the dependents and the broken families — that the increases in child abuse instances are attributed, Gallmeier said.

According to Gallmeier, "The dependents may know they are struggling, but they don't know why or how to get services or how to access the services that are available for them.

"They are an at-risk group. They are not going to read a pamphlet, go home and change their behavior."

An effective prevention effort for this group, Gallmeier explained, involves modeling in both a home visit and group-based setting.

The third group, Gallmeier said, are the ones incapable of forming a parental relationship with their children and are also incapable of raising a child. While this group was once thought to make up only 10 percent of the population, Gallmeier added, that number is now believed to be growing.

"These are the people for whom none of our existing programs will have an effect," Gallmeier said.

(Continued)