



**REMARKS OF ATTORNEY GENERAL JANET RENO BEFORE**

**THE AMERICAN ACADEMY OF PEDIATRICS**

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**P R O C E E D I N G S**

Dr. Donald E. Cook, President of the American Academy of Pediatrics (AAP): Our final public service award goes to US Attorney General Janet Reno, and we are extremely honored and privileged that Ms. Reno has joined us here to receive her award.

President Clinton appointed Ms. Reno Attorney General in 1993. In the past seven years, she has focused specific attention on the environment in which children can learn and play. She knows the best way to combat violence and delinquency is to ensure that all children have safe, healthy and nurturing environments. That is why the Academy is honoring Attorney General Reno with its Excellence in Public Service Award.

We are honoring Ms. Reno today for her prevention and early intervention efforts to keep children away from gangs, drugs and violence. Her department is dedicated to offering appropriate programs that can help children and adolescents from becoming victims of criminals.

Under her leadership the Justice Department has tackled the problems such as underage drinking, child abduction, school violence and delinquency. She invited the Academy to participate in "Safe from the Start," a national summit on children exposed to violence.

The Justice Department is also helping promote (inaudible) and Medicaid programs providing guidance on internet safety and offering information on programs and events designed for young people with disabilities.

Ralph Waldo Emerson said "To know even one life has breathed easier because you have lived, this is to have succeeded." Ms. Reno, you have succeeded in making the lives of children safer. For your dedication and diligence, it is my honor to present you with the American Academy of Pediatrics' Excellence in Public Service Award. On behalf of the nation's pediatricians, I thank you for your admirable efforts towards improving the lives of children.

Attorney General Janet Reno: Thank you, Doctor Cook, and thank you all. I can't think of any other group that I would rather receive an award from. For me you are the heroes and the heroines. You're on the front lines every day but you're looking for long-range solutions. You don't shrink from the challenges. I salute you for your work, your leadership and all you have done in efforts to prevent youth violence.

Now, the Department of Justice has been a very grateful beneficiary of some of your extraordinary efforts. Members of the Academy have become great allies and valued partners in the Department's "Children Exposed to Violence Initiative" and in our "Safe from the Start" summits around the country.

We've consulted with you on some of our toughest cases involving children exposed to methamphetamine labs and children traumatized by gun violence. We've relied on your insights in crafting new approaches to intervening in cases of child abuse and maltreatment. And, we have joined forces in developing prevention programs that are making a difference. You have published research that has been so instrumental to our policy development. Thank you for all you do for the children of America, and thank you so much for this award. I am very honored and privileged.

In about 3 months, I'm going home. I'm going to then figure

out what I do when I grow up, get a secretary and somebody to answer the telephone and the correspondence, and then I'm going to get in my red truck and see America, talk to the people that I didn't have a chance to talk to long enough, because I had to be back in Washington, climb mountains that I didn't have a chance to climb, because I had to be back in Washington. But, I intend to do everything I can to continue my advocacy for children. Today, I would like to discuss with you some of the challenges and the opportunities that I think we still face, as we seek to give our children a strong and positive future.

Children are substantially more vulnerable to crime than adults. Our young people, particularly teenagers, commit about 18 percent of the crime. They make up 33 percent of crime victims. Juveniles are the victims in 25 percent of all violent crimes and in 20 percent of family violence incidents reported to law enforcement. We all know that children who are victims of or witnesses to violence suffer devastating consequences. The scars, as you well know, are not only physical.

Exposure to violence effects how children see, how they feel, and how they learn. Children who are victims of and witnesses to violence are at a higher risk of developing behavioral problems, substance abuse, depression, suicide tendencies and violent criminal behavior. Being abused or neglected as a child increases the likelihood of arrest as a juvenile by 53 percent and the likelihood of arrest for a violent crime as an adult by 38 percent. Simply put, violence is the number one cause of violence. It is a viscous, often unrelenting, cycle that must be broken, and the question is how do we do it.

I think one of the first steps that we must take is to enhance multidisciplinary efforts to prevent youth violence and to understand its causes. Not long ago, law enforcement professionals and healthcare providers operated in fairly separate orbits, sometimes oblivious to one another, sometimes, unfortunately, working at cross purposes to the detriment of both professions and the people we serve. Each profession held a different piece of the puzzle making up a

child's life, but no discipline could see the whole picture. As a result, children fell through the cracks, and they did not get the support from either or any of the professions that they deserved.

In recent years, thanks so much to what you have done, we have come together to show how much more effective we can be when we are united, but we can do more in multidisciplinary efforts to deal with the issue of violence.

First, I think we have to look to the university setting not the medical school setting and not to the law school setting by themselves but the university setting and understand a pediatrician is not going to solve the problem of violence by herself. The lawyer or prosecutor is not going to solve the problem or the judge acting alone, but we must act together. And I would like to encourage a revolution in American higher education so that we start learning as lawyers about public health, about medicine, about teaching, if we have any inclination to pursue the issues of children and how they may have a chance to grow in a strong, constructive way.

The teacher trying to teach the second grader how to read will not have had education in what to look for in terms of physical problems. The doctor in trying to figure out what the problems are with the child that he or she is seeing won't know what to do if they don't understand the educational processes and what are the best means and processes for learning. The pediatrician is going to look at the court system aghast. Even if they knew more about the court system they sometimes might look at it aghast, and I will touch on that in a moment. But, if the court knows about some of the crimes and some of the issues that the court should consider, if they can be trained in the processes in the university setting or otherwise, I think we can make a tremendous difference.

There is one group of people that, when they're doing a good job, know the answers to most of the questions that the different disciplines consider, and that's parents. But how we teach people to be parents is a challenge that I

think the American university system faces as well. Community policing can be the eyes and ears of doctors, of prosecutors, of judges in terms of identifying abuse early on, in terms of recognizing a child who is at risk at school, but we must train that community police officer on what to look for.

The second challenge that I think the university setting faces is how do we go out into the community, into the real world, and make it our laboratory--not only for solving problems, but for building communities that create a net around children and families at risk. How do we promote, organize and build healthy communities? Now we've taken some steps in Washington to try to begin to do that, but we've got a ways to go. When I got there, HHS was doing its thing, Education was doing its thing, and Justice was doing its thing. Now, Donna Shalala, Dick Reilly, and Alexis Herman of Labor and I have combined together to develop healthy children, safe schools grants that recognize that no one department is going to do it all, that we need to work together in community building to create opportunities that really focus on the long-range answers to children who are at risk.

Now, we may be successful in one neighborhood, but how do we expand it beyond that neighborhood. Liz Shore, who I have the greatest respect for, says to expand it beyond one neighborhood always creates a risk for a program. But let's use the ingenuity in America's higher education amongst pediatricians and lawyers to begin to make a difference. And, I would invite you to consider what we're doing at the Department of Justice. We've established a program called "Strategic Approaches" where we've gone in many instances to the university or the college in the area and said, "We need to work with you to address the issue of guns or youth violence or a particular project." That would be great if we had pediatricians involved in some of those initiatives.

I have developed a whole new respect for public health and the discipline of public health and its processes. And I would like to challenge us to figure out how we include public health concerns in pediatric intake evaluations. What would happen if every pediatrician asked children in

his or her practice about guns in the home, safe gun storage, bullying in school, conflict resolution at school, drug and alcohol abuse, self-esteem issues, depression, violence in the family? I just think it's a tremendous opportunity for us to use the processes of the various disciplines to make a difference.

And we see afoot in the country amongst practitioners the development of multidisciplinary teams that are making an extraordinary difference. The Children's Advocacy Centers throughout the country are powerful models of multidisciplinary intervention programs that work. By enabling law enforcement officers, child protection workers, prosecutors, victim advocates and therapists to coordinate interviews and referral services, children are better heard and better served and perpetrators of violence against children are more likely to be brought to justice.

The Department has committed over \$4 million in funding to support CACs and we will do all we can to continue that support. Other multidisciplinary intervention approaches like the New Haven Child Development Community Policing Program are making a tremendous difference.

As part of the Department's efforts to enhance multidisciplinary intervention strategies, I have had meetings with medical, mental health, public health experts for roundtable discussions on how we can work together. Wonderful ideas have come out of these programs and these opportunities. A trauma surgeon talked with me about what we can do to focus on the children who are the victims, and who are the perpetrators, who are the witnesses to intervene quickly to make a difference, and if this works out, to make it an acceptable standard of medical care.

Members of the Academy have taken part in this effort. They have told us that we need to improve medical training curricula on child maltreatment and family violence issues, to improve collaboration between medical professionals treating children and women exposed to family violence. We need to do so much more. But, armed with the knowledge that reaches across disciplines, united in our determination to end the cycle of violence, to prevent our youth from

becoming the victim and the perpetrator, we must prevent, we must intervene, and we must hold people accountable.

Good parents are the best caregivers. Good parents are the best preventers of violence. Good parents are hard to find. I have shared with some of you before that I have had the opportunity to raise two 15-year-old twins, a boy and a girl. It takes hard work, intelligence, love and an awful lot of luck, but there is no substitute for that as one of the most rewarding experiences that you can have.

Too many parents today don't know how. They don't know how to talk to their children and they will say so. They do not know whether to exercise discipline or to give them a hug. They don't know how to react when the teacher calls and says, "Johnny's not reading well." They don't know how to react with a snuffle. They are ill-prepared. How do we give them the tools to do the job? I think that is one of the single issues that we must face together. How do we teach them when to talk, when to give the pat on the back, when to discipline, how to hold the child accountable?

This will be one of our challenges, but incidences of child abuse decrease and studies report up to a 60 percent drop in destructive behavior among children served when parenting skills are provided. I'm proud to tell you that we will begin a new parenting initiative in Washington early next year. Every parent of every baby born in the District soon will receive a package at the hospital, including coupons for free nurse home visitation, videos on child development and discipline, safety, health and nutrition, child care and early literacy, a parent resource guide, a children's passport to record inoculations and store current photos to help recover abducted children, a guide to the Department's new parenting web site, and books to promote early literacy. I hope this new initiative will be replicated across the country.

But good parents must be violence-free parents. Most of the time, I think the medical profession is ahead of the law profession, but in the case of domestic violence, I think too often, we are both too far behind. Just think of what the medical community can do if the emergency room

physician, the obstetrician, the pediatrician, the family physician come together and focus on domestic violence.

I go to so many doctors offices and see rows and rows of brochures that are extremely informative. I don't think I've ever seen anything on domestic violence, and the pediatrician is often going to be the one if trained who could pick out the evidence and the signs of domestic violence early on. But too often the pediatrician doesn't know to whom to refer the person, what shelters are available or what processes are available. We must do far more to eradicate domestic violence. It is coming down, but unless we end violence in the home, our children are going to continue to accept violence as a way of life and we must join together in a firm partnership to put an end to this.

Education is the key to prevention. Zero to three are those most formative years. Simply put, the first years really do last forever, and you are the ones that have taught me that. How can they make a difference? I think we should join together and make sure that educare is a program that exists throughout this country not childcare, not warehousing, not taking care of somebody until somebody can get home from work, but real constructive educare that understands that 50 percent of all learned responses are learned in the first year of life. Let us learn how to teach in those early years conflict resolution, appreciation for differences, problem solving skills.

Let us do more to figure out how we can involve parents. Remedial reading teachers tell me that what they would like to do is make sure that the parent is included in the reading programs so that the parent can learn to read to the child. We can do so much if we teach parents to recognize physical and mental health problems. For this, we have a long way to go, but we can truly make a difference.

But, then we must figure out how to design programs for youngsters who are getting bored in school, who are turning their attention to other things, who are acting out because they want to attract attention to themselves, and they're not doing well in school. How can we enhance the learning

opportunities for all children?

Secondly, violence is going to happen and children are going to absorb it. We need to intervene quickly in those efforts. In December 1998, we launched a multidisciplinary effort designed to reduce child maltreatment across America. The "Children Exposed to Violence Initiative" addresses the needs of our nation's most vulnerable crime victims and witnesses, our children. The goal of the initiative is three-fold: to find better ways to prevent children's exposure to violence, to intervene early and effectively when children tragically do become crime victims and witnesses, and to make certain that individuals gets the support they need when they have been the witnesses to violence.

We can also focus on programs that give opportunities when the danger signals that the perpetration of violence is about to occur. Truancy prevention is another step that can be taken to make a difference. Drug courts for juveniles can be very effective in intervening in early stages of substance abuse.

Finally, I would like to call on you to join with me in what I think can make a tremendous difference. The courts of America have been overwhelmed, overwhelmed by children who have come through them after other institutions, from the family to the schools to the neighborhood, have failed. Faced with tremendous case loads, the courts have tried their best, but with so many and with such inadequate resources, they have not succeeded. That has undermined confidence in the courts.

But, through drug courts we have seen what can be done if you control caseloads and if you provide resources that can truly address the substance abuse problem evidenced by that child. Just think of what we could do if we developed a program for a model court for dependency, a model court for delinquency, a model court for domestic violence with caseloads that permit the judges to know the name of the child before them, to give that child adequate time on a court calendar, to give that child adequate resources over a sufficient period of time that can help adjust and change

behavior, and if detention is required, that provide for after care so that we don't send that child back to the apartment over the open-air drug market where they got into trouble in the first place. Courts where if there is a medical problem, there is a pediatrician there that can be working with the court, working with counselors to address the problem in a comprehensive way. Nothing is so frustrating as to see a system begin to work and then find one piece of the puzzle missing and unsolved.

We can truly, truly make a difference. But to do so, we've got to level the playing field. The disparity between the number of children arrested who are minorities and the number of children who are detained is striking in this country. Is it a question of bias, or is it a fact that there is not a level playing field because there is no one to send that child home to for non-secure detention? We've got to work together to level the playing field for the children of America so that a disparate number are not arrested rather than sent home, are not detained rather than sent home to non-secure detention, are not transferred to the adult court rather than remaining in the juvenile court to experience the opportunities there. If we can level that playing field and give equal opportunity to all the children of America, we can make a tremendous difference.

But one thing we've got to do. We've got to give America's children and young people confidence in themselves. We've got to make them believe in themselves. Growing up today is probably harder than at almost any time in history, because children are without supervision more so than probably at any time in history. The issues they face, the knowledge that they must learn is more complicated than ever before, but children and young people, as you well know, want so to make a difference. They want to reach out and contribute and be somebody and change things and when they can't do that, they often try to attract attention in other ways. We've got to figure out how we work together along with other disciplines to give the children of America the belief that they can be anything they really want to be, if it's the right thing to do and if they put their mind to it in a reasonable way.

I can't thank you enough for all you to do to give the opportunity to children to let their dreams come true. But if we work together, if we involve other disciplines, if we focus on prevention, if we focus on holding people accountable in a fair way, I think we can make America's children the strength and the foundation of our future.

When I get in that red truck, I'm going back to visit some of the kids that I've had the opportunity to talk with, children who are in detention facilities who said, "I just want somebody to talk to, somebody who understands how hard it is to grow up in America today." Thank you for helping them grow up.

Dr. Donald E. Cook, President of the American Academy of Pediatrics (AAP): Thank you Attorney General Reno for your thoughtful remarks.