

concerns, and strategies for removal of barriers.

We will consider funding this priority area in future years. All newly funded PNS initiatives are expected to develop the capacity to communicate and disseminate information and technical assistance through e-mail and other effective, affordable, and accessible forms of electronic communication.

*Comment:* ADD received 12 comments on Priority Area 7, Meeting the Mental Health Needs of Individuals With Developmental Disabilities. ADD received many commendations for including a priority area on the mental health aspects of mental retardation and other developmental disabilities issues. Comments cited lack of training in this area and the critical need for partnerships to stimulate interagency agreements and other needed projects. It was recommended that single points of entry be established and that services follow the individual into the community.

There was a suggestion that ADD consider as a funding requirement a letter of agreement between the State mental health system and the State developmental disabilities system. There were suggestions for projects aimed at improving both the community and social presence and social skills of persons with dual diagnoses and for involvement in arts and leisure programming. Training was urged for all network participants in such issues as inclusion, psychoactive medications, anger management, and legal aspects. There was also strong support for consumer outcome measures to evaluate program impact.

*Response:* ADD has long felt strongly that the mental health needs of persons with developmental disabilities do not receive adequate attention. ADD was at the forefront of promoting nonaversive approaches and has funded a Project of National Significance to develop training materials for mental health professionals to help bridge the gap between systems. A number of ADD-funded University Affiliated Programs and Developmental Disabilities Councils have projects in their local areas. Community inclusion requires understanding on the part of providers and network participants and individuals and families as well. There is also great need to raise the general standard of practice regarding psychoactive medications.

The next stage of addressing this issue will be broader implementation of strategies and best practices. Effective advocacy through recruitment and training will contribute toward appropriate systems change.

*Comment:* ADD received 15 comments on Priority Area 8, Children at Risk: The Impact of Abuse and Violence on Children With Disabilities, all of which were supportive of the overall approach. Many commenters noted the great need for this area to be addressed. Some commented that the issue involves both the abuse of children with disabilities and disabilities caused by abuse and neglect of children. Many stated that a comprehensive multi-system, multi-agency approach must be taken to adequately address the significant issue of prevention, intervention, and treatment of abuse and neglect of children with, and at risk of, disabilities. Many commenters noted the need for coordination among a wide variety of State and local agencies in abuse cases. Several recommendations specifically stressed the need for coordinated investigations, including the importance of sharing data among agencies when abuse or neglect of a child is alleged. One commenter reported that Child Advocacy Centers throughout the country are attempting to coordinate all of the investigating entities involved in child abuse cases.

One organization noted that non-organic failure-to-thrive typically results from neglect, abuse, and poor knowledge of care giving. Another commenter recommended the need for training of professionals and research on the incidence and prevalence of Abusive Head Trauma, including Shaken Baby Syndrome (SBS), which was reported as the leading cause of disability among abused children.

One commenter noted that provision of adequate child care can help to reduce the incidence of abuse and neglect and that child care workers are a good source of identifying children at risk of abuse and neglect. Another commenter stated that a "safety net" could be designed to identify and enroll families at risk of abusing their children. Such families would then be provided with education and training designed to increase their parenting skills and reduce the risk of abuse and neglect.

One commenter recommended funding a group of local projects in a given State to bring about a coordinated strategy from the "bottom up" rather than from a Statewide demonstration which then filters change down to the local level. Another organization stressed the need for information, education, and training of a variety of audiences, disciplines, and professions, including children and youth themselves. ADD was also urged to collaborate with appropriate agencies at the Federal level to address the abuse problem.

One commenter reported how well a comprehensive Statewide approach very similar to the one described by ADD in this priority area is working in one State to prevent child abuse of children with disabilities. The strategy being used involves a wide range of agencies including the State Departments of Education, Human Resources, Mental Health and Mental Retardation, as well as the State Developmental Disabilities Planning Council and Protection and Advocacy Agency, Children's Trust Fund, Corporate Foundation for Children, a major university, and several other agencies. Besides including these entities, another organization recommended also involving the State Child Care, Health and Criminal Justice systems as well as Head Start programs.

*Response:* ADD is pleased to see the very favorable response to this priority area and the comprehensive approach we selected. ADD has worked over the last year, in collaboration with other Federal agencies, to help focus national attention on the problem of abuse of children with disabilities and the fact that abuse often causes disabilities. We believe that a multi-system, multi-agency coordinated approach must be used at the local, State, and national level in order to adequately address this serious problem. In this announcement, ADD will stress the need for coordination and collaboration among all agencies involved in allegations of abuse as well as in prevention activities, including the need to share data among all agencies.

We appreciate the information regarding non-organic failure to thrive and Abusive Head Trauma, including Shaken Baby Syndrome, and will address these in this announcement. ADD agrees that appropriate child care may help reduce abuse and neglect, and we will address the need for inclusive child care in Priority Area 4. Moreover, we hope child care agencies will be involved as relevant agencies in any comprehensive State or local child abuse strategy. Concerning the recommendation that a "safety net" approach be used of enrolling and training parents at risk of abusing their children, ADD agrees that parent skill training can help reduce the risk of abuse and neglect, but we leave the individual elements of any strategy selected to the State or local community involved.

ADD believes that with limited funds it is best to demonstrate the comprehensive, coordinated strategy at a State level first, especially given the flow of Federal funds for the various agencies involved which usually go to