

Kentucky children keep dying in 'preventable' drug overdoses

BY SARAH LADD
KENTUCKY LANTERN

Kentucky children are increasingly ingesting and overdosing on unsafe substances like cannabinoids and fentanyl, with the rate increasing by more than 100% in the last five years, a new report shows.

The annual report from Kentucky's Child Fatality and Near Fatality External Review Panel shows an increase in physical child abuse as well among the 72 child fatalities and 176 near fatalities in fiscal year 2024. The panel only reviews fatal and near-fatal cases. There were nearly 15,000 cases of child maltreatment in Kentucky in 2024, according to a federal report released in January.

Findings show a lack of parental and caregiver education around the dangers of routine medications as well as system failures, including packaging of cannabinoids that fails to adequately communicate the risks products pose to children and mistakes made by the state in investigating allegations.

Dr. Christina Howard, a child abuse pediatrician and a member of the panel, said the ingestion and overdose cases investigated by the panel are "absolutely preventable."

While THC and medical cannabis products are available to adults, "we do know that they can be dangerous to children when they're accessed," Howard said. "And I think that's kind of what we want the general population to know: You ... have things in your home that are dangerous. Tylenol can be dangerous to kids. Making sure that those are stored in a way that children cannot access them is very important."

Packaging and marketing of these products also needs improvement, she said. They need to clearly communicate to consumers that products that may look appealing to children, like a cannabis brownie, can seriously hurt them.

The Child Fatality and Near Fatality External Review Panel was created in 2012 to conduct comprehensive reviews of child deaths and serious injuries from abuse or neglect. The independent panel of physicians, judges, lawyers, police, legislators and social service and health professionals meets regularly to analyze such cases. It produces an annual report on its findings and recommendations for improvements.

KEY FINDINGS IN THE REPORT

The latest report, which is more than 100 pages, details findings based on incidents in the 2024 fiscal year, which was July 1, 2023-June 30, 2024. The findings include:

- 98 children ingested or overdosed on dangerous substances. The most common substances in these cases were cannabinoids (28%), fentanyl (19%) and methamphetamine (16%).

- 11 children died from ingestion/overdoses. The report does not identify which substances killed the children.

- Nine children died from firearm injuries out of 11 cases of injury reviewed by the panel. The panel reviewed 12 in the previous report.

- The rate of cannabinoid exposure to children in Kentucky has increased 720% in the last five years. In 2020, there were five cases of cannabinoid ingestion or overdose. In



Arden Barnes/Kentuck Lantern

Dr. Christina Howard and Darcy, a therapy dog, are shown in the Kentucky Children's Kosair For Kids Center for Safe & Healthy Children & Families last May in Lexington.



Kosair for Kids

Dr. Gerard Rabalais speaks at a child abuse awareness rally in 2025.

2024, there were 41.

- The majority of physical abuse cases (76%) were almost fatal for the child victim.

- There was a 31% increase in physical abuse cases reviewed by the panel: 55 for fiscal year 2024, up from 42 the previous year.

- Parental refusal of Vitamin K shots is "increasingly common, often due to disinformation on social media and misunderstanding the risks involved," the panel reported, calling this trend "alarming."

According to the American Academy of Pediatrics, giving babies Vitamin K has been the "standard of care" to prevent vitamin K deficiency bleeding since the 1960s. When a baby doesn't have enough vitamin K in the blood they may not be able to clot and therefore, are unable to stop bleeding. This can lead to life-threatening brain hemorrhage or death, according to the panel.

This shot usually happens in the delivery room, said Dr. Gerard Rabalais, a professor of pediatrics at the University of Louisville School of Medicine who co-chairs Kosair for Kids' Face It Committee. Increased parental refusal of this can be at least partially traced to general misinformation perpetrated on social media, he said.

"I think what you're

seeing is the power of social media to influence people, where someone gets online and says something about, 'well, my kid got a vitamin K shot, and two months later, she had a seizure, and therefore, I'm telling everybody: don't get the vitamin K shot,'" he said. "There's no science to it, but the anecdote is enough to scare people. Information is so readily available to people, but it doesn't come with wisdom, understanding or knowledge."

This spread of misinformation leads to "fear based" decision making, he said. Vitamin K is not a vaccine and the nutrient is a safe and important defense against bleeding for babies, according to the Mayo Clinic.

THE 'MULTIFACTORIAL' ISSUES DRIVING CASES

Physical abuse cases investigated by the panel also often involved other issues including involvement with the state Department for Community Based Services, financial issues, substance use, mental health issues, criminal history and domestic violence.

There are "multifactorial" issues driving these cases: "There's no one thing that leads to these problems — that's what makes it so hard to deal with," Rabalais said.

With the exception of

travel, I think transportation comes up a whole lot of times when we think about families that are having financial hardship. I think that making sure that families get the support that they need is always important, and we can't just presume that they're getting it."

Of the fatality and near-fatality cases reviewed by the panel, 63 had, at one point, referrals that were "screened out," meaning they reportedly didn't meet the criteria for a case at the time.

Of the 248 cases reviewed for this year's report, a majority (73%) involved problems with the Department for Community Based Services (DCBS), including screening out reports early (63 cases) and not conducting thorough investigations (50 cases).

"When a caseworker with policy knowledge and direct involvement with a family determines a new report is warranted, the decision to screen out such a report warrants further examination," the report says.

Meanwhile, social workers are overworked. Kentucky statute says social workers with the Cabinet for Health and Family Services and DCBS should not exceed caseloads of 25.

For the timeframe in the latest fatality and near fatality report, 36 of Kentucky's 120 counties exceeded those caseload restrictions. In July 2024, the average caseload was 32; it was 30 in August and 32 in September.

Cabinet spokeswoman Beth Fisher said Thursday that the average caseload in December 2022 was 37 and was down to 30 in December 2025. She credited that improvement to a 2021 pay raise for social workers, but caseloads are still averaging above the statute-set threshold.

REPORT RECOMMENDATIONS

The report has a slew of recommendations, which include:

- The Cabinet for Health and Family Services should develop and implement a comprehensive, standardized training curriculum on medical indicators of child physical abuse for both child welfare caseworkers and medical professionals.

- The Kentucky Board of Nursing through the Licensed Certified Professional Midwife program, should develop a standardized protocol

which includes the importance of vitamin K within parenting education and pre-natal medical visits.

- The Department for Community Based Services should include a parent's refusal of the vitamin K shot at birth as part of the medical neglect criteria.

- The Department for Community Based Services should encourage staff to continue to treat THC use as a high-risk behavior and follow policy accordingly.

- The Department for Community Based Services should create a guideline to specifically address safe firearm storage assessments.

- The Cabinet for Health and Family Services, Department for Public Health and Office of Medical Cannabis should ensure consistency in child-resistant packaging requirements for hemp-derived cannabinoid products. Additional warnings should be required to inform the consumer that "child-resistant" packaging does not mean "child-proof" and these products may be harmful or potentially fatal to children.

'EVERYBODY'S PROBLEM'

While there are plenty of policies that could change and improve the child wellbeing landscape in Kentucky, Rabalais said everyone needs to be involved in preventing and stopping abuse.

"We should have watchful eyes all around these children," he said. "We're there to protect them, and we have to be their advocate. The neighbors and the brother-in-laws and the cousins — you know a family who's got a problem kid? Go volunteer to help them find out what they need."

Parents and caregivers, too, need to reach out for help, Howard said, and that starts with realizing the "it takes a village" cliché is true, she said.

"Learning to ask for help is really hard, especially as a parent," she said. "We need to normalize the ask for help."

"We won't make a significant impact unless everyone takes this on, and expecting state government to fix it or Kosair (for Kids) to fix it ... it's just not going to happen," Rabalais said. "This is not simply (on) state government. It's not simply parent organizations. It is not simply a Kosair for Kids problem. It's everybody's problem."

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