



# APSAC ALERT

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## APSAC's Amicus Committee and the APSAC Template Legal Brief for Abusive Head Trauma

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This *APSAC Alert* informs readers about a sample legal brief designed to improve courts' responses to cases involving allegations of abusive head trauma (AHT) and reviews the work of APSAC's Amicus Committee (the Committee). Our aims are to provide readers with a tool to help courts better understand the science of abusive head trauma and to educate readers in general about the amicus process that APSAC employs to advance its goal of protecting children.

Abusive head trauma is a leading cause of serious and fatal head injuries in children younger than 3 years. It is a severe form of child physical abuse that occurs when an infant or young child's head and brain are injured through violent shaking, hitting, or throwing. It is often triggered by caregiver frustration with the child's continuous crying. Injuries include bleeding on the brain and retinal hemorrhages. AHT can cause death or long-term disability. A hospital multidisciplinary team bases this diagnosis on history, physical examination, imaging, and laboratory findings. AHT is a scientifically non-controversial medical diagnosis broadly recognized and managed throughout the world. When diagnosed,

it signifies that accidental and disease processes cannot plausibly explain the etiology of the infant/child's injuries.

These cases are reported to child protective services and law enforcement for investigation. A diagnosis of AHT is a medical conclusion, not a legal determination of the intent of the perpetrator or, in the false hyperbole of the courtroom and sensationalistic media, "a diagnosis of murder." Unfortunately, courts may be generally ill-equipped to measure the consensus of physician thought on a particular concept and may be unduly influenced by the small proportion of experts who offer alternative theories in court. In some high-profile cases, the courtroom has become a forum for medical opinions on the etiology of infant/child head injuries. These opinions range from well-founded and uncontroversial evidence-based conclusions of multidisciplinary medical teams to speculative theories that cannot be reconciled with the medical evidence that is generally accepted in the relevant medical community.

One way to have evidence introduced into court hearings is the use of *amicus curiae* (e.g., amicus briefs). *Amicus curiae* is a Latin term meaning "friend of the court," and an amicus party is an expert,

or group of experts that offers authoritative facts to a court in addition to those already in the case. Often called “amici,” these parties—organizations and individuals—usually file briefs with courts of appeal. Depending on the court’s rules, amici may also need to file a motion for permission to file. Amicus briefs can be filed with the court by individuals or groups when they want the court to have additional or new information pertinent to the case at hand. Amici are not parties to a case but have a vested interest due to their area of expertise. They make these filings via an attorney who is admitted to practice in the relevant court. Amicus briefs include a statement of interest for each amicus party signing the brief. This statement explains how and why the amicus party is interested in the case, along with the organization’s mission, if the amicus is a nonprofit, or credentials, if the amicus is an individual. The statement of interest should demonstrate why the amicus party’s expertise is sufficient to advise the court.

A template, or sample, amicus brief is a generic brief produced by a group of experts on a challenging or novel topic, to benefit a relevant court from that group’s clarifications, interpretation of evidence, or other input. The template amicus brief is available to any potential amicus party that wishes to adapt it. The interested party must engage an attorney admitted to practice in the relevant jurisdiction, who

will check citations and law, and revise, customize, and file the brief in the case that the amicus intends to comment on. Legislation, court decisions, and local practices, as well as characteristics of the particular case, may require counsel to adjust arguments to align with relevant law and fact.

APSAC’s Amicus Committee is a working committee that has been meeting monthly since 2012. It files amicus briefs on behalf and with the formal approval of the APSAC Board of Directors (the Board) in cases of great concern to the APSAC membership. The goal is to use our multidisciplinary and evidence-based strengths to help courts engage with key facts not yet presented in cases before them. Solid medical and social science research supports legal arguments on behalf of children’s safety and well-being. The amicus briefs help lawyers better serve their clients and can make systems more responsive to their needs. Potential cases come to the Committee by email from interested parties or via Committee member proposals.

Table 1 presents examples of notable amicus briefs from the Committee that were filed with the Supreme Court (see also APSAC, 2026). APSAC has also appeared as amicus curiae in the highest state courts of Michigan, New York, Ohio, and Texas, and many other trial and appellate courts.

**Table 1**

**Examples of Amicus Briefs Filed with the Supreme Court by APSAC’s Amicus Committee**

<i>Year</i>	<i>Case</i>	<i>Argument</i>
<b>2013</b>	<i>Paroline v. United States</i>	restitution for harm done to victims of child pornography should reflect all damage done by all perpetrators, rather than requiring evidence of harm done by individual images or defendants
<b>2015</b>	<i>Ohio v. Clark</i>	admission of three-year-old boy’s statements alleging abuse through third parties did not violate defendant’s right of confrontation
<b>2016</b>	<i>Joseph H. v. State of California</i>	courts should consider early life adversity in evaluating whether a child has made a knowing, intelligent, and voluntary waiver of the right to remain silent
<b>2019</b>	<i>Department of Homeland Security v. Regents of the University of California</i>	rescission of Deferred Action for Childhood Arrivals protections, which forestall deportation of undocumented immigrants who arrived in the U.S. as children, would cause significant harm to the children of recipients, who would face separation from their parent(s) or departure from the United States
<b>2020</b>	<i>Fulton v. City of Philadelphia</i>	all interested and qualified families, including LGBTQ couples, should be certified to serve as foster parents

Additionally, the Amicus Committee periodically collaborates with the Board and other bodies within APSAC to issue position statements on matters of great relevance to child maltreatment. Recent examples include APSAC Position Statement on Separating Immigrant Children From Their Families at the United States Border (2018) and APSAC's Position Statement: Gender-Affirming Care Is Not Child Abuse (2022).

The AHT amicus template is the first of its kind. A future template amicus brief is planned for use in cases engaging "Parental Alienation," in line with APSAC's previously established position on this matter.

The APSAC template amicus brief on Abusive Head Trauma is [available for download on APSAC's website](#). Potential amici should engage counsel and review the brief thoroughly, updating social science and legal citations as needed. Counsel must further adapt and revise the brief as necessary before filing it.

## References

American Professional Society on the Abuse of Children. (2022), *Assertions of Parental Alienation Syndrome (PAS), Parental Disorder (PAD), or Parental Alienation (PA) when child maltreatment is of concern*. <https://apsac.org/wp-content/uploads/2023/05/APSAC-Position-Statement-PAS.pdf>

Association of Professionals Solving the Abuse of Children (2026). *Amicus briefs*. <https://apsac.org/amicus-briefs/>



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