

25th Maine Child Welfare Conference

Who Speaks for the Child?

June 27, 2019

- 8:00-8:30 **REGISTRATION**
- 8:30-8:45 **WELCOME AND HOUSEKEEPING**
- 8:45-10:15 **KEYNOTE** - Abusive Head Trauma: The Controversy, *Greeley*
- 10:15-10:30 **BREAK**
- 10:30-12:00 **MORNING BREAKOUT SESSIONS**
- A. Children's Views About Facilitated Parent-Child Contact: Lessons from Supervised Visitation Programs and the Use of Virtual Technologies, *Saini*
 - B. Project STAAR (Survivors of Trafficking Creating Art, Agency, and Resilience): Using Photovoice to Reduce Stigma and Promote Resilience Among Survivors of Childhood Sex Trafficking, *Middelton/Renfro*
 - C. External Signs of Abuse and Neglect, *Greeley*
 - D. Mandated Reporting: The Call That Starts It All, *Johnson*
- 12:00-1:00 **LUNCH**
- 1:00-2:30 **AFTERNOON BREAKOUT SESSIONS**
- E. The Impact of Adversity and Disparity on Child Health, *Greeley*
 - F. Development and Implementation of a Trauma-Informed, Evidence-Based Child Sex Trafficking Risk Screening for Youth, *Middleton/Renfro*
 - G. Who Speaks for the Child When There Is Sexual Abuse, *Brownell*
 - H. What Happens Next? Investigation, Intervention, and Advocacy, *Johnson/Jacques/White*
- 2:30-2:45 **BREAK**
- 2:45-4:15 **PLENARY** – The Child's Voice Entrenched in Conflict: Deciphering Views, Safety and Wellbeing in the Context of Custody-Related Disputes Within Child Protection Services, *Saini*
- 4:15-4:30 **CLOSING REMARKS AND EVALUATION**

Title: Abusive Head Trauma: The Controversy

Description: Abusive Head Trauma (AHT), historically called "Shaken Baby Syndrome", is a condition in which a young child (usually in the first year of life) is injured by violent force by a caretaker. The clinical findings include: injury to the brain, fractures (typically to the ribs and growth plates of the bones), bleeding in the eyes and external injury (bruising). Over the past decade there have been news reports indicating that the existence of AHT has been questioned in the courtroom. This talk will discuss the science behind AHT and frame some of the criticisms raised in the courtroom and in the media.

Objectives:

- 1) To appreciate the scope of the medical/legal debate surrounding Abusive Head Trauma ("shaken baby syndrome")
- 2) To understand some of the criticisms of the theory of Abusive Head Trauma which are raised in the legal setting and the medical literature used to support the skeptical position
- 3) To appreciate the role of high quality medical literature appraisal in the medico-legal setting.

References

Greeley, C. S. (2014). "'Shaken baby syndrome' and forensic pathology." Forensic Sci Med Pathol **10**(2): 253-255.

Greeley, C. S. (2015). "Abusive head trauma: a review of the evidence base." AJR Am J Roentgenol **204**(5): 967-973.

Workshop – 90 minutes: Children’s views about facilitated parent-child contact: Lessons from supervised visitation programs and the use of virtual technologies.

Abstract:

Supervised access and exchange services and the use of virtual technologies allow non-custodial parents to visit with their children under the supervision of trained service providers in a safe, neutral, and child-focused environment. These services are most appropriate for families involved in issues that have risen from child custody and access disputes, such as the safety of children and custodial parents and substance abuse or mental health problems among non-custodial parents. This workshop will highlight the views of children and youth based on their use of these services.

Learning Objectives:

1. Describe supervised visitation programs and the use of virtual technologies to maintain parent-child relationships
2. Describe views of children about supervised visitation programs and the use of virtual technologies to maintain parent-child relationships.
3. Present information to families, attorneys and the court about recent research and guidelines to help protect children within supervised and online services.

References:

Saini, M., & Polak, S. (2018). The benefits, drawbacks and safety considerations in digital parent-child relationships: An exploratory survey of the views of legal and mental health professionals in family law. *Family Court Review*, 54(4), 597-606

Saini, M., Birnbaum, R. (2015). Raising the bar: A risk assessment checklist when supervised access is being considered in child custody disputes. *Canadian Family Law Quarterly*. 34(3), 373-400.

Saini, M., Mishna, F., Barnes, J., Polak, S. (2013). Parenting online: Virtual parenting time in the context of separation and divorce. *Journal of Child Custody*, 10(2), 120-140.

DOI:10.1080/15379418.2013.796265

Birnbaum, R. & Saini, M. (2012). A scoping review of qualitative studies on the voice of the child in child custody disputes. *Childhood*. 20(2), 260-282. DOI: 10.1177/0907568212454148

Birnbaum, R. & Saini, M. (2012). A qualitative synthesis of children’s participation in custody disputes. *Research for Social Work Practice*. 22(4), 400-409. DOI: 10.1177/1049731512442985

**Title: Project STAAR (Survivors of Trafficking creating Art, Agency, and Resilience):
Using Photovoice to Reduce Stigma and Promote Resilience among Survivors of Childhood
Sex Trafficking**

Presentation Description

Project STAAR (Survivors of Trafficking creating Art, Agency, and Resilience) is a survivor-informed photovoice project that utilized grounded theory analysis techniques to facilitate critical conversations with two cohorts of survivors of childhood sex trafficking. The resulting compilation of photos and narratives shared by the artists (the survivors) will be shown as a 20-minute silent short film. The film is powerful and conveys the many 'photovoices' of survivors of child sex trafficking. Following the film, a survivor-led panel will present lessons learned and findings (photography and narratives) from the project. Recommendations for improving advocacy, outreach and services will also be discussed.

4 Learning Objectives:

This photovoice project aims to 1) increase awareness of the issue of child sex trafficking in the United States; 2) enhance knowledge and understanding regarding the dynamics of child sex trafficking and its impact on children; 3) to reduce stigma and promote resilience among child trafficking survivors; and 4) to improve the ability of systems to appropriately and effectively respond to child sex trafficking in a trauma-informed manner.

External Signs of Abuse and Neglect

Description: This talk will cover the basics of the external signs of child physical abuse and neglect. The talk will emphasize the understanding about bruising and burns in children. The talk will include typical abusive patterns as well as typical accidental patterns of bruising. The talk will also look at burn patterns. The participant will be presented different patterns of inflicted burns. Ways to distinguish inflicted from accidental burns will be discussed. The presentation will also include some common conditions that can be mistaken for being the result of abuse or neglect.

Objectives

- 1) The participant will be able understand some ways to distinguish accidental from inflicted bruises
- 2) The participant will be able to understand some ways to distinguish accidental from inflicted burns
- 3) The participant will be able to recognize some common external manifestations of neglect

References

Pierce, M. C., et al. (2010). "Bruising characteristics discriminating physical child abuse from accidental trauma." Pediatrics **125**(1): 67-74.

Maguire, S., et al. (2005). "Are there patterns of bruising in childhood which are diagnostic or suggestive of abuse? A systematic review." Arch Dis Child **90**(2): 182-186.

Maguire, S., et al. (2014). "Burns as a consequence of child maltreatment." Paediatrics and Child Health **24**(12): 557-561.

Title: Mandated Reporting- The Call that Starts it All

Description: Mandated Reporters are a critical part of Maine's Child protection system and act as an early warning network to identify suspected child abuse and neglect. Prompt reporting can help avoid serious and long term damage to a child. Professionals who frequently encounter children in their work are in the best position to recognize and report suspected child abuse and neglect and are required by law to do so. The purpose of this training is to promote child safety by increasing the knowledge of mandated reporters regarding the identification of the signs of abuse and neglect and explaining the process for reporting abuse.

Objectives:

1. Participants will be able to define the role of mandated reporters.
2. Participants will be able to identify behavioral and physical indicators of child abuse or neglect.
3. Participants will be able to understand the steps necessary to make a Child Protective Services report.

The Impact of Adversity and Disparity on Child Health

Description: This talk will be an overview of the impact of childhood adversity on the child and the child as an adult. It will discuss on the proposed mechanism how childhood adversity can result in early mortality and increased morbidity. The presentation will discuss different frameworks for how to think of adversity and resilience in children. It will focus on common threats to child well-being (poverty, violence, neglect) and will explore how socioeconomic adversity and inequality has measurable impacts on children and their families. The concepts of inequality will be introduced and explored as it impacts the lives of children. Specific examples of inequality and adversity will be used to illustrate the points made.

Objectives

- 1) The participant will be able to appreciate the role that childhood adversity plays in the life trajectory of children.
- 2) The participant will be able to appreciate how socioeconomic inequality has measurable effects on growing children and their families.
- 3) The participant will be able to appreciate how the healthcare provider can begin to address adversity in their practice.
- 4) The participant will appreciate the role that education plays in the life span of the child

References

Felitti, V. J., et al. (1998). "Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study." Am J Prev Med **14**(4): 245-258.

Shonkoff, J. P., et al. (2012). "The lifelong effects of early childhood adversity and toxic stress." Pediatrics **129**(1): e232-246.

Caspi, A., et al. (2016). "Childhood forecasting of a small segment of the population with large economic burden." Nat Hum Behav **1**(1): 0005.

Title: Development and Implementation of a Trauma-Informed, Evidence-Based Child Sex Trafficking Risk Screening for Youth

Abstract: Comprehensive screening of multiple traumas can prevent further victimization. This session will present a trauma screening tool for children and youth that has been adapted to include a sex trafficking risk score and is currently being piloted across several settings in Kentucky. Discussion will focus on tool development and potential uses in a wide array of settings.

4 Learning Objectives: Participants will leave with an understanding of: 1) The most common risk factors for human trafficking among youth, 2) How and why human trafficking often gets missed on trauma and power based violence screenings, 3) How a comprehensive trauma screening can enhance agency service provision and referral processes, and 4) How to screen youth using the screener adapted by The Center for Promoting Recovery & Resilience

Citations:

Saxe, G.N., & Bosquet, M. (2004). Child Stress Disorders Checklist-Screening Form (CSDC-SF) (v. 1.0-3/04). National Child Traumatic Stress Network and Boston University School of Medicine

Middleton, J. S., Ghent, R., Gattis, M., Roe-Sepowitz, D., Goggin, R., & Frey, L. M. (2016). Youth Experiences Survey (YES): Exploring the Scope and Complexity of Sex Trafficking in a Sample of Youth Experiencing Homelessness in Kentuckiana. Report submitted by the Human Trafficking Research Initiative, University of Louisville, Louisville, KY.

Who speaks for the child when there is sexual abuse?

This presentation will follow the case of a child who has been sexually abused from initial disclosure, to evidence collection, medical evaluation and follow-up. The importance of the multidisciplinary team is discussed. Myths and misconceptions about the medical evaluation will be dispelled. Attendees will be able to better serve child victims of sexual abuse and their families by understanding this often complex process.

Objectives:

1. Learners will be able to describe the role of the multidisciplinary team in caring for children who have been sexually abused
2. Learners will understand the importance of the medical examination when a child has been sexually abused
3. Learners will be able to provide an explanation of the process involved in caring for sexually abused children and their families including how evidence is obtained for an investigation

References:

Adams JA, Kellogg ND, Farst KJ, et al. Updated Guidelines for the Medical Assessment and Care of Children Who May Have Been Sexually Abused. *Journal of Pediatric and Adolescent Gynecology* 2016;29(2):81–7.

Anderst J, Kellogg N, Jung I. Reports of Repetitive Penile-Genital Penetration Often Have No Definitive Evidence of Penetration. *PEDIATRICS* 2009;124(3):e403–9.

Gavril AR, Kellogg ND, Nair P. Value of follow-up examinations of children and adolescents evaluated for sexual abuse and assault. *Pediatrics* 2012;129(2):282–9.

Hobbs CJ, Wynne JM. Examination findings in legally confirmed child sexual abuse: it's normal to be normal. *Pediatrics* 1996;97(1):148–50.

Title: “What Happens Next? Investigation, Intervention, and Advocacy”

Description:

1-800-452-1999 then what? There are several steps and decision points involved in a child welfare response. When a report is accepted for evaluation, a child protective services investigation takes place to determine whether or not a child was abused or neglected, and if so, to what extent. When a child has been harmed or subjected to an ongoing threat of harm and the child’s family and supports cannot keep the child safe, intervention by the Court can become necessary. Each stage of the legal process has its own intricacies, including who can participate and to what extent. Every child protection proceeding has a guardian ad litem (GAL) appointed to conduct an investigation, evaluate what is in the child’s best interest, and advocate for those best interests to the court.

Learning Objectives:

1. Participants will be able to describe what happens during a child protective services investigation to determine a child’s level of safety.
2. Participants will be able to describe the different Court stages and legal standards of a child protection proceeding.
3. Participants will be able to describe the role and responsibilities of the GAL as an agent of the Court and how that role differs from that of an “interested person,” “participant,” and “intervenor.”

The 25th Annual Maine Child Welfare Conference: Who Speaks for the Child?

Michael Saini, PhD, MSW, RSW

Plenary – 90 minutes: The child’s voice entrenched in conflict: Deciphering views, safety and wellbeing in the context of custody related disputes within child protection services

Abstract:

Ascertaining children’s views and preferences in family law and child protection matters has created a number of important academic and policy conversations. These conversations touch on the social construction of children, the role of legal processes, the rights of children, the strategies for accessing children’s points of view, and the intersection among childhood, the family, and the law. Current research on the voice of the child has shifted from questions about why the voice of the child is important to how to include the voice of the child. In order to answer these questions, the plenary will explore the different ways that the voice of the child can be considered within child protection services (e.g. parenting assessments, legal representation of a child, guardian-ad-litem, audio or video of the child, letters written by the child, and judicial interviews of children). The plenary will highlight both direct and indirect methods for involving children’s voices and will consider the various actors within child protection services that either facilitate or hinder children’s voices.

Learning Objectives:

1. Participants will gain an understanding about the arguments and counterarguments for voice, choice and access.
2. Participants will learn about the various methods and services that have been developed to encourage children’s participation in child custody disputes.
3. Participants will be taught the recent social science evidence about children’s participation.

References:

Saini, M., Black, T, Godbout, E., Deljavan, S. (2019). Feeling the pressure to take sides: A survey of child protection workers’ experiences about responding to allegations of child maltreatment within the context of child custody disputes. *Children and Youth Services Review*, 96, 127-133.

Polak, S., & Saini, M. (2018). The complexity of families involved in high-conflict disputes: A post-separation ecological transactional framework. *Journal of Divorce & Remarriage*. DOI: 10.1080/10502556.2018.1488114

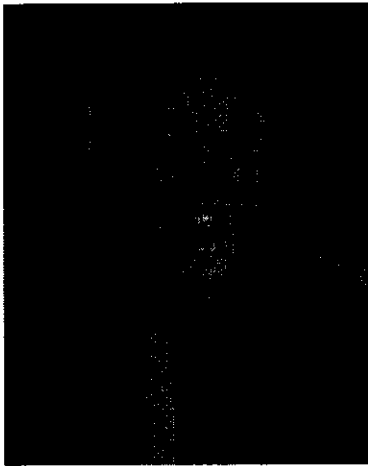
Houston, C., Bala, N., Saini, M. (2017). Crossover cases of high-conflict families involving child protection services: Ontario research findings and suggestions for good practices, *Family Court Review*. 55(3), 362–374.

Saini, M. (2012). Reconceptualizing high-conflict divorce as a maladaptive adult attachment response. *Families in Society: The Journal of Contemporary Social Services*, 93(3), 173-180.
DOI: 10.1606/1044-3894.4218



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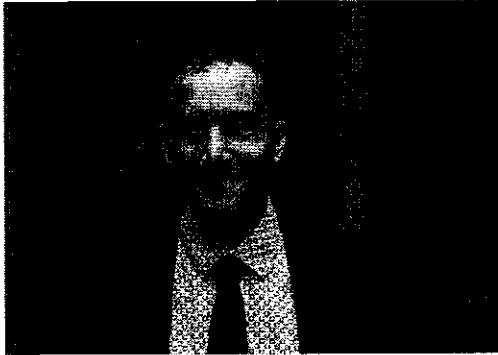
School	Education	Degree	Year
University of Virginia School of Medicine	Medical School	Doctor of Medicine	1992
Vanderbilt University	Internship/residency	Pediatrics	1995
University of Texas Health Science Center at Houston	Masters	Clinical Research	2014

Organization

Organization Name	Role
American Academy of Pediatrics (1993-present)	Section Child Abuse and Neglect (1997-present); Section of International Child Health (1997-present); Executive Committee (2011-2015)
American Medical Association (1988-present)	Member
American Professional Society on the Abuse of Children (2000-Present)	President, Texas Chapter (2009-Present)
Prevent Child Abuse America (2005-Present)	Board of Directors; Board Chair (2009-2013); Research Committee Chair (2007-2009)
Ray E. Helfer, MD Society (2007 to present)	President, International Society for Physicians in the Field of Child Abuse (2014-present); Co-Chair, Prevention Committee (2014-Present); Executive Committee (2011-2013)
Texas Pediatrics Society (2007-present)	Committee on Child Abuse and Neglect Co-Shair (2010-Present)

* Texas Children's Hospital physicians' licenses and credentials are reviewed prior to practicing at any of our facilities. Sections titled From the Doctor, Professional Organizations and Publications were provided by the physician's office and were not verified by Texas Children's Hospital.

Michael Saini, Ph.D., M.S.W., R.S.W.



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Michael A. Saini, PhD, is an Associate Professor at the Factor-Inwentash Faculty of Social Work, University of Toronto and holds the endowed Factor-Inwentash Chair in Law and Social Work and the Co-Director of the Combined J.D. and M.S.W. program. He is a Board Member of the Association of Family Conciliation and the Courts and an editorial board member for the *Family Court Review* and the *Journal of Divorce and Remarriage*. He provides risk management consultation for working with families involved in high conflict child custody disputes, he leads parent groups for separated families, he provides parent coaching, and for the past 18 years, he has been conducting custody evaluations and assisting children's counsel for the Office of the Children's Lawyer, Ministry of the Attorney General in Ontario. He has over 100 publications, including books, book chapters, government reports, systematic reviews and peer-reviewed journal articles. His publications have focused on access to justice, child custody disputes, interparental conflict, intimate partner violence, alienation, cultural dynamics of separated families, supervised visitation, virtual visitation, child protection services and parent competencies post separation and divorce.

Tracy Leigh Jacques, Esq. joined Maine CASA as a Volunteer Coordinator in May of 2013. She graduated from the University of Maine at Orono earning a B.A. in Sociology and Psychology and has a law degree from the University Of Maine School Of Law. She currently serves as the **Coordinator, Guardian ad Litem Services for Maine Judicial Branch**. She also oversees the day-to-day operations of Maine CASA including recruiting, training, and overseeing the volunteers.

Briana L. White, Esq. joined the Office of the Maine Attorney General as an Assistant Attorney General in the Child Protection Division in 2015. She received her Bachelors of Arts in Political Science from the University of New England and Juris Doctorate from the University Of Maine School of Law. Currently she handles child protection proceedings in Skowhegan and Farmington District Courts. Additionally she sits on the Maine Child Death and Serious Injury Review Panel and handles Clifford Orders statewide.

Bobbi Johnson, LMSW is the Associate Director of Child Welfare Services for the Office of Child and Family Services within the Maine Department of Health and Human Services. She obtained her Master's degree in Social Work at the University of Maine at Orono and is a Licensed Master Social Worker. Bobbi has worked for OCFS for 24 years. In her role, she is responsible for the overall leadership and strategic direction of child welfare services in Maine. Bobbi has experience with community building at both the local and statewide levels, and has been instrumental in moving the work of child welfare from an agency responsibility to the shared responsibility of families, OCFS and community partners. She has been active on several committees, including the Maine Child Welfare Advisory Panel, the Kinship Advisory Board and the Domestic Violence Homicide Review Panel. These efforts bring together partners statewide and are focused on improving the system of care, maximizing resources and promoting the voices of the individuals we serve.

**Dr. Jennifer Middleton, PhD, MSW, LCSW
Associate Professor and Director
UofL Human Trafficking Research Initiative
Kent School of Social Work**

Bio

Dr. Middleton is an Associate Professor in the Kent School of Social Work at the UofL and Director of the UofL Human Trafficking Research Initiative. Dr. Jennifer Middleton's research, teaching, and service activities all focus on partnering with communities to develop trauma-informed approaches to working with children and families impacted by trauma, substance abuse, and other adverse childhood experiences. In addition, her collaborative efforts aim to address the cumulative impact of working with traumatized populations on the professionals and organizations who serve them. Dr. Middleton leads multiple federally-funded, interdisciplinary research projects examining the impact of trauma-informed organizational change interventions within systems of care that serve sex trafficked populations and address community violence within refugee, Tribal, urban, and rural community contexts. She recently completed a five-year \$3.9M federal grant project that created a trauma-informed system of care for children directly impacted by the opioid epidemic.

Dr. Middleton is currently the Director of Implementation for a new five-year \$5M SAMHSA grant aimed at addressing community violence, trauma, and inequities in west and south Louisville. Dr. Middleton is also the Principal Investigator of two recently funded research projects which aim to address child sex trafficking: 1) Project STAAR: Survivors of Trafficking Creating Art, Advocacy, and Resilience, a qualitative study which utilizes photovoice methods to explore the lived experiences of child sex trafficking survivors, and 2) Project PIVOT: Prevention and Intervention of Victims of Trafficking, a comprehensive case review of all reported child sex trafficking cases over a 5-year period in Kentucky. Middleton is an active member of numerous local, state, national, and international human trafficking initiatives and is fully trained in the Sanctuary Model[®]. During her forensic social work career, Dr. Middleton interviewed and provided services to over 4,000 sexually exploited and trafficked children and youth.



Kristylove Foundation Inc.

A Listening Ear to a Silent HEART



Angela Renfro Executive Director
Founder of the Kristy Love Foundation Inc.

From the age young age of three to age twenty-nine, "SURVIVOR" Angela Renfro lived through sexual abuse, prostitution, drug addiction, and human trafficking. Once Angela escaped the clutches of her trafficker, she dedicated herself to "FREEDOM," helping young girls & women escape the life of human trafficking. Angela took her heartfelt inspiration and watched it blossom to a global aspiration to stop modern day slavery. Angela's vision led to the creation of the first-of-its-kind "SURVIVORS" home in Louisville, Kentucky in 2010. The program has since expanded to three "SURVIVORS" homes in Kentucky and one in Indiana.

The foundation has also successfully implemented a number of innovative and survivor-led programs through the community of Louisville including the Survivor Community Park & Garden, Secret Garden Podcast, Drop in Center, and Resource Lab Center.

Angela is the Founder and Executive Director of the Kristy Love Foundation, Inc. located in Louisville, Kentucky. The Kristy Love Foundation is a 501c3 organization that has been in existence for over 8 years and served over 2,000 victims of trafficking through residential programming, and provided meals and outreach to over 25,000 homeless and/or vulnerable individuals in need. Angela's selflessness, community focus, and leadership has enhanced the quality of life for so many girls and women.

The Kristy Love Foundation is a SURVIVOR-led, trauma informed program that provides comprehensive services for girls and women suffering from addiction, prostitution and human trafficking. We strive to "providing services with a listen ear to a silent heart" so that all "SURVIVORS" may heal in a safe place, become confident, financially self-sufficient and develop healthy relationships with their families and in their communities. All of our work is informed by our founder and executive director, Angela Renfro, who lived through sexual abuse, prostitution, addiction and human trafficking from the age 3 to age 29, when she escaped, she rebuilt her live and gave her breath, sweat, tears so that others could experience freedom from modern day slavery.

Angela is currently living in Louisville Kentucky with her family. She is a member of the Survivors' Counsel for the Kentucky Office of the General Attorney, the Coalition for the Homeless, Coalition Supporting Young Adults, the Kentucky Statewide Human Trafficking Task Force, and the Southern Indiana Human Trafficking Coalition. She was featured as one of the Faces of Compassion for "Festival of Faith" with the DALAI LAMI at the Yum Center and has been interviewed by a number a magazines and news stations as a voice for trauma survivors in Indiana and Kentucky. Angela has spoken at Homeland Security in Arizona. Angela is internationally recognized as a survivor leader by India, and recently hosted six international ambassadors and two interpreters during their visit to the foundation to collaborate regarding how to bring the principles of her program and awareness of human trafficking to their country. Angela is the Ambassador of Human Trafficking, also featured in Sold in America for Missing and Exploited Children. She has received three awards from the Louisville Youth Philanthropy Council. Angela's most recent national speaking engagement occurred at the Shared Hope International JUST Conference in October of 2018.

At the Kristy Love Foundation, our goal is that every survivor becomes a productive member of society and, when all is said and done, the safety and recovery of a survivor is the most important mission we have.