

# ADVISOR

December 2022



The American  
Professional Society  
on the Abuse of Children  
*Strengthening Practice Through Knowledge*  
apsac.org @The\_APSAC

In partnership with  **THE NEW  
FOUNDLING**  
nyfoundling.org @TheNYFoundling

## 35th Anniversary Special Issue Volume II

*Presidents and Pioneers*

Editors: Lisa Schelbe, Carlo Panlilio, and Amanda M. Ferrara



The American  
Professional Society  
on the Abuse of Children™  
*Strengthening Practice  
Through Knowledge*  
apsac.org @The\_APSAC

In partnership with



nyfoundling.org  
@TheNYFoundling

## ***The American Professional Society on the Abuse of Children in Partnership with the New York Foundling***

---

### **About APSAC**

Since being established in 1986, APSAC has served the field of child maltreatment as an interdisciplinary professional society. APSAC's Mission "is to improve society's response to the abuse and neglect of its children." APSAC's Vision is a world where all children and their families have access to the highest level of professional commitment and services to prevent and address child maltreatment. APSAC pursues its mission through expert training and educational activities, policy leadership, the production and dissemination of public education materials, collaboration, and consultation that emphasize theoretically sound research and evidence-based principles. APSAC's members are attorneys, social workers, law enforcement personnel, forensic interviewers, educators, researchers, and medical and behavioral health clinicians, and professionals from allied disciplines.

### **About the New York Foundling**

The New York Foundling trusts in the power and potential of people and deliberately invests in proven practices. From bold beginnings in 1869, this New York-based nonprofit has supported hundreds of thousands of its neighbors on their own paths to stability, strength, and independence.

The New York Foundling's internationally-recognized set of social services are both proven and practical. The Foundling helps children and families navigate through and beyond foster care, helps families struggling with conflict and poverty grow strong, helps individuals with developmental disabilities live their best lives, and helps children and families access quality health and mental health services—core to building lifelong resilience and wellbeing.

### **Register for the APSAC & Foundling Online Course**

Child maltreatment work is by nature multidisciplinary; we all share the same goal of ensuring health, safety and justice for children and families. APSAC and the New York Foundling have developed a comprehensive, multidisciplinary online course for professionals to help expand their perspective and knowledge base to support effective practice in any child welfare setting. Learn from leading experts in child maltreatment and enhance your understanding of the multiple systems, professionals, and interventions that comprise our field!

Psychology CEs available. Group pricing available upon request.

### **[Learn More](#)**

### **[Register for the Online Course](#)**

To see an up-to-date list of all training opportunities, please **visit the APSAC website**.



The American Professional Society on the Abuse of Children™

# ADVISOR

Vol. 35 | No. 2

[Presidents and Pioneers: A Celebration of APSAC’s 35th Anniversary, Volume II, Interview with Stacie LeBlanc JD, MEd](#)

*Carlo Panlilio, PhD; Amanda Ferrara, PhD; Lisa Schelbe, PhD, MSW* .....pg 4

[Captain Video: the Legacy of David L. Corwin, MD, Founding Chair of APSAC](#)

*Nina Agrawal, MD* .....pg 12

[APSAC Advisor 35th Anniversary Special Issue: An Interview with Viola Vaughan-Eden, PhD, MJ, LCSW](#)

*Ellen M. Chiocca, PhD, APRN, CPNP-PC; Megha Sardana* .....pg 16

[35th Anniversary of APSAC Special Issue of the Advisor: An Interview with John E. B. Myers, JD](#)

*Naomi Rothenberg* .....pg 20

[Celebrating 35 Years of Improving Society’s Response to Abuse and Neglect of Children: An Interview with Randall Alexander, MD](#)

*Carmella Spinelli Miller, MSW, LCSW; Stacey L. Shipe, PhD, MSc, MSW* .....pg 23

[Reflecting on the History and Future of APSAC: An Interview with Diane DePanfilis, PhD, MSW](#)

*Kate Theimer, PhD* .....pg 30

[Celebrating 35 Years of Improving Society’s Response to Abuse and Neglect of Children: An Interview with Joyce N. Thomas, Founding Member and Past President of APSAC](#)

*Bonnie Christian Marsh, DSW, LSW* .....pg 35

[The Role of Interdisciplinary Learning in the Advancement of Child Sexual Abuse Prevention: An Interview with Linda M. Williams, PhD, Former President of APSAC \(1994\)](#)

*Maria L. Schweer-Collins, PhD; Charles Alvarado* .....pg 41

[Celebrating 35 Years of Improving Society’s Response to Abuse and Neglect of Children: An Interview with Sandra Alexander, a “Pioneer in Child Maltreatment Prevention”](#)

*Emily Bosk, PhD, LMSW; A. Lilyan Falcon* .....pg 48

[35th Anniversary of APSAC Special Issue of the Advisor: An Interview with Frank Vandevort, Past President of APSAC](#)

*Courtney A. Waid, PhD* .....pg 53

[Celebrating 35 Years of Improving Society’s Response to Abuse and Neglect of Children: An Interview with Barbara Bonner, Past President and Lifetime Member of APSAC](#)

*Leah Bartley, PhD, MSW* .....pg 60

# Presidents and Pioneers: A Celebration of APSAC's 35th Anniversary, Volume II

*Carlo Panlilio, PhD; Amanda Ferrara, PhD;  
Lisa Schelbe, PhD, MSW*

This is the second volume of the *Advisor's* special issue celebrating APSAC's 35th anniversary. If you haven't read the first one, stop reading and go to the editorial of the first volume, which explains our vision for and process of creating the special issue. Because we ourselves are busy people and don't always follow directions, we're going to assume that some of you who haven't read the first issue are going to keep reading. So we'll bring you up to speed in the next paragraph. For those of you who have already read the first issue, you can skip the next paragraph as there isn't anything new here.

We have created a two-volume special issue that highlights the history and future of APSAC, specifically, and the field of child maltreatment, broadly. We enlisted practitioners and new scholars to interview APSAC's presidents and pioneers in an effort to preserve history, make connections between those who built APSAC and those who will help continue APSAC's growth into the future, and introduce new voices to the *Advisor* and APSAC. Now you can skip the next paragraph which is directed to those who have read the first issue.

So, what did you think of the first volume? Of course, we are biased, but it was pretty amazing, wasn't it? We were excited with how it turned out. If you're reading this and you didn't read the first issue (and didn't follow the directions that we gave at the end of the previous paragraph), you can skip to the next paragraph. We loved reading about the connections and themes echoed across the various articles. Authors' reflections often highlighted similar insights. Different pioneers and presidents shared

events and mentioned one another. A story emerged from the articles that continues in this second volume.

Okay. Now everyone should be up to speed. (Although, if you haven't read the first volume of the special issue, seriously, PLEASE consider going back and reading it.) We hope you aren't confused by our jumping around a bit at the beginning. If you are, our apologies. We're not going to give any directions to skip paragraphs for the rest of this editorial. So, please keep reading.

As we set out to write this editorial, we wanted to be engaging, and we knew that not everyone was on the same page. When thinking about how to introduce the second volume, we settled on the approach of conversationally writing for two different groups (i.e., those who have read the first volume and those who have yet to read it) and directing the groups to read different paragraphs. We suspected that this innovation was not going to be enjoyed by some; it was a little quirky and not the normal editorial. Nevertheless, we tried something new.

Novelty and risk taking are characteristics that should be very familiar to APSAC members. Similarly, APSAC members understand that people are coming from different places (i.e., disciplines, stages of career, lived experiences) and have different levels of knowledge and skills. Innovation and the need to engage a diverse group of people also are recognized by APSAC members. Within our editorial as well as our approach to the special issue, we sought to be innovative, to bring people together, to build on our history, to enhance our collective

*Presidents and Pioneers*



knowledge, and to celebrate our diversity. As we look to the future of APSAC, we know that there is a lot of work to be done and that a solid foundation has been built by our past presidents and pioneers. Much of this is explored in the articles in this volume. We are quite excited to introduce this volume; however, first we want to share our interview with the immediate past president of APSAC, Stacie LeBlanc.



**Immediate Past President:  
Stacie LeBlanc**

Stacie LeBlanc, JD, MEd, brought more than 25 years of experience in child advocacy to her tenure as APSAC’s past president. She is also Co-founder

and Executive Director of the UP Institute, which provides upstream interventions and strategies that are aimed at reducing childhood adversity and promoting resilience in children and families. In 2017, Ms. LeBlanc was instrumental in launching

the Child Advocacy Studies Training (CAST) program as Adjunct Professor at Tulane. She is also Founding Director of the New Orleans Children’s Advocacy Center, which provided the backdrop for much of our conversation about lessons learned and future directions for APSAC. She also serves on state and national boards, including the National Review Board for the United States Conference of Catholic Bishops, the Executive Committee of the National Initiative to End Corporal Punishment, and the Louisiana Alliance of Children’s Advocacy Centers (as founder and first president). In addition to her impressive array of experiences, she has received numerous recognitions and awards for her advocacy efforts, that include successful legislative amendments.

Despite these astounding accomplishments, Ms. LeBlanc was very down-to-earth during our conversation, which made the experience informative and quite enjoyable. This prompted me (Carlo) to ask how she manages to keep the steam going, stay motivated, and be able to maintain such a positive outlook given the difficulty in approaching

maltreatment prevention broadly, and the challenges of working in a state with different perspectives about abuse specifically. After a lighthearted response, she acknowledged the difficulties and challenges of working in the field of maltreatment prevention and child advocacy by saying, “It’s hard... it seems like every time you make a step forward, there’s a backlash...” She then stated that what keeps her going is seeing “the light at the end of the tunnel,” the results of preventive efforts such as reduction in juvenile incarceration rates, and the positive impact of upstream prevention efforts on communities. I would add that her use of humor and her affable personality are also impressive. As you will shortly see, a conversation about Ms. LeBlanc’s background and historical involvement with APSAC says a lot about how such a positive outlook has come about. More important, it was refreshing to hear her many self-reflections and the need to pivot along her professional journey, which propelled her to where she is now. Within the field of educational psychology, this process is referred to as *metacognitive monitoring*, during which individuals determine their progress toward a previously set goal, checking if the strategy or plan is working, detecting any potential challenges, and shifting as needed.

### Professional Background

Ms. LeBlanc’s journey began as an undergraduate pre-med student gearing up for medical school. By her junior year, she had already taken many prerequisites, such as the MCAT, as well as courses in organic chemistry and microbiology. She had also begun an internship in a psychiatric facility to prepare herself for a specialization in child psychiatry. This internship experience was pivotal in her career choice, having seen the impact of psychiatric treatment non-compliance on abuse and neglect. She stated that it was “so compelling how many of these kids had been victims of crimes at the hands of their parents, and I truly left out of there, and decided I wanted to go to law school and become a prosecutor.” This was a defining moment for Ms. LeBlanc to switch from pre-med to law, where she began her chosen career path. For 10 years

post-law school, she was a successful prosecutor, having prosecuted parents at a 94% conviction rate. According to Ms. LeBlanc, “I loved it, but then I realized, I just didn’t have any children...who were happy about what I was able to do for them.” This was another moment of self-reflection for Ms. LeBlanc, realizing that she was “never going to prosecute her way” to solving this challenge. She realized that something else had to be done.

What Ms. LeBlanc noticed is that in her work as a prosecutor, so many professionals in the various disciplines involved with the cases worked in different silos. It was then that she subscribed to the idea of bringing in multiple disciplines to work in concert and pursued legislative changes in Louisiana to mandate Child Advocacy Centers (CACs) to engage in a multidisciplinary response. According to Ms. LeBlanc, multidisciplinary teams should be able to “understand everybody’s roles and their limitations” and prevent any misunderstandings between team members who come from varying disciplinary perspectives. This led her to APSAC, where she admired how the organization brought different disciplines together.

### Early APSAC Involvement

Ms. LeBlanc recalled that her initial introduction to APSAC came from the time that she met Dr. Viola Vaughan-Eden. She and Dr. Vaughan-Eden had been paired up to present in San Diego, California, for a joint session. Ms. LeBlanc presented first a CAC case about prosecuting a mother and stepfather from a decades-old sexual abuse act given the availability of DNA evidence. She shared her reflections on the case with the audience, particularly about how she was “aggressively going after the mom” or telling the children that they would go to foster care. She soon realized that such an approach did not make sense and therefore began talking to experts across different disciplines and bringing research into practice by understanding the literature on the incongruencies in the emotional and behavioral responses of victims and alleged perpetrators. She discussed some of her missteps and how she

## Presidents and Pioneers

approached the children during interrogations, reflecting on wanting to be instead part of the solution by reading even more empirical work that could better inform her practice at the CAC.

Dr. Vaughan-Eden came to present next and expressed that she was shocked to find out how much “this attorney” knew about the child welfare system. She then told the audience about Ms. LeBlanc, joking that she would not help Dr. Vaughan-Eden with her equipment as a rebuttal. It was during the conference social hour that Dr. Vaughan-Eden shared the value of Ms. LeBlanc’s presentation. Specifically, it is important to bring practitioners to the table so that research can be translated. Even though APSAC was heavily academic at that time, Dr. Vaughan-Eden recognized the importance of bringing in a partnership between research and practice. For nearly three years, she attempted to bring Ms. LeBlanc on as a board member of APSAC. She finally succeeded and since then, this dynamic duo has become good friends and worked together to publish multiple articles and open a company called UpStream Solutions. Ms. LeBlanc then shared that this is what the field needs—more opportunities for people across different disciplines and silos to work together.

### Advice for APSAC Members

Recognizing that there is no such thing as a one-size-fits-all approach to prevention and intervention efforts, Ms. LeBlanc reiterated the importance of working with different disciplines across research and practice settings and building authentic relationships. She outlined her experiences and how she came to learn the value of research and practice. If others have not attempted such a collaboration, it can be nerve wracking, but it is still an important step to take. She said that those in the field who are recognizing similar challenges across different points in their careers have to be brave enough talk with their colleagues. They should also ask peers how to improve and welcome constructive feedback to grow and develop professionally.



When working with practitioners in the field, we need to be able to shift away from just performance evaluations related to instrumental criteria such as time sheets, box-checking, invoices, and so on. Instead, we need to work together on developing relational skills, recognizing their value as critical when working in the field of maltreatment prevention. She said that, akin to her lessons from working with legislators, one should learn how to lobby and to advocate while not being insulting at the same time. Additionally, if you find yourself working with people who are actually doing harm, find a way to communicate directly—“be an upstander . . . speak out, and if not, go up and do what you’ve got to do.” She related that just like with her efforts to push for no hit zones against corporal punishment, you have to be brave enough to talk about the topic directly and not discuss euphemisms on punishment. You need to be direct about the developmental consequences of not doing so.

### Vision for APSAC’s Future

Ms. LeBlanc stated that she would love to see APSAC grow in membership and to have more interdisciplinary representation that includes the faith leadership and education sectors. She believes that inclusion of faith leadership would be instrumental in Southern communities to bring prevention to these families. She also wants to see more diversity in leadership on the Board of APSAC and to have the Board represent the membership and the people that it serves. On this note, she expressed excitement about the role of APSAC’s Commission for Racial Justice in Child Maltreatment in calling out white supremacy and its impact on the field of child welfare. Ms. LeBlanc also wishes to see more disciplines recognize each other’s strengths and recognize the strength of the community members that we serve. In line with such recognition, she envisions a special day called “Champ’s Day,” when frontline workers in the field of maltreatment prevention and intervention would be recognized for the outstanding work they are doing. Given the high levels of stress and burnout in the field, such an

appreciation could help ensure that we recognize the contributions frontline practitioners undergo on a daily basis.

### Reflections

We were fortunate enough to have two of us interview Ms. LeBlanc: Carlo Panlilio and Amanda Ferrara. I (Amanda), as an early career researcher, was particularly inspired by our conversation. At the time we interviewed Ms. LeBlanc, I was preparing to defend my dissertation. At that time, the experiences and thoughts Ms. LeBlanc shared with us left me with three big takeaways.

The first is that not all paths look the same, and there are many different roads that lead to the same destination. At the time, I was anxiously figuring out my next career move, worried about whether I was making the “right choice.” However, as you can probably tell from hearing Ms. LeBlanc’s career path, I was reminded that there is no one “right choice” when you remain passionate about pursuing work that positively impacts children and families. She described how her interests in maintaining and promoting the safety of children led from one experience to another, and it was difficult to not think that she had ended up exactly where she was meant to be. I’m not usually one that says something was fated or meant to be—I think life is made up of many more choices than that—but it did seem like she had ended up where the universe needed her most. And I think that maybe that is a takeaway we should all be reminded of by Ms. LeBlanc; while there is no one “right choice,” and we are often inundated with what seem high-stake decisions, when we remain passionate about a goal such as promoting the safety and wellness of others, we will not be disappointed. In fact, we may find that it does indeed feel like where we end up was meant to be.

My second takeaway from our conversation with Ms. LeBlanc is to continue to be a lifelong learner and be inspired for future endeavors by our past experiences. As a self-regulated learning scholar, I found it easy to see how Ms. LeBlanc has used



## Presidents and Pioneers

reflection and metacognitive monitoring (i.e., the tracking of one's performance throughout a task) to propel her career. Specifically, she talked about the value of peer review and feedback, then changing your current practice upon learning of ground-breaking science. Soliciting peer review and feedback takes a great deal of humility and grace; further, incorporating others' suggestions requires introspection and a constant updating of your own practices. Similarly, changing your current practices when confronted with emerging research that contradicts what you have been doing requires not only the capacity for continued change and growth but also the constant seeking out of new knowledge. These are hallmarks of excellent self-regulated learners. We all would do well to follow in Ms. LeBlanc's footsteps in this regard.

My final takeaway is to collaborate with those who are available to you and excited to work alongside you—you never know who will turn out to be the most fruitful collaborators...just like the guest editors of this special issue! Specifically, Ms. LeBlanc shared how she has collaborated with Catholic bishops to promote child safety in the face of the Catholic church's child abuse scandals. She shared that she didn't anticipate this being one of her career paths, but to me, it seemed like one of the most fruitful and needed relationships that she discussed in our conversation. By keeping herself open to non-traditional collaborations, she was able to create a genuine, unexpected relationship benefitting Catholic children and families. Similar to remembering that there is no one "right path," there is no one right collaborator. Following Ms. LeBlanc's example, we can all remember that sometimes the most fruitful collaborations come in disguise.





## Introduction to the Special Issue

Themes within Ms. LeBlanc’s interview align with many of articles in this volume of the special issue. Pioneers and presidents frequently discuss the choices that they made in their career, often that were based in wanting to make an impact and influenced by meeting people committed to addressing child maltreatment. The relationships among passionate people from multiple disciplines are mentioned in all of the articles. Many of the authors also discuss how pioneers and presidents bridged the worlds of research, policy, and practice and observe how this is something that the future leaders of APSAC need to continue.

Most introductions to a special issue are to introduce each article and make connections across them. We decided not to do this because we want each APSAC member to read the articles and see the special connections that resonate with them. After all, everyone’s journey and pathway through learning might be different! As editors, we quickly realized that it was nearly impossible to summarize so many themes and connections. Also, these articles are deeply personal, and it would be an injustice to summarize them in just a few sentences. Let us just say, therefore, that we hope you will delight in all of this special issue written about Dave Corwin, Viola Vaughan-Eden, John Myers, Randell Alexander, Diane DePanfilis, Joyce Thomas, Linda Williams, Sandra Alexander, Frank Vandervolt, and Barbara Bonner.

There is much to learn from the pioneers and presidents as well as the authors. We are excited to recognize the authors, who undoubtedly will build on the work of those who have founded and led APSAC: Nina Agrawal, Ellen M Chiocca, Megha Sardana, Naomi Rothenberg, Stacey L. Shipe, Carmella Miller, Kate Theimer, Bonnie Marsh, Maria Schweer-Collins, Charles Alvarado, Emily Bosk, Lili Falcon, Courtney A. Waid, and Leah Bartley. We imagine that 40 years from now, many of these authors will be interviewed for APSAC’s 75th anniversary special issue. We know that there are many people who are not included here yet who have contributed and will contribute in the future to APSAC and the field of child maltreatment. We indeed look forward to reading about their work over the years.

### About the Editors of the Special Issue:

**Carlo Panlilio, PhD**, is Assistant Professor in the Department of Educational Psychology, Counseling, and Special Education, and a faculty member with the Child Maltreatment Solutions Network at the Pennsylvania State University. He received his PhD in Human Development from the University of Maryland, College Park, with a specialization in Developmental Science and a Certificate in Education Measurement, Statistics, and Evaluation. He was a former Doris Duke Fellow for the Promotion of Child Well-being. His program of research focuses on the dynamic interplay between maltreatment, context, and development and how these processes influence individual differences in learning across the lifespan. His research is guided by an interdisciplinary approach to examine the multisystemic influences of early adversity on self-regulatory processes that explain variability in the academic outcomes of children with a history of maltreatment. He has published several journal articles and chapters and was editor of *Trauma-Informed Schools: Integrating Child Maltreatment Prevention, Detection, and Intervention*. He previously worked as a licensed clinical marriage and family therapist in private practice, community agencies, treatment foster care, and a residential treatment facility for adolescents.

**Amanda M. Ferrara, PhD**, is Multi-Modal Research Project Manager at the Survey Research Center at The Pennsylvania State University. She earned her PhD in educational psychology from The Pennsylvania State University, with a minor in applied statistics. Her program of research focuses on unpacking the effects of traumatic experiences and childhood maltreatment on individual and family well-being, self-regulation, and learning. Specifically, her prior work has focused on the effects of symptoms of trauma on students' self-regulated learning and metacognitive monitoring, and evaluating programs designed to decrease child maltreatment.

**Lisa Schelbe, PhD, MSW**, is Associate Professor at Florida State University College of Social Work and a Faculty Affiliate at the Florida Institute for Child Welfare. She serves as a Co-Editor-in-Chief of the *Child and Adolescent Social Work Journal*. Her research focuses on young people transitioning out of foster care and services to assist with their transition out of care and into adulthood. She is a qualitative methodologist with experience working on interdisciplinary teams. She has published over 30 referred journal articles and co-authored two books: *The Handbook on Child Welfare Practice* (Springer, 2021) and *Intergenerational Transmission of Child Maltreatment* (Springer, 2017). Dr. Schelbe received her doctorate in social work from University of Pittsburgh, where she was a Doris Duke Fellow for the Promotion of Child Well-being.



# Captain Video: the Legacy of David L. Corwin, MD, Founding Chair of APSAC

*Nina Agrawal, MD*

## David L. Corwin, MD

When we sat down to do our legacy interview, we were pleasantly greeted by David Corwin, MD, sitting smack in the middle of a yellow flowered valley flanked by symmetric white-capped mountain ranges. “You have a choice of backgrounds,” Corwin said. “This is a picture taken last fall at Snowbird Resort coming down the mountain on the tram. It’s a pretty picture. I like this one.” Corwin changed his zoom background to an orange glowed sunset with two darkly outlined palm trees. “This is from the Pacific Terrace Hotel where the APSAC Board has stayed and met each January for a number of years. Let’s stay with this.”

For the next two hours, Dr. Corwin took us through the journey of his remarkable career, from the comfort of his desk chair against the virtual backdrop of the sunset over the Pacific in San Diego, where APSAC has been meeting annually for decades. He started by telling us about his friendship with an Italian engineer now living in San Diego but whom Corwin met when they both lived in Orinda, California, during the 1980s. So, what does this engineer have to do with Corwin and his legacy? Upon reading Corwin’s 1997 groundbreaking paper on the APSAC website about a suppressed child sexual abuse memory, the engineer recalled an experience that occurred on his third birthday in Italy. Because it was his birthday, he was allowed to accompany his father, a former naval officer, who was at that time working as a farm manager overseeing workers in a field when men, probably German soldiers, armed with machine guns drove up and

were threatening his father. The 3-year-old clung to his father’s leg. Ultimately, he believed it may have helped save his father’s life because the armed men decided to leave his father alive. It was upon reading Corwin’s article that the engineer recalled this very traumatic event.

As a trained child and adult psychiatrist, Dr. Corwin has had a long-standing interest in how traumatic childhood memories affect people later on in life. When he was a second year psychiatry resident at UCLA doing his child psychiatry rotation at a child guidance clinic, he evaluated two young boys and their mother, which would help guide his entire career. The twin boys were brought to the child guidance clinic for behavioral problems. After evaluating the boys, Dr. Corwin did not have any mental health concerns for the children. However, he did have concerns about the mother. She had disclosed being a victim of intrafamilial child sexual abuse during her adolescence. He began treating her in individual psychotherapy. It was 1977.

“I was clinically impressed, or, rather, horrified by how experiences of sexual abuse could negatively influence her life so much,” said Corwin, with the case still very fresh in his mind.

Corwin had no textbooks or treatment guidelines to refer to. He sought guidance from his supervisors, one of whom he later started working with during his child psychiatry fellowship, Roland Summit, the author of child sexual abuse accommodation syndrome. Within the next five years, he went on

## Interview with David L. Corwin

to see many more patients who had been sexually abused. Eventually, he started videotaping his child abuse evaluations—and fondly began being called by some colleagues and family as “Captain Video.”

In 1981, Dr. Corwin continued to move forward on the little-trodden path of child sexual abuse evaluation and investigation by working with a multi-disciplinary group of professionals, now legacies in their field, who were working with child sexual abuse cases in various settings. These professionals included Roland Summit, Kee MacFarlane, Jill Waterman, Sargent Toby Tyler, and others who called themselves the Los Angeles Task Force on Interviewing Sexually Abused Children. Their first initiative was to recommend video recording the investigative and evaluation interviews of children in suspected child sexual abuse cases. Corwin was making progress.

In 1982, Corwin took his rapidly growing expertise in videotaping child sex abuse interviews on the road. He led the first presentation of this idea at the national symposium on child sexual abuse in Washington, D.C., that spring and later, in the fall of 1982, he presented it with Sargent Tyler at the International Society’s 4th Congress on the Prevention of Child Abuse and Neglect. More training opportunities arose. But, when he was invited to travel to Amsterdam for the Third International Congress on Child Abuse and Neglect, he hesitated as he was still in training. He felt unsure about whether he felt ready to continue to devote hours of his limited residency time to keep doing trainings. He sought advice from one of his UCLA child psychiatry faculty advisors. “You become an expert by being an expert,” advised the faculty child psychiatrist. Corwin embraced the advice, presented the six hours of training in Amsterdam, and then spoke in several other European cities in Great Britain. He quickly became a national leader in child sexual abuse—before becoming a full-fledged medical board-certified child psychiatrist.

Upon completion of his psychiatric residency and fellowship, Corwin settled in Northern California, where he started a private practice in child,

adolescent, and adult psychiatry. There, he testified in numerous court cases about child sexual abuse. But, without any clinical guidelines to support his expert opinion, he found testifying grueling. “I can’t continue to do this. It is too hard. I need to find a safer altitude or fly a totally different course,” Corwin told his wife. After some serious soul searching, he decided to continue his career at a “higher altitude.” (The flying metaphor had its origins in his father’s service as a glider pilot in World War II.)

In 1985, Corwin organized the National Summit Conference on Diagnosing Child Sexual Abuse. He led the discussion on creating a diagnostic category for sexually abused children, but found himself in the minority opinion of the more than 100 multi-disciplinary attendees at the Summit, who had been invited because of their work or research with child sexual abuse in investigation, medical, and mental health evaluation, court, treatment, and prevention. However, the dissent did not dampen him, as it never has. He sought consensus. His partners—Joyce Thomas and colleagues from the Children’s National Medical Center in Washington, D.C.; a Northern California group of professionals working with child sexual abuse; colleagues in southern California; and others from around the United States—agreed to create a new multi-disciplinary professional society focused specifically on child sexual abuse.

Led by Corwin, the first multi-disciplinary professional societies dedicated to addressing child maltreatment in the United States were founded in July of 1986: APSAC on a national level and CAPSAC in California. APSAC was initially named the American Professional Society on the Victimization of Children (APSVOC). CAPSAC stood for the California Association of Professionals on the Sexual Abuse of Children. The story of how the acronym APSAC came to be, demonstrates the signature ability of Corwin to bring people together:

On July 25, 1986, a group of 28 professionals, led by Corwin, founded the multi-disciplinary organization that later became known as APSAC—the American Professional Society on the Abuse of Children. David Chadwick, APSAC’s second president, attended a

previous organizing luncheon in New Orleans at the fourth National Symposium on Child Sexual Abuse in May of 1986. Chadwick insisted that if this new multidisciplinary organization focused on just child sexual abuse and not all forms of child maltreatment, he was not “coming along.” At first Board meeting in September of 1986, the Board agreed to expand the focus from child sexual abuse to physical abuse and neglect, aka child maltreatment, to be more inclusive of all forms of maltreatment and the professionals who work to address them. Corwin chaired the first Board meeting of the new national multi-disciplinary professional society. After the EC had been chosen, it elected Jon Conte as APSAC’s first president. On July 24, 1986, Corwin joined with California colleagues to found the California Association of Professionals on the Sexual Abuse of Children (CAPSAC), which subsequently changed its name to California Professional Society on the Abuse of Children (CPSAC). Corwin later became CAPSAC’s first president.

The first thing that Dr. Corwin did as a founding member of APSAC was to create a professional guidelines committee. He then went on to create the *Advisor* newsletter. Although he did not consider himself an expert writer, he was skilled in identifying good talent. He saw a talented writer in John E. B. Myers. Looking back to when he started APSAC, Corwin is proud of what APSAC has accomplished over the past years. “APSAC has become the foremost leader for professional trainings in child abuse in the U.S.”

After a hiatus beginning in the late ‘90s, Corwin was re-elected to APSAC’s Board in 2012. In 2018, he became APSAC’s president. “I wanted to complete the circle and bring symmetry to my career,” said Corwin. From the time of APSAC’s founding in 1986 until now, his goal has remained the same more than three decades later: “To improve professional practice addressing child abuse and neglect.”

One of his last acts as APSAC’s president was to address systemic racism and implicit bias in the wake of the killing of George Floyd. He felt pressured to

issue a statement earlier but wanted to do something more substantial. His vision that APSAC make a larger, multi-year commitment to address implicit bias and systemic racism is being realized. He feels APSAC has had a long-standing effort to increase cultural sensitivity, but Dr. Corwin also strongly supports expanding and sustaining trainings to get all disciplines engaged in addressing racism and other topics important in the field. Regarding the future of APSAC, he would like to see more law enforcement professionals return to APSAC, particularly in leadership positions. He sees law enforcement as critical to helping achieve more needed diversity in discipline representation in APSAC and the key to APSAC’s success.

Corwin attributes his persistence and success to his mother. “She filled me with a sense that I could do anything -- if you are raised to believe that you can do something, it becomes internal, and you feel capable of doing great things.”

Corwin’s greatest accomplishments cannot be found on the CV he sent us. “I’m going to show you something,” he said as his computer camera panned to portraits on his walls and landed on his home office window. A beautiful black-brown Bengal cat could be seen lounging on a window sling. “Gilley,” he called. As cats will do, Gilley continued to gaze out of the window without a flinch. Corwin explained that Gilley belonged to his deceased daughter, Jessica. She died in 2011 just shy of 28 years old of a fentanyl-methamphetamine toxic interaction. APSAC was founded on Jessica’s third birthday. Gilley is Jessica’s spirit cat, Corwin explained. “When your children die, you don’t want to let go of them and your memories of them. I choose not to resolve their loss—instead, I surround myself with them.”

Corwin pointed to a group of nicely laid out portraits on his office wall. Each portrait is one of his children. For each child, he tells us their name and something uniquely characteristic—a talent, a personality, a memorable event, such as his younger daughter Andrea’s wedding and his son Aaron’s stint in the Marines.

## Interview with David L. Corwin

Corwin leaves our camera view for a minute. He returns with a copy of a school notebook and a piece of paper with handwriting. It was written by Justin, his oldest adopted son. With emotion in his voice, Corwin reads the handwritten note, thanking Corwin for his fatherly role in his life. “My potential outweighs his,” Justin wrote, making a comparison with his father. Corwin is proud, embodying his ability to see and bring out the strengths in his children.

We became “emotional” as well, taking a pause to celebrate the life and legacy of his children and him as a father. He further tells us that three of the adult children in his photo wall gallery have died. He described Zach as the handsome young man whom my Marine son, Aaron, has his arm around. He explained that Zach died about a year ago. Justin died at age 39 in October of 2020 from complications of appendicitis, for which he failed to seek medical care soon enough due to his and others’ fears of COVID-19. “Two weeks ago, 15 of our family members gathered beside the ocean near Poipu Beach, Kauai, and spread some of Zach’s ashes.” Zach was my wife Vicki’s oldest son. I loved Zach, too. We had a beautiful and loving memorial for him.”

Corwin’s legacy cannot be captured in one sentence or even this one article. The common thread is his wonderful ability to bring people together and consider different ideas respectfully, while improving the trajectory of the life of child abuse victims and those close to him. Dr. Corwin reflected, “The value of what I have done is to those whom I and the rest of us have been able to help. I know what I have done, and I feel I have contributed and hope to contribute more. The interview with you and these documents describe what has been my great privilege to do. I have made many mistakes and offended some on my journey, but I have always tried to do the right thing, just as with my patients, subjects, and the raising of my children. I feel a bit like the old man at the end of *Saving Private Ryan* who is seeking some assurance that he has been a good man in his life. As it draws closer to the end, I believe that I have been,

and ultimately, we each know ourselves the best. I urge others to live good lives and give as much as they can to make the world a better place. That is all anyone can do of greatest value! As my 86-year-old paternal grandfather told me when I was 19 or 20 and searching for the meaning of life and how best to live mine, “It’s about the people!”

As to what Dr. Corwin would like to see APSAC accomplish in the next decade, he said, “I’d like to see [APSAC] stay true to its mission to bring different disciplines together to address challenges associated with ... child maltreatment, and to do so in a democratic and just way.”

### About the Author

*Nina Agrawal, MD, is a child abuse pediatrician who works at Children’s Aid Society.*





# APSAC Advisor 35th Anniversary Special Issue: An Interview with Viola Vaughan-Eden, PhD, MJ, LCSW

*Ellen M. Chiocca, PhD, APRN, CPNP-PC;  
Megha Sardana*

**Viola Vaughan-Eden,  
PhD, MJ, LCSW**

## Introduction

Dr. Viola Vaughan-Eden has made significant contributions to the field of child welfare in a variety of ways. As a clinical and forensic social worker, Dr. Vaughan-Eden has acted as a consultant and expert witness in child maltreatment cases, mainly involving sexual abuse. She has contributed to the field through her scholarly work, including university teaching, as well as local and state trainings and national and international presentations to multidisciplinary groups of child protection professionals. In her current role, Dr. Vaughan-Eden is a Professor and PhD Program Director with the Ethelyn R. Strong School of Social Work at Norfolk State University in Southeastern Virginia.

Dr. Vaughan-Eden has made numerous contributions to APSAC through her service and leadership roles. She has served on the APSAC board of directors since 2008 and as President Emerita, having served as president from 2012-2014. In 2019, Dr. Vaughan-Eden was the recipient of APSAC's Outstanding Service award, which recognized her exceptional leadership and service to the organization. Dr. Vaughan-Eden is also the President Emerita of the National Partnership to End Interpersonal Violence (NPEIV) and Past-President of the National Organization of Forensic Social Work (NOFSW).

## Early Life and Career

As a child, Dr. Vaughan-Eden decided she wanted to be either a psychologist or a mathematician. She was particularly interested in mental health services, in part because of her experiences related to her parents' divorce. Her childhood and adolescence were shaped by the dynamics of being raised by a single mother in the 60s and 70s, as well as seeing other children and teens struggle emotionally. By the time Dr. Vaughan-Eden began college, computer science was an emerging field, which inspired her to enroll as a double major in psychology and computer science; however, she quickly decided that she was far more interested in psychology.

At the time that Dr. Vaughan-Eden earned her undergraduate degree in psychology in 1985, jobs in psychology were scarce, so, she worked for a time as a salesclerk in a mall clothing store. This clashed with Dr. Vaughan-Eden's mother's beliefs about a "young, single woman living alone," and she insisted her daughter either move back home or immediately enroll in graduate school. On the advice of several friends and colleagues, Dr. Vaughan-Eden enrolled in the MSW program at Norfolk State University, graduating in 1987.



## Interview with Viola Vaughan-Eden

### After Undergraduate Studies

Dr. Vaughan-Eden chose to pursue a graduate degree in social work not just because of her interest in mental health, but also in part because of her family's and her own personal history. Her mother grew up during segregation, and it was not until she was an adult that Dr. Vaughan-Eden appreciated the significance of having an opportunity to go to college as a Black woman. The year that Dr. Vaughan-Eden was born, her mother earned an undergraduate degree and then went on to graduate school. There were no graduate schools in her mother's field of study in Virginia that allowed Black students to attend at that time, but she was accepted at several other schools, ultimately attending Howard University. Dr. Vaughan-Eden spent those three years that her mother was in graduate school living with her great aunt. Dr. Vaughan-Eden believed that since her mother worked so hard to earn a college education, there was no question that she herself must attend college. Her mother went on to become a teacher and minister, so she was always working in service of others. Many of Dr. Vaughan-Eden's aunts, uncles, and cousins worked in the church as well, so these values, instilled in her early on, inspired her to study social work.

As Dr. Vaughan-Eden was earning her MSW, she spent a lot of time in the children's unit and began learning about child sexual abuse. She also worked at a residential treatment center for children and adolescents. It was there that her love of working with young children was solidified; she began to specialize in working with 3-, 4- and 5-year-old children, and she changed the topic of her dissertation to child sexual abuse and parenting. Shortly thereafter, Dr. Vaughan-Eden began her PhD studies and became involved in opening a child advocacy program in Norfolk, Virginia. This program quickly grew, and soon, roughly ten other jurisdictions were requesting their child advocacy services, with 800 referrals in their first year alone.

### Becoming Involved with APSAC

Dr. Vaughan-Eden's involvement with APSAC evolved over time. She first learned about APSAC in 1996, after meeting Jon Conte and reading the work of Kathleen Faller, a pioneer in studying and writing about child sexual abuse and forensic interviewing. David Finkelhor's work was another strong influence on Dr. Vaughan-Eden at this time. In order to learn more about the skills required to testify in court, Dr. Vaughan-Eden followed the work of John Myers and connected with him in the early 2000s. Linda Cordisco-Steele and Patti Toth were also instrumental in helping Dr. Vaughan-Eden develop her understanding of forensic interviewing. Dr. Vaughan-Eden then met researcher Lisa Fontes at a conference, and they kept in touch. Both Jon Conte and Lisa Fontes nominated Dr. Vaughan-Eden to join the APSAC Board.

### Reflections on the Pandemic and Racial Justice Movement Over the Past Two Years

Dr. Vaughan-Eden believes that teaching Black history is of the utmost importance. During our interview, she discussed her experiences attending a predominantly white school from fifth through twelfth grade—in that school, the mentality was that slavery happened so long ago that it didn't need to be taught. She discussed how we know that so much of what is happening today is another form of or connection to slavery, from mass incarceration to corporal punishment. Dr. Vaughan-Eden described living in Virginia, which was the center of the Confederacy, and driving on her way to work each day over the bay where the first slave boats arrived; yet schools in Virginia have been discouraged from talking or teaching about slavery. Dr. Vaughan-Eden also discussed how difficult it is to get parents to abandon corporal punishment, acknowledging that these practices originated in the past and have carried over to our present without the average

parent understanding their origins. She stressed that many are uncomfortable with acknowledging systemic racism in child welfare, but she added we must shine a light on these issues by celebrating and honoring Black pioneers in any field of child welfare. She also spoke of the importance of ratifying the United Nations Convention on the Rights of the Child, as to this day, children have no legal rights here in the United States.

### Thoughts on Self-Care and Racism Embedded in Child Welfare Work

Dr. Vaughan-Eden was very clear that despite her love of what she does, it can be difficult work. One of the overarching parts of her life that guides her through adversity is her faith and spirituality. One example she gave of her faith helping her cope was when she worked at a psychiatric hospital and was called at the end of a shift to help put two young sisters to bed, ages 3 and 5 years old. She soon learned that they had been sexually abused by their father; one child's injuries were so severe that she wouldn't be able to have children as an adult. Dr. Vaughan-Eden said she went into an empty office because all she could do was cry and pray. As another form of self-care, she also began to regularly attend trainings and conferences to educate herself, recharge, and network with other people who do this work and understand its challenges.

Dr. Vaughan-Eden believes she has improved her self-care routines, as the pandemic has helped her to recenter and prioritize herself, especially while working remotely for 18 months. Dr. Vaughan-Eden cares for herself by taking walks with friends and traveling, which she loves. She has been invited to speak in several countries, including Japan twice. She continues to consult with her colleagues and was grateful for their hospitality, kindness, and compassion. Her mother passed away three years ago but was able to see many of Dr. Vaughan-Eden's accomplishments and was very proud of her. In addition to self-care, Dr. Vaughan-Eden recognizes the power of support networks. She has been married

since 1993, and her husband has been extremely supportive of her career, including during the time she cut her private practice in half to serve as APSAC President.

### Next Steps

Dr. Vaughan-Eden decided right before the pandemic began to significantly reduce her clinical work and move upstream to prevent child abuse. As full-time faculty at Norfolk State University, she focuses on providing training to the next generation of social workers, encouraging them to become effective leaders of the profession who recognize their importance as change agents in society. She wants her students to exemplify the values of social justice and a respect for human dignity. Her goals include stimulating students' desire to forge ahead and build the perseverance required to end child abuse and systemic racism. Recently, Dr. Vaughan-Eden was asked to take over a local nonprofit in her community, Prevent Child Abuse Hampton Roads. Along with her business partner, Stacie LeBlanc, the nonprofit was renamed Up for CHAMPIONS and focuses on supporting the professionals working to prevent child abuse and neglect globally, through advocacy, public education, and family support programs.

### Advice for Future Leaders in Our Field

Dr. Vaughan-Eden believes that the field of child abuse has greatly evolved but has a long way to go, and that it is imperative for us all to show up to work now if we have any hope of ending child abuse in the future. APSAC has been part of her life for more than 25 years, and during that time, she has learned that no one must go it alone. People need to be involved in such organizations because they serve as brain trusts where professionals must come together to address the crisis of child maltreatment. This includes finding support networks that allow each professional to learn, grow, and reach their fullest potential.

## Interview with Viola Vaughan-Eden

### Author Reflections

I interviewed Dr. Vaughan-Eden in tandem with Megha Sardana, the Project Director at Safe Horizons in New York. My primary takeaway from the interview was threefold. First, I was inspired by Dr. Vaughan-Eden’s passion and commitment to child welfare, particularly to children who were sexually abused. I also admired how hard she worked to achieve her goals. Second, I was impressed by Dr. Vaughan-Eden calling out institutional racism and its overlap with the corporal

punishment of Black children as a remnant of slavery. My third observation, which I am very passionate about, was that I appreciated the way Dr. Vaughan-Eden asked child welfare professionals to work toward the cessation of physical violence against children and the ratification of the UN Convention on the Rights of the Child. I share her emphatic belief that children, as human beings, have human rights. Overall, learning more about Dr. Vaughan-Eden made me respect her even more than I did before this interview.

### About the Authors

*Ellen M. Chiocca, PhD, APRN, CPNP-PC is an Assistant Teaching Professor with the University of Missouri Sinclair School of Nursing in Columbia, Missouri. She has been a pediatric nurse for 40 years, working in the PICU and pediatric emergency room, where she encountered many cases of child abuse and neglect. Dr. Chiocca is also a pediatric nurse practitioner and co-authored the NAPNAP position statement “Utilizing Positive Parenting to Eliminate Corporal Punishment.” Dr. Chiocca is a board member of the U.S. Alliance to End the Hitting of Children, of the National No Hit Zone Committee, and of Arkansans Against School Paddling.*

*Megha Sardana is the Project Director for LIFT UP, a federally funded infant and early childhood mental health initiative across Safe Horizon’s five co-located Child Advocacy Centers and Counseling Center in New York City. She was born and raised in Sydney, Australia, forming a multicultural identity rooted in her Indian heritage and Australian upbringing. Megha spent six years as a victim advocate, forensic interviewer, clinician, and supervisor at the Bronx Child Advocacy Center. She is currently based at the Manhattan Child Advocacy Center and is the Chair of Safe Horizon’s citywide Child Advocacy Centers Anti-Racism Work Group. Megha is also a Peer Review Consultant for the Midwest Regional Child Advocacy Center. She has previously worked in trauma research, domestic violence services for South Asian women, and home-based early intervention for children on the autism spectrum. Megha holds a Master’s degree in Clinical Psychology from Columbia University. She is passionate about community building, social justice, and intergenerational healing.*

# 35th Anniversary of APSAC Special Issue of the Advisor: An Interview with John E. B. Myers, JD

*Naomi Rothenberg*

The American Professional Society on the Abuse of Children (APSAC) began in 1986 as a hub for social workers, psychologists, and other professionals dedicated to serving children and families. APSAC offers a space for service providers to gather as a community and learn best practices. One early member of APSAC who facilitated the growth of APSAC's subject areas is John E. B. Myers, JD, a prolific scholar and committed advocate for children in the courtroom.

Professor Myers began his career as a medic in the U.S. Navy, where he aided the dead and dying in Vietnam during the war. His early interest in working with children further developed as a student at the University of Utah, initially manifesting in the preschool lab program before he switched to sociology. Throughout his undergraduate career, he drew from his experience as a medic in Vietnam and was employed throughout his education as an ambulance driver. After contemplating a career in social work, he chose to pursue a career in law and attended the University of Utah College of Law. Upon graduating from law school in 1977, Professor Myers moved to Washington, D.C., to work at the United States Department of Justice. He then returned to Utah, where he provided legal services to all of eastern Utah. It was in this position that he first became interested in representing children experiencing abuse. Throughout law school, Professor Myers had been given only limited exposure to the area of children's rights; he first represented children and youth in Utah when judges would occasionally request a lawyer in juvenile court. Following his experience serving as a rural poverty lawyer, he served as the director of the Legal

Center for the Handicapped in Salt Lake City, before moving to the University of Wyoming and running the poverty law clinic there. Chased away by the cold Wyoming winters, Professor Myers moved to California in 1984, where he served as a professor at the University of the Pacific for 35 years. In 2017, Professor Myers moved to the University of California, Hastings, where he currently teaches criminal law, criminal procedure, evidence, family law, and community property.

In addition to his work as a professor of law, he provides direct legal representation. Professor Myers represents children entangled in California's family regulation system in juvenile court, serving as minor's counsel by appointment for Colusa County, a small, rural county in northern California. He has represented all the dependent children in Colusa County for the past twenty years. In Yolo County, where Professor Myers lives, he represents children in high conflict custody cases. He also works as a volunteer lawyer for a domestic violence nonprofit in his county that provides shelter and legal assistance to women in need.

Professor Myers' most recent appointment is by the California Judicial Council's Center for Families, Children & the Courts. With the Judicial Council, Professor Myers is in the process of contacting all the law schools in California to determine whether schools are offering a course on the juvenile court. As there are no case books or standardized materials on juvenile court dependency, he is also preparing a curriculum to provide to California schools interested in offering such a course.

## Interview with John E. B. Myers

### APSAC and Legal Expertise

When Professor Myers first began his career in academia, he noticed a substantial gap in the literature surrounding child abuse. Few lawyers were discussing the complexity of issues children faced, motivating him to engage in scholarship around child abuse, child witnesses, and techniques to interview children. Soon after he published his book *Child Witness: Law and Practice*, his scholarship caught the attention of Dr. David Corwin. Dr. Corwin was practicing psychiatry in Orinda, California, at the time and invited Professor Myers to attend a meeting of CAPSAC, the California Professional Society on the Abuse of Children, which Dr. Corwin had been involved in starting. Like Professor Myers, Dr. Corwin noted that there were few lawyers involved in the field and brought Professor Myers in as a legal expert. Professor Myers joined APSAC when it first began and presented on legal issues at meetings. He continued to work closely with Dr. Corwin, admiring his enthusiasm and skills as a community organizer. The two collaborated in creating APSAC's practice-oriented journal, the *Advisor*, which Professor Myers served as managing editor of for several years. Professor Myers speaks fondly of his time with APSAC and his work with the organization's doctors, psychologists, and social workers.

### Insights Into the Field and Looking Forward

Professor Myers reflected upon the great advancements within the field; however, he expressed concern over the limited number of lawyers pursuing a career advocating for children and families. Just as he was not initially exposed to juvenile court, many law students similarly lack opportunities to learn about issues affecting children or develop the skills necessary to properly advocate for them. He indicated that few schools offer a course on juvenile court. Furthermore, few career development offices focus on careers related to

children and families, failing to connect new lawyers with available placements or offer guidance toward potential career paths.

Although there may be few lawyers in this area of law, Professor Myers commended the field for the enormous advancements within the topic of child sexual abuse. First, he acknowledged the practice of suppressing discussion related to sexual abuse in the 20th century and the benefits of us now acknowledging and discussing the issue with increasing openness. Despite this greater visibility, he emphasized the continued deficiencies in the court's response to child sexual abuse allegations. The court's reliance on objective evidence often results in a harsh reality of removing children from their parent's custody.

Professor Myers detailed a common situation in which parents will explain their suspicion that the other parent has molested their child. Oftentimes, lawyers will rush to court before there is any evidence to substantiate the parent's allegation. Although this situation arises for parents generally, it is especially prevalent for mothers. A judge's unconscious biases may result in a mother's branding of "crazy" or a "parent alienator." This situation is a minefield for parents, and they are often presented with a Catch-22 scenario: if they rush to court seeking to cut off the father's visitation rights, they are labeled a false accuser and the father is perceived as the innocent victim; however, if they do not go to court immediately, mothers are reprimanded for failing to protect their children and are at risk of losing their parental rights. These harmful realities can create deep distrust of the system. Professor Myers reflected on his most important book, *A Mother's Nightmare—Incest: A Practical Legal Guide for Parents and Professionals*, which describes the pitfalls of rushing to family court and offers strategies to maintain parental rights.

The complex dynamics surrounding gender are often accompanied by and compounded with unconscious racial biases judges may not have addressed.

Professor Myers discussed the discrimination embedded in the system, noting that nearly all the clients he represents in juvenile court enter the system due to allegations of neglect stemming from conditions of poverty. He elaborated that his clients are predominantly families of color, while he and most of the court representatives are nearly always white.

### Reflections From an Aspiring Lawyer

Professor Myers' reflections highlight the need for compassionate, strategic lawyering when representing children and families. As an emerging practitioner, it is essential that I effectively utilize the legal system in advocating for a child's best interests. However, I must also recognize the limitations of the legal system. Lawyers must learn to critically assess when to rely on the legal system and when to connect clients with other service providers. To represent clients to the best of my abilities, I must be prepared to navigate and delicately address judges' potential biases.

These observations emphasize the importance of diverse voices and lived experience among judges and legal practitioners.

Professor Myers noted that lawyers should expect to apply trauma-informed practices in their daily work. His literacy in child psychology informs his

practices as a lawyer, and he urges emerging lawyers in this discipline to have a similar foundation in child development. Lawyers must remain apprised of developments in case law as well as those in the psychological and medical literature. Multi-disciplinary collaboration is an important facet of this work, and Professor Myers shared that one of his favorite elements of the job is his ability to collaborate with individuals from a variety of professional backgrounds.

Professor Myers imparted upon me the great power and potential for change that lawyers possess. Despite the emotional turbulence inherent in his job, he expressed immense pride working as a pediatric lawyer. He remarked that the greatest satisfaction is successfully advocating for a child: "If I have an 8-year-old who sends a letter that says, 'Thank you for saving my life,' then that's all the reward I need." Thank you, Professor Myers, for your contributions to the field and for sharing your eternal optimism with me.

### About the Author

*Naomi Rothenberg is a law student at Seattle University School of Law. She is pursuing a career advocating for children and families affected by the family regulation system, incarceration, and immigration.*



Randall Alexander

## Celebrating 35 Years of Improving Society's Response to Abuse and Neglect of Children: An Interview with Randall Alexander, MD

*Carmella Spinelli Miller, MSW, LCSW;  
Stacey L. Shipe, PhD, MSc, MSW*

Randall Alexander, MD, began his practice as a child abuse pediatrician under the mentorship of Ray E. Helfer, MD, in the mid 1970s. Child abuse pediatrics is a subspecialty of medical practice in which physicians are trained to diagnose and treat infants, children, and teens who are victims of suspected child abuse and neglect. Although, collectively, these physicians have practiced for over three decades, this subspecialty was not officially recognized by the Accreditation Council for Graduate Medical Education (ACGME) until 2006. Likewise, the first qualifying exam did not occur until 2009 (Pediatric News, 2009). Certified child abuse pediatric providers are experts in conducting child physical and sexual abuse exams as their training is more specialized than other medical professionals; this often enables them to catch indicators of abuse and trauma earlier than noncertified providers. In addition to providing medical care, child abuse pediatricians primarily focus on the diagnostic side of care, commonly working alongside law enforcement, judicial experts, and child welfare workers in multidisciplinary teams.

When Dr. Alexander began his career, child abuse prevention was not yet mainstream in public health circles; thus, this was a small, tightknit group of practitioners able to develop and implement strategies that were less encumbered by bureaucratic restrictions than those of today. One of Dr. Alexander's earliest contributions to the field was creating a child abuse prevention program and a child abuse clinic during his tenure at Butterworth Hospital in Grand Rapids, Michigan. He went

on to become an expert in the fields of shaken baby syndrome and Munchausen syndrome by proxy. Currently, he is Professor of Pediatrics at the University of Florida College of Medicine—Jacksonville and is also Chief of their Division of Child Protection and Forensic Pediatrics in the Department of Pediatrics.

Dr. Alexander previously served as Statewide Medical Director of Florida's Child Protection Teams from 2004 to 2015. In 2013, he received the American Professional Society on the Abuse of Children's William Friedrich Memorial Award, and in 2017, he received the Ray E. Helfer Teaching Award for Significant Contributions as a Teacher of Child Abuse Pediatrics. In 2018, he was awarded the Lifetime Achievement Award presented by Gundersen National Child Protection Training Center at the Violence Intervention and Prevention (VIP) Summit. As a longtime member of the American Professional Society on the Abuse of Children (APSAC), Dr. Alexander has served on various national committees, executive committees, and boards. He currently serves as the co-chair of APSAC's Guidelines Committee.

### Early Career

From the beginning of his career, Dr. Alexander cultivated a person-centered, holistic view of development, focusing on the relationship between psychology and human development. While working toward his PhD in experimental psychology, he shifted gears and entered medical school at Wayne

State University, although he did ultimately finish his PhD at the University of Michigan during his fourth year of residency. At this time, he also became chief resident and a fellow in community pediatrics under the tutelage of Dr. Helfer, a pioneer in the field of child abuse prevention. As a fellow in community pediatrics, Dr. Alexander credits Dr. Helfer with bringing greater awareness to the broader, long-term effects abuse has on child development, proclaiming, “When we talk about the history of the field, Ray Helfer is one of the most important [child abuse professionals] others should know about.”

Dr. Helfer was a pediatrician trained under C. Henry Kempe, MD, a Nobel Prize nominee noted for his contributions in the recognition and identification of child abuse and neglect in the medical community. Dr. Helfer developed clinical guidelines for the detection and treatment of child abuse, and ultimately, he dedicated his career to reducing abuse and neglect through prevention strategies. Dr. Alexander recalls a pivotal experience and conversation with Dr. Helfer following a particularly disturbing child examination in which Dr. Helfer was troubled by not only the medical aspects of the case but also the news that the abuser would not receive clinical treatment in prison with a rehabilitative approach not yet offered during this time. He strongly felt any intervention had to be *proactive*, providing individuals with the tools necessary to enable them to choose an alternate action other than abusing a child. Up until his death in 1992, Dr. Helfer spent his career researching and raising awareness of child abuse and the need for prevention services. The time during which Dr. Alexander spent with Dr. Helfer influenced him so much so that, to date, Dr. Alexander is the only fellow who has stayed within the child abuse pediatric field.

### Initial APSAC Involvement

Dr. Alexander says child abuse programming and legislation often come about via advocacy initiatives. Dr. Helfer’s passion for building alliances and increasing child abuse prevention outreach and

education have had a notable influence on Dr. Alexander’s advocacy efforts. This all took a pivotal turn when he first became involved with APSAC shortly after its initial inception in 1986. As a new member during his early days with APSAC, he was at a meeting to discuss their upcoming agenda. During an informal conversation, he mentioned to his colleagues his concern that APSAC was predominantly known for its work on child sexual abuse (CSA) and not recognized for its work in other areas of child abuse and neglect. He believed this misguided perception was limiting APSAC’s reach and expressed his belief that the members needed to improve their messaging to include more than CSA. During that meeting, there was a call for ideas, and his colleagues, who agreed and supported his idea, nudged Dr. Alexander to share his thoughts on the topic with leadership. At their encouragement, he addressed the group expressing his concerns and rationale for change. His idea sparked a new committee, which in turn led to a seat on APSAC’s Board of Directors.

### APSAC Accomplishment Highlights

Reflecting on this time in his career, Dr. Alexander says he feels “lucky” he was on the ground floor with multiple child abuse organizations that were defining how child abuse and neglect would be identified and treated. One such project led to a publication in 2002 in which APSAC published extensive guidelines on the assessment, diagnosis, and treatment of Munchausen syndrome by proxy. Updated in 2019, this has become the most widely referenced document on the disorder in the medical and legal communities. Dr. Alexander credits the work of the Munchausen syndrome by proxy task force as one of the most notable contributions APSAC has made to the field.

Another successful advocacy effort coordinated by APSAC President and Chair of the National No Hit Zone (NHZ) Committee, Stacie Schrieffer Le Blanc, was in partnership with the archdiocese of New Orleans to designate all their Catholic Schools as



## Interview with Randall Alexander

NHZs. The NHZ is a campaign approach similar to the No Smoking campaigns of the 1980s. The NHZ aims to reduce the use of corporal punishment in public spaces using targeted signage. By providing this signage to organizations and public facilities, an environment of safety and comfort for families and staff is created and reinforced. Early evaluation of NHZ efforts show promising outcomes related to increased knowledge of the harms of spanking by parents. There is also evidence of staff feeling more knowledgeable and comfortable to intervene or report when they see these forms of corporal punishment occurring (Gershoff et al., 2018).

Dr. Alexander and colleagues (Schrieffer et al., 2019) continue to promote the implementation of NHZ. At the state level, Dr. Alexander achieved success with the NHZ initiatives and converted all Florida child advocacy centers (CACs) to official NHZs. Yet, he believes there is more to be done. He is inspired by these partnerships to help extend the reach of this valuable prevention program into the broader society, so that discussion and prevention of physical punishment does not remain a private family issue. As he says, change comes in waves, and he is optimistic this partnership has the potential to launch a larger tide.

### Future APSAC Initiatives and Advocacy Opportunities

When asked about his APSAC future goals wish list, Dr. Alexander paused and smiled, stating, “The good news is, history is on our side,” referring to the increased awareness of child abuse and how we have “more watchful eyes” to identify abuse or neglect when it happens. He continued, “Our job is to try to [make change] in our lifetime, or to catalyze it so that it doesn’t take 200 years to do something. We can do it in 100 years... We want to shape it and accelerate it.” What should APSAC focus on for the future? Dr. Alexander described three primary areas at the top of his wish list: education, advocacy/outreach, and prevention.

In terms of education, Dr. Alexander would like APSAC to disseminate the knowledge, guidelines, and technical documents its members have created. In addition, he would like to see the creation of a set of working documents to accompany the more specialized, technical medical guidelines. These technical documents were written with a medical and judicial lens. He believes APSAC could expand its reach by including accompanying documents more suitable for the child welfare workforce, social service professionals, educators, and the public. He would also like to shift the way we think about child abuse by placing it under the umbrella of child health. Learning from history, APSAC and upcoming leaders in the field should continue the work laid out by Bob Block, MD, MPH, Past President of the American Academy of Pediatrics and staunch supporter of the Child Abuse Prevention and Treatment Act (CAPTA) to create a campaign that switches the narrative from mental health to brain health and child health. Because mental health is highly stigmatized and often thought of as a deficiency, framing the trauma of abuse as brain health aligns it with the medical model and treats the brain as another organ in our bodies. By educating the public on what happens to a child’s brain when they experience abuse or neglect, the negative outcomes of child abuse and neglect can be openly discussed and destigmatized.

Although Dr. Alexander believes APSAC does an excellent job guiding the day-to-day issues in the field, he would like to see the organization apply more efforts helping to guide the big picture challenges child welfare professionals face, such as designing a nationwide model of care that has a clear structure and a systematic method of diagnoses and treatment of child abuse and neglect. Having seen the benefits of legislative involvement, he would like APSAC and future leaders to focus more on the legislative-policy arena. He believes that, nationally, APSAC could help move the child abuse and neglect agenda forward by creating special committees that lobby Congress to pass vital legislation, such as the reauthorization of CAPTA. At the state level, local

APSAC units should develop committees to draft, lobby, and help pass local child abuse legislation.

Overall, Dr. Alexander's highest priority advocacy goal is a nationwide focus on the prevention of child abuse and neglect. He believes APSAC should embrace a proactive stance against child abuse. More specifically, he said, "We want to reduce the number of kids going into foster care; [however,] that is not prevention. That's program management. Prevention [means] no child abuse." He feels the best way to accomplish this is through primary prevention efforts. He believes we need to stop child abuse before it happens *and* have a stable system in place to respond when it does. One potential avenue would be for APSAC to partner with other organizations such as Prevent Child Abuse America and Stop It Now! to begin a prevention movement.

Dr. Alexander believes that although not primary prevention-specific, another focus for the future should be the use of comprehensive child protection systems. He views systemic change as necessary to improve the field and the quality of services provided to vulnerable children and their families. He supports the use of the Child Protection Teams (CPTs) that Florida currently utilizes to further understand and prevent child abuse and neglect. Indeed, he moved from Georgia to Florida to become Medical Director for Florida's CPTs. CPTs are found only in Florida and are unique in that they are medically directed, multidisciplinary programs that coordinate child abuse and neglect investigations with local sheriff's offices, the judicial system, and departments of children and family services (DCF). These teams (22 spread throughout the state), employ over 100 medical providers, physicians, and nurse practitioners who have specialized certifications in child abuse pediatrics and perform the medical and sexual abuse examinations of all children identified within the system. In addition, CPT medical personnel read over 200,000 child abuse reports annually via a centralized, statewide hub where CPT medical

professionals have access to all records of cases seen by CPTs, as well as any previous CPT involvement. Dr. Alexander views this access as a major benefit in providing collaborative care because it enables the CPT medical providers to walk into examination rooms armed with information. In his opinion, this access is critical because it enables the CPTs to look at the reports through a medical lens and use their expertise on child abuse identification and treatment to determine whether the child needs to be seen by the team's medical personnel. He believes this is possible because all CPTs operate independently from law enforcement and DCF.

Dr. Alexander believes Florida's child welfare model is exemplary because it is legislatively mandated and funded (i.e., the Florida Department of Health receives 25 million dollars annually to support CPTs). Each CPT team has dedicated and specialized medical providers who provide continuous quality control measures and are accountable for giving vulnerable children the care they deserve during a traumatic time. In many ways, Dr. Alexander's pride in, and desire for, other states to adopt Florida's CPT model is his own form of advocacy within the child welfare system. He firmly believes all children seen within the system deserve the most precise and specialized care possible. If not, "when you go to court...[caseworkers will not have] good answers as to what it is they're dealing with and mistakes can get made." This includes mistakes made with allegations and diagnosis. He believes it is vital for practitioners to be accurate and thorough, otherwise innocent people end up in jail or children fall through the cracks in the system; both deserve better from a system set up to protect.

### Messages for Future Leaders

A specific piece of advice Dr. Alexander has for researchers and practitioners is for them to become proficient in the history of child abuse and neglect work. For example, many people know Henry Kempe's name, but fewer know Ray Helfer, and

## Interview with Randall Alexander

in many ways, Dr. Helfer is just as prominent in the rise of the public health awareness of child physical abuse (i.e., shaken baby syndrome).

Although Dr. Alexander does not expect his name to be commonplace, the work he has done with Munchausen syndrome by proxy has contributed to the syndrome becoming mainstream. Nevertheless, few would be able to point to this contribution. In other words, he believes that to know where one is going, one needs to know where they came from, and this cannot be done without understanding the history of the work done to get the field where it is today.

Dr. Alexander also believes in the widespread use of data and more professionals becoming committed to eradicating child abuse and neglect; there is much promise for future interventions, specifically primary preventions. However, he does not believe change will occur as quickly without a clear knowledge of the history of child abuse and neglect. Dr. Alexander's bottom line is as follows: "Appreciate the history [so you're not] likely to repeat something that's already been tried unsuccessfully."

Dr. Alexander challenged us to be the change makers. professing, "The thing that holds you back is more *you* than [the] system stuff." He says it isn't the bureaucratic systems [becoming an obstacle] but ourselves getting in our own way. He also advocates for just going out there and doing what is most important to you—after learning your history, of course. Ever optimistic, he said we must figure out what we want to do and make it happen. More specifically, Dr. Alexander suggested, "Do what you want to do, [that is] with APSAC. If you want to have a committee on something, tell [one of] the board members. Just ask and tell them you're going to chair it and go with it.... [T]here aren't people organized against you." From experience he has found there is less opposition if you commit to tackling the work. It is only by putting yourself out there that change occurs.

## Individual Reflections: Stacey L. Shipe, Postdoctoral Fellow

I thoroughly enjoyed our conversation with Dr. Alexander. Although I am familiar with the child abuse pediatric subspecialty, it was enlightening to understand the history of the profession and how it complements day-to-day child welfare practice. I was also impressed with Dr. Alexander's excitement and commitment to the Child Protection Team approach that exists in Florida. I do believe having a multidisciplinary approach to CPS cases is essential for more precise assessments, diagnoses, and recommendations specific to physical, sexual abuse, and severe neglect cases.

I appreciated Dr. Alexander's suggestions for the future that would lead to more prevention. As a junior scholar currently focused on the prevention of child maltreatment, I believe that to stop child abuse and neglect from occurring, the subject needs to be regularly discussed and presented to the public in ways that are similar to the "Stop Smoking" campaigns. Given that child maltreatment stopped being a "family issue" and became a "public health" issue only within the last 40 years, it is not surprising that primary prevention work is only beginning to gain momentum; however, I believe that with the foundation that Dr. Alexander and his colleagues have laid, this social investment will continue to grow.

Another area I appreciated in our conversation was Dr. Alexander's suggestion that work gets done because someone wants to do it. In other words, I hear that self-motivation and dedication to a cause get the ball rolling. In the field of child maltreatment, multiple areas still need attention, and Dr. Alexander's words are to "just go do it." In some ways, it is this simple and requires many of the skills that social workers—my profession—are trained in, such as organizing and leadership. For example, I have a vested interest in the well-being

of single fathers and their children, yet they are an overlooked and stereotyped population within child welfare. Therefore, it is upon me to gather the necessary information about these families, present at conferences, and write empirical articles (and editorials) so the needs of these families are met with skilled child welfare staff. It is equally upon me to collaborate with other parties so that information is disseminated to multiple groups. Dr. Alexander has participated in these exact movements, which is why one obscure diagnosis such as Munchausen by proxy is now familiar in more than just clinical spaces.

Overall, Dr. Alexander is an excellent example of “walking the walk and talking the talk.” He is passionate about his work, believes in his role as a mentor, networks with the necessary legislators to get policy passed that benefits families in need, and truly has taken the field of child maltreatment to another level. Although he humbly believes his success was because of timing, which may have some truth, I personally think it’s because of his belief that creating change is everybody’s job. You just have to want to do it.

### **Lasting Impression: Carmella Miller, LCSW, Doctoral Candidate**

Walking away from our meeting with Dr. Alexander, I felt invigorated and optimistic. I don’t know if it was his passion for his work, or the challenge he gave us to find an area we are interested in and pursue it, or both, but I ended our interview with a sense of hope and determination. My initial thought was how refreshing it was to hear him talk about the positive side of the child welfare workforce. I truly believe Dr. Alexander has such optimism because he genuinely believes his job is to provide the children he sees with knowledgeable and compassionate care. He sees himself as part of the healing process.

I was pleasantly surprised to hear Dr. Alexander speak about the importance of a holistic approach to treatment saying that we, as a field, can’t make

strides forward if we are *just* treating the child or responding to the abuse. As a clinical social worker who firmly believes in the person-in-environment model of care, I agree, of course, and his words made my heart happy. Treating the child involves examining the environment, providing services to caregivers, and true coordination of services among support team members. In addition, Dr. Alexander doesn’t want us to lose track of the humanity of it all or see the work as something to be checked off on our job task list. The responsibility of child abuse prevention, diagnosis, and treatment is not monochromatic but has shades of grey that represent the unique intricacies involved in each case. If we ignore those intricacies in favor of rote procedures, we will undoubtedly miss opportunities to truly make a difference.

I am thankful for Dr. Alexander’s generosity of time and wisdom. Truth be told, our interview was close to two hours, and it could have been longer. In fact, it was more of a conversation than an interview; at the end it felt like we had known each other for years. One thing is for sure, learning about his wealth of experience, accomplishments, and his future visions for APSAC members confirmed the importance of building connections and furthering their work in this important field.

At the end of our time together, Dr. Alexander relayed a story about Albert Einstein, who spoke about identifying *your number 13*. As he told it, Einstein would ask his colleagues and students to think of the last 12 things they had completed and then identify one thing they could add to that list to improve upon it. He challenged them to find one way to make their work better, more effective, or more efficient. That one thing was what Einstein called your number 13. In telling this story, Dr. Alexander said he does the same with his fellows and challenges them to find their number 13. After a brief pause, he asked Stacey and me to find our number 13s. We both had to stop and really think about it. I am not sure why, but that question hit me

## Interview with Randall Alexander

like a jolt. Since then, I have made it a habit at the end of the day to ask myself, *What is your number 13?* Reflecting on our interview and this article, I've decided that mine is to help connect you, the readers,

with the genuine spirit Dr. Alexander brings to his work and the field of child welfare. So, in honor of Dr. Alexander, I challenge you to find your own number 13.

### About the Authors

**Carmella Spinelli Miller, MSW, LCSW**, is a doctoral candidate at Florida State University in the College of Social Work where her research interests focus on the child welfare system, including workforce retention, job support, and policy analysis. Prior to entering the doctoral program, she worked as a licensed clinical social worker providing home and community-based mental health services. Contact: [clm06j@fsu.edu](mailto:clm06j@fsu.edu).

**Stacey L. Shipe, PhD, MSc, MSW**, is a postdoctoral fellow at the Pennsylvania State University's Child Maltreatment Solutions Network. She has extensive practice experience working for and with state child welfare systems. Her research focuses on improving organizational culture and climate through targeted policies and interventions aimed at child welfare staff. Contact: [sks6864@psu.edu](mailto:sks6864@psu.edu).

### References

Council of Pediatric Subspecialties (CoPS). (2022). *Child abuse pediatrics*. Retrieved from: <https://www.pedsubs.org/about-cops/subspecialty-descriptions/child-abuse/>

LeBlanc, S., Alexander, R., Mastrangelo, M., & Gilbert, H. (2019). No hit zones: A simple solution to address the most prevalent risk factor in child abuse. *APSAC Advisor*, 31(1), 37–51.

Schneider, M, (2009, Aug). Child abuse ped. subspecialty is born. *Pediatric News*, 43(8), 1. Retrieved from: <https://www.nationwidechildrens.org/-/media/documents/47691>

# Reflecting on the History and Future of APSAC: An Interview with Diane DePanfilis, PhD, MSW

*Kate Theimer, PhD*

Over the course of 50 years (and counting) in the field of child maltreatment, Diane DePanfilis, PhD, MSW, has shown a longstanding dedication to the integration of science and practice to promote the prevention of and response to child maltreatment. Through various important roles—including social worker, program developer, consultant, researcher, educator, and mentor—her work has significantly contributed to the field. Her authentic and empathetic approach will surely have a lasting impact. For this special issue of the *Advisor*, marking the 35th Anniversary of APSAC, I interviewed Dr. DePanfilis on her innovative legacy and gathered her insights into APSAC’s history, accomplishments, and future.

## Career and Legacy

Dr. DePanfilis got an early start in the field of child abuse and neglect through the completion of a high school assignment in which she was tasked to interview two individuals who were currently in the workforce. Through a connection from her best friend, she talked with the Director of Child Welfare for her local county. She also interviewed a nun who had dedicated her life to the advocacy and protection of children. These interviews greatly influenced her next steps, including where she went to college, the undergraduate degree she sought, and where she would complete her collegiate field placements. Specifically, in-between her junior and senior years at Villa Maria College, she received a stipend to complete a summer internship in which she worked full-time in child welfare, maintaining a caseload of 20 children in a variety of service areas. She also completed her formal field placement with child welfare the next academic year. Before she even graduated with her bachelor’s degree in social welfare and sociology, she had been hired by the public child welfare system.

She went on to work in the public child welfare system in Erie, Pennsylvania, for 10 years, starting out as a caseworker and then moving on to be Court Coordinator (liaison between child welfare and juvenile court), next as Casework Supervisor, and finally, she was Director of the Child Welfare Program. Of note, she did this all without a master’s degree. Though, given her consistent interest in research and grant support, plus the knowledge that additional education could help her move forward in her career, she pursued her Master of Social Work (MSW) degree at the University of Wisconsin–Milwaukee. She sought out a degree there because of the school’s involvement with the Resource Center on Child Abuse and Neglect, which Dr. DePanfilis described as an important phase of her training. As part of her MSW, she completed an internship with the American Humane Association’s Child Protection Division. She also received several local grants to enhance the quality of child protective services. She then worked on Capitol Hill to complete legislative advocacy, including a role as Director of the Washington, D.C., office for ACTION for Child Protection, a national nonprofit. There, she analyzed policies, developed proposals, and communicated with federal programs. In 1990, she pursued a PhD in social work at the University of Maryland, Baltimore. Her dissertation, an epidemiological study, examined recurrences of child abuse and neglect over a five-year period in Baltimore. From there, she received her first faculty appointment in Baltimore at the University of Maryland.

Around this time, the National Center on Child Abuse and Neglect announced a federal grant to design, develop, and test a prevention and intervention program focused on child neglect. With Dr. DePanfilis’ experience examining the

## Interview with Diane DePanfilis

differences between neglect and physical abuse in terms of patterns of recurrence over time through her dissertation, combined with the experience of her co-PI, Howard Dubowitz, MD's, foundational research in child neglect, they completed a proposal that ultimately funded and helped create Family Connections. (Of note, Dr. Dubowitz, a pediatrician, also served on the APSAC Board.) Family Connections is a social work intervention that integrates the use of clinical assessment instruments to understand the complex, unique risk and protective factors that a particular family may be experiencing. In this program, outcomes are derived that are targeted to pick the best array of intervention strategies to help reduce risk factors and strengthen protective factors, such as family functioning, social support, and parenting strategies. Intervention strategies are individualized and tailored to best meet the family's needs. Family Connections was funded originally as a demonstration, and then the federal government funded another series of replications. Since then, Family Connections has become "practice as usual" and shown continual value in supporting families and reducing the need for more intrusive interventions, such as out-of-home care.

In 2012, Dr. DePanfilis began a sabbatical in New York City because Family Connections was selected as an evidence-based program that the city's prevention programs could choose to adopt. There, she was recruited to return to Hunter College Silberman School of Social Work, where she previously had served as a visiting professor. Now, she is a full professor who currently teaches a two-semester research course for MSW students. She spends approximately half of her time collaborating with the Administration for Children's Services, the public child welfare system, on workforce development. She has helped to implement coaching as part of supervision and management for both the public and private child welfare sectors, having worked with at least 3,500 supervisors and managers who have gone through the coaching learning program. In this way, a series of "transfer of learning" strategies are implemented to support the use of coaching in a supervisor's role with their case

planner or case worker. In addition, Dr. DePanfilis works with coaches in the Division of Child Protection in each of the five boroughs in New York City. These coaches work to support supervisors' and managers' ongoing use of coaching in the provision of their staff's development, particularly surrounding risk and safety decision making and the use of strength-based intervention strategies (e.g., motivational interviewing). Through Dr. DePanfilis' contract with the city, the 28-person team includes coaches and practice instructors, supervisors, and members of an evaluation team. In addition, Dr. DePanfilis currently works with ten Family Connections programs in New York City, including in the Bronx, Harlem, and Brooklyn. Her primary roles include assessing fidelity and helping support the preventative service directors.

### Involvement and Leadership with APSAC

Dr. DePanfilis became involved in APSAC in the first several years of its formation through her connection with Charles Wilson, MSSW, who was Director of Child Welfare for the state of Tennessee. Together, they were involved in creating workshops for APSAC. She described how the interdisciplinary nature of the organization was a draw to become involved. APSAC's interest in producing the best possible research on child abuse and neglect also drew her in, with Mark Chaffin, PhD, being a particular influence.

Charles Wilson encouraged her to consider running for the APSAC Board of Directors because, until that time, the Board primarily consisted of medical and legal professionals. Although the medical and legal fields are critical in the area of child abuse and neglect, there was a lack of representation in social work in the early years of the organization. In addition, up until that time, APSAC had been focused primarily on child sexual abuse. Dr. DePanfilis was able to help expand APSAC through her involvement, given her expertise in child physical abuse and neglect as well as prevention. She helped fill some of the knowledge and practice

gaps at the foundational level of the group. She became a Board member in 1995 and served as Vice President of APSAC 1996–1997; as President-elect, 1997–1998; and as President, 1998–1999. She served as Past President, 1999–2000, and was on the Advisory Board, 2000–2003.

While in leadership with APSAC, Dr. DePanfilis made countless contributions to the Practice Guidelines. Along with Dr. Chaffin, she paved the way for how the research track at the APSAC Colloquium could be supported, especially given the practice focus of APSAC in its early days. She helped support state chapters, including the creation of the Maryland chapter, to bring the organization to the state and local levels. She also continued the growth of the *Advisor*. Notably, alongside Dr. Chaffin, Dr. DePanfilis was involved in deciding to create and launch the journal, *Child Maltreatment*, and was on the first Editorial Board. Further, she worked to increase the interest and engagement of child protection professionals in APSAC but noted the difficulties of long-term engagement in the organization given high rates of turnover in the social work field. Dr. DePanfilis openly shared about the challenges she faced while on the Board, including helping to keep APSAC going through difficult times. Yet, these growing pains allowed the organization to identify their needs at the foundational level.

### Insights About APSAC's Accomplishments

Dr. DePanfilis shared her praise for the ongoing strengths of APSAC's journal, *Child Maltreatment*. She noted that when Dr. Chaffin stepped down as the journal editor, she felt others really stepped up. She commended the strong base of scholars who have served the journal over the years through their involvement on the editorial board and as ad hoc reviewers. It has shown continuous strength as the premier journal in the area of child abuse and neglect, she shared, maintaining high rankings through its many years in publication. She feels that from the beginning to now, the journal has had

great empirical value as well as immense value for practitioners. She highlighted the importance of publishing research for both scientists and practitioners, ensuring rigorous peer review to maintain high-quality research.

Dr. DePanfilis further described the continued success of APSAC's annual conference, noting the high re-attendance rate (i.e., individuals attend year after year for the first-rate colloquium). She highlighted that those attending fully participate in the conference sessions as they offer meaningful training and information to the interdisciplinary attendees. Dr. DePanfilis shared that APSAC's partnership with the San Diego Children's Hospital conference has also been highly successful and garnered continuous engagement. She touted that APSAC continues to be one of the best sources for science-based knowledge and practice training in the field of child maltreatment, with multiple methods of delivery through their various journals and training opportunities.

### Insights About the Future of APSAC

Dr. DePanfilis shared that she has not played an active role in APSAC's leadership in recent years; therefore, she was hesitant to pinpoint a specific direction for APSAC's future. Thinking through previous instances in which APSAC wrote amicus briefs when a large or highly publicized criminal case was occurring, she identified areas of possible expansion to advocacy and policy development. She promoted APSAC's continued and strengthened presence with moving legislation and policy forward to best support the implementation of evidence-based and promising practices. An increased focus on systemic change, she commented, in addition to the focus on practice at the individual and family level, could help change the face of the system and positively impact many children and families.

She noted the challenges with funding and support to ensure individuals have dedicated time to gather together and think through implementation efforts and policy changes. For example, she highlighted the fact that scholars in the field often



## Interview with Diane DePanfilis

share recommendations for best practices and policy change in *Child Maltreatment*—thus, she thoughtfully questioned, “What would it take to have more opportunities for spreading, disseminating, or replicating what we believe works?” She noted the particular needs of the child welfare system in this area, including that the system has not always kept up with current recommendations for best responding to child abuse reports or for providing opportunities for true success for families. Dr. DePanfilis shared that policy change and widescale implementation efforts could help close the “revolving door” of the current child welfare system. Specifically, she envisions policies and efforts for which the appropriate support is identified and implemented with families upfront at first involvement, aiming to decrease future child maltreatment and ongoing child welfare involvement. Dr. DePanfilis highlighted the complexities of legislation development and sustained policy change given that policy makers come and go and the political system frequently shifts at both the local and national level.

Further, Dr. DePanfilis identified issues surrounding racial equity as a critical piece of APSAC’s current and future work. She promoted the significant importance, yet challenges, of infusing a racial equity lens into real-world practices. Thus, she shared that active efforts must be taken to make changes, given the clear disproportionate representation of children and families of color in the child welfare system, particularly children of color living in poverty. In fact, Dr. DePanfilis stated that one of the reasons she agreed to bring Family Connections to New York City (as she was not initially looking to promote its replication) was due to the city’s diversity. Moreover, in her reflections, she feels the New York City child welfare system has done well with hiring practitioners and staff of color with lived-experience and credibility in their community. She highlighted the importance of training and ensuring representation of individuals of color in the workforce across the country and noted that this was a draw to become involved with Hunter College.

Dr. DePanfilis identified that it is essential that APSAC and the field of child maltreatment continue to make explicit efforts to acknowledge and target implicit bias, dedicate research and practice efforts to authentically and empathetically serve families of color, and ensure representation in the workforce. She encouraged the continued focus on providing opportunities for support for families engaged in the child welfare system without the use of labels or criminalizing responses. Further, Dr. DePanfilis highlighted current community and systems intervention efforts that intend to combat bias and its influence on decision making, including mandating the use of motivational interviewing as part of the engagement process for child protection specialists who complete child abuse investigations. This approach promotes families’ strengths and can reduce preconceived judgements and implicit biases. Additional future efforts could also include aid for the creation of more family resource centers and increased access to support services for parents and youth. She concluded that a multipronged approach with an emphasis on strong, reflective supervision practices could support the advancement of these goals for the field, both at the individual/family level as well as the systems level.

### Author Reflections

It was a privilege speaking with Dr. DePanfilis for this interview and hearing her perspective on the history, challenges, and future of APSAC and the field as a whole. It feels great to know that this article plays a small role in helping further circulate her voice and insights, given her expertise and substantial contributions to the field over the last five decades as clearly evidenced above. Her involvement and leadership at the foundational level of APSAC paved the way for growing the interdisciplinary organization in many ways—from increasing interest in the social work field to further expanding efforts to focus on neglect and physical abuse. Throughout the interview, Dr. DePanfilis’ remarks were perfectly in line with APSAC’s overarching approach (and website tagline), “Strengthening Practice Through Knowledge.” In

all that she does, she promotes the integration of research and practice to best serve families through prevention and intervention services and support the workforce through education and coaching programs.

A particular reflection from my discussion with Dr. DePanfilis was her openness, approachability, and thoughtfulness, particularly related to complex issues. At one point in the interview, I asked about her perspective on working in New York City, as I was personally curious how aspects related to diversity (e.g., racial and ethnic diversity, geographic and population factors, disparity in socioeconomic status, high cost of living and housing) influenced the system's overarching response to child abuse and neglect as well as her approach. This conversation wavered from discussions of APSAC's history and future, but I found myself truly interested in her perspective and hoped to learn from her as a respected leader and pioneer. She humbly spoke about the disparity she sees on a daily basis and its effects on families and the child welfare system. She encouraged the implementation of evidence-based programming to best identify and serve families.

Dr. DePanfilis also advocated for representation in the workforce and the promotion of quality training opportunities, yet identified the difficulties of inadequate pay for high-stress social work positions in a city with astronomical housing prices. She was open in sharing that it is easy to get overwhelmed by the vastness of chronic problems in the world, such as intergenerational poverty and discrimination, or the challenges of high turnover and insufficient pay in the workforce. However, in spite of all that, there is still so much good happening. She emphasized that this balanced reflection is integral for all those who work in the field of child maltreatment to hear and internalize. If not, it would be easy to get bogged down by the countless challenges families, workers, and leaders face, potentially leading to burnout and a loss of hope. Alternatively, leading from the opposite end of the spectrum

(not acknowledging the difficulties) would act to minimize and invalidate the real challenges present in the field. Just as Dr. DePanfilis shared in our discussions, both perspectives can co-exist to form a balanced narrative: There are countless injustices and challenges encountered by families, workers, and leaders, *and* the work we do plays an active role in serving children and families to prevent and reduce child maltreatment. It is a message I believe will truly pave the way for increased advocacy, innovation, equity, and justice. It is a message that will keep families and the workforce hopeful, encouraged, and energized. Thank you, Dr. DePanfilis, for your time, thoughtful and authentic remarks, and numerous contributions to the field.

### About the Author

*Kate Theimer, PhD, is Licensed Psychologist at the Center on Child Abuse and Neglect within the University of Oklahoma Health Sciences Center. She completes clinical work, research, and training in the area of child maltreatment.*

Contact: [kate-theimer@ouhsc.edu](mailto:kate-theimer@ouhsc.edu)



Joyce N. Thomas

## Celebrating 35 Years of Improving Society's Response to Abuse and Neglect of Children: An Interview with Joyce N. Thomas, Founding Member and Past President of APSAC

*Bonnie Christian Marsh, , DSW, LSW*

Joyce N. Thomas, a founding member and third President of APSAC, has dedicated her career working to improve the lives of children. This article is based upon an interview with Ms. Thomas to learn more about her experiences as APSAC celebrates thirty-five years dedicated to providing access to the latest in child welfare research findings and best practices. An advanced pediatric nurse practitioner, Ms. Thomas has witnessed firsthand the challenges and impact of childhood victimization, especially in communities of color.

A historical lens of the child welfare system during the late 1970s shows that the system was plagued with many challenges. The number of child sexual abuse cases being reported exploded in America, as numerous victims began to disclose sexual abuse. The child welfare system was unprepared to effectively treat these victims. In 1976, Children's National Hospital in Washington, DC (CNH), applied to the Federal Department of Health and Human Services for funding to serve victims of child sexual abuse. The CNH received one of the first federal grants from the Department of Justice Law Enforcement Assistance Administration to treat sexually abused children. Ms. Thomas became the first director of a specialized unit within Children's National Hospital to examine pediatric child sexual abuse.

During the 1980s, the public child welfare system became overwhelmed by a crack cocaine epidemic that was ravaging communities, disproportionately affecting African Americans living in poverty in

inner-city communities. Many such neighborhoods experienced a high concentration of poverty after most middle-class black families had left the city and employment opportunities were scarce due to an economic recession. Manufacturing plants had moved away suburban areas, which restricted access for inner-city workers who did not have public transportation to work opportunities (Dunlap et al., 1996).

Because of its low cost and easy access, crack cocaine use spread within inner-city neighborhoods during the 1980s. Crack cocaine is highly addictive and devastated families when addicts focused on supporting their drug habits and failed to care for their children's needs. The child welfare system became overwhelmed by the demand for services required to care for the children of addicts (Edlin et al., 1994). Children born to mothers addicted to crack became common, as addicts often prostituted themselves to support their drug habit. Babies born addicted to crack cocaine were often medically needy and the crack cocaine epidemic also led to an increase in cases of human immunodeficiency virus (HIV) and acquired immune deficiency (AIDS), with children sometimes born being HIV positive. The lack of effective HIV treatments at the time resulted in some parents dying from the AIDS, which left children with no parent to care for them.

In 1983, the need to improve child abuse investigative practices became evident nationwide, after several high-profile child abuse cases questioned the credibility of child protection workers' clinical

skills. National publicity surrounding the McMartin Preschool Abuse Trial led to concerns about how alleged child sexual abuse interviews were being conducted at the time. The McMartin preschool case “was one of the earliest and largest child sexual abuse cases in United States history that led to a wave of pre-school sexual abuse cases during the mid-1980s after the mother of a 2 1/2-year-old boy contacted police in August 1983, to report that her son had been sexually abused by staff in the McMartin pre-school (FRONTLINE, 1986). Highly publicized hearings of the case led to accusations that interviews with children in the pre-school were tainted by the interviewers’ suggestibility. Although none of those charged was convicted, the longest and costliest criminal prosecution in U.S. history lasted 28 months before the childcare staff members alleged to have perpetrated abuse on numerous children were acquitted (Mason, 1991). The national attention to the McMartin case brought child welfare services into a limelight that helped spark the founding APSAC leaders to seek a forum where clinicians and child welfare professionals could learn more effective ways to prevent, identify, and treat children and families involved in the child welfare system.

In 1984, no professional society focused on child sexual abuse, and practitioners felt isolated and lacked access to new information about ways to effectively treat victims. Ms. Thomas was part of a group of social service professionals looking for ways to enhance and encourage clinical and empirical studies to better document and understand the needs of abused and neglected children. A large portion of their efforts focused on sharing information about problems dogging the child welfare system.

Between 1981 and 1984, Ms. Thomas helped to organize an annual conference sponsored by Children’s National Hospital (CNH) in Washington, D.C., which was attended by professionals around the country. At the second conference in 1982, the guest speaker, Rod McKuen (a singer, songwriter, and actor), disclosed that he had been a victim of

child sexual abuse. The CNH conferences grew larger each year thereafter as the numbers of attendees increased and as the need for more specialized training for child welfare professionals became more evident.

Ms. Thomas acted as Chair for National Children’s Hospital Conferences. While speaking at the podium during the 1984 National Conference on Child Sexual Abuse, she told the audience of about 2,000 people from medical, mental health, legal, law enforcement, and social services fields that “No single discipline holds the key to confronting child abuse alone.” Responding to the audience’s reaction, she then asked the crowd of professionals if they felt it would be beneficial to establish a professional association to focus on ways to share clinical information about child sexual abuse. In response, nearly every hand in the audience was raised. About one hundred people put their chairs in a circle right there and made a commitment to form a professional society, which is how the American Professional Society on the Abuse of Children (APSAC) was born.

After many meetings, much gathering of information, and the setting up of a structure for the professional society envisioned by these child advocates, APSAC became a reality when it was incorporated in 1987. Advocating to address numerous problems that were traumatizing children nationwide, Ms. Thomas and other founding members formed the American Professional Society on the Abuse of Children (APSAC).

APSAC sought to address the training needs of an overwhelmed child welfare system facing increasingly higher incidences of child fatalities, child sexual abuse, domestic violence, child neglect, and crack-affected infants and children neglected by addicted parents. Much of the early work of the founding members involved developing vision and mission statements and by-laws as well as planning ways to hold meetings with other professionals devoted to improving child welfare practices across the nation. In its early days, APSAC offered a series of conferences, or *colloquiums*, which focused on inviting attendees to be *students*, those who were learning about trending research.

## Interview with Joyce N. Thomas

APSAC's goal was to disseminate quality information related to child abuse by sharing best practices for interdisciplinary professionals involved with the child welfare system. Looking for ways to assess children's needs more effectively, particularly in understanding child behavioral issues, APSAC focused on bringing training to improve practitioners' skills and knowledge. Over time, APSAC has worked to improve connections and coordination between professionals from many disciplines to promote the best response to child maltreatment, based upon scientific research findings. In deciding which topics to address, APSAC focused on the issues that were current in the field to provide relevant information to those working in the child welfare system. APSAC has grown into a national nonprofit organization focused on meeting the needs of professionals engaged in services for maltreated children and their families, including sharing information on state-of-the-art practice in all professional disciplines related to child abuse and neglect (APSAC, 2022).

### Early Career and Current Work

Ms. Thomas served as the third president for APSAC and was also the first female and first African American to head the organization, and the only person of color on the original Board of Directors. Ms. Thomas' distinguished career as a public health specialist in maternal and child health and trauma-informed care led her to be a pioneer in forming APSAC. She has continued to be an active, contributing member of APSAC since its formation.

Her journey in child advocacy started when she graduated with a bachelor of science degree from Holy University in Oakland, California, and a master's degree in public health from the University of California, Berkeley. She earned her pediatric nurse practitioner certificate from Temple University School of Medicine in Philadelphia, Pennsylvania. In 1978, she was hired at National Children's Hospital as Director of the Child Protection Special Unit, which focused on the treatment and intervention of sexually abused children. In 1981, she was

appointed as Director of Child Protection Center at Children's Hospital. Under her leadership, this Child Protection Unit received the Exemplary Project Award from the U.S. Department of Justice. In 1987, Ms. Thomas co-founded the Center for Child Protection and Family Support (CCPFS), Inc., which is located in Washington, D.C. From 1988 to 1989, she took a brief leave from CCPFS and was a presidential appointee in the Reagan administration. She served as Staff Director of Substance Abuse Prevention.

In late 1989, she returned to CCPFS as president for that organization. In 1991, she served as President of APSAC. In 1990, Ms. Thomas received the first federal grant from the Department of Health and Human Service to examine cultural issues in the child welfare system, Ms. Thomas was instrumental in ensuring that APSAC included diversity, equity, and inclusion to improve the child welfare system. She established the People of Color Leadership Institute that provided technical assistance to child welfare agencies on definitions and various issues related to diversity, equity, and inclusion.

Ms. Thomas' legacy in APSAC leadership has ensured that the ongoing Colloquium gatherings focus on cultural diversity and inclusion training. During her interview, Ms. Thomas recalled working with APSAC and many other national organizations to address the problem of overrepresentation of African American and Native American children in the child welfare system. She commented on how unfortunate it is that "racial disparities continue to be a problem to this day, with no clear answer of what to do about it." There continues to be a gap between the race and ethnicity of leadership in child welfare organizations compared with the diversity of clients served. Providing diversity and inclusion training is essential to help practitioners learn more about cultural differences that affect practice.

During her impressive career, Ms. Thomas has been the invited guest of the President of the United States, Attorney General of the United States, and Surgeon General of the United States to provide critical input for policy development on a host of topics related to the victimization of, the protection of, and promoting

safety for children and families. As a premier nurse leader and scholar in the fields of child abuse, drug abuse, and domestic violence, she has testified in court as an expert witness in numerous criminal child maltreatment cases. She has shared her expertise as a panel member for the Cultural and Linguistic Competency Study as part of the National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families. She served as an expert panel member on violence for the American Academy of Nursing (AAN) and is a member of the Edge Runners National Advisory Council also with AAN. Ms. Thomas has served on the Board of Directors of the National Partnership to End Interpersonal Violence and was co-chair of the Public Policy Action Team. She also served on the Steering Committee of the Institute on Domestic Violence in the African American Community (ISVAAC). She is currently on the Steering Committee on Futures Without Violence's National Conference on Domestic Violence and Health. She has been an invited guest and lecturer in Heika, Finland; Istanbul, Turkey; Rio de Janeiro, Brazil; Paris, France; Leningrad, Russia; and Zurich, Switzerland.

A major highlight of Joyce Thomas' career involved representing APSAC internationally at the People-to-People Institute in 1997. The People-to-People Program was established to enhance international understanding and friendship through educational, cultural, and humanitarian activities involving the exchange of ideas and experiences directly among peoples of different countries and diverse cultures. She served as the delegate leader of ten professionals from the United States and Puerto Rico. As the leader, she designed the program to visit various child protection agencies in South Africa. She had an opportunity to collaborate with other child welfare professionals from Johannesburg, Pretoria, and Cape Town. Since her visit occurred around the end of the Apartheid, the system of public policies that discriminated against blacks, was ending, Ms. Thomas arrival gathered a lot of attention, as a black female in a leadership role at that time was unheard of in South Africa. As a result of this visit,

she was able to develop a program in South Africa to study child maltreatment, which examined their child welfare system, law enforcement system, community-based treatment techniques, and other therapeutic treatment and prevention activities.

Her many awards include Outstanding Leader of a Child Welfare Agency by the Black Administrators of Child Welfare, the T. Barry Brazelton Lecture Award, Margery Fry Outstanding Services as Victim Assistance Practitioner, and Washington, D.C., Psychiatric Society's Community Achievement Award. She was named Outstanding Community-Based Practitioner from the Institute on Violence Abuse and Trauma by Alliant University in San Diego, California, in 2012, and given the Outstanding Prevention Award from the National Children's Advocacy Center in Huntsville, Alabama, in 2014. She has authored numerous professional articles, testified before Congress, and lectured to audiences internationally. She has served on the faculty of Trinity College in Washington, D.C., and been an adjunct faculty member at Johns Hopkins University, School of Nursing. She has lectured at Georgetown University, Howard University, Spellman College, University of Maryland, Southern Methodist University, and other institutions of higher learning.

Ms. Thomas currently lives in Silver Spring, Maryland, and is married to Dr. Jesse J. Harris. They have three adult children and five grandchildren. After a long, distinguished professional career, she continues her ongoing child advocacy as Fellow in the American Academy of Nursing (FAAN). She also continues to be active in advocating for the needs of the African American community and has served as a Steering Committee member for the Institute on Domestic Violence in the African American Community.

## The Future of APSAC

As her legacy suggests, Ms. Thomas continues to advocate for more attention to diversity, equity, and inclusion issues. She believes that "*people need to be comfortable in their own skin*" (Thomas, 2022).

## Interview with Joyce N. Thomas

In 2021, Ms. Thomas held a webinar based upon her research of African American pioneers in the field of maltreatment and presented on this topic at the 2022 APSAC Colloquium in New Orleans, Louisiana.

In discussing the future of APSAC, Ms. Thomas advocated that APSAC should focus on taking a more active role in supporting or recommending changes to public policies that impact child welfare practice. Members should be informed about APSAC's position regarding equity and inclusion and the influence that diversity has on children's involvement in the child welfare systems and their outcomes. Practitioners should understand how implicit biases may affect their practices, particularly when working with diverse populations, to understand the long-term impact of institutional racism over time. APSAC should encourage an examination of public policies to identify current examples of institutional racism to ensure that human diversity is encouraged and welcomed.

She recommended that APSAC leadership might explore ways to increase more minority representation among the organization's leadership and membership. A workgroup within APSAC, the Commission on Racism, might be a place to start exploring opportunities for research or training needs to address the disproportionality of children involved in the child welfare system, including the overrepresentation of Native American and children of color in the foster care system.

Finally, she suggested that APSAC should issue position statements that advocate for public policies focusing on prevention services. These would help to meet the needs of children and thus divert them from needing to become involved with the child welfare system. APSAC leadership and members should be encouraged to speak at public policy hearings to represent APSAC's recommendations. Further, the organization needs to continue providing educational briefings to educate its members and the public on policy issues that impact children and families. Additional training topics may include how to analyze public policies and how to better meet the needs of frontline workers and first responders.

Actions that might lead to more systemic changes would be (1) to examine current public policies to identify issues that negatively influence the child welfare system, (2) to gather more information to address current public policy issues, and (3) to advocate for more research, funding, training, or resources.

### Reflections From an Aspiring Child Welfare Researcher

Interviewing Ms. Thomas was a fascinating educational experience in learning about all of the advocacy efforts she has completed throughout her impressive career. She serves as an excellent role model for new practitioners who could benefit from understanding that meaningful systemic change can start from the efforts of only a few committed persons.



## About the Author

**Bonnie Marsh, PhD**, is an assistant professor at Slippery Rock University in Western Pennsylvania. She has worked in the child welfare system since 1980 as a child welfare caseworker, supervisor and administrator. Dr. Marsh earned her BSW from Pennsylvania State University, a MSW from University of Pittsburgh School of Social Work, and a DSW from Kutztown University of Pennsylvania. She continues to train new caseworkers for the Pennsylvania Child Welfare Resource Center (CWRC) and serves as a consultant for CWRC on various projects. Dr. Marsh teaches BSW and MSW-level classes for the Social Work Program at Slippery Rock University. Her research interests include an exploration of the after-care needs of youth who spent time in the foster care system. She is currently conducting research at Slippery Rock University to identify ways to support former foster care youth to succeed in completing their college education.

## References

The American Professional Society on the Abuse of Children (APSAC). (2022). *Mission and Vision*. <https://www.apsac.org/mission-and-vision>.

Dunlap, E., Golub, A., & Johnson, B. D. (2006). The severely-distressed African American family in the crack era: Empowerment is not enough. *Journal of Sociology and Social Welfare*, 33(1), 115–139.

Edlin, B. R., Irwin, K. L., Faruque, S., McCoy, C. B., Word, C., Serrano, Y., Inciardi, J. A., Bowser, B. P., Schilling, R. F., Holmberg, S. D., & the Multicenter Crack Cocaine and HIV Infection Study Team. (1994). Intersecting epidemics: Crack cocaine use and HIV infection among inner-city young adults. *The New England Journal of Medicine*, 331(21), 1422–1427. <https://doi.org/10.1056/NEJM199411243312106>

*FRONTLINE; Innocence lost: The plea*. (1986). GBH Archives. Retrieved from <https://www.pbs.org/wgbh/pages/frontline/shows/innocence/etc/other.html>.





Linda M. Williams

## The Role of Interdisciplinary Learning in the Advancement of Child Sexual Abuse Prevention: An Interview with Linda M. Williams, PhD, Former President of APSAC (1994)

*Maria L. Schweer-Collins, PhD;  
Charles Alvarado*

“That’s the thing about this field [of child maltreatment]—it brings together many disciplines.” Throughout our interview with Linda Williams, PhD, she emphasized that a clearer understanding of child maltreatment and a pathway toward its prevention necessitate strong interdisciplinary collaboration between those in research, practice, and policy. Prior to the foundation of the American Professional Society on the Abuse of Children (APSAC), however, there were few places for researchers and practitioners focused on understanding child maltreatment to connect with one another, share knowledge, and receive the training and emotional support necessary to work in the difficult space of child maltreatment. To address this need, APSAC was founded in 1986, bringing together people to facilitate conversation across disciplines and sectors regarding child maltreatment etiology and prevention, lessons learned, and the most up-to-date research. Perhaps more important to the identity of APSAC, however, is that it was created with applied goals in mind: to meet the professional needs of researchers, clinicians, and practitioners working together to tackle the issue of child maltreatment.

As early career researchers in prevention science and educational psychology with the shared goal of preventing child maltreatment, we find it hard to imagine a time when an organization such as APSAC did not exist, or a time when there was no mandatory reporting, when the prevalence of child maltreatment was not widely known or studied, a

time when there were no journal outlets dedicated to the dissemination of research on child maltreatment, or no places to look for rigorous evidence-based programs and policies designed to meet the needs of families affected by child maltreatment. Yet there were many years when people working on researching and providing services to child welfare-involved families did not have access to these supports, or the interdisciplinary community that APSAC represents, or the associated research, training, and professional development provided by APSAC.

According to Dr. Williams, the early ideas that would shape APSAC were first generated by a small group of researchers, sitting together at a conference, discussing the absence of a dedicated space for bringing together professionals who do work in the field of child maltreatment. It was there that many pioneers in the field recognized the need for such an organization, and who later, in the 1980s, came together to found APSAC. Among those founders was Linda M. Williams whose scholarship was pivotal in understanding the prevalence of and familial contexts in which child sexual abuse, and more specifically sexual assault, occurs. Dr. Williams was part of the early conversations with other pioneers that generated the vision of APSAC that has been realized today. She served as President of APSAC in 1994, the same year that the official journal of APSAC, *Child Maltreatment*, was founded. Together with others, she worked to

ensure the early APSAC colloquiums were relevant for professionals working across sectors toward the common goal of preventing child abuse and neglect.

## Early Career and Current Work

Dr. Williams' career commenced at St. Lawrence University and then Beaver College, located in Canton, New York, and Glenside, Pennsylvania, respectively, where she received her BA in Sociology with honors in 1971. She then began her graduate studies at the University of Pennsylvania, earning a National Institute of Mental Health Traineeship (1971) and her MA in Sociology (1972) before later receiving a PhD in Sociology in 1979 with a specialization in Criminology. Since then, Dr. Williams has embarked on a successful career in the field of sexual assault, investigating justice and gender-based violence, child abuse, trauma and victimization, and recovered memory throughout the lifespan using cross-sectional and longitudinal research designs. During our interview, Dr. Williams credited her entry into the field to her mentor, Joseph J. Peters, MD, a psychiatrist who was interested in the social and psychiatric aspects of sexual assault. Early in her doctorate program (1973), while working for Dr. Peters, Dr. Williams began and directed a study, results from which would eventually become the "most important article [she] ever wrote."

The study was originally designed to describe the context around and consequence of sexual assault cases. In the early 1970s, Dr. Williams mentioned that the academic world and general public were largely unaware of the prevalence of sexual abuse and had limited knowledge of who was being sexually assaulted and who was perpetrating sexual assault. The study revealed that nearly "40% of the victims of sexual assault were under the age of 18," thereby bringing child sexual abuse into the conversation around child maltreatment. The study also documented that aggressors were not all strangers, but rather "someone who was known to them." In many ways, Dr. Williams says, "it was really the discovery of ... child sexual abuse."

A follow-up study was later funded to assess the long-term consequences of sexual assault within the same sample 17 years later. Dr. Williams and her team located and re-interviewed over half of the original sample, asking them what they remembered from their visit to the hospital during time one and to speak about their lives. They found that "38% of them did not appear to recall the victimization in childhood," demonstrating that adult women with documented histories of child sexual abuse may not have recollection of the abuse. In her consequential article, published in 1994, where she reported the findings of this follow-up study, Dr. Williams stated that professionals "should be open to the possibility of child sexual abuse among clients who report no memory of such abuse" (p. 1174) because "long periods with no memory of abuse should not be regarded as evidence that the abuse did not occur" (p. 1167). This study was pivotal in pushing the field's understanding of the relationship between trauma and memory, and has served as an often-cited, landmark paper for many branches of study within the sexual assault field.

Throughout her career, Dr. Williams experienced success in many other significant research and academic pursuits. Notably, she held research associate appointments at the American Foundation, Institute of Corrections (1972–1973), and University of New Hampshire (1986–2011), was director of research at the Joseph J. Peters Institute (1973–1994) and Wellesley College (1996–2005; 2015–present), and served as an instructor at Temple University (1980), University of Maryland (1982–1985), Bermuda College (1982–1985), and the University of Massachusetts Lowell (2005–present). As a measure of her scientific merit, her work has been funded by a number of federal grants and awards, in addition to contributing over 50 peer-reviewed publications, numerous books and book chapters, and many presentations on sexual assault-, justice-, and gender-violence-related topics. She was also an early contributor to APSAC (1991–2001) as a member of the board of directors, committee chair, and former president, as highlighted earlier. Additionally, she held roles as editor and reviewer

## Interview with Linda M. Williams

for notable child abuse journals, such as *Child Maltreatment*, APSAC's official journal, and *Child Abuse & Neglect*, and has offered her testimony to the U.S. Senate Judiciary Committee on topics such as criminal background checks for prospective employees and child safety in childcare settings.

Today, Dr. Williams continues to work toward ensuring that her research “serves an [applied] purpose” and ultimately addresses issues plaguing children and women through efforts in education, research, and policy. She is currently serving as Professor Emerita in the School of Criminal Justice and Criminology at the University of Massachusetts Lowell (2005–present), instructing graduate-level courses on childhood maltreatment and engaging in research to improve the prosecution outcomes of child sexual abuse cases. Also, as the Senior Research Scientist and Director of the Justice and Gender-Based Violence Research (JGBVR) Initiative at the Wellesley Centers for Women at Wellesley College (1996–present), Dr. Williams is currently designing, conducting, and disseminating research with her research team that addresses victimization and justice issues to improve the lives and safety of young girls and women (JGBVR, n.d.). Her research continues to serve an important role in the conceptualization and understanding of sexual assault with direct implications on clinical and prosecutorial policies, and on future research.

### Child Maltreatment Research at the Advent of APSAC: Progress and Needs

Dr. Williams shared several poignant examples on public attitudes and understandings of sexual assault and abuse in the early 1970s for girls and women, reflections that illustrate the stark differences in the national context in which child maltreatment research was conducted prior to and contemporary with the formation of APSAC and the present day. As noted previously, her early research focused on understanding the prevalence of sexual assault on adolescent girls and characterizing the contexts in which sexual assault occurred. Dr. Williams recalls

sharing these research findings with a local news station, citing that it was possible that around 40,000 women in the United States (U.S.) had experienced sexual assault, a prevalence rate that corresponded to less than 1% of all U.S. women in 1970. During that interview, the news reporters were stunned by this estimate, one that was much higher than researchers or the public had considered possible at that point in time. Today we know, based on self-report estimates, that the prevalence of sexual assault and abuse during childhood is much higher than what was thought in the 1970s; approximately one in five women experiences childhood sexual abuse or assault (Finkelhor et al., 2014). It is also widely accepted that these values are likely underestimates given that sexual assault and abuse are often not reported. Despite these concerning estimates, one measurable success of the field is the widespread attention and knowledge that clinicians, practitioners, researchers, policymakers, and the general public have regarding the occurrence of all forms of maltreatment, including physical, sexual, and emotional abuse and neglect. Such knowledge is necessary to identify children and families at risk of maltreatment, efficaciously treat symptoms and consequences of exposure, and ultimately prevent maltreatment.

Dr. Williams mentioned that during the same period of years in which she had been researching the prevalence of sexual abuse and assault, many girls who were brought into medical facilities (often by police) as victims of sexual assault were placed into juvenile correctional facilities, not because of a juvenile referral, but because professionals had few options or knowledge about the best placement for girls who had experienced sexual assault. There were few appropriate placement options available that were not deemed to risk the welfare of other vulnerable children. Moreover, Dr. Williams pointed out that evidence clearinghouses such as the California Evidence-Based Clearinghouse for Child Welfare, established in 2006, or the Title IV-E Prevention Services Clearinghouse, signed into law in 2018, did not exist, thus leaving policymakers and professionals with few comprehensive resources to

make evidence-informed decisions in selecting and implementing social and behavioral interventions for youth and families affected by child maltreatment. Dr. Williams considers these clearinghouses, and the many evidence-based programs indexed within them, to be essential to the field of child maltreatment prevention. Further, she credits the development of programs toward not only treating the individual but also the family to be a critical advancement for more effective supports for individuals and families affected by child abuse and neglect.

Dr. Williams noted that the criminalization of trauma in young girls involved with the child welfare and juvenile justice systems (e.g., commercial sexual exploitation) remains an area in need of further research. Efforts toward developing programs tailored to the needs of these youth, improving the coordination between the bifurcated juvenile justice and child welfare systems, and reforming policies to reduce the prosecution of youth who are victims of sexual exploitation need to be further supported. However, there has been some progress in these areas, such as the reauthorization of the Juvenile Justice and Delinquency Prevention Act (JJDP), which makes explicit calls to recognize the need to address the traumatic experiences of justice-involved youth (P.L. 115–385) that disproportionately affect girls (e.g., Baglivio & Epps, 2016; Harner et al., 2015). Dr. Williams wisely reflected that as we advance as a field, we often must revisit the lessons we learned in the past and relearn them for new or related issues. She shared that we must revisit lessons learned regarding the most appropriate supports and treatments for girls who experienced childhood sexual abuse and apply or adapt them for girls who have experienced commercial sexual exploitation.

These examples highlight the progress that has been made in the field across the past four decades regarding what is known about the widespread problem of child sexual abuse, as well as the professional means to intervene. Although current prevalence estimates of child sexual abuse and underreporting are both concerns warranting further attention, there is also evidence that rates of sexual

abuse have also begun to decline substantially (Finkelhor et al., 2010). Dr. Williams and many APSAC pioneers have been critical in shaping the societal and professional responses to child sexual abuse and other forms of child maltreatment that exist today.

## **Future Directions for Child Welfare Researchers and APSAC**

As we closed our interview with Dr. Williams, she reflected on important priorities for future research in the field of child maltreatment. She identified the need to ensure that research is actionable, that it is, “at minimum, addressing policy and practice.” She drew from Bronfenbrenner’s (1979) ecological model, noting that individual change is difficult without changes in the larger ecosystem. As an illustrative example, Dr. Williams remarked on her current research, a policy-oriented study aimed at understanding how sexual assault cases are prosecuted across the United States. Initial findings from this work have led her to see the imperative to understand societal and cultural responses to sexual abuse that can be evident in the way jurors might respond to sexual assault cases, or in the way law enforcement interacts with victims. The complexity of social institutions, communities, and cultures is important to explore across the spectrum of topics on child maltreatment. Dr. Williams suggested that a vital next step is both “addressing the community response to the issue of child maltreatment and the need for the community to be more involved in coming up with solutions.” She noted that although this type of research is challenging to conduct, future study should focus on changing community norms and values around child maltreatment, as this has implications for society’s response to maltreatment at every level of the ecological model.

In discussing next steps for APSAC specifically, Dr. Williams raised the question as to whether the membership of APSAC has reached child welfare itself (e.g., administrators, caseworkers, staff). She emphasized that it is important for APSAC to sustain its “heart,” the original vision, addressing

## Interview with Linda M. Williams

the professional needs of all researchers, educators, practitioners, and clinicians who support families and children involved in child welfare, ensuring they have access to the body of knowledge and network of support that is APSAC. In our interview, Dr. Williams commented on all the many ways you can enter into the field of child maltreatment research, noting that many of her friends and collaborators were social workers, psychologists, criminologists, and sociologists. She suggested that APSAC serves as one point of entry, and that APSAC should continue engaging people “across disciplines, including those newer to the field of child maltreatment, to keep ideas fresh.” To this point, she remarked that APSAC has many different initiatives and ways for individuals to become involved, a strength and marker of growth in the organization.

### Advice for Future Child Maltreatment Leaders

The child maltreatment field has had its champions, such as Dr. Williams, who have shaped the current climate and status of the field. Many important developments have been made to ensure that children are kept safe through data-informed policy decisions of prevention and intervention methods spearheaded by passionate and concerned research leaders. Moving into the future, new champions in the field will be needed to continue to push matters forward. Throughout the interview, Dr. Williams touched on several themes that would benefit institutions and future leaders, including funding, mentorships and collegiality, and interdisciplinary approaches to research and policy.

Few institutions across the country have a nexus of childhood maltreatment where promising scholars and scholars-in-training can enter the field. Despite APSAC being one organization that supports the interdisciplinary work necessary to effectively address child maltreatment, Dr. Williams also recounted the many institutional barriers present for both trainees and faculty or researchers who are siloed in their departments, who may not have institutional support or funding to do this kind of

work, and whose contributions to the field may not be recognized when they step outside the boundary of discipline-specific tenure and promotion or incentive structures. To create opportunities for research, Dr. Williams points out that a more concerted effort into thinking about “what...the field needs” and “what...investments we need to make...” must be made “even if this is hard.” At times, funding for maltreatment research is reallocated or terminated based on changing administration or leadership; however, to push the field forward, she believes that institutions should aim to provide a steady stream of funding that facilitates opportunities for graduate and postdoctoral students to receive specialized training in childhood maltreatment and connection with mentors in the field to foster their development. Further, institutions will need to be thoughtful in developing new ways to support and give credit to researchers who are doing this applied and actionable research.

For future leaders in training, Dr. Williams suggests it is important to find a mentor whose personality matches that of the student, who has a source of funding to sustain training opportunities, and who is willing to meaningfully engage in the student’s training goals. Mentors with these qualities encourage opportunities for the student to write and engage in substantive research with their mentors and in collaboration with other colleagues who find maltreatment research interesting and important. This includes those who are from disciplines outside of their own expertise.

Because we work in an interdisciplinary field, future leaders should continue to seek experts or mentors from other disciplines. As someone who mentored a student outside of her department, Dr. Williams found the experience to be successful and mutually enriching, with the caveat that the student strategically selected her because Dr. Williams could help access a part of the field that the student was interested in. According to Dr. Williams, this may be an opportunity in which APSAC and others could “help with the professional development and career development of the people who want to do work

in this field.” Here is an opportunity to continue to address their mission to improve society’s response to the abuse and neglect of its children. Providing purposeful and strategic training in actionable practice and policy-focused research across multiple integrated disciplines, providing mentorship, and obtaining reliable funding can all serve as avenues to encourage the development of future leaders in the field of childhood maltreatment.

### Reflections From Early Career Child Maltreatment Researchers

Throughout our interview with Dr. Williams, she commented several times on holding tension among perspectives of being critical of the past and status quo, celebratory but humble about lessons learned, and optimistic about the potential for change. This thread of conversation was about taking an honest look back at what we, as a field, have accomplished or not accomplished, not in the spirit of negativity, but toward the goal of identifying and addressing the true challenges and barriers that remain. Dr. Williams used the idiom of considering whether the “glass is half full or half empty” to describe this ongoing reflection as she has worked diligently across the decades to see significant reductions on the occurrence of child sexual abuse and assault. She described holding this tension even now as she seeks to understand the policy implications that might hinder or help progress in this area.

Although each of us used this idiom lightheartedly throughout the interview, we feel it represents well the concept of a “complex hope,” which is discussed by Sandage and colleagues (2014) and defined by social justice theorists as neither “cynical and immobilizing fatalism” (Freire, 1998, p. 70) nor a simple optimism, but instead a “courage to hope for betterment against the odds” (West, 2004, p. 216). Understandably, putting forth the idea of hope in the conversation of child maltreatment may sound glib to some; nevertheless, as we reflect on how an understanding of child sexual abuse has changed across the past four decades, we see clearly that the strides made toward reducing and preventing child

sexual abuse and assault (and of all forms of child maltreatment) were not made without the significant dedication, perseverance, and investment of many pioneers who believed that extinguishing child maltreatment was and is possible.

In closing, we would like to thank you, Dr. Linda Williams, for encouraging us to continue to engage in necessary interdisciplinary collaboration, for challenging us to learn new ways of thinking about the issue of child maltreatment through conversations and collaborations across disciplines and sectors, and for describing the narrative arc of the fight against child maltreatment that shows us just how far the field has come—and, how far the next generation of child welfare researchers have yet to go.

### About the Authors

*Maria Schweer-Collins, PhD, is an Assistant Professor in the College of Education and Prevention Science Institute at the University of Oregon. She has over a decade of clinical experience in working to support families affected by child maltreatment. Her current research focuses on understanding the experiences of girls and women whose lives have intersected with the child welfare and juvenile justice systems.*

*Charles Alvarado is a third-year doctoral candidate, and former middle school teacher, in the Department of Educational Psychology, Counseling, and Special Education at the Pennsylvania State University. His current research centers on understanding the effects of adversity on students’ attentional processing and reading comprehension from a cognitive and neuroscience perspective.*

## Interview with Linda M. Williams

### References

- Baglivio, M. T., & Epps, N. (2016). The interrelatedness of adverse childhood experiences among high-risk juvenile offenders. *Youth Violence and Juvenile Justice*, 14(3), 179–198. <https://doi.org/10.1177/1541204014566286>
- Bronfenbrenner, U. (1979). Contexts of child rearing. *American Psychologist*, 34(10), 844–850. <https://doi.org/10.1037/0003-066X.34.10.844>
- Finkelhor, D., Shattuck, A., Turner, H. A., & Hamby, S. L. (2014). The lifetime prevalence of child sexual abuse and sexual assault assessed in late adolescence. *Journal of Adolescent Health*, 55(3), 329–333. <https://doi.org/10.1016/j.jadohealth.2013.12.026>
- Finkelhor, D., Turner, H., Ormrod, R., & Hamby, S. L. (2010). Trends in childhood violence and abuse exposure: Evidence from 2 national surveys. *Archives of Pediatrics & Adolescent Medicine*, 164(3), 238–242. <https://doi.org/10.1001/archpediatrics.2009.283>
- Freire, P. (1998). *Pedagogy of freedom: Ethics, democracy, and civic courage* (P. Clarke, Trans.). Rowman & Littlefield.
- Harner, H. M., Budescu, M., Gillihan, S. J., Riley, S., & Foa, E. B. (2015). Posttraumatic stress disorder in incarcerated women: A call for evidence-based treatment. *Psychological Trauma: Theory, Research, Practice, and Policy*, 7, 58–66. <http://dx.doi.org/10.1037/a0032508>
- Justice and Gender-Based Violence Research Initiative (JGBVR). (n.d.). *Introduction to the Justice and Gender-Based Violence Research Initiative*. Retrieved July 20, 2022, from: <https://www.wcwonline.org/Justice-and-Gender-based-Violence-Research-Site/about-justice-and-gender-based-violence-research-initiative>
- Sandage, S. J., Crabtree, S., & Schweer, M. (2014). Differentiation of self and social justice commitment mediated by hope. *Journal of Counseling & Development*, 92(1), 67–74. <https://doi.org/10.1002/j.1556-6676.2014.00131.x>
- West, C. (2004). *Democracy matters: Winning the fight against imperialism*. Penguin Group.
- Williams, L. M. (1994). Recall of childhood trauma: A prospective study of women's memories of child sexual abuse. *Journal of Consulting and Clinical Psychology*, 62(6), 1167–1176. <https://doi.org/10.1037//0022-006X.63.3.343>



Sandra Alexander

# Celebrating 35 Years of Improving Society’s Response to Abuse and Neglect of Children: An Interview with Sandra Alexander, a “Pioneer in Child Maltreatment Prevention”

*Emily Bosk, PhD, LMSW; A. Lilyan Falcon*

It has taken many years for the field of child maltreatment to focus on prevention and resilience. While child maltreatment has always been present in societies, its recognition as a social ill has not. In fact, child abuse has only been considered to be such for a little over 60 years. The “discovery” of battered child syndrome in the early 1960s (Kempe et al., 1962), made possible partly by advances in radiology, marked a new era in public responses to physical and sexual abuse and child neglect (Pfohl, 1977). No longer a “private trouble” (Mills, 2000), child maltreatment became identified as a social problem requiring state intervention (Pfohl, 1977).

Shifting public perception about the need to intervene in what previously had been considered a private family matter required defining the prevalence of the problem. In the late sixties and early seventies, child maltreatment professionals worked diligently to document the scope and devastating impact of child maltreatment. The success of this effort can be seen in governments’ swift public policy response to it: Between 1963 and 1967, every state in the United States passed mandated child abuse reporting (Jenny, 2008). However, it would be another 30 years before the field began to give major attention to preventing child maltreatment.

Sandra Alexander is one of the people responsible for highlighting this need to extend the field’s focus from intervention to prevention. A prevention pioneer, Sandra Alexander had an early appreciation for the incompleteness of public policy and clinical

practice that only worked to stop or heal the effects of child maltreatment once it occurred. Identifying prevention efforts as another critical piece of the puzzle, she helped develop some of the first child maltreatment prevention programs in the United States. She has also been instrumental in bringing together the diverse field of child maltreatment professionals together through the American Professional Society on the Abuse of Children (APSAC). To celebrate the 35<sup>th</sup> anniversary of APSAC, she recently spoke about her experiences as a leader in child maltreatment prevention and as a past president and influential member of APSAC.

## Early Career and Current Work

Sandra Alexander began her career earning a Bachelor of Arts in Sociology from Furman University. After graduating from college, she started out on the frontlines, working as a caseworker before quickly advancing to a supervisor role at the Department of Children and Families in South Carolina. She noted that much of her later work was shaped by her experiences at the Department of Children and Families, where she resolved to develop programs to support families so that they would not need to become involved with protective services. She went on to earn a Master’s in Education in Guidance and Counseling from the University of South Carolina. The lack of flexible or part-time social worker programs shaped her decision to pursue her degrees in education but did not shift her focus: programs that improved the



## Interview with Sandra Alexander

lives of vulnerable children and families. Sandra worked with the Junior League of Columbia, South Carolina and a local pediatrician to start the Council on Child Abuse, which later became one of the first Prevent Child Abuse America chapters, Prevent Child Abuse South Carolina. She then continued her work in this area at Prevent Child Abuse Georgia in a variety of roles, including the role of Executive Director. For the past 18 years, Sandra Alexander has worked in multiple capacities in the Division of Violence Prevention at the Centers for Disease Control and Prevention (CDC), spearheading child abuse prevention initiatives, working to highlight the importance of prevention in the field of child maltreatment, and bringing together multi-disciplinary groups of practitioners, researchers, and policymakers to create the conditions in which families can thrive.

### Developing a Framework for Maltreatment Preventions and Prevention Programs

Sandra Alexander initiated some of the first prevention programs in the United States. For example, Welcome Baby was a forerunner to postnatal home visiting programs begun in the mid-1980s. This model utilized volunteers to visit with first-time moms in the hospital and then provide follow-up phone support to help ease the transition to parenthood. Welcome Baby also worked to connect first-time mothers with services that could meet their needs. This intervention led to development of the First Steps Program in Georgia, and later the Healthy Families Georgia Home Visiting Program. Sandra also created sexual abuse prevention programs for schools and provided consultation to support the Project Healthy Grandparents program at Georgia State University, which provides physical, emotional, and social support to grandparents and great-grandparents raising their grandchildren. At the core of each of these programs is a recognition that caring for caregivers is key for supporting the healthy development of children.

Not only has Sandra been a leader in developing prevention programs, she also has been a key actor in defining a framework for prevention. Being successful in these efforts meant bringing all stakeholders to the table, including those traditionally at the table (e.g., professionals in research, policy, medicine, and clinical practitioners) as well as those not typically considered to be part of this work (e.g., representatives from the business sector and the media) to identify the core components of child maltreatment prevention. The resulting effort, The Knowledge to Action Child Maltreatment Prevention Consortium, identified high-level sectors for involvement and community and societal level actions for prevention. Sandra was part of the team that developed the Essentials for Childhood framework, which highlights the foundational components necessary for assuring safe, stable, nurturing relationships and environments, as well as the Essentials for Childhood initiative to support states implementing the framework. The Essentials for Childhood framework is currently being implemented formally in seven states, supported by two rounds of five-year funding from the CDC. The power of this work is reflected in its dissemination outside formal funding mechanisms or other institutional supports. Sandra noted that over the years, she has worked with somewhere between 30 to 40 self-supported states or organizational partners to help them adopt the Essentials for Childhood framework. Doing this meant getting creative, conducting phone trainings and webinars, and allowing people to attend Essentials meetings at the CDC. This “can-do” and improvisational spirit has pervaded much of Sandra’s work as she noticed and then worked to fill gaps in approaches to maltreatment.

### Challenges Working in Prevention of Child Maltreatment

While Sandra has been incredibly successful in creating a space for prevention within the field of child abuse and neglect, working in this area is not without challenges. Reflecting on the importance of prevention, she asserted that it can still be hard

for prevention work to capture the same attention as other areas in the field: “I think everyone feels that prevention is important. However, it sometimes gets lost. Even though I think people care about prevention and want to prevent [maltreatment], when they start to work on it, there is a tendency to go more toward intervention and treatment or secondary and tertiary prevention.” Sandra witnessed this trend firsthand through her experience as the prevention advocate on the Atlanta Child Fatality Review Committee. Even though she had chaired the committee in the past, and even though the group’s stated purpose is to identify strategies that would prevent future fatalities, she has at times found it challenging to center the prevention component.

Further, Sandra emphasized the need to continue to have a more expansive view of the role of prevention in child maltreatment. That is, maltreatment prevention should be just as focused on communal and social interventions, such as providing economic supports for families and accessible and affordable childcare, as it is on individual prevention efforts. Sandra also described a need for a more expansive view of who should be partners in child maltreatment prevention work. In addition to the usual players, she emphasized that the field needs to partner with faith leaders, business leaders, schools, and the media to create the conditions to prevent child maltreatment.

### APSAC Then and Now

Sandra remembered the year she was President of APSAC as one of the most difficult years in the history of the organization. APSAC was in financial jeopardy, unable to pay its rent and in danger of collapsing. As President-elect and President, she worked with the Board to make difficult decisions to lay off staff and close the Chicago office to keep the organization going. Board members carted boxes of APSAC documents to their homes and offices, running APSAC in their spare time. Sandra credited passion, determination, and shared commitment to advancing the field of child maltreatment for APSAC’s ability to pull through this challenging time.

In terms of the present and future, while APSAC has incorporated prevention more over the years by establishing a prevention committee, offering sessions on prevention at the Colloquium, and offering a prevention award, there is still work to be done. Sandra said that she would like to see the mission statement of APSAC revised to reflect the importance of prevention work. In addition, she discussed the importance of APSAC centering communal and societal prevention work, as APSAC is an organization that has an essential role to play in helping people make the connection between early adversity, protective factors, and community-level interventions that can reduce the likelihood that children experience early adversity at all. Overall, Sandra reflected on how important APSAC has been in her career, offering a wealth of opportunities to make lasting connections and gain knowledge across a group of multidisciplinary professionals.

### Advice to Future Child Maltreatment Professionals

Sandra shared plenty of helpful advice for both graduate students and early career professionals who are interested in working in the field of child maltreatment and prevention. She heavily encouraged participation in organizations like APSAC that connect people at multiple stages of their career and allow for networking and mentorship opportunities for those who are just starting out. In addition, she suggested volunteering and getting involved in committees within APSAC, taking advantage of the various opportunities to learn from others in the field, and to getting involved in prevention efforts. She stressed the importance of networking and being an active participant in APSAC, even as an early-career scholar. According to Sandra, APSAC is a wonderful way for new professionals to interact with and learn from “old professionals.” So, take note, if you are someone who feels you need an official invitation to get involved or to have a seat at the table, this is it!

## Interview with Sandra Alexander

### Reflections from A. Lilyan Falcon, an Aspiring Child Maltreatment Researcher

Hearing Sandra Alexander talking about her work and her passion for the field and for helping children was inspiring to say the least. As a first-year doctoral student, I am so glad and honored to have had the opportunity to hear from someone who has accomplished so much in the field. Two of my most significant takeaways from my conversation with Sandra regarded the importance of prevention in this field and of the necessity of making connections with others who share the same goals for child welfare at all points in one's career.

Sandra has spent most of her career working to develop programs and highlighting the importance of preventative efforts. While much of research is geared towards responding to instances of maltreatment and addressing various issues after the fact, she stressed the importance of not forgetting about prevention efforts. Many of the projects that she has had a hand in developing seem geared toward strengthening family bonds or equipping families with resources. In addition, she shared how many of these influential projects involved a multidisciplinary team of researchers and practitioners. To me, and I am sure to other graduate students and early career professionals who take the time to learn from her, it is clear future work in this field can and should be collaborative and multidisciplinary. As Sandra recommended, taking part in an organization like APSAC that brings together researchers and practitioners from all stages in their careers allows for these networking and collaboration opportunities.

Something that really stood out from this conversation with Sandra was the importance of community involvement in our efforts to prevent and address child abuse and maltreatment. Sandra stressed the importance of prevention efforts, especially those at the community level. For instance, she talked about the need to partner with community organizations like businesses, the media,

and faith communities. In particular, she highlighted that this level of community focus on prevention can enable communities to provide economic support for families, to offer services like equitable childcare, and to generally allow for everyone in a community to succeed.

Sandra also shared some of the most difficult moments from her time in APSAC, describing the difficulties that she faced during her year as president. Her presidency was a stressful time in APSAC history due to financial struggles, but its survival is a testament to the passion and dedication of people like Sandra who worked together to keep the organization alive and functional. Bringing together people who are passionate about helping children by preventing and addressing maltreatment may not be an easy task, as Sandra made clear, but it is an important one. Those just beginning to enter this field, myself included, may be intimidated and therefore hesitant to involve ourselves in organizations like APSAC, but as Sandra told me, us early career scholars and professionals are the future leaders of the field. It is therefore imperative for us to learn from, and potentially collaborate with, those with more experience in the field. The ability of APSAC to bring together people from different backgrounds, of different ages and different interests, but who share the goal of preventing and addressing childhood maltreatment makes this a particularly special and noteworthy organization. Sandra appeared to be very content with her time in APSAC, the work that she has done, and the legacy she has helped create within the organization. For those of us who are just getting started, I urge us to heed her advice: Don't forget about prevention.

This does, however, come with a warning: despite it being evident that there must be a seat at the table for prevention, obstacles to this may arise, and persistence is very much necessary. For instance, Sandra shared fears that current colloquiums are lacking in a prevention-focused context, which may dissuade some prevention-focused scholars from getting involved. However, she made clear that the future of this field must have a place for prevention-

focused scholars and for those in the treatment area to communicate and learn from one another. In addition, in sharing the difficulties that have arisen in APSAC's history, she shared potential challenges that the field may face in future. Among these were challenges in obtaining and retaining membership, potential competition from other organizations, and communication between members and those on the board. Generally, though, the takeaway message that Sandra stressed to me was how important it is to persevere, even in the face of difficulties. There is a lot of work to be done in the field, and APSAC provides a way for those who are passionate about making strides in the field to interact, collaborate and move forward in their work toward the mutual goals of helping children.

We would like to thank Sandra Alexander for her work and commitment to this field, her dedication to APSAC and to helping children, and for sharing her time, wisdom, and experiences with us.

### About the Authors

*Emily Bosk, PhD, LMSW, is Associate Professor at the Rutgers School of Social Work. Trained as both a sociologist and a clinical social worker, her work focuses on actionable approaches to advancing child and family wellbeing.*

*A. Lilyan (Lilli) Falcon is a first year PhD student in Educational Psychology at The Pennsylvania State University. Her research interests involve educational interventions focusing on various learning-related cognitive and neural mechanisms that are implicated through early experiences of trauma.*





Frank Vandevort

## 35th Anniversary of APSAC Special Issue of the Advisor: An Interview with Frank Vandevort, Past President of APSAC

*Courtney A. Waid, PhD*

### Frank Vandevort: A Passionate Advocate for Children

In April 2022, I had the pleasure of interviewing Professor Frank Vandevort for this special issue of the *Advisor*, which is dedicated to celebrating the 35<sup>th</sup> Anniversary of APSAC. Professor Vandevort's service to APSAC has spanned close to 30 years, and his term as President was from 2014 to 2015. From the moment our interview started, it was clear that Professor Vandevort not only has a passion for his work in a broad sense, but also has been able to bring his extensive professional experience and expertise to his work with APSAC in enthusiastic and creative ways. The organization has no doubt benefitted greatly from his leadership, and his contributions will continue to serve the organization for years to come. My conversation with Professor Vandevort, held via Zoom, covered topics ranging from his broad interests related to child advocacy to his specific involvement with APSAC in many endeavors over the years. Specifically, he was able to spend considerable time reflecting on what APSAC has achieved as an organization with assisting professionals in their work with children, especially in light of the COVID-19 pandemic, as well as on his recommendations for current and future APSAC leaders. Throughout our discussion, it was clear that his vast knowledge, consistent energy, and motivation to assist children in need as well as the professionals that serve them has been and continues to be invaluable to APSAC; as such, I have no doubt that the organization is successful in achieving many of their objectives because in part of Professor Vandevort's contributions.

### Early Career: Tireless Work for Children in Need

A native of Michigan, Professor Vandevort started his college education by attending a community college in northern Michigan for two years. He then completed his bachelor's degree at Michigan State University in East Lansing, Michigan. Upon graduation, he worked in a residential psychiatric facility for youth ages 12-17 in Detroit, Michigan. This work led him to enroll in law school, with the goal of working with delinquent, abused, and neglected children. He attended Wayne State University School of Law in Detroit and was able to continue his employment at the residential psychiatric facility during this time. Upon graduation from law school, he worked for six years in the public defender's office in Detroit, achieving his goal of serving children involved in delinquency, abuse, and neglect cases. His next professional position was with a nonprofit organization that provided legal services to children. After six years of working with the public defender's office in Detroit, two years with a nonprofit in Grand Rapids, and five years in a grant-funded position at the University of Michigan Law School, he felt deenergized by a system that was less than optimal in how it could serve youth in need, as it was disorganized and under-resourced. Thus, on the brink of burnout, he enrolled in a journalism graduate program with the intent of making a career change. However, instead embarking on a journalism career, he took a position providing continuing legal education specific to child protection cases as he felt his work with children in need was not yet finished.

In the early 2000s, Professor Vandevort taught courses at both the University of Michigan Law School and the University of Detroit Mercy Law School. In 2005, he was appointed to a tenure-track position at the University of Michigan School of Law. He received tenure, and still holds this position at the university today. While a large portion of his work and expertise is related to the well-being of children, his other interests include mediation, workers' rights, and interdisciplinary practice, the last of which serves as a blueprint guide and approach for all of his work. He did make a special note that his younger, law-student self would be surprised that he is a law professor, as he did not particularly enjoy law school. However, his position is a clinical faculty line, which allows him to blend his teaching with practice to provide law students courses in case-based processes. Undoubtedly, Professor Vandevort's students have benefitted immensely from his extensive experience and knowledge of legal issues surrounding children and the best practices in how best to serve children in need.

### Professor Vandevort's Involvement With APSAC

In the late 1980s, Professor Vandevort was fresh out of law school and employed as a public defender in Detroit. This early career experience led him to the realization that his work needed, as he put it, more "grounding in interdisciplinary practice." He was careful to note that while he didn't necessarily need the professional training of a medical doctor or a psychiatrist, he needed to be familiar with the empirical work and practice of such professionals in his efforts to best assist the delinquent, abused, and neglected youth he was serving. This motivated him to attend his first APSAC colloquium in the summer of 1993 in Chicago, Illinois. The program of the 1993 colloquium was appealing to Professor Vandevort as it was clearly interdisciplinary in nature and provided much of what he was looking for in terms of professional development and networking with colleagues—not only with those from law backgrounds, but also with professionals from backgrounds in all fields necessary to help

abused and neglected children in a holistic fashion. From the time that Professor Vandevort first joined APSAC in 1993, he has not hesitated to contact psychologists or social workers who he has met through the organization to ask for their perspectives on a case or issue. Further, in the past 10 to 15 years as pediatricians with expertise in child abuse have brought their skills to APSAC, Professor Vandevort has not hesitated in networking with these professionals in an effort to bring an interdisciplinary approach to his work that is more inclusive of the disciplines necessary to understand and treat issues of child welfare.

In 1995, Professor Vandevort met Dr. Vincent Palusci, a pediatrician who was working in Grand Rapids, Michigan at the time. Dr. Palusci encouraged him to become involved with the state chapter of APSAC in Michigan. In the late 1990s, Professor Vandevort maintained his membership in the state chapter and the national organization. His primary goals at this time were to expand the influence of APSAC with lawyers engaging in civil child protection work as well as to energize the Amicus program within the organization. His motivation for the latter came from both his personal experience writing Amicus briefs and his desire to see this as more beneficial in efforts to assist children in need. Because of his work and passion in this area, Professor Vandevort has served on the Amicus and Public Policy Committee, and has even chaired this committee. In 2012 and 2013, he served as the President-elect of APSAC, and his term as President spanned from 2014 through 2015.

### Professor Vandevort's Legacy

I asked Professor Vandevort to reflect on his professional legacy, both in the service of children in the child welfare system in a general, broad sense, as well as to APSAC more specifically. Like many young, early career professionals, during Professor Vandevort's early experiences working on his law degree and at the residential psychiatric facility for youth, he thought could completely change the world for youth in need. Of course, he noted

## Interview with Frank Vandevort

that he became much more realistic as he learned the intricacies of the incredibly overwhelmed child welfare system in Detroit, which led him to change his overall approach to his work. Instead of attempting to make broad, sweeping, system-level changes or changes that would drastically alter the course for any one child, he embraced serving as a voice for appropriate care for troubled youth. More specifically, Professor Vandevort wanted to address aspects of the system—specifically where treating “children as human beings” was not the driving ideology in juvenile court processes or in the child welfare system. Historically, these systems have roots in the paternalistic ideology that children are the property of their fathers, and thus that the needs of the child are not placed at the forefront. With this “child needs”-focused approach, Professor Vandevort realized that while he couldn’t change everything, he could make a difference in developing policies informed by the best practices in providing appropriate care for delinquent, abused, and neglected children. Undoubtedly, this perspective also allowed him to continue in the field when he was on the cusp of burnout in the late 1980s.

When asked to note any particular success with specific youth, it was no surprise given his overall approach to his work that Professor Vandevort chose not to discuss any particular one case. He noted that while successes with particular youth were undoubtedly quite numerous, just as some cases were not successful, he wasn’t able to know how a vast majority of children’s cases played out in the long term. His approach to his work allowed him to focus on the youth in front of him at any particular time and serve them in the best way possible with his knowledge and experience. On a larger scale, he preferred to engage in writing projects in which the information would be disseminated to scholars and practitioners, to take part in child advocacy activities, and to work to develop policy that would influence the field of child welfare in a broad fashion. For example, for close to 13 years, he sat on the State of Michigan’s Child Death Advisory Board. This group reviews all cases resulting in the death of a child, synthesizes findings, and presents them to the

governor for policy changes. Similarly, Professor Vandevort was part of a subcommittee that worked with Michigan’s Citizens Review Panel on Child Death for close to 12 years. This group is a bit more specific in its focus in that the deaths examined resulted from child abuse. Professor Vandevort noted that this work was professionally fulfilling, as he was able to feel that he could make an impact on many children and participate in shaping child welfare policy.

Unsurprisingly, Professor Vandevort’s reflection on his legacy in APSAC followed the same ideology and mode of professional engagement he has utilized throughout his career in a broad professional sense. For example, his work serving on and chairing APSAC’s Amicus and Public Policy Committee was especially meaningful to him in its impacts. In one case, the United States Supreme Court cited an Amicus brief written by the committee in the case of *Ohio v. Clark* (2015), which addressed what statements made by teachers and/or youth are permissible in a court of law. This committee played a part in setting policy for professionals working with youth; their work was a clear example of how APSAC is able to provide critical information to professionals working with youth or working to set policy that will impact youth. In recent years, Professor Vandevort stepped down from the Amicus and Public Policy Committee, and he noted that in his view, the work of the Amicus and Public Policy Committee is even more robust today. I have no doubt that his many years of enthusiastic work with this committee paved the way for the committee to remain active, grow, and be successful in their work today and in the future.

In discussing his time serving as President of APSAC from 2014-2015, one common theme that was threaded throughout Professor Vandevort’s discussion was his consistent commitment to leaving APSAC a better organization in all facets—including financially and in methods of information dissemination to members—upon the conclusion of his term in 2015. The New York Foundling became a partner with APSAC during his presidency,

and the Institute for Human Services in Columbus, Ohio redoubled its commitment to APSAC through both increased financial support and by assuming responsibility for the organization's day-to-day operations. These initiatives assisted the organization in growing financially and also in the ways it was able to serve professionals working with youth via trainings.

Since he has completed his term as President, Professor Vandevort has remained active in APSAC. In recent years, he has served on the editorial board of the organization's empirical journal, *Child Maltreatment*. This peer-reviewed journal embraces interdisciplinary approaches to understanding child abuse and neglect; it showcases best practices in working with youth in these situations, and, in turn, it serves to advise the professionals who work with these children. Professor Vandevort is currently serving as the editor for a special issue of *Child Maltreatment* that will focus on a collection of interdisciplinary, empirical studies on the legal issues currently prescient to serving delinquent, abused, and neglected children.

### Professor Vandevort's Recommendations to the Child Welfare Field and to APSAC

While Professor Vandevort praised what APSAC has done well during his time on the board, he also noted where the organization specifically, as well as the academic and practical disciplines informing its work more broadly, could do more to assist a child welfare system that is, in many ways, failing children. As an example, he cited the increase in child deaths in recent years, from roughly 1200 to 1750 annually. In examining these deaths, Professor Vandevort noted that many of the cases have involved children whose families saw previous involvement with Child Protective Services. In concert with his perspective that the system and the law consider children to be the property of their parents, Professor Vandevort feels that an inability to see a child's needs and interests as separate from their parents has led to an increase in such cases. Efforts to preserve the family

should not occur at the expense of the child, and he feels that, in some of the most egregious cases, we are losing more children in this fashion. Similarly, our focus on the most serious cases allows us to focus too few resources and not enough attention on cases in which serious injury or death is not the result. The worst cases clearly come to the attention of professionals because a child death is the result, but what about other children in need of services? Thus, Professor Vandevort noted that the system needs to do more to "measure the layers" of child harm. On a positive note, he highlighted evidence that the child tax credits issued during the COVID-19 pandemic have been extremely impactful, serving to reduce the stress that financial issues often bring to families, especially those living in poverty. After all, as Professor Vandevort noted, "If we are able to support families, we will need foster care less." He was very quick to add that APSAC should illuminate the COVID-19 child credits and other potential programs to assist families financially in training/programming for APSAC member professionals in the near future.

As Professor Vandevort takes an interdisciplinary approach to his work, it is his strong feeling that we should handle children as individual, dynamic people and not as their families' property. Thus, interdisciplinary tools should aim to gather as much information as possible from the child—and not only the child's parent(s) or guardian(s)—in order for interdisciplinary teams of professionals to recommend the most appropriate, intensive services early in the intervention process. Professor Vandevort feels that too many decisions have been made by professionals with inadequate information when working with children in need. Additionally, he added, "boilerplate assessment and programming does not and will not work," with children bearing the brunt of this misinformed approach. He astutely used the medical metaphor of treating cancer patients, where professionals consider all modalities of treatment (i.e., chemotherapy, surgery, and/or radiation treatment) with the patient as soon as possible after diagnosis; Professor Vandevort questioned why we were not taking the same



## Interview with Frank Vandevort

approach with the children in need of our assistance and services. He feels that the system should shift from the historic and current approach to one that considers children as individuals with their own voices and thus their own abilities to answer practitioners' questions about their experiences. Professor Vandevort did note that many professionals working in child welfare capacities today do not have appropriate training in forensic investigations of child maltreatment. He feels that APSAC can be a leader in this area by providing training that many professionals need in order to collaborate effectively and corroborate findings in the cases on which they work.

Professor Vandevort also said that he wants to see the value of APSAC membership further marketed to attorneys engaged in civil work with children. Such an initiative would not only serve to increase the membership of APSAC, but also to help existing members benefit from the expertise of these civil child attorneys—a professional area that Professor Vandevort feels can strongly inform the work of all APSAC members. This latter benefit is especially salient to consider, as the organization highlights an interdisciplinary approach to child welfare. Professor Vandevort noted that there are close to 50,000 attorneys engaged in child welfare work. Further, he surmised that there are undoubtedly countless other professionals, such as social workers, pediatricians, and sexual assault nurse examiners (SANEs), who would find APSAC membership a valuable professional resource. Thus, he noted that increasing the perceived value of membership among all child welfare professionals should be a top priority.

Increased APSAC membership would not only increase the range of interdisciplinary professional networking opportunities for members, but would also serve to augment the organization's finances, as this will undoubtedly continue to be a challenge in the coming years. With The New York Foundling's financial commitment tapering off in the future, Professor Vandevort noted that fundraising should continue to be at the forefront of the organization's plans; he would be glad to be involved in these

fundraising efforts. He was also quick to point out that the need for additional monetary resources is not surprising considering the health of financial resources available to professionals and organizations in the field of child welfare has historically been quite challenged. Present day financial concerns will be complicated further by the depletion of COVID-19-related resources and uncertainty regarding the status of the Affordable Care Act. Professor Vandevort noted that the APSAC Presidents who followed him have devoted considerable effort to fundraising and developing ways to attract young professionals to the organization, the primary way being providing training that has relevancy to their work. Professor Vandevort added that he is continually impressed with the organization's training and publications. Specifically, he gave special praise to the *Alert* publications, as APSAC has done a tremendous job in distilling complex empirical findings for practitioners who do not have graduate-level methodological training. In fact, he noted that APSAC is the only organization of its kind to engage in this type of research dissemination activity. Due to the value of these publications and the networking APSAC provides, he's seen the organization enable practical, direct-service experience to inform ideas for empirical research, and empirical research to inform the day-to-day practices of direct-service providers.

### Professor Vandevort's Advice to Early-Career Professionals and the Future Leaders of APSAC

When I asked Professor Vandevort to share the advice he would give to early-career professionals, it was no surprise that he immediately stressed that these individuals should make interdisciplinary connections, as these relationships can serve to fill in gaps in knowledge as well as provide missing links in cases and in programs. "Interdisciplinary pieces will move and educate the field," he said. In addition, he feels strongly that professionals cannot work alone or in a vacuum; they need other professionals that they consider their allies. He noted that not only can allies

serve as wonderful collaborators, but also as both informal and formal support to any professional in this field.

Several times at this juncture of the interview, Professor Vandevort stressed that this profession is “hard work” in that it not only is emotionally tiring, but it also requires long hours and much patience. While interdisciplinary networks via membership in APSAC can assist professionals, it is imperative that these individuals engage in regular self-care as well as mental health checks. He noted that while these avenues for professionals working in child welfare are more robust than they were 30 years ago, much more is needed to ensure that professionals have the tools to take care of themselves, reset, and perform tasks in a healthy manner. He added that the future leaders of APSAC should realize that work on the board is tireless, and it may be easy to get discouraged. However, small setbacks such as a poorly attended conference or training or the challenges the organization may face in terms of funding will not define the leadership of a particular group in board positions at any particular time. He advised that the key to navigating and overcoming those challenges lies in the President and President-elect working closely with other APSAC leaders and other professionals with whom they work well .

### Reflections From a Criminologist

It was an absolute delight to interview Professor Vandevort, from both a personal and professional standpoint. Our discussion was relaxed and engaging, and I found him to be open, honest, and extremely easy to talk to. He didn't shy away from difficult topics, and he was also very open, in a self-deprecating fashion, about some of his early experiences in the field. It was clear to me that he is an extremely humble professional who easily communicates his knowledge and experience to those who seek him out as a mentor. I have no doubt

that many professionals in the child welfare field, including Professor Vandevort's colleagues and the students he teaches, have successfully sought his advice on specific cases, policies, and practices. Similarly, I have full confidence that Professor Vandevort will continue to inspire his colleagues and students for years to come. With his continued involvement in APSAC and his ongoing desire to write for the organization's publication outlets, I have no doubt that the information that Professor Vandevort shares in the future will reach even more professionals in the myriad disciplines that inform APSAC's mission and goals. He is a tireless advocate for interdisciplinary approaches within his own work and within APSAC.

I am a criminologist, and while my field draws heavily upon sociological work, fields such as social work, psychology, history, and political science have given my field an interdisciplinary perspective; for this reason, Professor Vandevort's assertion that such an approach is critical to best practices resonated with me very much. In addition, his tireless passion, positive attitude, and unequivocal support for early career colleagues was impressive, and, I would surmise, matched by few. I have no doubt that he was an excellent President of APSAC, and his impact will continue to be felt for years to come. In light of my work as the newly appointed chair of the Department of Criminal Justice at Auburn University at Montgomery, I found our conversation to be incredibly valuable, as it served to remind me that the most effective leaders will always lead by example, no matter their leadership philosophy and management style is. It also reminded me that in order to make progress in our goals of educating individuals with bright futures in the child welfare field, we must not be siloed in our academic disciplines, as it is imperative that we communicate with other leaders in efforts to grow in an interdisciplinary manner.

*Interview with Frank Vandevort*

**About the Author**

*Courtney A. Waid, PhD, is Department Chair and Associate Professor of Criminal Justice at Auburn University at Montgomery. She received her PhD in Criminology from Florida State University in 2010. In recent years, her research and service interests have centered on victim advocacy and victim services.*





**Barbara Bonner,  
PhD, MSW**

# Celebrating 35 Years of Improving Society's Response to Abuse and Neglect of Children: An Interview with Barbara Bonner, PhD, MSW, Past President and Lifetime Member of APSAC

*Leah Bartley, PhD, MSW*

In the 1980s, there was limited research and practice guidance to support professionals working with child victims of sexual abuse. In the legal field, many interviews were conducted in a forensic fashion with limited consideration of the clinical care needed when helping children who had experienced maltreatment. Although there was the International Society of Child Abuse Prevention, professionals in law enforcement and the care of child victims did not have a national or local agency that could provide current research and practice guidance. As researchers, practitioners, and leaders noticed this gap, a group of experts came together to form a professional society to support practitioners working assisting with maltreated children. The American Professional Society on the Abuse of Children (APSAC) was formed to provide practice guidance from the best and most current research available on child maltreatment. The goal was to make research accessible for professionals working with child victims of maltreatment.

Barbara Bonner, PhD, MSW, was an important leader in the early development of APSAC. She ran for the board early in the organization's development and helped to shape the direction and vision of the organization. She remembers the very first meeting in Chicago and early conversations about hosting a national conference and is amazed by where the

organization is today. Shortly after, she became president of APSAC and provided seminal support in how research and evidence were to be used in the field of child abuse treatment and prevention.

## **Early Career and Current Work**

Early in her career, Dr. Bonner majored in special education and taught at school. She attributes this background as foundational to becoming a child psychologist and experiencing the range of normal child behavior. She went on to get her master's degree in educational assessment at Oklahoma State University, which was followed by a professional position conducting student assessments in schools. She obtained a doctorate in clinical psychology at Oklahoma State University in her 40s and later in her career. Oklahoma had only one clinical psychology doctoral program in the state, which took only seven students a year. Following the doctoral program, Dr. Bonner was accepted into a postdoctoral fellowship at the University of Oklahoma's Health Science Center in adolescent medicine and pediatric psychology. There, she attended a meeting with her mentor, C. Eugene Walker, and the district attorney, who was interested in implementing a child sexual abuse prevention program. While there, Dr. Bonner developed the Adolescent With Illegal Sexual

## Interview with Barbara Bonner

Behavior Treatment Program, which is a cognitive behavioral-based intervention that works with parents and children in developmentally appropriate ways.

Dr. Bonner joined the faculty of the University of Oklahoma Health Sciences Center in 1987, and in coordination with a federal focus and funding opportunity to strengthen services for maltreated children, she established the Interdisciplinary Training Program in Child Abuse and Neglect. In addition to the focus on fields such as social work, medicine, and psychology, this program also included the legal profession and law enforcement because sexual abuse goes to court in a different way than other forms of maltreatment. This is the only training program out of ten initially funded that is still providing training and professional support to practitioners working with child victims of abuse.

One important contribution mentioned by Dr. Bonner was the way she sought to change the nomenclature in the field related to how children who abused other children are viewed and referred to. Previously, children and adolescents with problematic sexual behavior were referred to as offenders. She worked to stop the connotation of sexual offender because research supports that children stop such behaviors with the use of effective interventions. Another outstanding contribution of Dr. Bonner was working successfully at the state level to limit the registry of juvenile sex offenders, for example, how juveniles may be attributed and for how long.

### APSAC Then and Now

One of the key reflections of Dr. Bonner was how responsive and open all professionals she has interacted with in the field of child maltreatment have been, particularly in the early years when APSAC was forming and there were limited opportunities for colleagues in the field to connect. She remarked how quickly APSAC became a highly professional organization and leader in using research and best methods to inform the field and

develop guidelines for working with maltreated children. This group brought together the best research available and made it quickly accessible for both professionals and practitioners. She also noted APSAC's contribution of establishing a highly recognized journal, *Child Maltreatment*. The organization took on the tasks early in its development to make APSAC viable, respected, and sustainable by providing immediate education, a national conference for professionals, and a journal. Dr. Bonner attributed a lot of the early success to leaders such as Jon Conte and Theresa Reid, who led the vision of APSAC within a social context and environment that was highly sensitive to sexual abuse and frequent negative media attention.

Early on, Dr. Bonner realized the importance of examining the research methods used in the field and making efforts to improve and strengthen methods to ensure timely and effective practices for working with children and supporting the professional development of practitioners. APSAC qualified experts to testify in cases of abuse and became a place for professionals to receive support and validation during abuse cases. She emphasized how in this critical field, it can be difficult to maintain perspective and optimism, and how APSAC has had a supportive role in connecting professionals in helpful ways.

Dr. Bonner acknowledged that, in the early days, it was inappropriate to use both a clinical and forensic approach to interview child victims of sexual abuse. APSAC assisted in developing the research and best practices related to how to appropriately interview with children. She reiterated how interviewing has become more of a science than a clinical approach. Now, APSAC has an frontline role in developing research uptake in child maltreatment prevention and supporting professionals or influencing organizational and policy efforts in the field. The organization is expanding its frame beyond child sexual abuse, which is necessary for the successful impact and future of APSAC.

## The Future of APSAC

Dr. Bonner applauded APSAC's focus on neglect of children, a timely consideration for the future. She acknowledged that neglect of children is a systemic problem and challenging to respond to or intervene with because it can be perpetual. If she were on the board of APSAC, she would be urging the members to highlight the fact of neglect in our world. She believes this is where the next 20 years need to be as physical and sexual abuse have decreased, yet neglect statistics continue to rise nationally. She suggested including board members who have experience in community interventions and neglect.

APSAC partnering with New York Foundling is important, according to Dr. Bonner, for long-term sustainability. Further, the journal continues to play a vital role in connecting research and practice. She suggested that APSAC consider changing the name of its colloquium to *conference*, a word that seems more welcoming. She clarified, however, that APSAC continued success is in connecting professionals with current research evidence. She suggested that APSAC find ways to continue to involve young professionals from a range of graduate and undergraduate programs, including law, psychology, social work, education, dentistry, sociology, and human relations to support an interdisciplinary focus.

## Advice for Future Leaders

Dr. Bonner sees an opportunity for APSAC to continue to support research and practice related to neglect and drug abuse and their co-occurrence. She noted that many funding opportunities exist related to drug abuse from drug companies. Dr. Bonner continues to see the value and contribution of education programs and interdisciplinary training opportunities. She also suggested developing relationships with other major organizations in the field, such as Prevent Child Abuse America or Child Abuse Division of American Psychological Association, a division of the Bar Association. She acknowledged that these types of relationships foster interdisciplinary work.

## Reflections From an Aspiring Child Welfare Researcher

One of the most interesting aspects of the interview with Dr. Bonner was her reflections on how challenging it is to move research into practice. She acknowledged that this applies to one of the major goals in the field, which is teaching interventions to professionals, particularly in undergraduate and graduate programs. She has experienced challenges in having doctoral courses that introduce evidence-based learning, such as cognitive behavioral programs for working with maltreatment victims. She stressed the importance of basic education and the ongoing supports required to understand and use evidence-based programs. Dr. Bonner suggested that providing more opportunities at the undergraduate and graduate levels to acquire evidence-based protocols will support professionals to carry out effective programs in practice. Not only is it necessary to work with professionals and practitioners when implementing a treatment intervention, but also programs need a community-based approach in which key partners such as legal or court representatives work with educational officials to be part of the effort. She sees that this approach is a vital aspect of the referral process, in terms of connecting with community partners.

Another understanding from my interview with Dr. Bonner is how significant APSAC has been in connecting professionals in the field of child maltreatment. She has found these alliances such a source of support and comradery throughout her career. It can be challenging and strenuous to continue to work in the field of child maltreatment and sexual abuse. Organizations such as APSAC have an important role in aiding professionals to align with others for collegial support and connection.

It was an honor to interview Dr. Bonner. She was very down-to-earth and humble about her impressive and influential career. Thank you, Dr. Bonner, for the opportunity to share insights about yourself with me on this 35th anniversary of the *Advisor*. Your legacy

## Interview with Barbara Bonner

and impact on child abuse treatment and prevention are achievements to be recognized and will continue to inspire practitioners working with vulnerable children, as well as victims of abuse, for many years to come.

### About the Author

*Leah Bartley, MSW, PhD, is Senior Implementation Specialist at the University of North Carolina Chapel Hill School of Social Work. Dr. Bartley is passionate about using relational strategies in implementation to change practice and organizations for the benefit of children and families.*





The American  
Professional Society  
on the Abuse of Children™

*Strengthening Practice  
Through Knowledge*

apsac.org  @The\_APSAC

In partnership with



nyfoundling.org

 @TheNYFoundling

*Opinions expressed in the  
APSAC Advisor do not reflect  
APSAC's official position  
unless otherwise stated.*

*Membership in APSAC  
in no way constitutes an  
endorsement by APSAC  
of any member's level  
of expertise or scope of  
professional competence.*

© APSAC 2022

*All rights reserved*