17th Hawai‘i International Virtual Summit on Preventing, Assessing, and Treating Trauma Across the Lifespan

April 14-17, 2020

Benefits of Attending

• Cover diverse topics with interdisciplinary approach
• Gain applied knowledge in many areas of specialty
• Earn up to 18 continuing education credits
• Earn IVAT specialty certification training credits
• Network with professionals from a variety of disciplines
• Emphasis on under-represented populations

Summit Tracks

1. Adolescent Trauma & Youth Violence
2. Child Trauma/ Adverse Childhood Experiences
3. Criminal & Civil Justice Issues: Violence & Trauma
4. Healthcare Systems, Violence & Trauma
5. Intimate Partner Violence
6. Prevention & Early Intervention
7. Sex & Labor Trafficking
8. Sexual Victimization
9. Special Topics in Trauma
10. Trauma Among Military Personnel, Veterans, & Their Families
11. Trauma & First Responders
12. Vulnerable Adults & Elder Trauma

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Register: IVATcenters.org/Hawaii-Summit
# 17th HAWAI‘I INTERNATIONAL VIRTUAL SUMMIT: PREVENTING, ASSESSING & TREATING TRAUMA ACROSS THE LIFESPAN
April 14-17, 2020

## SCHEDULE AT A GLANCE

### PRE-SUMMIT

**Tuesday, April 14th**
- **Pre-Summit Half-Day Introductory Trainings** 9:00 am – 12:00 pm HST

### SUMMIT

**Wednesday, April 15th**
- **Breakout Session A** 8:30am – 10:00am HST
- **Breakout Session B** 10:30am – 12:00pm HST
- **Breakout Session C** 1:00pm – 2:30pm HST

**Thursday, April 16th**
- **Breakout Session D** 8:30am – 10:00am HST
- **Breakout Session E** 10:30am – 12:00pm HST
- **Breakout Session F** 1:00pm – 2:30pm HST

**Friday, April 17th**
- **Breakout Session G** 8:00am – 11:00am HST
- **Breakout Session H** 12:00pm – 3:00pm HST
- **Summit Adjourns** 3:30 HST
Summit Description & Goals

The 17th Hawai`i International Summit brings together the latest research on prevention, assessment, and intervention techniques concerning various aspects of trauma and maltreatment across the lifespan, as well as the long-term effects if left untreated. Plenary and breakout sessions will discuss various types of child, adolescent and adult/elder trauma, the dynamics of maltreatment and trauma at home or in the community, and the psychological, behavioral and neurodevelopmental effects. Nationally and internationally recognized presenters and local practitioners assemble to discuss the latest research, assessment methods, interventions, and prevention strategies for those who have been traumatized, abused, and/or victimized. Application of current research information and practical techniques are emphasized throughout this Summit.

Objectives

- Identify current state-of-the-science research and practice concerning child, adolescent and adult/elder trauma and maltreatment
- Explain the dynamics and overlap of different types of trauma and maltreatment
- Identify the effects of early trauma on the long-term functioning of children, adolescents, and adults/elders
- Improve skills and techniques for helping children, adolescents, adults/elders, and families recover from various types of trauma and maltreatment
- Identify issues and strategies for preventing abuse and neglect
- Enhance understanding of Trauma-Informed Care approaches

Continuing Education

The Pre-Summit and Summit are approved to offer 18 hours of continuing education for Psychologists, Counselors, Marriage and Family Therapists, Social Workers, Attorneys and Substance Abuse Counselors. Additional CE accreditation may be available – due to accreditation procedures, we are prohibited from advertising prior to approval. CE credits approved by California agencies are accepted in most states. Different sessions meet many licensure requirements for continuing education credits for child abuse, domestic violence, ethics, aging, substance abuse, child custody, domestic violence offender treatment and child sexual abuse.

IVAT is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. IVAT maintains responsibility for this continuing education program and its content. The California Board of Behavioral Sciences (BBS) now accepts APA continuing education credit for license renewal for LCSWs, LMFTs, LPCCs, and LEPs. IVAT is approved by the State Bar of California to offer Minimum Continuing Legal Education for attorneys (#11600). IVAT is approved by the California Association of Alcoholism & Drug Abuse Counselors (CAADAC) to sponsor continuing education for certified alcohol and drug abuse counselors (Provider #IS-03-499-0221).

In support of improving patient care, IVAT is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

CE credits for each session will be available on the IVAT website: [www.ivatcenters.org](http://www.ivatcenters.org).
IVAT Specialty Certifications:

Pre-Summit and Summit sessions meet many of the training requirements for IVAT Specialty Certification Programs. Specialty certification assures the consumer that specialists have successfully completed the educational, training, and experience requirements of the specialty area, and that their expertise has been objectively reviewed and documented.

**Specialty Certification in Domestic Violence Offender Treatment**
Includes training and experience in working with both male and female intimate partner violence offenders to understand the dynamics and safety issues involved in intimate partner violence and typologies of domestic violence offenders.

**Specialty Certification in Child Custody Evaluations**
Includes an understanding of the issues of child development, parenting abilities and issues, best interests of children, and assessment techniques in general and specifically regarding child custody cases. The dynamics of legal, forensic, and mental health issues are included.

**Specialty Certification in Trauma Care**
Includes an understanding of the various forms of trauma, short and long-term effects of trauma, and assessing and treating adults and/or children who have experienced both simple and complex trauma. The dynamics of post-traumatic stress disorder are included.

**Child and Adult Maltreatment (CAM) (Formerly known as CAST/CAAST)**
Focuses on experiential, interdisciplinary, ethical, and culturally sensitive content that provides professionals with common knowledge base for responding to child and adult maltreatment. This certification focuses on development and understanding of the numerous factors that lead to child and adult maltreatment and the existing responses to child and adult maltreatment.
**Summit Program: All session times are listed in Hawai`i Standard Time**

**HALF-DAY SESSIONS: 9:00am - 12:00pm Hawai`i time (Select One)**

**PS1. Introduction to Adverse Childhood Experiences (ACEs) Science and Practical Applications**  
_Sandi Capuano Morrison, MA, Institute on Violence, Abuse & Trauma, National Partnership to End Interpersonal Violence Across the Lifespan_

**Audience: Beginning: Appropriate for attendees as an introduction to a topic.**

This workshop will provide attendees with an introduction to the 1997 Adverse Childhood Experiences (ACEs) study by Kaiser Permanente and the Centers for Disease Control and the expanded use of the ACEs knowledge by various communities to incorporate the research around ACEs and resiliency into practical applications. The workshop will also include discussion of various ways that communities are applying the knowledge gained from the ACEs science through campaigns such as Childhood Trauma, Changing Minds by the Department of Justice Defending Childhood Task Force and Futures Without Violence, to the learning collaborative of 14 U.S. communities working to Mobilize Action for Resilient Communities (MARC). These multidisciplinary practical applications of the ACEs science are expanding and improving the response to child and adolescent victims through proper identification of trauma and its short, and long-term impacts as well as increased understanding of the critical importance of the research around resilience.

**Objectives: As a result of this session, participants will be able to:**
1) Identify the ten main categories of adverse childhood experiences included in the ACEs study.
2) Identify how ACEs impact the brain development of children.
3) Identify five ways ACEs influence health and well-being throughout the lifespan.
4) Identify three practical applications of the ACEs science.
5) Identify three ways to strengthen resilience.

**Areas of Emphasis: Advocacy/Policy/Prevention**

**Continuing Education: Approved up to 3.0 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Attorneys, Victim Advocates, and Substance Abuse Counselors, IVAT Specialty Certifications: Approved to 3.0 Hours for: Child & Adult Maltreatment (CAM), Trauma Care, and Child Custody Evaluations**

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**PS3. Delivering Services Through a Culturally Responsive Trauma Informed Lens**  
_Suganya Sockalingam, PhD, Change Matrix, LLC, Rachele Espiritu, PhD, Change Matrix, LLC_

**Audience: Beginning: Appropriate for all attendees as an introduction to a topic.**

Trauma refers to individual trauma resulting from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being. A trauma-informed approach to the delivery of mental health services includes an understanding of trauma and an awareness of the impact it can have across settings, services, and populations. This workshop provides a conceptual foundation of the importance of trauma and approaching the delivery of services and supports through culturally responsive trauma-informed approach. Participants will engage in interactive experiences/discussions and examine the importance of culturally responsive trauma-informed approach as a change process and better understand the leadership required to motivate and manage the change to integrate trauma- informed approach and cultural and linguistic competence in the delivery of mental health services and supports.
Objectives: As a result of this session, participants will be able to:
1) Understand the term trauma and the culturally different ways in which it can be experienced.
2) Recognize that trauma informed care and culturally competent care are one and the same.
3) Explore the culturally responsive trauma-informed approach to delivering services.

Areas of Emphasis: Advocacy/Policy/Prevention, Cultural Diversity/Trauma

Continuing Education: Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 3.0 Hours for: Child & Adult Maltreatment (CAM), Trauma Care, Child Custody Evaluations, and Domestic

PS4. Resilience for Trauma-Informed Professionals: Protecting Ourselves from Secondary Traumatic Stress
Patricia Kerig, PhD, University of Utah

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

A wealth of research and clinical literature has been devoted to helping mental health professionals recognize and address the negative effects of exposure to others' trauma, termed secondary traumatic stress, vicarious trauma, or compassion fatigue. However, less recognition has been given to the fact that those concerns also are relevant to front line staff and first responders who work with traumatized individuals in a wide variety of systems, including child welfare, domestic violence, rape crisis, criminal/juvenile justice, law enforcement, disaster relief, medical care, homeless advocacy, gang violence intervention, as well as research contexts in which investigators study trauma and violence. This workshop will introduce participants to evidence-informed techniques effective for mental health professionals and non-professionals alike that foster preparedness, resilience, and adaptive coping in the face of secondary exposure to trauma in real-world contexts and will emphasize the practical application and dissemination of these skills within our workplace environments.

Objectives: As a result of this session, participants will be able to:
1) Identify reactions associated with secondary traumatic stress, vicarious trauma, and compassion fatigue.
2) Utilize effective coping strategies during exposure to trauma-related material.
3) Carry out effective self-care strategies in the aftermath of secondary exposure to trauma.

Areas of Emphasis: Controversial/Critical Issues/Difficult Dialogues, Evidence-based/Promising Practices, Prevention, Other - Secondary traumatic stress

Continuing Education: Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 3.0 Hours for: Trauma Care
SUMMIT TRACKS

1. Adolescent Trauma & Youth Violence
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3. Criminal Justice & Civil Justice Systems, Violence & Trauma
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5. Intimate Partner Violence
6. Prevention & Early Intervention
7. Sex & Labor Trafficking
8. Sexual Victimization
9. Special Topics in Trauma
10. Trauma among Military Personnel, Veterans & their Families
11. Trauma & First Responders
12. Vulnerable Adults & Elder Trauma

THE FOLLOWING SYMBOLS INDICATE AN AREA OF INTEREST FOR THE NOTED SESSIONS:

- ELDER ABUSE
- CULTURAL COMPONENT
- FOR EDUCATORS
- LGBTQ

Wednesday April 15, 2020

A SESSIONS: 8:30 am – 10:00 am (Select One)

A1. Strengthening Personal and System Responses to Adolescent Sexual Assault

Morgan Shaw, PsyD, Institute on Violence, Abuse, & Trauma

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Globally, children and adolescents experience sexual abuse at an alarming rate. Meta-analyses estimate that 18% of girls and nearly 8% of boys will experience some form of sexual abuse during their childhood, including sexual assault or rape (Stoltenborgh, Bakermans-Kranenburg, Alink, & Ijzendoorn, 2015). Adolescents who experience sexual violence are at very high risk for a wide range of acute and chronic negative health impacts (Maniglio, 2009), and are likely to come into contact with individuals across a wide range of disciplines following a report of an assault; this includes educational, medical, mental health, and criminal justice systems. This session will cover common themes and concerns related to reporting, including delayed reporting, as well as a guiding principle for individual and systems responses to assault disclosures. We will also cover practical skills and techniques for how to gather additional information regarding a disclosure in a gender sensitive and culturally responsive manner.

Objectives: As a result of this session, participants will be able to:
1) Identify three common themes related to the disclosure of adolescent sexual assault.
2) Describe two ways that gender and/or culture may impact reporting of an assault.
3) Identify one individual and one systemic approach to appropriately responding to an adolescent report of sexual assault.

Area of Emphasis: Advanced Clinical Training, Advocacy/Policy/Prevention
Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

A2. Get Out of the Office: The Benefit of Naturalistic Activities in Family Reunification after Trauma

*April Harris-Britt, PhD, AHB Center for Behavioral Health and Wellness*

**Audience:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This workshop will illustrate how taking the therapeutic process beyond the confines of the office can help families re-establish the interpersonal security and natural connection necessary for successful reunification after family violence and trauma. The presenter will share how therapeutic interventions within a family’s own community can be leveraged to create a multi-faceted reunification intervention. The underlying developmental, neurobiological, and psychological processes in this reunification intervention model will be explored through the lens of attachment, trauma, and social engagement theory.

**Objectives: As a result of this session, participants will be able to:**
1) Increase understanding of developmental, neurobiological, and psychological processes in parent-child relational repair following trauma.
2) Become aware of naturalistic interventions that benefit parent-child reunification.
3) Identify ways community-based activities could be incorporated into orders.

**Area of Emphasis:** Advanced Clinical Training/ Controversial/ Critical Issues/ Difficult Dialogues

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, Attorneys

IVAT Specialty Certifications: Approved to 1.5 Hours for: Child Custody Evaluators

A3. Enhancing Trauma Informed Practice in Courts

*Nida Abbasi, JD, Center for Court Innovation; Danielle Pugh-Markie, Center for Court Innovation*

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

This presentation will address the impact of trauma on litigant behavior and decision-making in intimate partner violence (IPV) cases, as well as identify trauma-informed promising practices to enhance the overall court process for survivors and their families. Research shows that survivors of IPV often exhibit trauma reactions that are misdiagnosed or overlooked, which can affect how they are perceived and treated while accessing court and other services. Furthermore, survivors belonging to underrepresented populations can face particular barriers towards achieving safety through the court system. In order to foster a more equitable justice system, it is crucial for practitioners to identify and implement trauma-informed and culturally responsive practices while working on IPV cases. These practices are grounded in research and help promote survivor safety through criminal and civil courts. Furthermore, practitioners must recognize the reality of vicarious trauma and manage its impact to safely and effectively work with survivors.

**Objectives: As a result of this session, participants will be able to:**
1) Explain the impact of trauma on litigant behavior and decision-making in IPV cases.
2) Apply understanding of trauma-informed and culturally responsive promising practices to better serve survivors of IPV.
3) Design strategies for managing vicarious trauma in your practice.
A4. A Comparison of Sexual Assault Mental Health Treatment Utilization Intensity and Dropout Among Native Hawaiians, Asian Americans, and Caucasians

Dawna Nelson, PhD, MSW, Alabama State University

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

Mental health treatment following a sexual assault could be beneficial to recovery however, research shows that those who are most in need of trauma-focused mental health treatment (i.e., psychotherapy) may discontinue services prematurely or attend irregularly. Attrition and dropout may vary by sociocultural factors, however little research has been done with Asian Americans and Native Hawaiians to determine how these distinct and separate racial/ethnic groups may differ, including when compared against Caucasians. Sexual assault mental health treatment utilization amongst Asian Americans and Native Hawaiians is of particular concern as existing research shows both groups underutilize healthcare in general, in particular mental health care (U.S. Department of Health and Human Services, 2001), and these groups may be more likely to endorse maladaptive avoidant behavior post-assault (Abe-Kim et al., 2007). The findings presented here are a post hoc analyses of a larger study using a health services utilization model to identify factors related to treatment utilization. Post hoc analysis identified significant variance in treatment dropout and utilization intensity by race/ethnicity. Findings from this and the larger study contribute to theory development relating to health services utilization norms among diverse groups. Findings can also be used to contribute to culturally adapted interventions to increase attendance at psychotherapy.

Objectives: As a result of this session, participants will be able to:
1) Identify factors contributing to treatment utilization and dropout in diverse populations.
2) Identify variance in treatment utilization and dropout among Native Hawaiians, Asian Americans, and Caucasians.
3) Identify ways to culturally adapt treatment to increase adherence.

Area of Emphasis: Applied Research/ Cultural Diversity/Trauma

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse and Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child & Adult Maltreatment, Child Custody Evaluators, and Domestic Violence Offender Treatment

A5. He Hurt the Kids and the Dog, But He Never Hit Me, Am I Still a Victim?: The Danger of Getting it Wrong During a Forensic Assessment of Intimate Partner Violence (IPV) When No or Low Levels of Physical Violence are Present

Cynthia Lischick, PhD, NJ Domestic Violence Fatality Review Board, Rutgers University- School of Social Work

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This presentation addresses the problems forensic assessors face when evaluating allegations of Intimate Partner Violence
and the victim denies physical violence. Participants will learn about the Coercive Control Spectrum and its theory (Stark, 2007) including its structure, dynamics, and spatial dimensions. Participants will review assessment approaches and tools used to screen, identify and evaluate tactical patterns located in the Coercive Control Spectrum and differentiate those patterns from other types of episodic fights and marital contretemps. Participants will learn how to link tactical patterns within the IPV-CC context to their consequences including dangerous systems’ issues contributing to ongoing risk, the behavioral and cognitive processes used to coerce, control and dominate the adult victim, and, the resulting effects on victims in terms of their behavioral and cognitive adaptations for survival (Dichter, et al., 2018; Crossman, et al., 2018; Lischick 1999). Through forensic case examples from Dr. Lischick (2009) and the newly burgeoning research on coercive control, participants will learn about the history and utility adapting this model to apply to their clients experiencing this form of Intimate Partner Violence and the danger of getting it wrong (Lischick, 2007). Participants will learn about the extension of Coercive Control tactical patterns involving pets (Collins, et al., 2018) and children. Participants will use their knowledge of CC Spectrum gained in this workshop utilizing the Ecological Nested Model to identify unique risk and resiliency factors in the CC context and apply those factors to safety planning in a small group exercise. Participants will have an opportunity to apply the CC Model to risk assessment efforts and design trauma-informed interventions.

Objectives: As a result of this session, participants will be able to:
1) Recognize Coercive Control (CC) as a Spectrum with Specific Elements, Dynamics, Spatial Dimensions and Consequences
2) Apply screening/assessment tools to capture CC (ABOC [Dutton], WEB [Smith et al.], RVI [Dutton], DA[Campbell])
3) Assess and analyze the impact of CC and develop treatment recommendations


Continuing Education: Approved up to 1.5 CE credits for: *applicable Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Attorneys.

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child & Adult Maltreatment


Machelle Madsen Thompson, PhD, MSW, Shaderoom Group Counseling

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Practitioners and community leaders will learn to understand and implement the protective factors that lead to resilience in youths in the challenging climate of COVID-19. Resilience is a broad concept that can be difficult to implement within crisis intervention settings. Therefore, the training will focus on remote protective factor implementation in times of emergencies. In addition to her trauma intervention work in a children's hospital, trauma-focused counseling and resilience research, Dr. Madsen Thompson has been a mental health responder for the American Red Cross since Hurricane Katrina hit her region. Gathering information from these varied sources, this training will help attendees understand the protective factors leading to resilience and their application to children as they experience the social isolation, anxiety, loss, trauma, and misunderstanding of the COVID-19 virus. Current research-supported protective factors will be addressed with specific examples and activities to allow families and practitioners across disciplines to use resilience interventions and resilience informed care as children face the uncertainties and losses due to the current pandemic. The presentation will begin with a brief overview of resilience and the protective factors known to offset some of the negative effects of trauma. These include: Self Value, Self Regulation, Hopeful Future Goal Setting, Problem Solving, Supportive Belief Structure, Family, Friends, Academic Support, Active Diversion, Supportive Community, Security Aids, and Preventing Additional Stressors. Dr. Madsen Thompson has been writing Applied one-page Resilience Briefs each week for children and families. She will present their child-friendly (Early Reader to Second grade reading level) content and discuss their use for application across disciplines. Telehealth methods for helping clients as prevention and intervention in the climate of COVID-19 will be presented and discussed in-depth. Specific examples for use in practice,
prevention, education, and families will be addressed for each protective factor. Finally, we will address the needs of the practitioners in continuing to build their own protective factors as we address a very difficult crisis in our world.

**Objectives: As a result of this session, participants will be able to:**
1) Identify the protective factors associated with resilience helpful with youths in the precarious climate of Covid-19.
2) Demonstrate how to use the resilience app and proposed resilience mini-games.
3) Describe the child-centered resilience briefs the presenters created.

**Area of Emphasis:** Applied Research, Critical Issues, Cultural Diversity/Trauma, Prevention

**Continuing Education: Approved up to 1.5 CE credits for:** Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors
**IVAT Specialty Certifications: Approved to 1.5 Hours for:** Trauma Care, Child & Adult Maltreatment

**A7. Collaboration in Identifying and Investigating Child Sex Trafficking**
*Jason Lundquist, MA, Waco Police Department; Joseph Scaramucci, McLennan County Sheriff's Office*

**Audience:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

In this presentation we will discuss the needs for a multidisciplinary team (MDT) approach to minor sex trafficking, as well as how to combine proactive and long-term investigations to meet the needs of identifying and recovering juvenile trafficking victims.

**Objectives: As a result of this session, participants will be able to:**
1) Understand the MDT model in trafficking cases.
2) Understand the need for law enforcement partnerships.
3) Identify best practices in DMST investigations.

**Area of Emphasis:** Evidence-based/Promising practices

**Continuing Education: Approved up to 1.5 CE credits for:** *applicable to Child* Psychologists, MFTs, Counselors, Victim Advocates, Attorneys and Substance Abuse Counselors
**IVAT Specialty Certifications: Approved to 1.5 Hours for:** Trauma Care, Child & Adult Maltreatment, Child Custody Evaluators, and Domestic Violence Offender Treatment

**A8. Therapy for Sexual Assault Survivors and an Empowerment Prevention Program**

**Part 1. Healing after Sexual Violence: Exploring Therapy Use by Survivors of Sexual Assault and Rape**
*Christine Weingarten, PhD, MS, University of Hawai‘i at Mānoa*

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

The purpose of this research is to understand experiences of healing after sexual violence. This study explores the variety of therapeutic options available to survivors of sexual violence, including psychotherapy, yoga, and massage among others. In a sample of female survivors of sexual assault and rape (n = 303), the average number of therapies used was 3.95, indicating that the existing research investigating therapies separately is not able to fully capture the experiences of survivors and their use of multiple therapies. In this study, three classes of therapy utilization were identified, a high-use, low-use, and those who use psychotherapy in addition to a body-focused treatment (i.e., yoga, massage, chiropractic medicine). Patterns of victimization (i.e., childhood only, adult only, both childhood and
Adult), therapy use, and demographic information are considered to understand the relationship of these variables to current depression and PTSD symptoms. Furthermore, qualitative data from follow-up interviews with volunteers from the online survey (n = 24) are used to add understanding to the experiences of survivors with these services as well as reasons for seeking out multiple types of therapy. The results of this study contribute valuable information regarding survivors’ experiences with multiple therapies for researchers and clinicians alike. Increased understanding regarding survivors’ experiences post-trauma is essential for improving service provision and offering options to this population.

Objectives: As a result of this session, participants will be able to:
1) Describe therapy use by survivors of sexual trauma including modalities, timing, and patterns of therapy use.
2) Discuss factors related to therapy use and current symptoms of depression and PTSD.
3) Explain how qualitative data can increase understanding related to experiences of therapy by survivors.

Area of Emphasis: Applied Research

Part 2. Empowerment Self Defense (ESD) as a Primary Prevention Program
Michelle Johnson Blimes, MA, Be Empowered LLC.

Audience: Beginning: Appropriate for all attendees as an introduction to a topic

This presentation will propose ESD as an effective primary prevention strategy that has been shown to increase feelings of self-efficacy and confidence, improve risk assessment, reduce the risk of sexual assault. The presenter will discuss the mission and philosophy behind ESD, as well as, explain the format and content of an ESD program. The presentation will include successful case studies. Participants will be encouraged to explore ESD and consider adding it to their repertoire of interventions.

Objectives: As a result of this session, participants will be able to:
1) Identify practical applications of empowerment self-defense as a primary prevention program.
2) Apply ESD skills to current prevention practices.
3) Compare ESD with other self-defense and violence prevention programs.

Area of Emphasis: Advocacy/Policy/Prevention, Evidence-Based/Promising Practices, Gender Issues, Prevention

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child * Psychologists, MFTs, Counselors, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child & Adult Maltreatment, Child Custody Evaluators

A9. Trauma Informed Practices to Address Intimate Partner Violence

Part I. Building Trauma Informed Volunteers
Carrie McManus, Sagesse Domestic Violence Prevention Society

Audience: Beginning: Appropriate for all attendees as an introduction to a topic

At Sagesse we support 200 volunteers as our front line staff who deliver 400 peer support group sessions over the course of a year. In the volunteer capacity building program, volunteers engage in knowledge gathering, dialogue, and specific activities to begin to recognize and respond to trauma. Our program staff curate environments where trauma awareness is openly discussed and examined. Volunteers explore possible trauma coping mechanisms, viewing physical space through a trauma lens, stigma and shame, ways to support, and the limitations of trauma-informed practice. Through the
process of capacity building, volunteers feel empowered to manage their own trauma responses, and in turn empower group participants to do the same. Over the course of this workshop participants will be able to understand the practical steps of a trauma-informed model for building capacity with volunteers. Participants of the workshop will develop an understanding of the ripple effects of our trauma-informed program, such as overall agency health, empathic interpersonal and community response, and increased resiliency. In addition, workshop participants will be able to identify how trauma-informed practice supports the empowerment of volunteers, clients, staff, and the community. Using examples from our own successes and challenges, the presentation will examine how our belief in a trauma-informed capacity building program strengthens the abilities of volunteers.

**Objectives: As a result of this session, participants will be able to:**
1) Identify trauma informed practice principles and how to put them into practice.
2) Describe the values of peer programming for individuals impacted by trauma and domestic violence.
3) Implement trauma informed practice into their volunteer programs.

**Area of Emphasis:** Applied Research, Basic/Student Level Training, Evidence-Based/Promising Practices, Gender Issues

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**Part II. Collective Impact and Trauma Informed Practice**

*Carrie McManus, Sagesse Domestic Violence Prevention Society*

**Audience:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Domestic violence is a wicked problem that requires large scale social change to address and eradicate it. Trauma informed practice has become the most prominent model of practice used within domestic violence service delivery but is not often explored as a model for engaging within our sector or as professionals. This presentation will share the experiences of using a collective impact model to achieve largescale change through shared measurement and trauma informed practice. We will explore the pre-existing conditions necessary for social change within a collective impact model including shared measurement. Having recently completed a shared measurement project within trauma informed practice, we will share the results of this project and the implications for our domestic violence sector and delivery of trauma informed practice trainings and learning opportunities. We will also explore a research project within the collective addressing trauma within service providers and how, using a collective impact model, we can provide trauma informed work places to service providers often struggling with their own experiences of trauma and domestic violence. This presentation will present collective impact within a trauma informed lens as a key tool to affecting large scale change and working towards eradicating domestic violence.

**Objectives: As a result of this session, participants will be able to:**
1) Describe pre-existing conditions for collective impact.
2) Explore mechanism for trauma informed practice addressing both clients and service providers.
3) Identify how collective impact can address trauma within communities.

**Area of Emphasis:** Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices, Gender Issues

**Continuing Education: Approved up to 1.5 CE credits for:** *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

**IVAT Specialty Certifications: Approved to 1.5 Hours for:** Trauma Care and Domestic Violence Offender Treatment

**A10. - Spiritual Care for Suicidal Veterans: Pilot Study of the Impact on Substance Abuse, Treatment Compliance, and**
Suicide Prevention  
Marsha Amoy Fraser, PhD, University of Central Florida

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

Born out of the call of the Mental Health Collaborative of the Department of Defense and the Veterans Administration to incorporate military and veteran chaplains in the care of Veterans, this pilot study examined the utility of a spirituality-based intervention, CORE, for increasing treatment compliance, reducing substance use, and preventing suicide. The study was a retrospective chart review of the electronic medical records of a purposive sample consisted of 61 Veterans who were hospitalized for suicidality.

Objectives: As a result of this session, participants will be able to:
1) Review historical/current role of chaplaincy in the Veterans Administration.
2) Review literature on spirituality-based treatments for mental health issues (substance abuse, post-traumatic stress disorder, and suicide).
3) Introduce CORE, a spirituality-based intervention, and its effects.

Area of Emphasis: Cultural Diversity/Trauma, Faith/Spirituality, Substance Abuse/Addictions, Other – Veterans

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence, Substance Abuse, and Suicide Prevention* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care

A12. In Their Own Words – Abuse in Later Life - “When He Shot Me (Annie)”
Paul Needham, MSW, National Adult Protective Services Administration; Laurie Jicha, MSW, Adult Protective and Community Services

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

This workshop is designed to shine a light on Adult Abuse in Later Life, a subject or portion of our society that is often ignored, misunderstood, or not believed to even exist; resulting in an inadequate national response to a very special and vulnerable population in our country and internationally; the elderly. The title of the workshop is: “In Their Own Words-Abuse in Later Life” When He Shot Me (Annie) and will focus on the very real case of Annie. The workshop design will be a very interactive multidisciplinary approach. Domestic abuse is a pattern of coercive tactics that abusers us to gain and maintain power and control over their victims. Abusers believe they are entitled to use any method necessary to control their victims. Domestic violence and sexual abuse in later life are subsets of elder abuse. The World Health Organization defines elder abuse as “a single, or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust, which causes harm or distress to an older person.” This interactive workshop will detail and inform the different forms of abuse, what causes domestic violence in later life, and victim (survivor) dynamics of domestic abuse in later life. The hope is to improve the awareness and response to adult abuse in later life.

Objectives: As a result of this session, participants will be able to:
1) Recognize and acknowledge power and control dynamics in abuse in later life cases.
2) Affirm victims’ strengths, survival skills, and courage.
3) Use an approach that recognizes safety issues and potential services.
4) Promote an interdisciplinary approach.

Area of Emphasis: Advocacy/Policy/Prevention, Basic/Student Level Training, Evidence-Based/Promising Practices
B1. Treatment Dynamics in Children and Youth with Problematic Sexual Behavior
Meghan Fagundes, PhD, Institute on Violence, Abuse and Trauma

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

Problematic sexual behavior problems (PSB) are found in adolescents and children. Although these behaviors may appear to be similar to those of adult offenders, there are qualitative differences that lead us to strongly caution against viewing youth through the same lens. Children are in their formative years and rehabilitation is the best response to this problematic and, at times, illegal behavior. Youth who have PSB are first and foremost children and adolescents. Their path to problematic behavior was formed by a combination of life circumstances and individual factors that contributed to challenges following rules about sexual behavior, respect, and safety. Family members, peers, and other community members have fundamental influence on youth’s growth, development, decision-making, and behavior. To successfully address youth PSB and promote healthy development, professionals must help youths and their families build social bonds, positive supports, and peer groups. This presentation will provide an overview in the identification of PSB, causes, and treatment needs for the youth and family to promote healthy family healing.

Objectives: As a result of this session, participants will be able to:
1) Describe two ways of identifying sexual behavior problems in youth.
2) Identify the impact of social media and internet availability on sexual development of youth.
3) Name two essential treatment components to address PSB.
4) List three ways caregivers can promote safety.

Area of Emphasis: Advanced Clinical Training, Advocacy/Policy/Prevention, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices, Prevention

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, and Child & Adult Maltreatment

B2. TIPS for Tuning In: Building Resilience in your Children
Jennifer Jorgenson, MSW, University of Vermont, VT Child Welfare Training Partnership; Jessica Strolin-Goltzman, PhD, University of Vermont; Amy Bielawski-Branch, MA, University of Vermont, VT Child Welfare Training Partnership; Nicole Breslend, PhD, University of Vermont

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Children and youth involved in the foster care system are at high risk for social, emotional, and behavioral challenges. Birth parents, teachers, mentors, and foster and kinship caregivers need access to concrete, trauma-informed practice and strategies (TIPS) to effectively support the trauma-related needs of youth in their care. This workshop will provide research-based parenting techniques focused on building resilience for all children including those who have experienced...
adverse childhood experience (trauma). This will be a hands-on workshop where you will learn 3 concrete skills that you can practice at home and/or in your work with children and youth. Participants will also leave with a list of resources. This workshop aims to provide trauma informed practices and strategies (TIPS) to help parents, caregivers, teachers, mentors, and other professionals Tune In to children and youth, enhance resilience, and minimize conflict/challenging behaviors, and providing in-class practice of trauma informed parenting skills. Research findings from this curriculum show significant and positive changes pre–to post-training on a number of dimensions that have been correlated with placement stability for children including knowledge of trauma, parenting self-efficacy, and child behavior outcomes.

Objectives: As a result of this session, participants will be able to:
1) Learn specific trauma informed parenting strategies and skills to support children who have experienced trauma.
2) Practice 3 trauma informed strategies for engaging children and youth through specific tuning in skills.
3) Identify specific skills related to “changing the station”.

Area of Emphasis: Advanced Clinical Training/ Applied Research/ Cultural Diversity/ Trauma/ Other: caregiving for children and youth with trauma histories

Continuing Education: Approved up to 1.5 CE credits for: *applicable Child Abuse* Psychologists, MFTs, Counselors, Victim Advocates
IVAT Specialty Certifications: Approved to 1.5 Hours for: Child Custody Evaluators, Child & Adult Maltreatment

B3 – Historical Trauma Power and Control Wheel: Applications in Clinical Practice
Gimel Rogers, PsyD, Institute on Violence, Abuse and Trauma

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

This training will discuss the power and control wheel of historical trauma. The wheel is a guide to assist mental health professionals when working with ethnically diverse populations to understand, explore and process the dynamic of power and control within the context of historical trauma. In addition, the importance of utilizing this wheel in the conceptualization of the presenting problem and how to apply it in clinical practice will be discussed.

Objectives: As a result of this session, participants will be able to:
1) Describe the effects Slavery, Holocaust, Trail of Tears, Japanese Internment Camps, and Armenian Genocide had on those populations.
2) Define various constructs tied to historical trauma (e.g., cultural paranoia, epigenetic, etc.).
3) Differentiate between the different categories of power and control of historical trauma.
4) Demonstrate knowledge of the categories of power and control of historical trauma and the need to include in the conceptualization of the presenting problems.

Area of Emphasis: Controversial/critical issues/difficult dialogues, Cultural diversity/trauma

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

B4. Munchausen Syndrome by Proxy (MSBP) and the APSAC Guidelines
Randall Alexander, MD, PhD, University of Florida
Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Munchausen syndrome by proxy is an unusual form of child abuse in which the caregiver deliberately deceives medical personnel to portray a child as having a medical condition. This furthers the caregiver’s goal, not the welfare of the child. This presentation will include definitional issues, demographics, examples, and discussion about treatment.

Objectives: As a result of this session, participants will be able to:
1) List diagnostic criteria for MSBP Describe several ways in which MSBP presents.
2) Identify the likelihoods that intervention will work to keep the child safe with the abuser.

Area of Emphasis: Advanced Clinical Training, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Attorneys
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, and Child & Adult Maltreatment

B5. Practical Suggestions for Addressing Domestic Violence in Family Court Cases
Viola Vaughan-Eden PhD, MJ, MSW, Norfolk State University, National Partnership to End Interpersonal Violence Across the Lifespan

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

According to the CDC, approximately 1 in 4 women and 1 in 10 men experience domestic/intimate partner violence (DV/IPV), and most suffer in silence. However, when DV/IPV is alleged in family court, the judicial system often relies on mental health professionals to address the complex issues faced by these families. This session will discuss approaches for non-attorneys to prepare for domestic violence hearings including managing collateral contacts, child custody evaluations, and treatment recommendations. Participants will be provided key points for report writing and testimony as well as learn strategies for improving family safety and well-being.

Objectives: As a result of this session, participants will be able to:
1) Apply key points to evaluation and report writing in DV cases.
2) Demonstrate proactive strategies for testifying in family court.
3) Utilize approaches for improving family safety and well-being.

Area of Emphasis: Advanced Clinical Training, Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma, Gender Issues

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Domestic Violence Offender Treatment

B6. Building A Legacy of Safety: Smart Strategies for Sexual Abuse Prevention
Christy Keating, JD, Savvy Parents Safe Kids
**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

A child's safety is an adult's job and protecting children from sexual abuse is one of the most important jobs for every professional working with children. This workshop will help professionals build a legacy of safety for children by teaching smart strategies for providing the children in their care with the skills needed to build a foundation of safety that will last a lifetime. Attendees will learn why prevention education for caregivers is critical in reducing a child's risk for being a target of predators, the do's and don'ts of mandatory reporting, how to identify "red flag behaviors" in adults and other children, how to respond to parents' concerns about safety, how to keep staff safe as well as the children in your care, how to integrate safety into your curriculum, and much, much more. Attendees will walk away with easy to implement strategies that make safety lessons fun, even for young children.

**Objectives: As a result of this session, participants will be able to:**
1) Recognize and describe "red flag behaviors" in adults and children.
2) Identify how to integrate smart safety lessons into their curriculum and feel more confident in doing so.
3) Develop a set of easy-to-implement safety and prevention skills, tips, and tools to keep children safe.

**Area of Emphasis:** Advocacy/Policy/Prevention, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices, Prevention

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, Child & Adult Maltreatment

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**B7. The State v Trey Allen Cartwright: Lessons Learned in a Complex Trafficking Investigation**

*Jason Lundquist, MA, Waco Police Department*

**Audience:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

In 2016, a brave victim came forward to report years of abuse by a family member. This presentation will discuss the complex investigation which resulted from that outcry, the importance of a victim centered investigation, and techniques aimed at successful outcomes. Additional unreported victims were discovered, 3 people were arrested for abusing children, and Trey Cartwright ultimately pleaded guilty to continuous sexual abuse of a child.

**Objectives: As a result of this session, participants will be able to:**
1) Understand how a victim centered response can aid in a trafficking investigation.
2) Investigative techniques related to complex human trafficking investigations.
3) Understand the importance of a victim centered investigation.

**Area of Emphasis:** Advocacy/Policy/Prevention, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices, Substance Abuse/Addictions

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Ethics* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Domestic Violence Offender Treatment, and Child & Adult Maltreatment
B8. The Role of Attachment in the Trauma of Clergy Sexual Abuse
Suzanne Hollman, PsyD, The Institute for the Psychological Sciences

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

The clergy sex abuse scandal in the Catholic Church has proven to be traumatic in a myriad of ways to the victims, their families, and allies, including the therapists tasked to work with survivors. In this paper I explore the incidence of clergy abuse, the trauma experienced by the survivors in terms of this abuse, but also the secondary trauma located in the inadequate response from the Church. I examine the role that Attachment theory can play in the treatment and mitigation of the trauma response from a relational perspective. I argue that the traumatic internalization of authority figures exacerbates the effects of the trauma, and that the fraught relationship with the Church itself is experienced as a traumatic betrayal that requires mourning and working through. Research pointing toward the role of insecure parent-child attachment as it applies to unresolved relational trauma is connected to the relational trauma inherent in sexual abuse that occurs within the clerical setting. Implications for intervention and treatment is discussed.

Objectives: As a result of this session, participants will be able to:
1) Review the scope of the clergy sexual abuse crisis.
2) Delineate the subtypes of trauma specific to the sexual abuse crisis: vicarious trauma, betrayal trauma; vicarious trauma, and institutional trauma.
3) Explore the role of attachment theory in the conceptualization and treatment of trauma.

Area of Emphasis: Advocacy/Policy/Prevention/ Faith/Spirituality

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence and Child Abuse*
Psychologists, MFTs, Counselors, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, and Child and Adult Maltreatment

B9. Historical Loss Scale and Native Hawaiians: Exploring a Historical Trauma-Informed Suicide Prevention
Antonia Alvarez, PhD, LMSW, Portland State University School of Social Work

Audience: Beginning: Appropriate for all attendees as an introduction to a topic.

This study explores the applicability of a historical trauma-informed framework to understand Native Hawaiian and LGBTQ Native Hawaiian experiences with suicide. Through the crossover implementation of a widely used quantitative instrument, the Historical Loss Scale, this study makes direct connections between historical losses survived by Native Hawaiians and mental health. This project utilizes a qualitative dominant crossover mixed analysis (Frels & Onwuegbuzie, 2013), which is a technique used in mixed research for a number of purposes, including the reduction, comparison, and integration of qualitative and quantitative data (Johnson, Turner, Tashakkori & Teddlie, 2003). Specifically, the qualitative data from a phenomenology was analyzed through the application of the Historical Loss Scale (Whitbeck et al., 2004) as theory-driven codes. The HLS assesses the prevalence and urgency of thoughts of historical losses (Whitbeck et al., 2004) and empirically demonstrates the connections between historical losses and associated symptoms. The HLS consists of twelve items (A-L) that capture thoughts related to historical losses, including loss of land, loss of language, and loss of culture. Quantitative results identifying salient items from the Historical Loss Scale (HLS) will be presented and compared with prevalence findings from the original (HLS) study. These include, the loss of our land, the loss of our language, and losing traditional spiritual ways. Other items that were not endorsed by Native Hawaiians or LGBTQ Native Hawaiians will also be presented. Qualitative examples from the Native Hawaiian narratives will provide additional context for the endorsement of the scale items. Unique descriptions of historical losses that emerged from the
data through the theory-driven coding will be presented, as well as recommendations for scale-development with Native Hawaiian communities, and for the development of suicide prevention/intervention efforts moving forward.

**Objectives: As a result of this session, participants will be able to:**
1) Explore the impacts of historical and ongoing colonial trauma on the health of Native Hawaiians.
2) Relevance of the Historical Loss Scale on capturing colonization experiences described by Native Hawaiians.
3) Implications of historical trauma framework to inform suicide prevention with Native Hawaiians.

**Area of Emphasis:** Applied Research/ Cultural Diversity/Trauma/ Prevention

**Continuing Education: Approved up to 1.5 CE credits for:** *applicable to Substance Abuse, and Suicide Prevention* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications: Approved to 1.5 Hours for:** Trauma Care

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**B11. Appropriate Interventions and Investigative Techniques by First Responders in Traumatic Situation**

*Michael Hertica, MS, Independent Consultant*

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

Responding to domestic violence, sexual assault or similarly violent calls is often different than responding to other types of calls. There are significant safety issues, high emotions and often, a confusing relationship between victim and offender. An inappropriate response can cause further harm to the victim(s) and can damage the investigation and prosecution of the case. This workshop will provide information on effective and appropriate interactions with the victim, no matter how the victim presents themselves to the responder. It will also provide an understanding on why victims stay in harmful relationships and provide interviewing skills. It will also inform responders on the differing types of offenders and how to interview them. Finally, it will provide information on specific investigation techniques in these difficult cases.

**Objectives: As a result of this session, participants will be able to:**
1) Apply appropriate interviewing techniques in an emotionally volatile situation.
2) Apply effective interviewing techniques in emotionally volatile situations.
3) Apply effective investigative techniques to further the ability to prosecute.

**Area of Emphasis:** Basic/Student Level Training/ Other: Criminal Justice and Social Service

**Continuing Education: Approved up to 1.5 CE credits for:** *applicable to Domestic Violence and Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications: Approved to 1.5 Hours for:** Trauma Care

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**B12. Rising Above the Scars: One Woman’s Triumphant Defeat over Unseen, Generational Social Ills and Cultural Norms of Child Abuse**

*Johnnetta McSwain, PhD, MSW, Clark Atlanta University*

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

Culture plays a major role in shaping our identity; thus, making us a product of our environment. It’s learned behavior that
is passed down to us from generation to generation. Culture, as defined by the Webster’s dictionary (2007), is the integrated pattern of human knowledge, belief and behavior that depends upon man’s capacity for learning and transmitting knowledge to succeeding generations. It is also the customary beliefs, social forms and material traits of a racial, religious or social group. "Culture encompasses religion, food, what we wear, how we wear it, our language, marriage, music, what we believe is right or wrong, how we sit at the table, how we greet visitors, how we behave with loved ones, and a million other things," Cristina De Rossi, an anthropologist at Barnet and Southgate College in London, told Live Science. In this workshop we will explore how the long term adverse effects of social ills and cultural norms, for example, religion, social beliefs, unwanted pregnancy, high school drop-out, public housing, food stamps, single parenting, alcoholism, poverty, socioeconomics, intimate partner violence, environment and generational curses played a dire role in the child sexual, emotional and physical abuse and self-destruction in her family. Participants will view the Emmy Award winning documentary, “The Road Beyond Abuse”, directed and produced by Georgia Public Broadcasting (GPB) and narrated by Jane Fonda. Subsequently, participants will be introduced to the model that inspired the documentary, “The 12 Step Self Awareness Model (SAM)”, created by Johnnetta McSwain. This model will provide participants with a step by step blueprint on how to break cycles of cultural childhood sexual abuse, poverty, trauma and neglect and the ability to beat ALL the odds. Participants will learn how to teach clients self-discovery, forgiveness, acceptance and release of past traumatic histories, and self-sustaining skills to grow and succeed.

Objectives: As a result of this session, participants will be able to:
1) Learn how unseen cultural ills play a major role in child abuse and re-victimization.
2) Learn how culture plays a major role in shaping our identity, values, beliefs, religion, behavior and language.
3) Learn the adverse effects of child abuse.

Area of Emphasis: Advanced Clinical Training, Advocacy/Policy/Prevention, Applied Research, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma, Evidence-Based/Promising Practices, Faith/Spirituality, Gender Issues, Prevention, Substance Abuse/Addictions

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence and Child Abuse*
Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Domestic Violence Offender Treatment, Child & Adult Maltreatment

C SESSIONS: 3:30 pm – 5:00 pm (Select One)

C1. Assessing and Implementing Protective Factors that Support Resilience Following Trauma with Multi-Faceted Interventions
*Machelle Madsen Thompson, PhD, Florida State University*

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

The workshop will teach practitioners how to understand, assess, and implement the protective factors that lead to resilience in youths following violence and trauma. Resilience is currently a broad concept that can be difficult to implement with those who have experienced trauma. This training will teach attendees how to assess the protective factors leading to resilience. Then, implementation and current research-supported interventions across individual and group settings will be addressed with specific examples and activities to allow practitioners across disciplines to use resilience interventions and resilience informed care in their agencies or schools.

Objectives: As a result of this session, participants will be able to:
1) Learn how to assess the protective factors leading to resilience.
2) Identify ways to recognize and implement protective factors across individual and group interventions.
3) Participants will identify adaptations to resilience intervention with underserved communities.

**Area of Emphasis:** Advanced Clinical Training/ Applied Research/ Cultural Diversity/Trauma/ Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

C2. Pain in Life is Mandatory, but Suffering is Optional: Happy88 Tools to End Suffering

*Marissa Pei, PhD, Peace In & Peace Out*

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

If the statistic is true, that 7 out of 10 of us have had childhood trauma, and we are the majority, then why is it that we think that we are damaged goods, that there’s something wrong with us, that we’ll never be good enough, that we will never catch up to those who have had loving homes to grow up in? Well that is BS - a belief system that has kept us suffering from our past and it’s time that we realized that pain in life is mandatory, but suffering is optional. In this workshop, participants will experience exercises that help embody the truth, that what happened in the past didn’t happen to us but happened for us. With a new belief system and using happy88 tools as part of our blissipline, we will rise from the ashes, and use past pain to alchemize us into greater good. In fact, those of us who have been through the fire are actually in a unique position to be a Beneficial Presence on the Planet, because we know suffering and can help those still suffering by holding a flashlight to move towards the Light of Life.

**Objectives: As a result of this session, participants will be able to:**
1) Identify answers to the question "Who am I" and "What do I Want".
2) Analyze cognitive tools to help soothe the critical voices in our head, which are louder when there has been past trauma.
3) Apply moving meditation practice promoting inner peace.

**Area of Emphasis:** Cultural Diversity/Trauma, Evidence-Based/Promising Practices, Faith/Spirituality

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

C3. Digital and Social Media Evidence for Investigators

*Jason Lundquist, MA, Waco Police Department*

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

Digital evidence has been described as the "new DNA." It is a treasure trove for investigators but is often overlooked. Sergeant Lundquist will discuss how to identify, preserve and retrieve digital evidence from a variety of sources. Participants will learn about resources and techniques, applicable statutes, and digital officer safety concerns. Information in this presentation will benefit any investigator and give them a basic understanding of the topic that they can use to build their expertise.
Objectives: As a result of this session, participants will be able to:
1) Learn about digital evidence, its investigative value, and associated statutes.
2) Learn social media search and investigative techniques along with basic collection methods.
3) Learn about available open source resources and digital officer safety concerns.

Area of Emphasis: basic/student level training, evidence-based/promising practices

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, and Child & Adult Maltreatment

C5. Beyond Risk Assessment: Evaluating Cognitive Change in Batterer Intervention Participants with Corresponding Increases in Retention and Reduced Violence
Nada Yorke, MSW, Yorke Consulting

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Risk Assessments are increasingly being used in batterer intervention programming within the criminal justice system to determine who should receive services and how extensively; but once the participant is in the program how do we know we are making a difference? Research continues to show high drop-out rates and reoffending are common reports, and denial and minimization of violence is a hallmark of many male perpetrators of intimate partner violence. This workshop will provide a review of a measurement scale (RPRS) modified from the Abusive Behavior Inventory, to determine if the male participants in their batterer intervention program are experiencing objective reductions in denial and minimization of their abusive behaviors. A trauma-informed program design, utilizing evidence-based clinical interventions will be reviewed with the objective measurement results and recidivism outcomes over a 5-year period. The program has been implemented in a maximum-security prison and a community-based organization with promising outcomes for increased retention and reduced violence where applicable. The community-based pilot project had 90% of the participants still attending after 90-days; at 18-months post-graduation there were zero new arrests for violence among graduates versus 30% for non-graduates. Five years post-graduation the re-arrest rate was 15% among graduates. Methodology and program design will be reviewed, as well as the challenges and benefits of implementing these practices.

Objectives: As a result of this session, participants will be able to:
1) Assess evidence-informed interventions used to increase client engagement & retention rates.
2) Evaluate RPRS, an objective measurement tool, to assess potential for use in their BIP’s Contrast “confrontation” vs “empowerment” techniques.
3) Understand these techniques to promote personal responsibility and victim empathy.

Area of Emphasis: Applied Research, Evidence-Based/Promising Practices

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence and Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, Domestic Violence Offender Treatment, and Child & Adult Maltreatment
C6. Adolescent Vaping: Impacts on Behavior and Learning
Jason Kuttner, MA, AFSC Magellan Federal/ASACS Hawaii

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

Adolescent Vaping has reached epidemic proportions in just a few short years. An examination of why and how teens vape as well as latest finding on health effects including mental health and addiction to nicotine and THC will be presented. Best practice clinical intervention strategies for working with adolescent vape users of nicotine and THC will be shared and discussed. Additionally, effective prevention education and school and community intervention strategies will be discussed.

**Objectives: As a result of this session, participants will be able to:**
1) Analyze the scope of adolescent vaping of nicotine and THC.
2) Identify the health effects of vaping including mental health, addiction, and impacts on learning and school.
3) Apply clinical strategies for most effectively treating adolescents who vape nicotine and THC.

**Area of Emphasis:** Substance Abuse/Addictions

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Substance Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

C7. Conducting Offender Focused Human Trafficking Operations to Recover Victims
Joseph Scaramucci, McLennan County Sheriff’s Office; Rochelle Keyhan, JD, Collective Liberty

**Audience:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This is designed to give Human Trafficking Investigators an understanding of psychological effects of Human Trafficking, so more Victim Centered, Offender Focused Investigations occur, ensuring the victims needs are met, and aiming to conduct investigations and prosecutions of offenders without victim cooperation. Topics discussed will be stages of victimization, causes of victimization, trauma in the brain, learned helplessness, and how to approach these investigations with the best interest of the victim’s overall well being taken into account. Then shifting their investigations from the victim, to the offender to ensure the victim is not even necessary for investigative and purposes of prosecution. Utilizing alternative criminal charges, and criminal charges that can be brought against traffickers, without the need for victim assistance will be discussed, in order to prevent the victim from the burden of testifying.

**Objectives: As a result of this session, participants will be able to:**
1) Identify why victim cooperation is not likely to occur.
2) Identify and utilize methods utilizing minimal man-power, and limited funding to locate victims.
3) Identify alternative criminal charges.

**Area of Emphasis:** Advocacy/Policy/Prevention, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Domestic Violence and Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys

**IVAT Specialty Certifications: Approved to 1.5 Hours for:** Trauma Care, Child Custody Evaluators, and Child & Adult Maltreatment
C8 - Best Practices in Forensic Interviews with Children
Gimel Rogers, PsyD, Institute on Violence, Abuse and Trauma

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic

Forensic interviewing of child victims is a difficult process particularly when the child is a toddler or has a disability. Due to the difficult nature, it is also highly controversial with many criticisms. This training will define child abuse and child maltreatment and when forensic interviewing becomes necessary. It will also cover the differences between dependency and child custody proceedings and the impact of forensic interviewing on these proceedings. Utilizing case studies, participants will be able to describe the standards of practice and identify when standards of practice are and are not being met.

**Objectives:** As a result of this session, participants will be able to:
1) Describe the difference between child abuse and child maltreatment.
2) Describe dependency proceedings and child custody proceedings as it relates to child abuse and maltreatment.
3) Define the standard practices of forensic interviewing for child sexual abuse cases.

**Area of Emphasis:** Basic/student level training

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Domestic Violence* * Psychologists, MFTs, Counselors, Victim Advocates
**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, and Child & Adult Maltreatment

C9. Ho’a Hou: The Re-awakening of a Healing Practice in Jeopardy
Lama Chang, ‘Aha Kane Foundation for the Advancement of Native Hawaiian Males; Keola Chan, ‘Aha Kāne Foundation for the Advancement of Native Hawaiian Males; Malina Kaulukukui, MSW, ‘Aha Kāne; Brian Kamana‘o Kohatsu, MSW, Kaua‘i Community College

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic

This presentation describes a three year federally funded initiative to reawaken and perpetuate the revered traditional cultural healing practice of ho’oponopono. The word literally means, “To put to right; to put in order or shape, correct, revise, make orderly or neat” (Pukui, Haertig, & Lee, 1972). In terms of the practice itself, ho’oponopono refers to restoring family harmony in which relationships were set right (ho’oponopono) through a set of structured actions to facilitate authentic discussions, and where indicated, repentance, forgiveness and mutual restitution. In its purist form, ho’oponopono is a holistic, collectivist process that is consistent with the traditional Hawaiian worldview. The ho’oponopono initiative is intended to increase the number of trained practitioners state-wide in order to help create healthier Native Hawaiian families, which, in turn, strengthen Native Hawaiian communities. The ultimate hope is to have a ho’oponopono practitioner in every family. This initiative was spearheaded by ‘Aha Kāne, a 501©3 whose mission is to strengthen the Native Hawaiian community by nurturing and perpetuating traditional kāne (male) roles and responsibilities that contribute to the physical, mental, spiritual and social well-being of individuals, their families and communities.

**Objectives:** As a result of this session, participants will be able to:
1) Identify a minimum of three differences between Western and Native Hawaiian methodologies of family conferencing/intervention.
2) Identify the principal steps in the traditional ho’oponopono process.
3) Distinguish between traditional and alternative methodologies of ho’oponopono.
Area of Emphasis: Cultural Diversity/Trauma, Faith/Spirituality, Prevention

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates

Dan Willis, FBI National Academy Associates

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Our communities are only as safe as the health and wellness of the first responders protecting them. When first responders suffer from the daily traumas of their job without understanding trauma and knowing ways to heal, then they are vulnerable to experience becoming calloused, uncaring, jaded, negative, frustrated, burned out,.uninterested in serving and helping others, unhealthy, and unable to provide the ethical and professional services that the public demands and needs. The daily experience of traumas erode resiliency and can cripple any first responder. Bulletproof Spirit provides an understanding of trauma and how it can potentially injure a first responder’s brain (causing PTSD) or kill them (suicide). It provides 10 proactive wellness strategies to strengthen resiliency, maintain motivation and professional services, and to prevent their heart from suffocating so that they can continue to serve with purposed compassion to make a meaningful difference in their agencies, with their colleagues, and within their communities. It provides critical information on EMDR and how first responders can heal from trauma. The purpose of human life is to serve and to have the will and compassion to help others. Those who will be truly happy and well are those who have discovered how to serve with compassion and purpose beyond their self-interests.

Objectives: As a result of this session, participants will be able to:
1) Counteract the effects of traumas that can cause PTSD or suicide.
2) Explain EMDR and how to find certified therapists.
3) Apply 10 proactive wellness strategies to strengthen resiliency, heal from traumas, and enhance professional, ethical, and compassionate service.

Area of Emphasis: Cultural Diversity/Trauma, Evidence-Based/Promising Practices, Faith/Spirituality, Prevention, Substance Abuse/Addictions, Other -Healing from traumas experienced by first responders

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

C12. Trials and Tribulations of Trauma-Informed Care: Two Agencies’ Stories of Engaging Rules Reduction and Voluntary Services Practices and How to Stay the Course (yes, we have answers for how you can do it too!)
Sophora Acheson, MFT, Ruby’s Place; Rachel Cox, MSW, Community Against Violence

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

The purpose of our presentation is to discuss the trials and tribulations of agencies that have attempted to be trauma informed, client centered and have voluntary services for their clients. We will look at the history and buy in of non-profits to the trauma informed model and the lack of a road map on how to do this in practical everyday work. We will show what a client driven model looks like in real practice, share our lessons and experience on how to weave an agencies service model into a successful and true trauma informed foundation. We will take a dive into what power dynamics look like in an agency and how this contributes to low client resilience and healing. We will tell the stories of two agencies and their...
journey through these service model changes. Both CAV and RP took the leap the faith to be vulnerable and pull back the
curtain to dig into their broken service models, what it revealed was a new way of thinking, a new way of providing services
and a significant increase in positive client experience and healing. Community Against Violence specifically will talk about
their experience implementing rules reduction practices and how they have identified the many structural supports
needed to ensure that agencies are truly trauma informed. Ruby’s Place will specifically talk about how they have been
implementing rules reduction and engaging structural supports for the past year and a half and the promising action
research results indicating the success of this model. Together as a group, we will have an open honest discussion on how
unintentional power dynamics exist in our agencies and what is needed to truly be trauma informed and stay the course.

Objectives: As a result of this session, participants will be able to:
1) Identify what a client driven, trauma informed, voluntary services shelter model logistically looks like.
2) List what challenges you can expect with staff and clients when implementing this model and how to navigate them.
3) Identify what resources are needed to implement and follow through with this model.

Evidence-Based/Promising Practices

Continuing Education: Approved up to 1.5 CE credits for: MFTs, Counselors, Domestic Violence Offender Treatment
Providers, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, and Child & Adult Maltreatment

Thursday April 16th, 2020

D SESSIONS: 8:30 am – 10:00 am (Select one)

D1. Trauma Informed Instruction in the Special Education Setting: Identification and Interventions for Students
and Teachers
Michele DeBerry, MS, Oklahoma State Department of Education; Jenae Tindell, MS, Oklahoma State Department of
Education

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

Students with disabilities experience childhood trauma not unlike neurotypical children. For some students with
disabilities, traumatic events in life further impacts their ability to form relationships, learn and display appropriate
classroom behavior, as well as gain academic skills. Teachers of these students must provide specially designed instruction
in the areas of social emotional learning, academics, self-regulation, as well as be specifically trained in trauma-informed
care, crisis prevention and de-escalation practices. Educators who work with students with disabilities report experiencing
significant vicarious trauma, compassion fatigue, and are more likely to consider leaving the field of education. Educators
must be supported socially, emotionally and with ongoing resources in order to minimize the long-term effects of vicarious
trauma.

Objectives: As a result of this session, participants will be able to:
1) Describe ACEs of students with disabilities in the education setting, the implications of trauma on student behavior
and academic instruction.
2) Utilize appropriate trauma informed classroom practices in the special education setting.
3) Support teachers experiencing traumatic events in the class.

Area of Emphasis: Advocacy/Policy/Prevention, Basic/Student Level Training, Cultural Diversity/Trauma, Other - Trauma
in the Special Education Setting
D2. Building Trauma-Informed-Responsive Community Schools and the Community Focused on Systems Change Through Compassionate Engagement

Godwin Higa, MA, Alliant University Department of Psychology, Consultant

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

Trauma-informed responsive schools means understanding the neurobiological impact of trauma • Trauma induces Fight or Flight response • Fear and trauma responses activate limbic system of brain that governs arousal and emotional reactivity • Ability to access pre-frontal cortex which governs abstract thought and problem-solving is compromised in children experiencing trauma • Toxic stress inhibits learning • There are long-term consequences on brain development. Teachers and administrators are encouraged to seek knowledge and practice Trauma-Informed Care.

Objectives: As a result of this session, participants will be able to:
1) Describe the trauma-informed care in a Trauma Responsive School.
2) Describe trauma effects on learning and behaviors.
3) Explain executive functions: planning and problem-solving.
4) Evaluate attentiveness to classroom task.

Area of Emphasis: Advocacy/Policy/Prevention, Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma, Evidence-Based/Promising Practices, Prevention, Other - Effects of Trauma Across a Life Span

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Advocates
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

D3. Justice Systems from the Child’s Perspective: Supporting Child Victims and Witnesses

Kathryn Ford, MSW, Center for Court Innovation; Shashika Peeligama, MSW, Center for Court Innovation

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

The Child Witness Materials Development Project is a Center for Court Innovation initiative, funded by the Office for Victims of Crime. Through this project, a package of interactive support materials for children and caregivers has been created, to facilitate effective and trauma-informed support for children involved in state, federal and tribal court systems as victims and witnesses of crime. A multidisciplinary group of national experts contributed to the design and development of these materials. In this workshop, participants will learn more about how children experience the child welfare and criminal justice systems; best practices in educating, preparing and supporting children through this experience; and how court support materials can be used to help children feel more informed and empowered and less distressed as they navigate these systems. Copies of the materials will be provided to workshop participants, as well as instructions for accessing the materials online in the future.

Objectives: As a result of this session, participants will be able to:
1) Understand how children experience the criminal justice and child welfare systems.
2) Learn about best practices for supporting children involved with the justice system.
3) Learn how to use child witness materials in their role.
Area of Emphasis: Advanced Clinical Training, Advocacy/Policy/Prevention, Evidence-Based/Promising Practices

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, and Child & Adult Maltreatment

D4. Implicit Bias in the Manifestation of Trauma
Suganya Sockalingam, PhD, Change Matrix, LLC; Rachele Espiritu, PhD, Change Matrix, LLC

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

Implicit bias refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner. Everyone has them and becoming mindful of how implicit and explicit biases impact our work with others is important. This workshop explores the dynamics of implicit bias and its impact on service and supports provision in mental health spaces. Implicit biases affect how service providers perceive and respond to people. Bias can lead to unfair differences in the expectations we hold of those we serve, ways in which we interact with them, and the re-traumatization that we create in our encounters with our clients. This workshop will also dive into the concept and understanding of implicit bias leading to workplace trauma among staff and personnel in that of the unhealthy workplace culture and climate. Participants will experience a hands-on and interactive workshop that when they finish, they will have a strong grasp of implicit bias in trauma in the workplace setting.

Objectives: As a result of this session, participants will be able to:
1) Understand implicit bias and concepts like prejudice, stereotypes, microaggressions, and discriminatory attitudes.
2) Recognize the role implicit bias plays in the manifestation of trauma and how individuals respond.
3) Learn ways to become self-aware regarding own biases and ways to others authentically

Area of emphasis: Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

D5. Measuring the Severity of Intimate Partner Violence as Continuous Variable Using a Large Sample of Anonymous Respondents
Marsha Amoy Fraser, PhD, University of Central

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

The available tools for measuring intimate partner violence (IPV) rely heavily on victim's ratings and frequency counts (CDC, 2006). There is a gap in the methodology to allow for measurement without accessing the victims. Additionally, such a measurement tool should be able to measure across cultures. This presentation introduces a method used to measure IPV using police report narratives for Jamaican IPV victims.

Objectives: As a result of this session, participants will be able to:
1) Describe the current methods of measuring intimate partner violence.
2) Assess the limitations of these methods.
3) Introduce, utilize, and assess a novel method of measuring the severity of intimate partner violence without accessing the victim.

**Area of Emphasis:** Applied Research, Cultural Diversity/Trauma, Gender Issues

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

**D8. Current Research & Findings: From Global Human Trafficking to Workplace Sexual Harassment in Hawai‘i**

### Part I. Structural Inequalities Contribute to Human Trafficking across the Globe

**Kristine Jacquin, PhD, Fielding Graduate University; Erinn Cameron, Fielding Graduate University**

**Audience Level:** Beginning: Appropriate for all attendees as an introduction to a topic.

At least 40.3 million people are currently being trafficked (Walking Free Foundation, WFF, 2018). Most human trafficking victims are women and girls (UNODC, 2016; WFF, 2018). Research shows that various factors contribute to the insecurity of women and girls such as human rights violations; gender oppression; lack of political freedom; discrimination; limited access to education, paid work, and health care; and violence (Huang, 2017; Mihăilă, 2016; Novikova, 2017; Piscopo & Thomas, 2017; Walsh, 2016). Because structural inequalities make women and girls less secure, they may also increase risk of being trafficked. Our research tested the hypothesis that structural inequalities increase risk of human trafficking. Data from 2018 were obtained from the United Nations, World Bank, and Global Slavery Index for 195 countries. Variables included indicators of structural inequality and human trafficking prevalence. Regression analyses were used to test the hypothesis. Study 1 found that the best predictors of trafficking were labor force participation for females, life expectancy for women, and rape rate. Study 2 showed that the best predictors of human trafficking legal cases were Gender Inequality Index, Gender Development Index, percentage of women in the work force, share of seats in parliament for women, life expectancy for women, income for women, and rape rate. Study 3 found that the best predictors of trafficking were maternal mortality rate, antenatal care coverage, adolescent birth rate, and intimate partner violence prevalence. Study 4 identified the best predictors of trafficking as rape rate, percent homicide victims who are female, female juvenile incarceration rate, and percent of females who experience intimate partner violence. Study 5 found that fewer equal rights laws for women predicted more trafficking. Our research suggests that alleviating structural inequalities for women and girls is likely to have the greatest impact on reducing human trafficking.

**Objectives:** As a result of this session, participants will be able to:
1) Explain likely causes of insecurity for women and girls.
2) Understand the research results showing the connection between indicators of inequality and human trafficking.
3) Recognize the value of reducing structural inequalities to decrease human trafficking.

**Area of Emphasis:** Applied Research

### Part II. Workplace Sexual Harassment in Hawai‘i: A Report of Survey Findings by Safe Spaces & Workplaces (SSWP)

**Rachael Wong, PhD, One Shared Future; Safe Spaces & Workplaces Initiative; R. Makana Risser Chai, JD**

**Audience Level:** Beginning: Appropriate for all attendees as an introduction to a topic.

Safe Spaces & Workplaces (SSWP), a statewide initiative to collaboratively end workplace sexual harassment, conducted the first comprehensive survey of workplace sexual harassment in Hawai‘i. Data were collected from 607 participants.
through a web-based survey from January 22, 2019 to February 19, 2019. Key findings based on this sample: nearly half (48.6%) of survey respondents were sexual harassed while working in Hawai‘i, including 52% of women and 42% of men; workplace sexual harassment occurred across genders, ages, ethnicities, levels of education, islands, and industries in Hawai‘i; respondents were sexually harassed in different work-related settings (68% - office, 33% - pau hana, 25% - phone calls/texts); only 18% of victims told Human Resources; those who have lived in Hawai‘i less than 10 years were statistically more likely—two times more—to report sexual harassment to Human Resources than lifelong residents; respondents who believed that their employers took workplace sexual harassment “extremely seriously” were statistically less likely to be sexually harassed than those who perceived that their employers took workplace sexual harassment only “somewhat seriously” (44.3% versus 65.7%); sexual harassment rates were statistically higher in those organizations that did not have training (85.9%) versus those that did (71.9%); and victims who indicated their organization did not have sexual harassment training were statistically more likely to be harassed by a supervisor than those who were unsure whether their organization had training (29.5% versus 7.7%). Conclusions: workplace sexual harassment occurs in Hawai‘i; employers might not know that sexual harassment happened as respondents in this sample who experienced or witnessed it rarely made complaints; workplace leadership made a difference; and sexual harassment training makes a positive impact.

Objectives: As a result of this session, participants will be able to:
1) Describe examples of workplace sexual harassment.
2) Identify the prevalence of workplaces sexual harassment in Hawai‘i, where it happens, who is most at risk, and what impacts its occurrence.
3) Discuss local activities and resources addressing workplace sexual harassment.

Area of Emphasis: Controversial/Critical Issues/Difficult Dialogues

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

D9. Understanding the Racialized Trauma of Blackness and Belonging in Hawai‘i
Akiemi Glenn, PhD, The Pōpolo Project

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

Despite its distance and its incredible ethnic diversity, Hawai‘i is still plagued by stark social and economic inequality that has its roots in the racial politics of Europe and the Americas. In June 2019, a New York Times op-ed invited readers, “Want to be less racist? Move to Hawai‘i,” and the strong reactions to the piece in the islands and abroad showed that the time is ripe for a new vocabulary to talk about what’s different, special, and sometimes difficult about navigating the layers of history and culture that form the social landscape of Hawai‘i. Looking at outcomes for Native Hawaiians, other Pacific Islanders, and Black residents of Hawai‘i against a historical backdrop, this talk explores the lasting impacts of racialized trauma, the extension of concepts of “Blackness” to the Pacific beyond people of African descent, and looks at how race, ethnicity, and power are changing in Hawai‘i as we move from plantation politics to become a part of an ever more connected, dynamic global community.

Objectives: As a result of this session, participants will be able to:
1) Explain how historical processes of racialization and belonging specifically manifest in Hawai‘i.
2) Identify 3 indicators of racialized trauma.
3) Apply racial analyses to quantitative economic and social outcomes for racialized communities in Hawai‘i.

Area of Emphasis Controversial/Critical Issues/Difficult Dialogues/ Cultural Diversity/Trauma
Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care

D10. Resilience, Trauma, and Mental Wellbeing
Christine Heath, MFT, Hawaii Counseling & Education Center; Stanley Luke, MA, Hawaii Counseling & Education Center

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

Traditional approaches to treatment of PTSD and trauma tend to emphasize diagnosis, psychopathology, cognitive behavioral therapy, exposure therapy, and similar methods. Basically, traditional therapists have been treating people by looking at the memory that was created by a person of a past external event. The theory has been that if the person processes it, analyzes it, relives it, or intellectually understands why they are suffering, that will alone give them wellbeing. This presentation, however, will emphasize a different perspective from which to view clients with PTSD, anxiety, and depression, and how this impacts the helping process. We will challenge the traditional perspective by explaining how these symptoms are created and maintained from within, as opposed to being generated from the outside world. We have found that when people understand the principles behind the creation of their experience, helping them see how to activate their innate wellbeing, the source of resilience, it is an antidote to mental suffering. We propose that everyone is innately resilient. Understanding how this works allows them to navigate trauma and stress with minimal distress and discomfort and can lead to near immediate relief of symptoms. An equally important factor, the health of the helper, is also emphasized in this work. No one can teach people about mental wellbeing if they do not see it for themselves. We have found that burnout in therapists is virtually eliminated when they work from this understanding.

Objectives: As a result of this session, participants will be able to:
1) Attendees will be able to explain how this perspective is different from traditional approaches in treating PTSD.
2) Explain how innate health and resilience are the catalysts for change.
3) Share the three principles behind the creation of experience in all people.

Area of Emphasis: Advanced Clinical Training/ Basic/Student Level Training/ Evidence-Based/Promising Practices/ Faith/Spirituality/ Prevention/ Substance Abuse/Addictions

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care

D11. Trauma-Informed Care and Vicarious Trauma for First Responders
Morgan Shaw, PsyD, Institute on Violence, Abuse and Trauma; Robert Geffner, PhD, ABN, ABPP, Institute on Violence Abuse and Trauma

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

This session will provide an overview of the More Than Surviving: From Traumatic Stress to Wellness curriculum developed by the Institute on Violence, Abuse, and Trauma for law enforcement officers (LEOs) and first responders. The purpose of the overall workshop is to provide training on the impact of both direct and secondary trauma, assist in recognizing symptoms of cumulative stress and chronic trauma and identify tools and skills to increase officer and other first responder wellness and resilience. The goals of the overall training are to prevent compassion fatigue and burnout and minimize negative reactions by first responders to the stress and traumas they experience daily on the job and sometimes in the job. The training is also designed to reduce excessive force situations, and lower likelihood of complaints regarding individuals or agencies. In this session, we will outline the basic premise for the training and cover specific tools and strategies for individuals and agencies to develop and strengthen wellness programs for law enforcement officers and
other first responders.

**Objectives:** As a result of this session, participants will be able to:

1) Describe core terminology surrounding first responder trauma, wellness, and safety.
2) Identify one resilience-building wellness strategy that can be engaged in on an individual level.
3) List one strategy that can be implemented on a systemic level within an agency to promote wellness and post-traumatic growth.

**Area of Emphasis:** Promising practices, Applied research

**Continuing Education:** Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, Attorneys and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care

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**D12. Racism as Experienced by Physicians of Color in the Healthcare Setting**

*Kelly Serafini, PhD, Saybrook University*

**Audience Level:** Beginning: Appropriate for all attendees as an introduction to a topic.

The purpose of this study was to examine the impact of racism experienced by physicians of color in the workplace. Method: We utilized a mixed-methods, cross-sectional, survey design. Seventy-one participants provided qualitative responses describing instances of racism from patients, colleagues, and their institutions. These responses were then coded in order to identify key domains and categories. Participants also completed quantitative measures of their professional quality of life and the incidence of microaggressions experienced while at work. Results: We found that physicians of color were routinely exposed to instances of racism while at work. Twenty-three percent of participants reported that a patient has directly refused their care specifically due to their race. Microaggressions experienced at work and symptoms of secondary traumatic stress were significantly correlated. The qualitative data revealed that a majority of participants experienced significant racism from their patients, colleagues, and institutions. Their ideas for improving diversity and inclusion in the workplace included providing spaces to openly discuss diversity work, constructing institutional policies that promote diversity, and creating intentional hiring practices that emphasize a more diverse workforce. Conclusions: Physicians of color are likely to experience significant racism while providing healthcare in their workplace settings, and they are likely to feel unsupported by their institutions when these experiences occur. Institutions need to increase their focus on diversity and inclusion efforts in order to provide an equitable workplace environment.

**Objectives:** As a result of this session, participants will be able to:

1) Describe different sources of racism encountered by physicians of color.
2) Discuss the most common types of microaggressions.
3) Discuss how microaggressions are related to secondary traumatic stress.

**Area of Emphasis** Cultural Diversity/Trauma

**Continuing Education:** Approved up to 1.5 CE credits for Psychologists, MFTs, Counselors, Victim Advocates, Attorneys and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care
E SESSIONS: 10:30 am – 12:00 pm (Select One)

**E1. Addressing Violence and Mental Health Issues Among LGBTQ Youth**

*Dorothy Espleage, PhD, University of North Carolina*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Peer victimization, bullying, and other forms of youth violence are common in U.S. schools. Lesbian, gay, bisexual, questioning, and transgender youth (LGBTQ) often experience elevated levels of peer victimization when compared to their non-LGBTQ peers. Rates of victimization will be reviewed across these populations. Protective factors that buffer the relation between victimization and mental health outcomes will be highlighted. Mental health outcomes will be discussed with a particular focus on protective factors and building resilient communities and schools for these youth.

**Objectives: As a result of this session, participants will be able to:**
1) To understand associations among bullying, sexual violence, and dating violence.
2) To identify ways to engage youth to address bullying, sexual violence, and dating violence.
3) To appreciate how technology can maximize current prevention efforts.

**Area of Emphasis:** Advocacy/Policy/Prevention, Applied Research, Evidence-Based/Promising Practices, Gender Issues, Prevention, Substance Abuse/Addictions

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Child Abuse and Substance Abuse* *Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors*

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

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**E2. Safe School Model**

*Azim Khamsa, Tariq Khamisa Foundation*

**Audience Level:** Beginning: Appropriate for all attendees as an introduction to a topic.

The TKF Safe School Model, a powerful school presentation, is centered on the TKF story and utilizes presenters, video and open discussion to provide schoolwide messages and strategies focused on understanding the impacts of violence while teaching kindness, conflict resolution and forgiveness. Our curriculum helps students develop social skills, sound reasoning abilities, and advocate for collaborative behaviors. TKF’s course emphasizes active student discussions and encourages sharing personal views, opinions and experiences on the various topics. Our mentoring strategy incorporates a restorative approach that is focused on peacemaking, behavior management, and mediation to prevent misconduct incidents. The Peace Club is a program that builds student advocacy and leadership skills through lessons in peace, understanding, cooperation, and service.

**Objectives: As a result of this session, participants will be able to:**
1) Describe the Safe School Model.
2) Describe restorative principles of accountability, compassion, forgiveness, and peacemaking.
3) Design professional development opportunities tailored to the needs of the school or community.
Area of Emphasis: Advocacy/policy/prevention

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, and Child & Adult Maltreatment

E3. Compassion Fatigue in a Forensic State Institution
Joan Parker-Dias, MSN, Hawaii State Hospital; Christine Pasion, Hawaii State Hospital

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

The purpose of this presentation is to deal with a gap in practice related to clinicians being unable to identify signs/symptoms of compassion fatigue/vicarious trauma within themselves. For staff to be able to provide high quality of care to their patients, they must be healthy themselves. Through research, it has been identified that listening and dealing with patients who experience trauma can negatively impact clinicians. Clinicians have signs and symptoms of trauma like nightmares, startled effect, poor sleep, irritability etc., even though they have not directly experienced trauma. The effects of compassion fatigue/vicarious trauma also affect facilities as staff with compassion fatigue can call in sick more, make more mistakes, get into conflicts with their peers etc. The staff’s ability to take care of patients with trauma declines and they may even leave the field and look for another career. The clinicians are experiencing vicarious trauma due to hearing and dealing with their patients' trauma. Research has shown that early identification and/or treatment, clinicians can get better and be able to continue to work in the field of mental health and continue to work with traumatized patients. The presentation will help clinicians be able to identify and manage their symptoms of compassion fatigue/vicarious trauma and come up with a wellness plan to prevent and manage their symptoms. The wellness plan will include ways to identify and deal with symptoms as well as ways to maintain wellness in the future. Compassion fatigue/vicarious trauma can negatively impact staff working with traumatized patients and may even leave their field of work. There are ways to prevent and treat staff who have been impacted by compassion fatigue/vicarious trauma and continue to work in this field by learning early identification, prevention skills, and treatment options like going to therapy themselves and developing a wellness plan to address the symptoms.

Objectives: As a result of this session, participants will be able to:
1) Define compassion fatigue/vicarious trauma and list three symptoms of each.
2) Explain how compassion fatigue can negatively affect work performance
3) Identify three strategies to use to help manage compassion fatigue.

Area of Emphasis: Advanced Clinical Training/ Applied Research/ Prevention

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

E4. Thriving beyond Trauma: Manifesting a Life of Power and Purpose
Susan Omilian, JD, National Partnership to End Interpersonal Violence Across the Lifespan; Diana Barnes-Fox, MA, National Partnership to End Interpersonal Violence Across the Lifespan

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

No longer a victim or even a survivor, she is a thriver who is creating a new future for herself and her children. Learn
innovative, evidence-based practices that have been successfully used to empower women who have experienced abuse (e.g. domestic violence, sexual assault, child abuse) to move forward and find an authentic life of power and purpose beyond trauma. This session will include interactive writing exercises that have been successfully used in working with hundreds of survivors to support and build their resiliency and self-determination. Learn how to help survivors manifest a life of power and purpose by getting positive energy, focusing their desires, overcoming their fears and limiting beliefs about themselves to find the Real YOU, a part of them that has been untouched by all that has happened to them. Techniques to be demonstrated and have their clinical application described will include exploring positive storytelling, setting a new future vision, countering negative and limiting beliefs that sabotage movement forward and setting goals that are realistic and achievable. Come explore the power of fueling a survivor’s life with passion and purpose so that they can take the critical “next-step” from survivor to thriver.

Objectives: As a result of this session, participants will be able to:
1) Describe techniques to help women move beyond trauma such as positive storytelling, countering negative, limiting beliefs and goal setting.
2) Identify barriers to moving forward after experiencing trauma.
3) Describe working with trauma survivors to overcome obstacles and thrive.

Area of Emphasis: Evidence based/Promising practices

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

E5. HIV Support and Prevention for Victims of Domestic Violence
Ashley Slye, National Network to End Domestic Violence

Audience: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Victims of domestic violence are at an increased risk for acquiring HIV, and women living with HIV experience domestic violence at rates higher than the general population (Campbell JC, Soeken K. 1999; Machtinger E. 2012). In addition to the trauma of experiencing domestic violence, receiving a positive HIV test result can profoundly impact an individual’s psychological wellbeing and be an additional means of trauma. As advocates, we can play a key role in helping survivors living with HIV access medical support and other services. For those not living with HIV, advocates can assist in linking survivors to HIV testing, PrEP (Pre-Exposure Prophylaxis), and provide resources on remaining HIV-negative. However, most advocates are uninformed about the intersection of domestic violence and HIV and are uncomfortable addressing the topic. By providing this training, those that work with survivors will have the knowledge, skills, and tools to provide survivors living with or at risk for HIV with the appropriate support and referrals. This knowledge can help advocates feel more comfortable discussing HIV, empower survivors, and prevent new HIV cases by linking survivors to PrEP.

Objectives: As a result of this session, participants will be able to:
1) Build knowledge on the intersecting aspects of HIV and Domestic Violence, PrEP, and reducing risk of HIV acquisition.
2) Identify methods and resources to increase the safety of victims living with HIV.
3) Develop a plan for building a partnership with their local HIV program(s) to improve services.

Area of Emphasis: Advocacy/Policy/Prevention, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices, Gender Issues
E6. Understanding and Intervening: Using Mindfulness and Motivation to Address the Impacts of Trauma and Adverse Experiences on School Completion  
* Amanda Webster, Waipahu Community School for Adults; Christine Park, PhD, Waipahu Community School for Adults  

**Audience level**: Beginning: Appropriate for all attendees as an introduction to a topic.

High school noncompleters are those who did not earn a high school diploma. Before their early departure from high school, noncompleters often struggled with challenges such as trauma, adverse childhood experiences, and addiction. Dropping out of high school often results in decreased opportunities, lower economic stability, and increased health and mental health risks. Some noncompleters enter remedial education to earn their equivalency credential. However, in this setting, they experience additional challenges, such as increased responsibility, stress, and anxiety. This presentation will share detailed information surrounding non completion prior to and after dropout. Results from a qualitative study of noncompleters who self-reported emotional and psychological challenges, including trauma, abuse and adverse childhood experiences will be shared. Participants will also learn more about strategies, such as mindfulness and motivational interviewing, to help promote success amongst this population.  

**Objectives**: As a result of this session, participants will be able to:  
1) Understand the impacts of childhood and adolescent trauma and adverse experiences on high school completion and noncompletion in connection to mental health, health and economic disparities.  
2) Analyze strategies (mindfulness and motivational interviewing) that promote success.

**Area of Emphasis**: Advocacy/Policy/Prevention, Evidence-Based/Promising Practices, Prevention

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**E7. A Strengths Based Approach for Case Management and Advocating for Children Impacted by Commercial and Sexual Exploitation**  
* Amber Davies, MSW, Saving Innocence; Eshele Williams, PhD, Saving Innocence  

**Audience Level**: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Our goal is to illustrate through concrete examples and case studies how case management and advocacy can help identify and serve victims of child sex trafficking. We will briefly share the evolution of our SEAM Model. Then we will spend a majority of our session focusing on how case management, advocacy, and survivor leadership as well as partnerships can help create a support network for youth. Our session will inform the audience of the importance of using a victim centered, trauma informed and trauma responsive multidisciplinary team approach. There will be an emphasis on how to work collaboratively to develop an effective plan to meet each client’s needs. Our goal is to describe how a safety plan – a
practical guide that helps lower risk and helps support youth – can be utilized by individuals who have direct contact with CSECY (Commercially Sexually Exploited Children and Youth). We will discuss why safety planning is important and highlight key components of safety planning.

**Objectives:** As a result of this session, participants will be able to:
1) Utilize strength-based language to engage and support CSECY.
2) Understand and implement the SEAM model for case management and advocacy.
3) Practice safety planning and utilize safety planning tools with reference to the stages of change.

**Area of Emphasis:** Advanced Clinical Training, Advocacy/Policy/Prevention, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Victim Advocates.

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

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**E9. Auhea Kō Piko? Where's Your Center? (Hā or Essence)**
*Sharon Ehia, MSW, Lili'uokalani Trust*

**Audience Level:** Beginning: Appropriate for all attendees as an introduction to a topic.

The purpose of this presentation is to awaken the cultural consciousness of systems and organizations that service Native Hawaiian individuals and families who have been impacted by the effects of Historic Cultural Trauma as a result of colonization. This trauma has impacted the growth and potential of our people, resulting in high percentage of Hawaiians incarcerated, involved with Child Welfare system, addicted to drugs or involved in a domestic violence relationship. Our presentation will demonstrate the importance of creating space for our people to reclaim their moʻolelo (stories) through cultural practices and rituals passed down through intergenerational connection and knowledge. The commitment is to restore the value and practice of Nā Kūpuna by systematically integrating their rituals and ceremonies into western modalities and theories with intentionality, rooted in 'ike kupuna. More importantly, this structured (yet flexible) culturally resonant program sets the context for understanding the proper way to malama (take care) and promote wellbeing and healing, by receiving and transferring the sacred mana (essence) from kūpuna to the next generation.

**Objectives:** As a result of this session, participants will be able to:
1) Apply appropriate engagement skills in working with indigenous populations.
2) Demonstrate understanding of (4) indigenous values and concepts.
3) Discuss (2) examples of application of indigenous values and concepts.

**Area of Emphasis:** Cultural Diversity/Trauma, Prevention, Other: Impact Historic cultural Trauma

**Continuing Education:** Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care

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**E11. FIRST Do No Harm: First-responder Incident Response Support Training**
*Douglas Misquitta, MD, The Ohio State University Wexner Medical Center; Dustin Froehlich, MD, The Ohio State Wexner Medical Center*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information
The work of first responders is inherently demanding, both physically and emotionally. Our session will introduce attendees to the behavioral health impact of and current state of treatment for emotional trauma experienced by first responders. We intend to provide thoughtful considerations to ensure those working with this population are well-informed about acute and chronic challenges presented by the nature and culture inherent to the work of first responders. As both victims of vicarious trauma and through their role definition as respondents to accidents, medical and mental health crises, and beyond, these workers are at high risk for incurring the same behavioral health catastrophes as the patients they are trained to help. Our team will describe a statewide effort to capture the emotional conditions, actions, and needs among first responders. In addition, we will highlight the Stress, Trauma, and Resilience (STAR) Program’s preliminary efforts to provide burnout and resilience training for victims of vicarious trauma and discuss interventions, results, and next steps. The session will also feature demonstration of the First-responder Incident Response Support Training (FIRST) phone app, a tool for specifically designed for self-help within this population. Our goal is to share perspectives and ideas with a broader group of like-minded individuals caring for and developing programs for first responders. We are certain of the sense of the urgency and dire need to appropriately address the behavioral health and emotional issues among firefighters and emergency medical services professionals and that this can only be achieved by understanding the problems and potential impacts of job-related exposures. We look forward to discussing the challenges, opportunities, and rewards of advancing quality in the care of this patient population.

**Objectives: As a result of this session, participants will be able to:**
1) Describe implementation of innovative mobile application (FIRST app) designed for use by first responders.
2) Review inherent challenges in addressing the emotional needs of first responders and the current state of evidence-based treatment.
3) Discuss ideas about next steps to optimize care.

**Area of Emphasis:** Cultural Diversity/Trauma/ Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care

**F SESSIONS: 1:00pm – 2:30 pm (Select One)**

**F2. That is Not My Name: Educate or Incarcerate our Youth**
*Alicia Brav, MAS, BRAV Consultations; Patricia Martinez, San Diego Advisory Council on Human Trafficking and Commercial Sexual Exploited Children (CSEC); Jacqueline Bartley, PhD, Every Child Matters, International*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This presentation will be divided into three segments exploring how the School-to-Prison Pipeline disproportionately affects children of color, LGBTQ, children with disabilities, and traumatized youth. Patricia Martinez will present on the experiences of Native children and bullying by peers, as well as systemic discrimination within school settings. Dr. Bartley will illustrate how marginalized communities have enhanced vulnerability for justice-involvement and implications under mass incarceration and the revolving door phenomenon. Alicia Brav will provide a historical overview on the School-to-Prison pipeline and explore implications for traumatized youth. Recommendations for educators, social workers and administrators will include discussion for trauma-informed schools and diversion programs, such as Youth Courts.
Objectives: As a result of this session, participants will be able to:
1) Describe how the School-to-Prison Pipeline (STPP) affects minority youth.
2) Describe how STPP and treatment disparities affect student achievement.
3) Describe school disciplinary policy from a trauma-informed and culturally sensitive lens.

Area of Emphasis: Controversial/critical issues/difficult dialogues, Cultural diversity/trauma

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence and Child Abuse *
Psychologists, MFTs, Counselors, Victim Advocates
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

F3. Sex Trafficking: Hidden Truths
Lynn Matsuoka, JD, Dept of the Prosecuting Attorney, City and County of Honolulu

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

The purpose of the training module is to raise awareness on what trafficking looks like in the community using case studies that are relevant and educational for law enforcement officers, service providers, medical personnel and prosecutors. Each case will highlight aspects of trafficking from common indicators, hidden truths, and the dynamic relationship between pimp, recruiter, and victim, to the importance of collaboration among community partners. The cases provide an in depth look into the realities of trafficking, how it presents itself, and the general perception held by the public and how we, collectively, can met the challenges and successfully assist victims and hold offenders accountable.

Objectives: As a result of this session, participants will be able to:
1) Raise awareness on human trafficking in Hawai‘i.
2) Increase knowledge on sex trafficking and what it may look like in the real world.
3) Provide an in depth look at what we know by way of data collected and the hidden truths behind trafficking.
4) Describe a System Response.

Area of Emphasis: Advocacy/Policy/Prevention, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues, Evidence-Based/Promising Practices, Gender Issues

Continuing Education: Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, Attorneys and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care and Child & Adult Maltreatment

F5. Guidelines and Tips on How to Work with Clients Where Domestic Violence is an Issue: Inviting, Engaging and Challenging
Janie Christensen, MSW, Private Practice

Audience Level: Beginning: Appropriate for all attendees as an introduction to a topic.

Counselling is typically the prerogative of voluntary, self-referred individuals, seeking services from professionals trained in working with motivated clients who genuinely want help, alleviation from suffering, and another perspective. Court mandated or not, domestic violence clients very often bring denial and resistance to the table, a sense of shame as well as sometimes the added complication of keeping secrets, all part and parcel of domestic violence. The task of offering a new way of ‘being’ to such clients requires patience, creativity and skill. So too is the outcome of this counselling arguably
greater than for clients seeking help with traditional issues of depression and anxiety; these may be clients where you are always assessing if they are going to hurt someone else, be hurt, and/or expose children to abuse. To break the denial, while at the same time preserving the dignity of clients and uncovering potential strengths, again may be an onerous task akin to ‘selling’ something and stimulating a desire for change. This is not work for the faint of heart, though in finding meaningful connections and offering tools and ideas clients find valuable, the potential for change is so very much worth all effort as it otherwise is a cycle that may be passed down like the family silver through generations to come.

**Objectives: As a result of this session, participants will be able to:**

1) Analyze how language and words, have especial meaning in domestic violence counselling.
2) Discuss what words to use and what words not to use.
3) Assess the words that ultimately better invite clients into a collaborative relationship where they both feel heard.

**Area of Emphasis:** Advanced Clinical Training, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues, Prevention

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

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**F6. Introductions to Mindful Forgiveness: Learn the Steps and Apply It to Improve Your Personal and Professional Life**

JoYi Rhyss, Mindful Forgiveness Center, Moxie Fitness LLC; Kaipo Paiva, Honolulu Police Department; Shannessy Ahu, Hawaii Department of Human Services

**Audience:** Beginning: Appropriate for all attendees as an introduction to a topic.

Dr. Fred Luskin and colleagues outline groundbreaking insights into the healing powers and medical benefits of forgiveness. The emphasis is on letting go of hurt, helplessness and anger while increasing confidence, hope and happiness. The implications are considerable, including the possibility that skills-based forgiveness training may prove effective in reducing anger as a coping style, reducing perceived stress and physical health symptoms, and thereby may help reduce allostatic load (e.g., immune and cardiovascular functioning) in daily living. The practice of mindfulness has moved from a largely obscure Buddhist concept founded about 2,600 years ago to a mainstream construct today. Advocates of mindfulness believe that virtually every client and professionals can benefit from being more mindful. The theorized list of benefits includes reduced rumination, less emotional reactivity, more cognitive flexibility, relationship satisfaction.

**Objectives: As a result of this session, participants will be able to:**

1) Describe three ways to cultivate mindfulness.
2) Identify the seven steps to forgiveness.
3) Gain an understanding of how to apply these skills to let go of anger, frustrations and other negative emotions and obtain more joy and peace.

**Area of Emphasis:** Basic/Student Level Training/ Cultural Diversity/Trauma/ Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 1.5 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care
**F8. The Audacity of an Expectation of Safety: Violence Against Black Girls and Women**
*Sherina James, MA, Washington State Office of Crime Victims Advocacy*

**Audience:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This is a workshop centered on addressing the underlying factors of sexual violence in the black community. Particularly how it pertains to black girls and the culture of secrecy. This workshop sets to expound upon how violence against black women plays an instinctive roll in how services for black girls and women can no longer be mediocre. All while providing context and strategies on how to better serve black girls and women.

**Objectives: As a result of this session, participants will be able to:**
1) Share our stories of why this workshop was created.
2) Share root causes of pervasive sexual violence in the black community.
3) Share case studies on black girl cases in the US, and allow folks to work in groups.

**Area of Emphasis:** Advocacy/Policy/Prevention, Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma, Gender Issues

**Continuing Education:** Approved up to 1.5 CE credits for: *applicable to Domestic Violence and Child Abuse*
*Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors*

**IVAT Specialty Certifications:** Approved to 1.5 Hours for: Trauma Care, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

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**F12. The Effects of Trauma on the Brain: Clinical Practice and Application**
*Isaiah Moreno, PsyD, Ho'oko, LLC*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This workshop is an overview of the neurobiological and physiological effects of chronic trauma. It will define complex trauma and PTSD and review the multiple neurofunctions of the brain that contribute to ongoing symptoms, such as dissociation and flashback, of PTSD and developmental trauma. This workshop will identify key neurobiological challenges related to chronic trauma and ongoing mental health challenges. These biological systems include (1) the brain’s alarm system that registers danger (2) Increased stress hormone activity (3) alterations in the cognitive systems that filters relevant information from irrelevant information, and (4) the activation of the Fight or Flight (or Freeze) survival response of the sympathetic nervous system. The treatment of traumatic experiences, including trauma and unresolved grief, are directly related to the brain’s circuitry and the reexperiencing of symptoms. This workshop explores the current literature on evidence-based treatments (psychotherapy and pharmacotherapy) and gives a review of effective types of treatment that affect the physical aspects of past trauma. In addition, participants will review and practice appropriate coping skills (i.e. grounding techniques) to help regulate intense emotional reactions related to trauma. This is an interactive workshop that allows participants to review the current research on trauma and apply techniques to address these challenges with clients.

**Objectives: As a result of this session, participants will be able to:**
1) Define complex PTSD and the long-term effects of chronic traumatic experiences.
2) Review the neurobiological effects of trauma that are commonly seen in clinical practice.
3) Learn and practice grounding exercises that address traumatic symptoms.
Area of Emphasis: Advanced Clinical Training, Evidence-Based/Promising Practices, Other - The Neurology of Trauma

Continuing Education: Approved up to 1.5 CE credits for: *applicable to Domestic Violence, Child Abuse, Substance Abuse, and Suicide Prevention* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 1.5 Hours for: Trauma Care, Child Custody Evaluators, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

Friday April 17th, 2020

G SESSIONS: 8:00 am – 11:00 am (Select One)

G3. Multidisciplinary Investigation of Child Abuse Reports When Child Custody is in Dispute
Seth Goldstein, JD, Law Offices of Seth L. Goldstein

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Allegations of child abuse that arise in the context of divorce, custody, and visitation cases are extremely difficult for professionals and the courts to deal with. Often the complaining parent is viewed as exaggerating or fabricating the allegation to better themselves in the custody case. Acting in a self-preservation mode, protective parents often do things which are hard to accept or believe as being done innocently or without ulterior motives. Professionals who have biases and/or blind spots that distort their perception of the protective parent’s claims too often discount the severity of the abuse and potential risk to the child. With no outward signs of abuse on the child nor any complaint made by that child, the child is often thrust back into or left to remain in a physically and psychologically dangerous environment. Social workers and the courts often make unrealistic recommendations for mothers who are trapped in abusive relationships. These problems coupled with the statutory mandates and rules of law the courts must comply with cause even greater conflicts. When compromises are made to screen cases, these cases often get 'screened out' prematurely and the system created as a safety net for children fails.

Objectives: As a result of this session, participants will be able to:
1) Recognize misconceptions that mislead investigators .
2) Learn about dynamics at play in these cases.
3) Apply concepts of interdisciplinary practice that make for better outcomes in cases involving child abuse reports made during child custody litigation.

Area of Emphasis: Evidence-Based/Promising Practices

Continuing Education: Approved up to 3.0 CE credits for: *applicable to Child Abuse * Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

IVAT Specialty Certifications: Approved to 3.0 Hours for: Trauma Care, Child Custody Evaluators, and Child & Adult Maltreatment

G4. Team Resilience to Combat Secondary Trauma
Sara Mulholland, MEd, State of Colorado

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic
Professionals working with persons who have committed or been traumatized by violent offenses are vulnerable to effects of secondary trauma. Secondary trauma effects often are the basis of team dysfunction, interpersonal conflicts, and inappropriate countertransference reactions. Treatment teams with high levels of team resilience tend to experience better treatment outcomes, higher morale, less turnover, and positive interactions with clients and professionals. Team resilience relates to the ability of team members to function in unison to overcome adversity and attain positive outcomes, making team resilience essential. This workshop will define secondary trauma symptoms and how they present in professionals, then will define the 7 components of team resilience. Audience members will be given a chance to discuss how they have experienced and/or observed these concepts. Audience members will learn various ways to build team resilience and practice team resilience building strategies. Audience members will leave this workshop with team resilience knowledge and tools applicable to their practice.

Objectives: As a result of this session, participants will be able to:
1) Identify and describe the seven components of Team Resilience and symptoms of secondary trauma.
2) Identify specific ways secondary trauma affects team cohesion, treatment effectiveness, and emotional health.
3) Apply strategies for building team resilience within the learner’s team.

Area of Emphasis: Advanced Clinical Training, Applied Research, Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma, Evidence-Based/Promising Practices, Other - Secondary Trauma in Treatment Providers

Continuing Education: Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Victim Advocates, and Substance Abuse Counselors
IVAT Specialty Certifications: Approved to 3.0 Hours for: Trauma Care

G5. Promising Practices: Intimate Partner Violence (IPV) Interventions and Treating Trauma

Part 1 - Watching Dad Watching Mom: Teaching Abusive Men to Set a Better Example for Their Children
David Adams, EdD, Emerge

Audience Level: Advanced: Appropriate for practitioners in the field 10+ years (advanced workshops should present practical applications for attendees to utilize)

Watching Dad Watching Mom: Teaching fathers to set a more positive example for their children. Children who witness abuse are at much increased odds to grow up to become abusers. How can this inter-generational cycle be broken? Is it ever too late to do this? David will draw from his many years of experience counseling abusive men, teaching parenting classes, and serving as an expert witness in domestic violence cases to talk about the importance of helping men with histories of domestic violence to set a better example for their children. David will describe several key strategies used in Intimate Partner Abuse Intervention Programs to promote empathy and respect for partners and children.

Objectives: As a result of this session, participants will be able to:
1) Understand how children exposed to IPV can copy the behavior and attitudes of the abuser.
2) Identify the parenting deficits of abusers.
3) Identify five key intervention strategies to help abusers set a better example for their children.

Area of Emphasis: Advanced Clinical Training, Advocacy/Policy/Prevention, Evidence-Based/Promising Practices, Gender Issues, Prevention

Part 2 - Sexual Assault and Intimate Partner Violence: A Cognitive Behavioral Therapy in Treating Trauma
Robert Kirchner, PhD, Glacier Consulting Inc.
**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Glacier Consulting, Inc. has conducted research and evaluation projects on over numerous programs since 2000, focused on treating victims of sexual assault. Based on the results and conclusions of evidence-based interventions and impact in the final reports, the issue of the nexus between recovering from sexual assault and intimate partner violence and changing behaviors is a concern for all of the programs investigated. This workshop presents the underlying behaviors that promote domestic violence; the interventions that change those behaviors; and how the outcomes can sustain an individual’s recovery efforts.

**Objectives: As a result of this session, participants will be able to:**
1) Gain knowledge about the impact of behaviors on sexual assault and intimate partner violence and trauma.
2) Learn about the evidence-based trauma interventions for prevention and treatment resulting victim recovery.
3) Discuss the problem of sustained recovery for victims after program completion.

**Area of Emphasis:** Applied Research, Evidence-Based/Promising Practices, Prevention, Substance Abuse/Addictions

**Continuing Education:** Approved up to 3.0 CE credits for: *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers

**IVAT Specialty Certifications:** Approved to 3.0 Hours for: Trauma Care, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

**G6. Corporal Punishment and Painless Parenting (Part 1)**
*Randall Alexander, MD, PhD, University of Florida; Deborah Sendek, MS, United States Alliance to End the Hitting of Children, National Partnership to End Interpersonal Violence Across the Lifespan; Stacie LeBlanc, JD, MEd, The Up Institute, American Professional Society of Abuse on Children (APSAC); Viola Vaughan-Eden PhD, MJ, MSW, Norfolk State University, National Partnership to End Interpersonal Violence Across the Lifespan*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Prevention of child abuse eventually requires a change in social norms – a different way to look at parent child interactions. Review of the literature shows that no study yields a long-term benefit to spanking, it has detrimental brain changes, and therefore the American Academy of Pediatrics and others have called for it to stop. About ¼ of the world’s countries now ban spanking anywhere. More countries are on the verge of joining this movement, often based upon the UN Convention on the Rights of Children. Communicating the known scientific harms and ineffectiveness of spanking across cultures can be difficult, yet, often considered a necessary but dreaded task. Research indicates that parents seek guidance on discipline from the very professionals (pediatricians, mental health, etc.) who repeatedly report feeling anxious and reluctant to provide the desired information. This interactive session will lessen that dread while increasing professional confidence to successfully communicate the harms of physical discipline by building a repertoire of effective parenting alternatives.

**Objectives: As a result of this session, participants will be able to:**
1) Identify places in the world that have banned corporal punishment.
2) List some of the processes in setting up a NHZ and resources for alternative behavior management.
3) Explain how corporal punishment is not only harmful to the child and parental relationship, but it is also ineffective.

**Area of Emphasis:** Advocacy/Policy/Prevention, Applied Research, Controversial/Critical Issues/Difficult Dialogues, Prevention
**G7. Apple Dumpling Gang Case Study**  
*Anne Darr, Victim Specialist, FBI; Peneleope Gallegos, CO Sheriff Department*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This presentation will provide an overview of a case study, "The Apple Dumpling Gang," which yielded the largest sentence of a human trafficker in US History (400 years-LIFE). The case will highlight the use of the proactive high-risk model and the human trafficking (HT) victim identification tool, which initiated the case due to the identification of the first juvenile victim. The case study will incorporate the investigation (involving a multi-pimping operation and multiple victims) and long-term victim assistance efforts/services.

**Objectives: As a result of this session, participants will be able to:**
1) Provide an overview of the high-risk model/multi-disciplinary team response to HT.
2) Provide an overview of a complex sex trafficking investigation and utilizing a team approach.
3) Provide an understanding on victim dynamics and long-term services/after care.

**Area of emphasis:** Other - Human Trafficking

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**Continuing Education: Approved up to 3.0 CE credits for: *applicable to Domestic Violence* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys.**

**IVAT Specialty Certifications: Approved to 3.0 Hours for:** Trauma Care, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

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**G8. Family Therapy and Sexual Abuse**  
*Mary Jo Barrett, MSW, Center for Contextual Change*

**Audience Level:** Advanced: Appropriate for practitioners in the field 10+ years (advanced workshops should present practical applications for attendees to utilize)

Our field has come a long way in addressing the challenges of complex development trauma. Unfortunately, no matter how much progress clients make in therapy, once our clients leave the safe space of our relationships, they often fall back into patterns of negative emotion and dysfunctional relationships. Abuse happens in the context of a relationship, often in the relationships of the family. Why do we not heal the violations and traumas in the context of the family. In this workshop, attendees will learn concrete strategies for involving partners and other family members in the treatment process to make sure that the cognitive and self-regulation skills clients learn in therapy transfer to everyday life. We will learn how to effect true long last changing by employing the family as collaborators of change.

**Objectives: As a result of this session, participants will be able to:**
1) Identify how to avoid demonizing clients’ families.
2) Identify how to play the role of therapeutic rescuer when family trauma is involved.
3) Discuss the benefits of involving family members in the therapy process.

**Area of Emphasis:** Advanced Clinical Training, Advocacy/Policy/Prevention, Applied Research
G10. Traumatic Stress Recovery: Treatment Options Utilizing Survivor Context (and a Scuba-diving Perspective)

Lori Daniels, PhD, Hawaii Pacific University - College of Health and Society

**Audience Level:** Advanced: Appropriate for practitioners in the field 10+ years (advanced workshops should present practical applications for attendees to utilize)

Providing treatment targeting a myriad of changes that emerge from a client’s past traumatic experience is often challenging for mental health providers. A one-size-fits-all intervention rarely fully addresses all the problems associated with PTSD, the uniqueness of each client’s recovery journey, and the context of a survivor’s experience. Integrative approaches are better suited for intervening with a diversity of traumatized clients. This workshop is for practitioners who wish to provide a safe emotional space and immerse into the depths of processing traumatic memories. Integrative psychotherapy techniques addressing trauma-related triggers, guilt, repressed anger, and unresolved grief are highlighted; as well as considerations for a client’s own cultural, developmental, and situational context. Rapport building is discussed as a metaphor for having a dive-buddy, and self-care for practitioners. Throughout the workshop, clinical cases will be presented to illustrate the application of integrative psychotherapy methods.

**Objectives: As a result of this session, participants will be able to:**
1) State 3 areas of a client’s traumatic event context to consider toward a successful intervention plan.
2) State at least 3 therapy methods, which provide specific client-centered interventions with guilt, grief, or anger.
3) State 4 suggestions for traumatic stress practitioner self-care.

**Area of Emphasis:** Advanced Clinical Training

Continuing Education: Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates

IVAT Specialty Certifications: Approved to 3.0 Hours for: Trauma Care

G11. Culturally Responsive Strategies: Coping and Resilience Strategies for Crisis/Trauma Service Providers

Suganya Sockalingam, PhD, Change Matrix, LLC; Rachele Espiritu, PhD, Change Matrix, LLC

**Audience Level:** Beginning: Appropriate for all attendees as an introduction to a topic.

Secondary trauma or vicarious trauma is the emotional residue of exposure that health care providers have from working with people, hearing their trauma stories, and becoming witnesses to the pain, fear, and terror that trauma survivors have endured. This experience is filtered through their own cultural values and beliefs. This workshop provides an understanding of vicarious/secondary trauma and its impact on crisis/trauma response providers and other providers through a cultural lens. Assessing for symptoms like compassion fatigue and vicarious trauma which diverse cultures experience and express in different ways will be reviewed. Systemic and organizational approaches to providing coping and resilience building strategies using a cultural lens will be explored. Participants will engage in interactive experiences/discussions and examine the importance of culturally responsive trauma-informed approaches to coping positively and moving towards posttraumatic growth.

**Objectives: As a result of this session, participants will be able to:**
1) Define vicarious and secondary trauma and its impact through a cultural lens.
2) Identify culturally responsive organizational approaches to providing supportive coping/resilience strategies.
3) Examine personal approaches to culturally appropriate coping mechanisms and post-traumatic growth

**Area of Emphasis:** Cultural Diversity/Trauma/Prevention

**Continuing Education:** Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates

**IVAT Specialty Certifications:** Approved to 3.0 Hours for: Trauma Care

**H SESSIONS: 12:00 pm – 3:00 pm (Select One)**

**H2. Ethical Dilemmas and Compassion Fatigue: The Interface of Energy Management**
*Mary Jo Barrett, MSW, Center for Contextual Change*

**Audience Level:** Advanced: Appropriate for practitioners in the field 10+ years (advanced workshops should present practical applications for attendees to utilize)

The ethical guidelines for therapists were once governed by simple, direct, utterly unambiguous rules. But in today’s far more informal therapeutic climate, with greater latitude afforded the therapist, the old rules don’t seem so clear anymore. The increase of technology has increased the confusion. The lack of clarity, coupled with the increasing demand of both professional and personal life in this millennium, has fatigued struggling clinicians. This course will explore creating and maintaining clinically sound boundaries through the lens of the clinician’s self-care. It is an ethical imperative for clinicians/health care providers to stay physically, emotionally, psychologically, and spiritually fit in order to provide ethically sound services. We will explore how our work impacts us and our professional choices. Together we will openly explore the ethical dilemmas we face around boundaries involving such issues. You'll come away with clearer ideas for establishing boundary guidelines at the beginning of treatment and reestablishing them if and when boundary violations seem imminent. How to maintain our health and our own boundaries to assure the ethical boundaries of our clients are maintained.

**Objectives: As a result of this session, participants will be able to:**
1) List two ways to assess the client's motivation, stage of change and preferred mode of learning.
2) Effectively build a therapeutic collaboration around each client’s individual needs.
3) Explain the importance of therapist transparency and empower clients by making the therapy process as safe and explicit.

**Area of Emphasis:** Advanced Clinical Training/ Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 3.0 CE credits for: *applicable to Ethics* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys and Substance Abuse Counselors

**IVAT Specialty Certifications:** Approved to 3.0 Hours for: Trauma Care

**H3. Family and Parenting Evaluations with Intimate Partner Violence and/or Child Abuse Allegations: Practical Techniques and Case Examples**
*Robert Geffner, PhD, ABN, ABPP, Institute on Violence, Abuse and Trauma; Morgan Shaw, PsyD, Institute on Violence, Abuse and Trauma*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Conducting family and parenting evaluations for courts, attorneys, and various agencies is a specialty with many pitfalls
and risks of error, malpractice, and professional burnout for practitioners. This workshop focuses on assessment strategies and child and parent measures in cases of intimate partner violence (IPV) and/or child abuse allegations. The protocols created by researchers and practitioners published by American Psychological Association Press (2018, 2nd Edition), are presented. Examples of different objective and projective measures are presented and discussed with respect to child custody and related evaluations. The practical procedures, ethical practice for child custody disputes when there is IPV or child abuse, and distinguishing among abuse, high conflict, alienation, estrangement, and rejection are emphasized. These are very difficult and complex cases from mental health/social work, criminal justice, child welfare, and legal perspectives. In addition, risk assessment and ethical issues are presented for these types of cases. Examples of cases are shown and discussed.

Objectives: As a result of this session, participants will be able to:
1) Explain two techniques for distinguishing domestic violence and child abuse allegations from a parent’s alienating behaviors.
2) Describe three assessment measures for parents involved in family court or dependency cases.
3) List three assessment measures in evaluating children in these cases.


Continuing Education: Approved up to 3.0 CE credits for: *applicable to Child Abuse and Ethics* Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, Attorneys

IVAT Specialty Certifications: Approved to 3.0 Hours for: Trauma Care, Child Custody Evaluators, Domestic Violence Offender Treatment, and Child & Adult Maltreatment

H6. Painless Parenting and No Hit Zones (Part 2)
Stacie LeBlanc, JD, MEd, The Up Institute, American Professional Society of Abuse on Children (APSAC); Viola Vaughan-Eden PhD, MJ, MSW, Norfolk State University, National Partnership to End Interpersonal Violence Across the Lifespan; Randall Alexander, MD, PhD, University of Florida; Deborah Sendek, MS, United States Alliance to End the Hitting of Children, National Partnership to End Interpersonal Violence Across the Lifespan

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Communicating the known scientific harms and ineffectiveness of spanking across cultures can be difficult, yet, often considered a necessary but dreaded task. Research indicates that parents seek guidance on discipline from the very professionals (pediatricians, mental health, etc.) who repeatedly report feeling anxious and reluctant to provide the desired information. This interactive session will lessen that dread while increasing professional confidence to successfully communicate the harms of physical discipline by building a repertoire of effective parenting alternatives. About ¼ of the world’s countries now ban spanking anywhere – in the schools or homes. More countries are on the verge of joining this movement, often based upon the UN Convention on the Rights of Children. For countries that are less likely to incorporate a ban anytime soon, one approach to change hearts and minds is for organizations and facilities to voluntarily become No Hit Zones. The history of No-Hit Zones (NHZs) has blossomed beyond its beginnings in children’s hospitals. This session will review examples of cities, hospitals, and other entities in becoming NHZs, how this can be done, and what resources are available. Beyond signage and staff education, it is important to identify alternatives to spanking to assist families.

Objectives: As a result of this session, participants will be able to:
1) Understand and effectively communicate the known harms of corporal punishment.
2) Explain how corporal punishment is not only harmful to the child and parental relationship, but it is also ineffective.
3) Demonstrate, through common case scenarios, how to provide families with information that

Part I. Clinical Treatment for Sex Trafficking (ST) Survivors

Dominique Roe-Sepowitz, PhD, MSW, Arizona State University; Dani Riggs, MA, American Counseling Association

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

The purpose of this presentation is to outline the best-practices for interventions for child and adult sex trafficking survivors. This includes a review of current practices, description of a trauma-informed approach for sex trafficking survivors, a review of complex trauma symptoms and their demonstration in sex trafficking survivors, and tools for treatment including material for the Sex Trafficking Awareness and Recovery Curriculum.

Objectives: As a result of this session, participants will be able to:
1. Identify two possible approaches to treating sex trafficking survivors.
2. Increase their knowledge about complex trauma and PTSD related to sex trafficking survivors.
3. Explain a therapeutic approach to treating ST survivors.

Area of Emphasis: Advanced Clinical Training

Part II. Sex Trafficking in Hawai`i: Research and Recommendations

Dominique Roe-Sepowitz, PhD, MSW, Arizona State University; Khara Jabola-Carolus JD, Hawaii State Commission on the Status of Women; Joey Keahiolalo, MSW, Child and Family Service Hawai`i

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Continuing Education: Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates

H8 – Innovative Prevention and Intervention Efforts to Prevent Bullying, Sexual Violence and Dating Violence

Dorothy Espelage, PhD, University of North Carolina; Sabina Low, PhD, ASU, Sanford School of Social & Family Dynamics

Audience Level: Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

This session will discuss recent research on the associations among bullying, sexual violence, and teen dating violence and interventions to address these forms of violence as well as the interventions being developed to prevent these behaviors in K-12 school settings. Youth-led programs will be highlighted where youth are actively involved in shifting school climate and increasing adult-student relationships and how technology can be leveraged to decrease these behaviors.

Objectives: As a result of this session, participants will be able to:
1) Identify associations among bullying, sexual violence, and dating violence.
2) Identify ways to engage youth to address bullying, sexual violence, and dating violence.
3) Analyze how technology can maximize current prevention efforts.

**Area of Emphasis:** Advocacy/Policy/Prevention, Applied Research, Evidence-Based/Promising Practices, Gender Issues, Prevention, Substance Abuse/Addictions

**Continuing Education:** Approved up to 3.0 CE credits for: *applicable to Child Abuse* Psychologists, MFTs, Counselors, Victim Advocates

**IVAT Specialty Certifications:** Approved to 3.0 Hours for: Trauma Care

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**H11 - Reduce Personal Suffering by Applying the Mindful Forgiveness Skills and Improve Your Personal and Professional Life**
*JoYi Rhyss, Mindful Forgiveness Center, Moxie Fitness LLC; Kaipo Paiva, Honolulu Police*

**Audience Level:** Intermediate: Appropriate for attendees who have been in the field 5-10 years and have basic information on a topic.

Dr. Fred Luskin and colleagues outline groundbreaking insights into the healing powers and medical benefits of forgiveness. The emphasis is on letting go of hurt, helplessness and anger while increasing confidence, hope and happiness. The implications are considerable, including the possibility that skills-based forgiveness training may prove effective in reducing anger as a coping style, reducing perceived stress and physical health symptoms, and thereby may help reduce allostatic load (e.g., immune and cardiovascular functioning) in daily living. The practice of mindfulness has moved from a largely obscure Buddhist concept founded about 2,600 years ago to a mainstream construct today. Advocates of mindfulness believe that virtually every client and professionals can benefit from being more mindful. The theorized list of benefits include: •Reduced rumination •Less emotional reactivity •More cognitive flexibility •Relationship satisfaction Additional benefits for therapists, counselors and medical professionals include: •Promotes empathy •Enhances self-compassion •Develop counseling skills that make them more effective •Fosters emotional intelligence and social connectedness

The Mindful Forgiveness workshops is a six week professional development training program funded in part by The Office of Youth Services designed to teach & promote mindfulness and forgiveness as foundational daily living skills using the two research-based tools: “Forgive for Good” by Dr. Fred Luskin and “Mindfulness in Daily Living” by Dr. Thao Le. Participants will be introduced to concepts, tools and practices that will allow them to implement a daily mindfulness practice and learn the steps to the Forgive for Good process. Participants will leave with a better understanding of how to let go of unhelpful thinking and be freer to have a more productive relationship with coworkers, family members and clients.

**Objectives:** As a result of this session, participants will be able to:
1) Practice three ways to cultivate mindfulness.
2) Identify the seven steps to forgiveness through interactive activities.
3) Assess how to apply these skills to let go of anger, frustrations & other negative emotions to obtain more joy and peace.

**Area of Emphasis:** Advocacy/Policy/Prevention, Basic/Student Level Training, Controversial/Critical Issues/Difficult Dialogues, Cultural Diversity/Trauma, Evidence-Based/Promising Practices

**Continuing Education:** Approved up to 3.0 CE credits for: Psychologists, MFTs, Counselors, Domestic Violence Offender Treatment Providers, Victim Advocates, and Substance Abuse Counselors