I am very pleased to be serving as president of the Section on Child Maltreatment of Division 37 for 2015 and 2016. For those of you who don’t know me, I am a professor of social work and psychology at the University of Southern California in Los Angeles. I have been doing research on the developmental impact of different forms of child abuse and neglect for more than 30 years.

Division 37 has provided the Section with a 2-hour slot for a symposium at the 2015 APA convention. An exciting program is planned: The title is, “The Institute of Medicine’s 2013 report, New Directions in Child Abuse and Neglect Research: Implementing the Recommendations and Future Directions.” Confirmed participants are Dr. Anne Petersen, who was the Chair of the Institute of Medicine (IOM) panel (and of the earlier IOM panel which resulted in the 1993 book, Understanding Child Abuse and Neglect), and Dr. Michael Meaney, from McGill University, a renowned researcher who studies the epigenetics of child maltreatment using both animal and human models. This should be an exciting symposium of interest to many Section members. I hope you can come. It is scheduled for Sunday, August 9, from 9 to 10:50. Also at this year’s convention, the Section will have a service project – details to follow soon!

Please send in your Section dues if you haven’t done so already and check with colleagues and friends to see if they have done likewise. Thank you.
Increasingly, children are becoming involved in the legal system in dependency and
criminal proceedings as a result of allegations of abuse and neglect, in delinquency
proceedings, and in family law proceedings resulting from divorce and custody matters.
Children often play an integral role in these proceedings. However, concern over the
emotional trauma that child witnesses may experience has led some to question the
extent to which children should be involved in legal proceedings. In fact, Justices
Blackmun and Rehnquist recognized the importance of this issue, asserting, “The fear and
trauma associated with a child’s testimony . . . have two serious identifiable conse-
quences: They may cause psychological injury to the child, and they may so overwhelm
the child as to prevent the possibility of effective testimony, thereby undermining the truth-
finding function of the trial itself” (Coy v. Iowa 487 U.S. 1012, 1032 (1988)).

The trauma children may experience as a result of participation in the judicial process,
may be due, in part, to their lack of knowledge about the process. Children’s lack of legal
knowledge is well-documented in the literature (Goodman et al., 1992; Quas et al., 2009;
Saywitz, Jaenicke, & Comparo, 1990). Studies also show that child witnesses express
fears and anxieties regarding participation in the process (Sas, 1991). Additionally, there
has been speculation that stress is a likely mediator of memory performance (Saywitz &
Nathanson, 1993). In a study of children’s knowledge and attitudes about dependency
court, Block et al., (2010) concluded, “children may profit from a greater understanding of
court”.

In a 2003 study, Nathanson and Saywitz examined the effects of the courtroom
environment on children’s system-related stress and memory. Results revealed that
children who were interviewed in a mock courtroom displayed significantly higher heart rate
variability, indicative of a stress response, than children interviewed in a private room. In
fact, the heart rates of children interviewed in the private room ranged from 60 - 120 beats
per minute, whereas children interviewed in the courtroom produced heart rates of 60 - 240
beats per minute. Moreover, the memory of children interviewed in the courtroom was also
impaired. The children interviewed in the private room recalled more than twice as much
information as the children interviewed in the courtroom. This study further demonstrated
the need to educate children about the judicial process in order to decrease their anxiety
and increase their ability to offer complete and accurate testimony.

To address this need, the Kids’ Court School (KCS) was established in the Boyd
School of Law at the University of Nevada, Las Vegas. The purpose of the KCS is to
educate children and youth about the judicial process and to teach them strategies to
reduce system-related stress. The KCS curriculum consists of three components: (1)
legal knowledge education; (2) stress inoculation training; and (3) a mock trial. Partici-
pants, ranging in age from 4 – 17-years-old, attend two 1-hour sessions. A one-week time
span between Session I and Session II is typical. The second session is taught approxi-
mately one week prior to the child’s scheduled court date.
Legal Knowledge Education

Session I addresses the pretrial and trial processes. Concepts such as accused, law, crime, investigation, and evidence are taught in familiar analogies to a child’s life to enable participants to apply legally-relevant concepts to their own circumstances. For example, “Accused means to blame someone for doing something wrong.” “If you accused someone of taking your pencil, it means you blamed them for taking your pencil.” “If you’re accused of doing something wrong, does it mean you did it? Just because somebody says someone else did something, it doesn’t mean they did it. The person who accuses someone of doing something wrong could be making a mistake.” To ensure the integrity of the legal process, actual facts about the child’s case are never discussed.

Children are then introduced to the roles and functions of courtroom participants such as the judge, bailiff, defendant, witness, prosecuting attorney, defense attorney and jury. For example, “The judge is in charge of the courtroom, kind of like your teacher is in charge of the classroom. The judge’s job is to make sure that everything that happens in court is fair. The judge is not on anybody’s side.” “The prosecuting attorney’s job is to take the evidence from the police investigation and decide if there is enough evidence to go to court. He/she helps witnesses tell what happened by asking them questions when they are on the witness stand.”

The witness’s role is emphasized, as this will be the child’s role in court. The importance of being a witness, truth-telling, taking an oath, and speaking so that the child can be heard and understood, are discussed. Children are also taught that if they do not remember or know the answer to a question or if they do not understand a question that is asked, it is appropriate to simply express that they do not remember, do not know or do not understand. Throughout the curriculum instruction, a model courtroom is used as a visual aid.

Stress Inoculation Training

Session II focuses on stress inoculation training. Children’s court-related fears are elicited, current coping skills are assessed, and two strategies, breathing techniques and positive self-talk, are taught as coping skills to reduce anxiety while testifying. During positive self-talk instruction, children are given examples of positive things they can say to encourage themselves if they experience stress or anxiety while testifying. Children are then asked to generate their own positive self-talk statements.

Mock Trial

Session II concludes with a mock trial in a moot courtroom. Law students function in the roles of prosecuting attorney, defense attorney, defendant, and bailiff. Children take turns playing the roles of both the judge and the witness. While on the witness stand, children are exposed to direct-examination, cross-examination and interruptions and objections, as in a real trial. The mock trial involves an innocuous case developed as part of the curriculum and not the child’s actual court case.

In an initial study evaluating the effects of the Kids’ Court School on children’s court-related stress, 189 children who attended the KCS rated 10 court-related experiences, such as having an attorney ask you questions in court
The role of trauma in ADHD: Implications for clinicians

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University of California, Berkeley
Advisor: Stephen P. Hinshaw, Ph.D.

While working at a treatment clinic for young children exposed to trauma and maltreatment, I noticed that many of the youngsters also seemed to present with symptoms of Attention-Deficit/Hyperactivity Disorder (ADHD). For instance, a child who had been maltreated by her foster parents would stare out the window for long periods of time. This led me to wonder, was she staring out the window because she was dissociating as a result of a traumatic stress response, or was she staring out the window because she had ADHD (as teachers suspected)?

In the U.S., 11% of children have been diagnosed with ADHD (CDC, 2014), while 10-20% are abused or neglected (CDC, 2012; Wildeman, Emanuel, Leventhal, Putnam-Hornstein, Waldfogel, & Lee, 2014). Yet we have only a limited understanding of the overlap between these two groups. What if, in some portion of cases, we as clinicians, parents, and teachers are superficially seeing and diagnosing and treating symptoms of hyperactivity and inattention – but it is really trauma experiences that underlie some of those overt manifestations of ADHD?

Our recent study (Guendelman, Owens, Galan, Gard, & Hinshaw, in press) evolved from a desire to understand the long-term consequences of co-occurring maltreatment in youth with ADHD. Females are relatively neglected in the ADHD literature, even though we know that ADHD in girls is associated with dire long-term impairments in functioning (Hinshaw et al., 2012). Given what we do know about the adverse effects of maltreatment in general populations, we thought that maltreatment would be an important factor to consider in understanding the long-term trajectories of females with childhood ADHD.

Using data from the Berkeley Girls with ADHD Longitudinal Study (BGALS), an ongoing study on females with and without a childhood diagnosis of ADHD, we carefully examined case files to document instances of maltreatment (i.e., physical abuse, sexual abuse, neglect) during childhood and adolescence. We found that nearly 23% of the ADHD group had experienced at least one form of maltreatment by adolescence (relative to only 11% in the non-ADHD comparison group). Compared to the 77% with ADHD but without documented maltreatment, the 23% of participants with ADHD plus maltreatment had worse functioning by young adulthood in all of the domains we examined, but most saliently in the domains of internalizing symptoms and self-harm related symptoms, including elevated suicide attempts, higher levels of bulimia/eating disorder symptoms, and lower self-esteem among maltreated participants. Even after controlling for many confounding variables (e.g., socioeconomic status, prenatal risk factors), our findings indicate that child or adolescent maltreatment specifically is an important risk factor for maladaptive functioning in young adulthood among women with childhood ADHD, particularly with respect to depression, anxiety, and suicidal behavior.

Our findings point to several important clinical and public health implications. First, clinicians treating individuals, particularly women, with ADHD, should consider proactively...
screening for early trauma experiences. Given that treatment approaches for ADHD and childhood trauma differ substantially, screening for maltreatment may help guide therapeutic interventions aimed at individuals with co-occurring ADHD and maltreatment. Our findings also suggest that increased support may be necessary for parents of children with ADHD, since parental stress is a risk factor for maltreatment (and stress tends to be higher among parents of children with ADHD).

Overall, it would be fruitful to think of ADHD as a multi-factorial disorder that is influenced both by biological and social-environmental factors. Consideration of a child’s life experiences with stress and trauma strongly merit consideration in the diagnosis and treatment of ADHD.

References


One of the findings of this study suggests that increased support may be necessary for parents of children with ADHD, since parental stress is a risk factor for maltreatment (and stress tends to be higher among parents of children with ADHD).
Planning for the 114th Congress, plus FY2016 Budget and Appropriations

PI-GRO is gearing up for the new Congress, identifying key allies and shaping our agenda for the next few months. Our coalitions are gearing up for potential reauthorizations of key legislation—the Juvenile Justice and Delinquency Prevention Act (JJDPA), the Runaway and Homeless Youth Act (RHYA), and the Child Abuse Prevention and Treatment Act (CAPTA). Thus far in January, PI-GRO has signed on to letters supporting reauthorization of the Children’s Health Insurance Program (CHIP), and opposing the Pain Capable Unborn Child Protection Act, which would ban all federal funding for abortions after 20 weeks gestation. Additionally, PI-GRO is working with our colleagues in the Education Directorate to review proposed language for violence prevention programs in schools. This language, if adopted, will expand violence prevention programming authorized in the Elementary and Secondary Education Act (ESEA) which is due for reauthorization this year.

With the arrival of the new Congress, the FY2016 budget process has also begun, with the President’s budget scheduled for an on-time February 2 release. APA will continue to support funding for programs that affect children, youth, and families, including: Head Start and Early Head Start, the Child Care and Development Block Grant; the Individuals with Disabilities Education Act (IDEA); and appropriations for postpartum depression screening.

Early Childhood

APA joined over 750 national and regional organizations in signing on to a Dec. 4, 2014, letter of support for the Maternal Infant and Early Childhood Home Visiting Program (MIECHV). The letter requests that Congress fund MIECHV at its current annual funding level of $400 million and take this action either during the current lame duck session or during the 114th Congress, prior to the program’s funding expiration in March of 2015. MIECHV supports the implementation and expansion of home visiting programs, evidence-based interventions that help children and families in all 50 states and six territories. In-home support and education to parents provide a cost-effective means of addressing the wide range of health, societal and educational challenges facing at-risk families. Outcomes of home visiting include improved prenatal care, early childhood development and health. These programs provide families with the resources and support they need to become more self-sufficient, while making cost-effective use of public funds.

APA joined 43 additional national partners from the Child Care and Early Learning Coalition to urge appropriators to increase investments in early learning and child development programs, including the Child Care Development Block Grant, Head Start, Preschool Development Grants, and Early Head Start in the 2015 federal fiscal year. A letter from coalition members sent Nov. 6, 2014, just as Congress prepared to return from recess, highlighted the critical need to expand the reach of several programs that support academic and economic success for children and families in need.

Violence and Abuse

On Sept. 16, 2014, APA sent a letter to Sen. Richard Blumenthal, D-Conn., supporting his efforts to improve the mental health systems’ response to violent incidents with his introduction of the Promoting Healthy Minds for Safer Communities Act (S. 2872). Among many provisions, the bill seeks to support individuals in crisis and to affirm the authority of the Centers for Disease Control and Prevention to carry out gun violence prevention research.
An Update on Past Award Winner
Dr. Kristin Abner

Helen Milojevich
Section Student Representative

We are excited to follow-up with Section Award winner Dr. Kristin Abner. Dr. Abner was awarded the Section Dissertation Award in 2012 for her dissertation entitled “Child Maltreatment, Child Welfare Intervention, and Child Outcomes: Contextual and Individual Inequalities”. Dr. Abner earned her B.A. in Sociology from the University of Virginia. She then went on to receive her M.A. and Ph.D. from the University of Illinois, Chicago, successfully defending her dissertation in 2014.

The primary goal of Dr. Abner’s dissertation was to identify individual and contextual correlates of child maltreatment and the child welfare system’s subsequent intervention(s), with a particular emphasis on differential response. She collected both national data using the National Survey of Child and Adolescent Well-Being-II (NSCAW-II), and local DCFS administrative data. At the national level, Dr. Abner found that caregivers who reported higher social support, and specifically, high affective support, were more likely to experience allegations of blatant child neglect than allegations of neglect/failure-to-provide. Caregivers with more social support as well as those who reported higher social order in their neighborhoods were also more likely to have cases that receive services. Caregivers with the more intensive child welfare interventions – those with substantiated cases with services or with a child removal – reported better neighborhood conditions and higher social support. The Illinois DCFS analysis found that, overall, among investigated families, there was a higher proportion of families who resided in neighborhoods with the highest risk factors with allegations of neglect. And, among investigated families, there was a higher proportion of families with substantiated cases and placements in the areas with the highest risk factors. Dr. Abner also found neighborhood-level interaction effects by race.

The findings from Dr. Abner’s dissertation have implications for social work policy and practice in helping to identify specific contextual risk factors facing families. These findings may help states better target neighborhoods to build place-based child maltreatment prevention initiatives as families within a neighborhood, or geographic area, might be experiencing shared contextual risk factors. These similar risk factors, in turn, might be contributing to maltreatment experienced by these families; making a community approach potentially both cost-effective and successful.

Currently, Dr. Abner works for ICF International as a manager in Family Self-Sufficiency, which focuses on Temporary Assistance to Needy Families (TANF), workforce development, healthy families, and pathways out of poverty. To that end, Dr. Abner works on two federal websites that provide resources to researchers, practitioners, and policy makers related to helping low-income families become more self-sufficient. She is also in the process of developing several child maltreatment-related research projects, including one that utilizes data from the National Youth in Transition Database. Thank you Dr. Abner for your contribution to the field of child maltreatment!
Happy New Year! We would like to use the Student Corner article this Insider to introduce the new Student Advisory Board for 2015. The student board members are in the midst of making plans for advocacy and service related to child maltreatment for the upcoming year, so we thought we would share our professional New Year’s resolutions with the newsletter readers.

Caitlin Smith (Student Representative): Caitlin is currently a doctoral candidate in clinical psychology at the University of Southern California and a predoctoral psychology intern at Children’s Hospital Los Angeles. She collaborates on research with Drs. Penelope Trickett and Janet Schneiderman on studies of child maltreatment and health care within the child welfare system. My professional New Year’s resolution is to set specific achievable goals for each calendar month that I commit myself to completing. First up, submit my dissertation for publication!

Lindsay Huffhines (Student Co-Representative): Lindsay is studying clinical child psychology at the University of Kansas. She works with Dr. Yo Jackson on the Studying Pathways to Adjustment and Resilience in Kids (SPARK) project, which investigates the interaction between risk and protective factors and subsequent outcomes in foster care children and adolescents. This year, my professional New Year’s resolution is to set aside protected writing time for three hours per week. I will use this time to work on research-related writing only, and I will not schedule meetings, check emails, or work on other tasks.

Craig Kramer (Senior Policy Officer): Craig is currently completing his dissertation at Antioch University New England, in order to earn his Psy.D. in Clinical Psychology. He completed his APA internship at the Children’s Institute, Inc. in Los Angeles, CA last year. My professional New Year’s resolution is to finish my dissertation and obtain a postdoc.

Amy Leonard (Junior Policy Officer): Amy is a second-year doctoral student in the School Psychology program at North Carolina State University, as well as a J.D. candidate at Campbell University – Norman Adrian Wiggins School of Law. She focuses on policy and practice related to services for abused children and their parents as well as community action targeting homeless children. My professional New Year’s resolution is to explore new ways to fuse the fields of law/public policy and psychology. They are constantly overlapping; in fact, it’s hard to have one without the other. I'm looking forward to seeing what opportunities are out there in these areas and how I can be a part of growing and being a part of this hybrid of disciplines.
Grace Bai (Diversity Officer): Grace is a third year doctoral student in the clinical psychology program at Loyola University in Chicago, Illinois. She studies whether implementing kin connections specialists, who engage youth’s kin and fictive kin while they are in child welfare, yields better outcomes. My hope for 2015 is to develop more clinical skills and competency working with underserved populations, and to collaborate more with researchers outside my program in multidisciplinary settings.

Cheryl Arndt (Communications Officer): Cheryl is working toward her Ph.D. in Psychology at Capella University in Minneapolis, Minnesota, and her research involves examining factors which are known to protect against child maltreatment (e.g., nurturing and attachment, family resiliency, concrete support, and social support) within service programs. Cheryl is also the Director of Performance Improvement at KidsPeace, and writes articles for their Healing magazine. My overarching professional resolution for 2015 is to finish the PhD! Beyond that, I would like to increase my skills in data visualization and presentation.

Helen Milojevich (Newsletter Officer): Helen is working on her Ph.D. in Psychology and Social Behavior at the University of California, Irvine. Her research interests include cognitive and emotional development in childhood, particularly in atypical populations (i.e., maltreated children and children with developmental disabilities). My professional New Year’s Resolution is to apply for (and hopefully obtain) postdoctoral funding since I will be completing my degree in a little over a year.

Here’s to a happy and productive 2015! If you’d like to share your professional New Year’s resolutions with us, email us at caitlias@usc.edu or lindsay.hufhines@ku.edu.
Special thanks go out to Mary Haskett, PhD, Professor of Psychology at North Carolina State University, for her generous donation to the Section on Child Maltreatment. Mary shared the royalties from her co-authored book, Supporting Families Experiencing Homelessness: Current Practices and Future Directions.

What is the book about? [the following is taken verbatim from the website] “Homelessness among families with children in the U.S. is rising rapidly due to the economic downturn. Supporting Homeless Families: Current Practices and Future Directions aims to raise the standard of services provided to families without homes through practices that are strengths-based and culturally competent. This book provides a contextual overview of family homelessness. An ecological and developmental framework for understanding the implications of homelessness from infancy through adulthood are presented with reference to existing research. The book also addresses innovative designs for providing collaboration between and among diverse services that interface with families experiencing homelessness. In doing so, the importance of providing families with culturally competent services that support them during episodes of homelessness as well as the period of rehousing are addressed. Examples of empirically proven interventions and best practices are showcased, and roadblocks to success and sustainability are discussed.” http://www.springer.com/us/book/9781461487173

Passionate about advocating for the needs of homeless children and their families, Mary recently published the results of a pilot study in Wake County, North Carolina, that found that 25 percent of children who are homeless are in need of mental health services. The study, conducted by researchers at North Carolina State University and Community Action Targeting Children who are Homeless (CATCH), highlights the need for more screening and support for the millions of homeless children in the United States. https://news.ncsu.edu/2015/02/haskett-homeless-2015/

Mary’s program of research is designed to gain understanding of factors that contribute to harsh parenting and factors that promote resilience of young abused children. She currently serves on the editorial boards of Child Abuse & Neglect and Journal of Clinical Child and Adolescent Psychology. Dr. Haskett is Past-President of the APA Section on Child Maltreatment and Co-chairs the Interdivisional Task Force on Promoting Positive Parenting in the Context of Family Homelessness.
The American Psychological Association
Section on Child Maltreatment

2015 Dissertation Grant Award

The Section on Child Maltreatment (Section 1 of Division 37, APA) announces its annual dissertation grant award. A $400 grant will be awarded to one successful graduate student applicant to assist with expenses in conducting dissertation research on the topic of child maltreatment.

Applicants are requested to submit:

1) A letter of interest, indicating how the applicant would use the award funds toward the completion of the dissertation research;
2) A 100 word abstract; and
3) A five-page proposal summarizing the research to be conducted.

Please submit applications by March 31 to:

Jennifer Kaminski
Past-President, Section on Child Maltreatment
jkaminski@cdc.gov

Applicants will be notified of the decision in May. The award will be presented at the annual convention of the American Psychological Association in Toronto, Ontario, August 6-9, 2015.

The American Psychological Association
Section on Child Maltreatment

EARLY CAREER AWARD FOR OUTSTANDING CONTRIBUTIONS TO SERVICE IN CHILD MALTREATMENT

The Section on Child Maltreatment (Section 1 of Division 37, APA) announces its 2015 Early Career Award for Outstanding Contributions to Service in the field of child maltreatment. Nominees should be professionals within eight years of receiving their terminal degree. They need not be a member of the Section. Self-nominations are welcome.

Nominations should include an electronic copy of the following:

1) A summary of the nominee’s accomplishments to date and anticipated future contributions. This summary should describe the nominee’s major accomplishments related to the field of child maltreatment and how the nominee’s work has had an impact on the field;
2) The nominee’s current curriculum vitae;
3) A letter of support; and
4) Other relevant supporting material, as appropriate.

Please submit applications by April 15 to:

Jennifer Kaminski
Past-President, Section on Child Maltreatment
jkaminski@cdc.gov

Applicants will be notified of the decision in May. The award will be presented at the annual convention of the American Psychological Association in Toronto, Ontario, August 6-9, 2015.
or answering questions in front of someone who may have hurt you, as significantly less stressful after attending KCS.

The United Nations Convention on the Rights of the Child “guarantees children the right to be heard in any judicial proceeding affecting them.” KCS could be a promising means to reducing child witness anxiety and helping them have a “voice” in court.

References


MISSION STATEMENT

The Section on Child Maltreatment of the Division of Child, Youth, and Family Services supports and promotes scientific inquiry, training, professional practice, and advocacy in the area of child maltreatment.

PURPOSES

The purpose of the Section on Child Maltreatment is to promote the general objectives of the American Psychological Association and the Division of Child, Youth, and Family Services; to support and encourage the development of the scientific study of child maltreatment and of sound professional practice relevant to child maltreatment; to provide up-to-date information about maltreatment; to encourage networking across Divisions/Sections in the area of maltreatment; and to advance scientific inquiry, training, and professional practice in the area of child maltreatment as a means of promoting the well-being, health, and mental health of children, youth, and families.

Interested in joining the Division or have a friend who may be interested? Go to http://www.apadivisions.org/division-37/sections/index.aspx and click the Online Application link.
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