**WEDNESDAY**

**MAY 9, 2018**

**7:30 A.M. – 8:15 A.M. REGISTRATION**

**WELCOME:** RRCAC Executive Director
Anna Frissell

<table>
<thead>
<tr>
<th>Time</th>
<th>Speaker/Presenter</th>
<th>Topic</th>
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<tbody>
<tr>
<td>8:15 A.M.</td>
<td>KEVIN MULCAHY</td>
<td><em>Randy &amp; Me</em></td>
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<tr>
<td>10:15 A.M.</td>
<td><strong>BREAK</strong></td>
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<tr>
<td>10:30 A.M.</td>
<td>NICOLA HERTING, Ph.D.</td>
<td><em>What Happens After Disclosure? Evidence-Based Trauma Screening, Assessment, and Treatment</em></td>
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<tr>
<td>11:15 A.M.</td>
<td>VAL ERICKSON, CNP &amp; MEGAN WILLIAMSON, RN</td>
<td><em>Abuse Exams: The Basics</em></td>
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<td><strong>LUNCH 12:00 - 1:15 P.M.</strong></td>
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<tr>
<td>1:15 P.M.</td>
<td>ALICE SWENSON, M.D.</td>
<td><em>Silent Assaults &amp; Occult Injuries</em></td>
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<tr>
<td>2:45 P.M.</td>
<td><strong>BREAK</strong></td>
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<tr>
<td>3:00 P.M.</td>
<td>KEVIN MULCAHY</td>
<td><em>Blindsided: 7 Sneaky Challenges Facing Survivors of Childhood Sexual Abuse</em></td>
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<td>4:30 P.M.</td>
<td><strong>CLOSING &amp; EVALUATIONS</strong></td>
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**THURSDAY**

**MAY 10, 2018**

**7:45 A.M. – 8:15 A.M. REGISTRATION/ SIGN IN**

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<td><em>Bridging the Gap- “Protecting our Kids”</em></td>
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<td>10:00 A.M.</td>
<td>JIM HOLLER</td>
<td><em>Child Torture- “The American Trend”</em></td>
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<td><strong>LUNCH 11:30 A.M – 1:00 P.M</strong></td>
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<td><strong>SILENT AUCTION ENDS AT – 11:45 A.M.</strong></td>
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<tr>
<td>1:00 P.M.</td>
<td>JIM HOLLER</td>
<td><em>Childhood Fall Injuries- “Accidental vs. Inflicted”</em></td>
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**Target Audience:** Multi-Disciplinary Service Providers

Disciplines include:

- Advocates
- Child Protection/Social Services
- Counselors/Therapists/Mental Health
- Forensic Interviewers
- Health Care:
  - Advanced Practice Providers
  - Physicians
  - Registered Nurses
- Judges
- Law Enforcement
- Parole & Probation
- Prosecution/Attorneys
- School Personnel
- Social Workers

*Any profession that provides services to children/families

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With the assistance of our agency partners, the RRCAC facilitates a Multi-Disciplinary response to child victims of physical or sexual abuse and their families.

This conference brings together our partners to enhance our skills so that we continue to provide effective services to the children and families we serve.

The following organizations and agencies have helped make this conference possible:

- Dakota Medical Foundation
- Minnesota Children’s Alliance
- Grand Forks County
- North Dakota Children’s Alliance
- North Dakota Chapter of Children’s Advocacy Center
- North Dakota Department of Corrections and Rehabilitation, VOCA
- North Dakota Department of Human Services
- United Way of Cass-Clay
- United Way of Grand Forks/East Grand Forks
KEVIN MULCAHY
Executive Assistant United States Attorney, Detroit

Kevin is a survivor of child sexual abuse. He works as an Assistant U.S. Attorney in Detroit and serves as the Executive Assistant United States Attorney. Throughout his career, Kevin has prosecuted a variety of cases, including offenses involving firearms, drugs, bank robberies, threats, and a wide variety of other federal prosecutions. But most of his caseload focuses on child exploitation crimes, including production of child pornography cases, traveler cases, and other significant crimes against children prosecutions. Kevin has been a federal prosecutor since 2002, with the first 3 1/2 years as an AUSA in San Diego, and the rest in Detroit. Kevin obtained his undergraduate degree in Statistics and American Culture from the University of Michigan and his JD from Santa Clara University School of Law. He has 3 kids, 2 cats, and a very nice wife.

Randy & Me
This presentation will recount Kevin’s own story of sexual exploitation at the hands of his soccer coach, Randy. But, it will not be merely a retelling of the past. Instead, the presentation will address lessons learned from his case by combining Kevin’s experience both as a victim and a long-time prosecutor of child exploitation cases. Knowing what he knows now, Kevin believes there are lessons to be learned from his story for the investigator (Kevin’s was great), the prosecutor (Kevin’s was terrible), and the forensic interviewer (Kevin did not have one). Beyond these (hopefully) useful lessons, the presentation will provide plenty of time for questions from attendees. Given the nature of our work, we don’t often get to ask questions (beyond factual questions) of our child victims. This presentation will provide that opportunity.

Blindsided: 7 Sneaky Challenges Facing Survivors of Childhood Sexual Abuse
Child sexual abuse professionals know the most common challenges facing survivors of child sexual abuse, such as fear, shame, guilt, depression, trust issues, substance abuse, etc. But there are other, less widely discussed questions that child sexual abuse survivors face. This presentation will focus on a few of these sneaky challenges, including:

- The Hard Conversation: How am I going to tell my spouse, family, and friends about this?
- The Monster Complex: Am I going to be a child molester when I get older?
- The Parent Trap: What kind of parent will I be?
- The Real Me: What are my “true” characteristics and what are traits that evolved from my abuse?
- The Big Guy: Where was God in all of this?
- The Crusader: As a survivor, what responsibility do I have to confront child sexual abuse in my profession?
- The Discount: Compared to others, was my abuse really that big of a deal?

Law enforcement, prosecutors, social workers, victim advocates, child protective service workers, and anyone working with child sexual abuse victims have an opportunity to speak life into these survivors. The goal of this presentation is to provide a better understanding of some of the challenges they face so that professionals can aid victims.

NICOLA HERTING, PH.D.
Mental Health Director, RRCAC

Nicola Herting, Ph.D. joined RRCAC in November 2017 as the Mental Health Director. Dr. Herting is a Licensed Clinical Psychologist and trained in various evidence-based treatment models. Dr. Herting has devoted the last 10+ years of her education and career to the health and well-being of children, families, and trauma survivors. Dr. Herting received her MS and Ph.D. in Clinical Psychology from University of North Dakota in Grand Forks, ND and completed her internship at Virginia Treatment Center for Children (VTCC) at Virginia Commonwealth University Health System in Richmond VA. Inspired by the work she completed at VTCC, Dr. Herting then devoted her post-doctoral training to the area of child abuse at Children’s Hospital of The King’s Daughter Child Abuse Program, in which she is now considered a clinical and forensic expert. Dr. Herting has extensive training in child trauma and maltreatment and is experienced in providing evidence-based, trauma-specific assessment and treatment, community trainings, and clinical consultation.

What Happens After Disclosure? Evidence-Based Trauma Screening, Assessment, and Treatment
The journey to healing and recovery after disclosure of abuse is hard and complex. The goal of this presentation is to shed light on what that process looks like for families and what mental health services may be recommended following disclosure of abuse. Starting with an overview of how trauma can impact children and why mental health services may be needed. It will cover the differences between trauma screening and assessment and the purpose and use of those services. Different evidence-based and trauma-specific treatments available in the community will be reviewed and how they help children and families heal and recover will be discussed.
VAL ERICKSON, CNP & MEGAN WILLIAMSON, RN
Sanford Children’s CARE Clinic

Val Erickson, DNP, FNP-C is a nurse practitioner who provides care at the Sanford Children’s CARE Clinic in Fargo, ND. She provides evaluations for children who may have been victims of physical abuse, sexual abuse, neglect, and/or medical child abuse; she also provides well child visits for children coming into the care of social services. Val has a nursing background in women’s health and family planning. She earned her doctorate in nursing practice from NDSU in May 2016 and has been with the CARE Clinic since. She has completed advanced training in pediatric acute sexual assault examinations, as well as evaluations for bruising, burns, fractures, and abusive head trauma. Val aims to care for the whole child in addressing the psychological consequences of these adverse experiences and is grateful to be able to serve families in our community.

Megan Williamson has been an RN at Sanford Children’s CARE Clinic for 2.5 years. Megan is trained as a Sexual Assault Nurse Examiner (S.A.N.E.) for both Adult/Adolescent and Pediatric populations. In the clinic Megan attends forensic interviews to help determine medical needs of the children, completes sexual abuse exams, and assists with outreach education of community members, other providers, law enforcement, and advocates. Prior to the CARE Clinic, Megan worked as an RN in Sanford Emergency Center for 3.5 years where she also performed SANE exams for adults.

Abuse Exams: The Basics
This presentation will cover the basics of an abuse exam, including the benefits of a medical exam, the different timeframes for exam completion, and the limitations of the medical evaluation. Presenters will give overviews of the medical exam process, laboratory or imaging workup that may be indicated; as well as covering who can consent and/or decline an exam.

ALICE SWENSON, M.D.
Child Abuse Pediatrician, Children’s Minnesota

Alice Swenson is a Child Abuse Pediatrician. She received her medical degree from the State University of New York, Health Science Center at Brooklyn in 2003 and went on to complete a Pediatric Residency at the University of Minnesota. She completed a fellowship in Child Abuse Pediatrics and was in the first group of pediatricians to be board certified in Child Abuse Pediatrics, in 2009. She has practiced in Milwaukee, Minnesota, and in Auckland, New Zealand. In her free time she enjoys reading, baking and being with her husband and daughter.

Silent Assaults & Occult Injuries
Often abuse of younger children is not easily observable. This presentation will cover a mix of these “silent assaults” such as strangulation, asphyxiation, drowning, and the hidden injuries that are generally only found with workup. Discussion will include that child abuse may be difficult to detect by laypeople and medical providers, the radiographic tests and studies that should be done to evaluate for child abuse, and the signs of child abuse that should prompt evaluation.

JIM HOLLER
Holler Training

Jim is a captivating instructor and keynote speaker with extensive experience and training in law enforcement, specializing in child abuse investigations, internet crimes against children and child protective service workers safety.

- Sixteen years of service as Chief of Police for Liberty Township Police Department in Adams County, Pennsylvania. In the sixteen years as police chief, his responsibilities were not only to manage daily activities of the police department but also investigated homicides, unattended deaths, rapes, child abuse, child sexual assaults, and other major crimes.
- He served as a fire marshal for Liberty Township for 8 years becoming the Township’s first fire/arson investigator. Prior to Chief Holler’s law enforcement career he retired as a paid firefighter from Montgomery County Maryland with 23 years of service.
- Established the first Internet Crimes Against Children task force in Adams County in 2005.
- Past president of the Wetzel/Tyler County Children’s Advocacy Center 2009 – 2012
- Board chairman – Survivors Inc. – Adams County domestic Violence/Rape Crisis Center
- Attended University of Pittsburgh, Fox Valley Technical College, Harrisburg Area Community College and the Jimmy Ryce Law Enforcement Training Center and has received training from several academies and centers including The National Children’s Advocacy Center.
- Internationally known speaker in addition to being a consultant for the National Children’s Advocacy Center in Huntsville, AL.

Summary of Jim Holler’s sessions continued on next page
Bridging the Gap—“Protecting Our Kids”
Children who fall prey to the cunning and ruthless child molester are often haunted by what has happened to them and feel that there is no way out. These children are looking for a superhero to help them heal and become a survivor and that is where each of you become that ‘superhero’ playing a huge part in that child’s life! To be a “superhero” is tough and takes an optimistic person with high self-esteem who truly believes in themselves and are willing to work on a team full of “superheroes”. This training is designed to give you the boost that you need to succeed in being that superhero!

The common goal between each agency is creating a child-safe world where children are free from being abused and exploited by adults. The “superhero” team must work very hard in an effort to achieve this goal; however, in many cases agencies can easily begin to work independent from the other. This causes friction between the team, and in many cases, a child may suffer and the perpetrator may go free. The primary goal of this training is to bring the team closer together, not only in an investigative role in child abuse cases, but also as a support system where they can lean on each other for encouragement and support.

This workshop is designed to show the benefits of joint investigation, such as improved protection and services for children, better understanding of roles and responsibilities, enhanced information sharing, more effective use of limited resources, enhanced training, and reduced burnout.

Child Torture—“The American Trend”
The very essence of “torture” is secretive and hidden. “The World Health Organization’s definition of torture is “Extended exposure to violence and deprivation”. Children with repeated or prolonged exposure to violence or deprivation, tortured at the hands of their caregivers and most not discovered or reported due to being locked in rooms, in cages, in cribs, on beds and in basements, chained to polls, starved and physically and sexually abused and in some occasions both law enforcement and CPS have been at the home on unrelated incidents completely unaware of the child or children that are being tortured in the house. This training will better prepare first responders, law enforcement, child protective services, fire and EMS, juvenile and adult probation, mental health and other in-home health professionals how to recognize possible signs of children being tortured inside the residence. The training will emphasis the importance the collaboration of the multidisciplinary team. There are many instances in which team members hold what might seem to be minor details however; when shared paint a clearer picture of what may be happening in the residence where this child is being tortured thus prompting a recovery of the child.

Childhood Fall Injuries—“Accidental vs. Inflicted”
Falls are the leading cause of unintentional injury for children with nearly one-third of all fall-related visits to hospital emergency rooms are of children ages 14 and under. This workshop will focus on identifying non-accidental fall injuries on children and will emphasize the specific techniques that can be used by the investigator in the assessment, investigation, and reconstruction of injuries sustained from a fall.

Vicarious Trauma—The Silent Killer
Vicarious traumatization is unique to police officers, social workers and other crisis workers because of their frequent contact with human suffering, especially when dealing with children. This training will address ways police officers and social workers can deal with the two types of trauma that may be experienced: secondary traumatic stress disorder and vicarious traumatization.

Multidisciplinary child abuse members routinely have to respond to situations where they are exposed to the worst of people and the worst of what people do to each other. The psychological impact of such incidents is referred to as vicarious traumatization. Vicarious traumatization is the psychological cost of caring for victims who have been traumatized while feeling a sense of responsibility to help. Most investigators learn to maintain an emotional boundary in order to protect them from affecting their emotional needs; it is more challenging to separate while dealing with victims of trauma, particularly when the situation involves a child and to cope with such traumatization problem behaviors, such as drug, sex, food, and gambling addictions can develop.

CONTINUING EDUCATION
Continuing education hours are pending approval for the following:
MN/ND Law Enforcement POST credits
MN/ND Social Work CEUs
MN/ND Nursing CEUs
ND Counselors CEU
MN/ND Attorney CLEs