The Queensland Child Protection Information Network Newsletter

February 2013
Introduction

On behalf of the Queensland Child Protection Information Network, I would like to wish you all a very happy and prosperous New Year. A very warm welcome also to all new readers of the Queensland Child Protection Information Network Newsletter and, of course, to all returning readers.

The Queensland Child Protection Information Network Newsletter is a joint initiative of the Mater Children's Hospital Child Protection Unit, the Southern Queensland Child Protection Clinical Network and the Maternity Child Health and Safety Unit (MCSU), and the Primary Community and Extended Care Branch of Queensland Health. This newsletter supports best practice in Child Protection by facilitating timely access to recent clinical, therapeutic and professional development information.

Each monthly edition is distributed to all Queensland Health Child Protection Units via the CSU mailing list. To ensure receipt of this newsletter or to unsubscribe, please contact your district health office or CSU.

Contact

We appreciate your professional opinion and feedback. If there are any matters you would like to raise with the editorial team, or if you would like to post information relating to best practice or professional development on the monthly information network, please contact Laura Koopmans (Research Officer, Child Protection Unit, Mater Children’s Hospital, South Brisbane).

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Access to links

Hold down the Ctrl key and click on blue link to access full text journal articles or web pages. Where full text articles are not linked, please use the corresponding reference to access the article via CKN.

(Note: The access to full-text journal articles is dependent on CKN e-journal subscription. If your access is restricted, document delivery can be requested via your professional library).
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**News**

**MAIN TOPIC**

QUEENSLAND CHILD PROTECTION COMMISSION OF INQUIRY: DISCUSSION PAPER RELEASED

18 February

A discussion paper has been released to invite debate around some of the more significant issues and reform options which have arisen from the Queensland Child Protection Commission of Inquiry. This paper aims to provide a comprehensive exploration of the key issues facing the system, and some preliminary ideas aimed at addressing the problems identified. Opinions and views of respondents are sought on the issues and proposals for reform.

*Access discussion paper:*

**A practical approach to child protection and supervisory neglect**

30 January

This webinar, presented on 11 December 2012, considered the theoretical understanding of neglect and adequate supervision, and explored differences in identification of supervisory neglect between diverse groups of professionals. A recording of the Webinar and transcript are now available online via the following link:


**Campaign aims to reduce high number of Aboriginal and Torres Strait Islander children in the child protection system**

31 January

A national campaign is being planned to address the dramatic over-representation of Aboriginal and Torres Strait Islander children and young people in the child protection system.


**Ombudsman calls for better and more effective action on Aboriginal Child Sexual Abuse (NSW)**

1 February

A NSW Ombudsman report on child sexual abuse in Aboriginal communities has called for urgent action to address a chronic failure to fill vacant positions, improve the effectiveness of government service delivery and strengthen the accountability of government agencies and NGOs, especially in high-need locations in remote parts of the state.

*Access media release:*

**Agreement signed to target online child sex crime**

6 February

The Australian Federal Police (AFP) and the Australian Communications and Media Authority (ACMA) have signed a new
agreement to help combat the flow of child abuse materials on the internet.

Access media release:

Victoria’s first Commissioner for Children and Young People has been appointed
8 February

Victorian Premier Ted Baillieu and Minister for Community Services Mary Wooldridge have announced the appointment of Bernie Geary OAM as Victoria’s first Commissioner for Children and Young People.

Access media release:

Update: Royal Commission into Institutional Responses to Child Sexual Abuse
13 February

The Australian Government has introduced legislation to amend the Royal Commissions Act 1902 to assist the work of the Royal Commission into Institutional Responses to Child Sexual Abuse.

Access media release:

Australia’s first National Children’s Commissioner has been appointed
25 February

The Gillard Government today announced the appointment of Ms Megan Mitchell as Australia’s first National Children’s Commissioner.

Access media release:
Research Update

Abusive Head Trauma

1. Incidence of retinal hemorrhages in abusive head trauma


OBJECTIVES: To evaluate whether a relationship exists between the presence of retinal haemorrhages and confessions and/or identified perpetrators in cases of abusive head trauma.

METHODS: A retrospective chart review was conducted of all abusive head trauma cases. All cases that met criteria for abusive head trauma were placed into one of three categories: perpetrator confessed (category A), perpetrator identified without confession (category B), and no perpetrator identified (category C).

RESULTS: Forty-eight cases met the criteria for abusive head trauma, with 18, 16, and 14 cases in categories A, B, and C, respectively. Retinal haemorrhages were identified in 16 of 18 (88%) cases in category A, 12 of 16 (75%) in category B, and 6 of 14 (43%) in category C. A statistically significant difference regarding the presence of retinal haemorrhages was seen for perpetrator identified (28 of 34 or 82%) compared to no perpetrator identified (6 of 14 or 43%) (P = .034). The difference in retinal hemorrhages was correlated to the higher incidence of acute presentation in the perpetrator identified group (31 of 34 or 91%) compared to that in the perpetrator not identified group (9 of 14 or 64%) (P = .023).

CONCLUSION: The incidence of retinal haemorrhages in abusive head trauma for identified perpetrators, regardless of a confession, is similar. However, there is a statistically significant decrease in the incidence of retinal haemorrhages in abusive head trauma when comparing identified perpetrators to non-identified perpetrators. This decreased incidence of retinal haemorrhages was statistically correlated to a lower incidence of acute presentation in victims of abusive head trauma without an identified perpetrator.

Abstract online: http://www.ncbi.nlm.nih.gov/pubmed/23380029

2. Findings of perinatal ocular examination performed on 3573, healthy full-term newborns


OBJECTIVES: To document the findings of a newborn eye examination programme for detecting ocular pathology in the healthy full-term newborn.

METHODS: This is a cross-sectional study of the majority of newborns born in the Kunming Maternal and Child Healthcare Hospital,
China, between May 2010 and June 2011. Infants underwent ocular examination within 42 days after birth using a flashlight, retinoscope, hand-held slit lamp microscope and wide-angle digital retinal image acquisition system. The retinal fundus examination utilised the RetCam wide-field digital imaging system (Clarity Medical Systems, Pleasanton, California, USA). The external eye, pupillary light reflex, red reflex, opacity of refractive media, anterior chamber and posterior segments were also examined.

RESULTS: A total of 3573 healthy full-term newborns were enrolled and examined in the programme. There was detection of 871 abnormal cases (24.4%). The majority of abnormal exams were 769 (21.52%) retinal haemorrhages. Of these, there were 215 cases of significant retinal haemorrhage, possible sight threatening or amblyogenic, representing 6.02% of the total. In addition, 67 cases (1.88%) involved macular haemorrhage. The other 107 cases (2.99%) with abnormal ocular findings included subconjunctival haemorrhage, congenital microphthalmos, congenital corneal leukemia, posterior synechia, persistent pupillary membrane, congenital cataract, enlarged C/D ratio, retinal hamartoma versus retinoblastoma, optic nerve defects, macular pigment disorder and non-specific peripheral retinopathy.

CONCLUSION: Ocular examination of healthy newborns leads to the detection of a significant number of ocular pathologies. The most commonly discovered ocular abnormality during examination of the newborns in this study is retinal haemorrhage. The long-term impact of these findings is unknown. Although presumed by some to benign, neonatal retinal haemorrhages due to birth trauma could be involved in altering visual development. Further work, including prospective examination of newborns with long-term follow-up, is needed and supported by our findings.

Full text: 
http://bjo.bmj.com/content/early/2013/02/19/bjophthalmol.2012.301533.full.pdf

3. Subconjunctival hemorrhages in infants and children: a sign of nonaccidental trauma


SUMMARY: Subconjunctival haemorrhages in infants and children can be a finding after non-accidental trauma. We describe 14 children with subconjunctival haemorrhages on physical examination, who were subsequently diagnosed by a child protection team with physical abuse. Although infrequent, subconjunctival haemorrhage may be related to abuse. Non-accidental trauma should be on the differential diagnosis of subconjunctival haemorrhage in children, and consultation with a child abuse paediatrics specialist should be considered.
4. Abusive head trauma in young children: a population-based study


**OBJECTIVE:** The objectives of this study were to provide population-based incidence estimate of abusive head trauma (AHT) in children aged 0 to 5 years from inpatient and emergency department (ED) and identify risk characteristics for recognizing high-risk children to improve public health surveillance.

**METHODS:** This was a retrospective cohort study based on children's first encounter in ED or hospital admission with a diagnosis of head trauma (HT), 2000-2010. The relationship between clinical markers and AHT was examined controlling for covariables in the model using Cox hazards regression. Kaplan-Meier incidence probability was plotted, and the number of weeks elapsing from date of birth to the first encounter with HT established the survival time (T).

**RESULTS:** Twenty-six thousand six hundred eighty-one children had HT, 502 (1.8%) resulted from abuse; 42.4% was captured from ED. Incidence varied from 28.9 (95% confidence interval [CI], 27.9-37.4) in infants to 4.1 (95% CI, 2.4-5.7) in 5-year-olds per 100,000 per year. Adjusted hazard ratio was 20.3 (95% CI, 10.9-38.0) for intracranial bleeding and 11.4 (95% CI, 8.57-15.21) for retinal haemorrhage.

**CONCLUSIONS:** Incidence estimates of AHT are incomplete without including ED. Intracranial bleeding is a cardinal feature of AHT to be considered in case ascertainment to improve public health surveillance.

**Abstract online:** http://www.ncbi.nlm.nih.gov/pubmed/23426240

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**Child physical abuse**

1. The utility of follow-up skeletal surveys in child abuse


**OBJECTIVE:** Follow-up skeletal surveys (FUSS) are performed frequently in cases of possible physical abuse based on the evidence from small retrospective cohorts. Our objective was to determine the proportion of FUSS that identified new information in a large, multicentre population of children with concerns of physical abuse.

**METHODS:** This was a prospective secondary analysis of an observational study of all children <10 years of age (120 months) who underwent evaluation for possible physical abuse by 20 US child abuse teams. This analysis included all children in whom FUSS was recommended and measured rates of FUSS completion, results of FUSS, and the change in perceived likelihood of abuse before and after FUSS.
RESULTS: Among 2890 children enrolled in the Examining Siblings To Recognize Abuse research network, 2049 underwent skeletal survey and 796 (38.8%) had FUSS. A total of 174 (21.5%) subjects had new information identified by FUSS, including 124 (15.6%) with at least 1 new fracture and 55 (6.9%) with reassuring findings compared with the initial skeletal survey. Among cases with new fractures, the estimated likelihood of abuse increased in 41 (33%) cases, and 51 cases (41%) remained at the maximum likelihood of abuse.

CONCLUSIONS: FUSS identified new information and affected the perceived likelihood of abuse in a substantial fraction of cases in which it was completed. These data support existing guidelines and, in addition, suggest that FUSS should be considered in cases with lower initial levels of concern for abuse.

Abstract online:

2. Optimizing bone surveys performed for suspected non-accidental trauma with attention to maximizing diagnostic yield while minimizing radiation exposure: utility of pelvic and lateral radiographs


BACKGROUND: Skeletal surveys for non-accidental trauma (NAT) include lateral spinal and pelvic views, which have a significant radiation dose.

OBJECTIVES: To determine whether pelvic and lateral spinal radiographs should routinely be performed during initial bone surveys for suspected NAT.

MATERIALS AND METHODS: The radiology database was queried for the period May 2005 to May 2011 using CPT codes for skeletal surveys for suspected NAT. Studies performed for skeletal dysplasia and follow-up surveys were excluded. Initial skeletal surveys were reviewed to identify fractures present, including those identified only on lateral spinal and/or pelvic radiographs. Clinical information and MR imaging was reviewed for the single patient with vertebral compression deformities.

RESULTS: Of the 530 children, 223 (42.1%) had rib and extremity fractures suspicious for NAT. No fractures were identified solely on pelvic radiographs. Only one child (<0.2%) had vertebral compression deformities identified on a lateral spinal radiograph. This infant had rib and extremity fractures and was clinically paraplegic. MR imaging confirmed the vertebral body fractures.

CONCLUSION: Since no fractures were identified solely on pelvic radiographs and on lateral spinal radiographs in children without evidence of NAT, nor in nearly all with evidence of NAT, inclusion of these views in the initial evaluation of children for suspected NAT may not be warranted.
Child sexual abuse

1. The long-term effects of child sexual abuse


SUMMARY: This paper reviews recent Australian and international research on the long-term effects of child sexual abuse. It aims to assist practitioners and policy-makers who work with survivors of sexual abuse and their families to understand the significant findings from this large and sometimes complex body of research.


2. Distressing perineal and vaginal pain in prepubescent girls: an aetiology


OBJECTIVES: To propose an aetiology and treatment for distressing perineal and vaginal pain in a paediatric female population.

METHODS: Between 1997 and 2011, we saw 24 prepubertal girls (mean age of seven years, 11 months) with distressing vaginal pain, both before and after we suspected that pinworms (Enterobius vermicularis) were the cause.

RESULTS: Prior to 2005, two of six girls had resolution of their symptoms, one of whom had repeated courses of mebendazole. After 2005, when pinworms were discovered in one patient, treatment with mebendazole 100 mg weekly for three weeks resolved symptoms in 18 girls. Three girls had a recurrence of symptoms within 2-4 months, and repeat treatment with mebendazole was successful.

CONCLUSIONS: Pinworms should be considered when prepubertal girls present with distressing perineal or vaginal pain, and treatment with weekly mebendazole should be offered.

Abstract online: http://www.ncbi.nlm.nih.gov/pubmed/23311477

3. The impact of child sexual abuse on the course of bipolar disorder: a systematic review

Maniglio, R. Bipolar Disord Ahead of print [Epub 24/01/2013].

OBJECTIVES: The aim of this review was to elucidate the impact of child sexual abuse on all clinical phenomena that occur after the onset of bipolar disorder, including associated clinical features that are not part of the diagnostic criteria for the disorder.

METHODS: Five databases were searched and supplemented with a hand search of reference lists from retrieved papers. Study quality was assessed using a validated quality
assessment tool. Blind assessments of study eligibility and quality were conducted by two independent researchers to reduce bias, minimize errors, and enhance the reliability of findings. Disagreements were resolved by consensus.

RESULTS: Eighteen studies that included a total of 2996 adults and youths with bipolar disorder and met the minimum quality criteria necessary to ensure objectivity and not invalidate results were analysed. Across studies, child sexual abuse was strongly (and perhaps directly) associated with posttraumatic stress disorder; whereas it was less strongly (and perhaps indirectly) related to suicide attempts, alcohol and/or drug abuse or dependence, psychotic symptoms, and an early age of illness onset. In regard to the association between child sexual abuse and other clinical variables concerning the course of bipolar disorder, evidence was scant or conflicting.

CONCLUSION: Child sexual abuse is associated (either directly or indirectly) with some clinical phenomena that represent a more severe form of bipolar disorder. Although such a traumatic experience may directly affect the development of posttraumatic stress disorder, the effects of early sexual abuse on later suicidal behaviour, substance abuse, and psychotic symptoms may operate through the mediating influences of certain psychopathological or neurobiological variables.

Abstract online:

4. Identifying sexual grooming themes used by internet sex offenders


ABSTRACT: In the context of the sexual abuse of children, “grooming” is a process by which an individual prepares the child and their environment for abuse to take place, including gaining access to the child, creating compliance and trust, and ensuring secrecy to avoid disclosure (Craven et al. 2007). Grooming can be difficult to identify and define, especially Internet sexual grooming, as it incorporates a variety of behaviours and processes and can differ greatly in duration. This study looks to establish possible strategies that Internet sex offenders use within the grooming process, within the initial hour of contact with a child on-line. Eight transcripts were qualitatively analysed using thematic analysis. The transcripts that were analysed featured a “decoy” adult posing as a child, and an adult male who was later convicted following those discussions. Three main themes were identified in the transcripts: Rapport-building, Sexual Content, and Assessment. Implications for practice are discussed in the article.

Abstract online:
http://www.tandfonline.com/doi/abs/10.1080/01639625.2012.707550
Emotional abuse & neglect


No abstract available.


2. Adolescent neglect, juvenile delinquency and the risk of recidivism


OBJECTIVES: Victims of child abuse and neglect are at an increased risk of involvement with the juvenile justice and adult correctional systems. Yet, little is known about the continuation and trajectories of offending beyond initial contact with law enforcement. Neglect likely plays a critical role in continued offending as parental monitoring, parental rejection and family relationships are instrumental in explaining juvenile conduct problems. This study sought to determine whether neglect is associated with recidivism for moderate and high risk juvenile offenders in Washington State.

METHODS: Statewide risk assessments and administrative records for child welfare, juvenile justice, and adult corrections were analysed.

RESULTS: The sample was diverse (24 % female, 13 % African American, 8 % Hispanic, 5 % Native American) and included all moderate and high risk juvenile offenders screened by juvenile probation between 2004 and 2007 (n = 19,833). Official records from child protection were used to identify juvenile offenders with a history of child neglect and to identify juvenile offenders with an ongoing case of neglect. Event history models were developed to estimate the risk of subsequent offending. Adolescents with an ongoing case of neglect were significantly more likely to continue offending as compared with youth with no official history of neglect. These findings remain even after controlling for a wide range of family, peer, academic, mental health, and substance abuse covariates.

Interrupting trajectories of offending is a primary focus of juvenile justice.

CONCLUSION: The findings of the current study indicate that ongoing dependency issues play a critical role in explaining the outcomes achieved for adolescents in juvenile justice settings. The implications for improved collaboration between child welfare and juvenile justice are discussed.

Abstract online: http://www.ncbi.nlm.nih.gov/pubmed/23334336
Prevention and interventions

1. Nine-year follow-up of a home-visitation program: a randomized trial


OBJECTIVES: To evaluate the extent to which a home-visitation program (Early Start) had benefits for child abuse, child behaviour, and parental- and family-level benefits to the 9-year follow-up.

METHODS: A randomized controlled trial in which 220 families receiving Early Start were contrasted with a control series of 223 families not receiving the program. Families were enrolled in the program for up to 5 years. Outcomes were assessed at 6 months, annually from 1 year to 6 years, and at 9 years after trial entry.

RESULTS: Comparisons between the Early Start and control series showed that families in the Early Start program showed significant (P < .05) benefits in reduced risk of hospital attendance for unintentional injury, lower risk of parent-reported harsh punishment, lower levels of physical punishment, higher parenting competence scores, and more positive child behavioural adjustment scores. Effect sizes (Cohen’s “d”) ranged from 0.13 to 0.29 (median = 0.25). There were no significant differences (all P values > .05) between the Early Start and control series on a range of measures of parental behaviour and family outcomes, including maternal depression, parental substance use, intimate partner violence, adverse economic outcomes, and life stress.

CONCLUSIONS: The Early Start program was associated with small to moderate benefits in a range of areas relating to child abuse, physical punishment, child behaviour, and parenting competence. There was little evidence to suggest that the Early Start program had benefits that extended to the level of parents or family overall.

_Abstract online:_

2. Long-term changes in parenting and child behaviour after the home-start family support program


OBJECTIVES: The intervention Home-Start is a wide spread program in a number of countries, among which the Netherlands. In Home-Start, trained volunteers visit families with young children in need of support once or twice a week to help them to deal with problems in family life and parenting. Little is known, however, about the effects of Home-Start. This study describes short- term and long term changes in families that participated in Home-Start.

METHODS: Three groups of families with young children (at the start mean age 1 ½ years) were followed over a period of four
years. One of the groups of families participated in the Home-Start family support program in the first 6.6 months of this period. The two other groups were (1) a randomly selected community sample and (2) a group of families with elevated parenting stress and a need for support. Data were collected at the beginning of the study, (after median 1.4 months), directly after the intervention (median 6.6 months) and at two follow-up occasions (respectively, median 12.5 and 49.2 months after the first measurement). At the last measurement, data were available for 33, 45 and 34 families respectively.

RESULTS: Multilevel analysis showed more positive changes in parental wellbeing, competence and behaviour (more consistent behaviour and less rejection) during the intervention period in the Home-Start group than in the two other groups. At the three year follow up, the Home-Start group showed, compared to the other groups, more improvements in parenting (more responsiveness), but also diminished child externalizing and internalizing behaviour problems (less oppositional defiant behaviour, affective problems and anxiety problems).

CONCLUSION: Home-Start seems a promising family support intervention that deserves to be studied more extensively.

Abstract online: http://www.sciencedirect.com/science/article/pii/S0190740913000467

3. Behavioral interventions and counseling to prevent child abuse and neglect: a systematic review to update the U.S. preventive services task force recommendation


BACKGROUND: In 2004, the U.S. Preventive Services Task Force determined that evidence was insufficient to recommend behavioural interventions and counselling to prevent child abuse and neglect.

OBJECTIVES: To review new evidence on the effectiveness of behavioural interventions and counselling in health care settings for reducing child abuse and neglect and related health outcomes, as well as adverse effects of interventions.

DATA SOURCES: MEDLINE and PsycINFO (January 2002 to June 2012), Cochrane Central Register of Controlled Trials and Cochrane Database of Systematic Reviews (through the second quarter of 2012), Scopus, and reference lists.

STUDY SELECTION: English-language trials of the effectiveness of behavioural interventions and counselling and studies of any design about adverse effects.

DATA EXTRACTION: Investigators extracted data about study populations, designs, and outcomes and rated study quality using established criteria.

DATA SYNTHESIS: Eleven fair-quality randomized trials of interventions and no
studies of adverse effects met inclusion criteria. A trial of risk assessment and interventions for abuse and neglect in paediatric clinics for families with children aged 5 years or younger indicated reduced physical assault, Child Protective Services (CPS) reports, non-adherence to medical care, and immunization delay among screened children. Ten trials of early childhood home visitation reported reduced CPS reports, emergency department visits, hospitalizations, and self-reports of abuse and improved adherence to immunizations and well-child care, although results were inconsistent.

LIMITATION: Trials were limited by heterogeneity, low adherence, high loss to follow-up, and lack of standardized measures.

CONCLUSION: Risk assessment and behavioral interventions in pediatric clinics reduced abuse and neglect outcomes for young children. Early childhood home visitation also reduced abuse and neglect, but results were inconsistent. Additional research on interventions to prevent child abuse and neglect is needed.

Abstract online:  

Child protection professionals

1. Mandatory reporting of child abuse and neglect: crafting a positive process for health professionals and caregivers


SUMMARY: Health professionals working with children and their families are often required by law to report to governmental authorities any reasonable suspicion of child abuse and/or neglect. Extant research has pointed toward various barriers to reporting, with scant attention to positive processes to support the reporting process. This paper focuses on the context for mandatory reporting and evidence-informed practice for supporting a more structured and purposeful process of mandatory reporting. These practical strategies discusses: (1) the factors that positively influence the relationship between a child’s caregivers and the mandated health professional reporter; (2) a framework and specific skills for discussing concerns about maltreatment and reporting to child protective services with the caregiver(s); and (3) the need for further training and education of health professionals.

Abstract online:  
1. Longitudinal outcomes for victims of child abuse


SUMMARY: Childhood abuse and neglect (child maltreatment) represent a common and significant public health burden. The consequences of maltreatment can be seen immediately, in the short term and in the long term. Determination of the exact prevalence of childhood maltreatment is difficult, as many cases go unreported; however in reported cases there is an estimated $124 billion annual burden on the US health-care system. The evaluation of potential maltreatment is difficult as many of the initial symptoms are subtle and can be explained with alternative illnesses or injuries. Potential immediate and short-term effects include brain injury, shaken baby syndrome and behavioural regression. The potential long-term sequelae of child maltreatment are explored in detail here and include increased risks of the development of mental health disorders, substance use disorders and chronic physical complaints during development and adulthood. Lastly, the review provides an overview of current treatment approaches for victims of childhood maltreatment.

Abstract online:

2. Factitious disorders and Munchausen syndrome: the tip of the iceberg


OBJECTIVES: This population-based study evaluates the prevalence of factitious disorders, Munchausen syndrome, and Munchausen syndrome by proxy in a clinical setting.

METHODS: All children referred to the Paediatric Unit of the Department of Paediatrics of the Catholic University Medical School (Agostino Gemelli Hospital) in Rome were recruited between November 2007 and March 2010. An experienced interdisciplinary team of medical professionals analysed all suspected cases.

RESULTS: A total of 751 patients were hospitalized. Factitious disorders were diagnosed in 14/751 patients, resulting in a prevalence of 1.8%. Three of 14 (21.4%) patients fulfilled the criteria for Munchausen syndrome. Munchausen syndrome by proxy was identified in four of 751 patients, resulting in a prevalence of 0.53%. The perpetrator was the mother in three of four of these cases.

CONCLUSION: The epidemiological data obtained in this population-based study indicate that the prevalence of factitious disorders, Munchausen syndrome, and Munchausen syndrome by proxy is higher than previously observed. Moreover, early detection was possible thanks to the
awareness of an expert interdisciplinary team. We suggest that physicians must consider the possibility of these diagnoses whenever there are discrepancies in a child's illness presentation.

Abstract online:

3. The effects of cross-examination on children's reports of neutral and transgressive events

Fogliati, R. and K. Bussey Legal Criminal Psychology Ahead of print [Epub 18/02/2013].

OBJECTIVES: In many jurisdictions child witnesses who testify in court about their own sexual abuse are cross-examined by a defence attorney. Children find this process to be distressing, and despite recent child-focussed modifications to other aspects of the legal process, cross-examination has remained largely unaltered. This lack of modification is due, in part, to the assumption that cross-examination promotes truthful testimony (Wigmore, 1974 Evidence in trials at common law). However, little empirical research has investigated the effects of cross-examination questions on children's reports of neutral and transgressive events. To examine these effects a laboratory-based study was conducted.

METHODS: One hundred and twenty kindergarten (M = 6 years) and grade 2 (M = 8 years) students participated individually in a staged event. Children witnessed an adult commit a transgression and were then interviewed twice about it. Children first underwent a direct-examination interview followed by either a direct- or cross-examination interview.

RESULTS: Children's reports of neutral events were significantly less accurate in Interview 2 cross-examination, than they were in Interview 1 direct-examination, whereas children interviewed twice with direct-examination were equally accurate in Interviews 1 and 2. Furthermore, children whose second interview involved cross-examination were less accurate in their reports of neutral events than were children whose second interview was a direct examination. Cross-examination also affected some children's disclosures of a witnessed transgression. More of the older children provided truthful disclosures of the transgression in the initial direct examination compared with the Interview 2 cross-examination.

CONCLUSION: Findings suggest that cross-examination as used in this study may not be the most effective procedure for eliciting truthful testimony for both neutral and transgressive events from children aged between 5 and 8 years

Abstract online:
4. Child abuse and epigenetic mechanisms of disease risk


BACKGROUND: Child abuse is highly prevalent and associated with increased risk for a range of health problems, including cancer, cardiovascular disease, diabetes, psychiatric disorders, and other health problems. Little is currently known about the mechanism by which early adversity confers risk for health problems later in life. PURPOSE: To determine if there are epigenetic differences associated with child maltreatment that may help explain association between adverse childhood experiences and later health problems.

METHODS: As part of a study examining genetic and environmental factors associated with depression, saliva DNA specimens were collected on 96 maltreated children removed from their parents due to abuse or neglect and 96 demographically matched control children between 2003 and 2010. In 2011, the Illumina 450K BeadChip was used on stored DNA specimens and analyzed to examine whole-genome methylation differences between maltreated and control children.

RESULTS: After controlling for multiple comparisons, maltreated and control children had significantly different methylation values at 2868 CpG sites (p<5.0 x 10(-7), all sites; average methylation difference per site=17%; range=1%-62%). The gene set contained numerous markers of diseases and biological processes related to the health problems associated with early childhood adversity.

CONCLUSIONS: Although replication is required, this study suggests that epigenetic mechanisms may be associated with risk for health problems later in life in maltreated children. This study lays the groundwork for future studies examining health and methylation measures to further characterize the role of epigenetic mechanisms in conferring risk for medical problems in individuals with histories of early adversity.


Reviews / Guidelines

1. Guidelines for psychological evaluations in child protection matters


SUMMARY: The problems of abused and neglected children are epidemic in our society (U.S. Department of Health and Human Services, Administration on Children, Youth, and Families, 2008) and create issues that psychologists may be called upon to address. Psychologists are positioned to contribute significantly to decision making in child protection matters. Psychological data and expertise may provide sources of information and a perspective not otherwise available to courts regarding the functioning of parties, and thus may increase the fairness of
decisions by the court, state agency, or other party. These guidelines are a revision of the 1999 "Guidelines for Psychological Evaluations in Child Protection Matters" (American Psychological Association [APA], 1999). These guidelines are informed by APA’s "Ethical Principles of Psychologists and Code of Conduct" ("APA Ethics Code"; APA, 2002a, 2010). (PsyclINFO Database Record (c) 2013 APA, all rights reserved).

Abstract online: http://www.ncbi.nlm.nih.gov/pubmed/23025746

2. The aftermath of childhood trauma on later life mental and physical health: a review of the literature


OBJECTIVES: This article is an examination of the empirical literature published in peer-reviewed journals, which investigated samples of adults aged 50 and older, who had experienced trauma, in childhood with follow-up of the impact on later life mental and physical health.

METHODS: Articles were identified through searches of EBSCO host databases, such as PubMed, SocioIndex, and PsychoLit. Search terms such as childhood trauma and cumulative trauma were paired with the term older adults in varying combinations.

RESULTS AND CONCLUSION: The collective findings of 23 studies published between 1996 and 2001 suggested that trauma first documented as occurring in childhood is associated with later life mental and physical health. Methodological limitations and future directions as well as recommendations for practice, policy, and research with older adults and trauma are delineated.

Abstract online: http://tmt.sagepub.com/content/early/2012/03/26/1534765612437377.abstract

3. Child maltreatment: promising approaches and new directions


OBJECTIVES: This review summarizes the key articles in the field of child maltreatment, addressing abusive head trauma, physical abuse, sexual abuse, and global issues surrounding maltreatment. This topic is salient for both general paediatricians as well as specialists.

RECENT FINDINGS: Many articles this year focus on the importance of making an accurate diagnosis when considering child maltreatment, whether in the form of physical or sexual abuse. There is also a focus on understanding the epidemiology of abuse, as some data show a decrease in numbers, which is felt by many in the field to be a misleading impression.

SUMMARY: An appreciation of the scope of Child Abuse Pediatrics requires an understanding of physical abuse, sexual abuse, and neglect. The authors summarize notable advances in our understanding of
these key areas in a review of the year’s best literature.

Abstract online:
Professional development

National

**Australian Child & Adolescent Trauma, Loss & Grief Network**

The network aims to promote understanding of child and adolescent trauma, loss and grief. It offers key resources to help people involved with, or who have responsibility for, children and adolescents and those who are interested in the impact of psychological trauma, loss and other adversities as they affect young people. It also provides an online forum for communication and sharing of information and expertise among professionals and community workers; as well as people involved in research, policy, education and training and other interested members of the community. The website includes a subsection on abuse, neglect and violence.

*Website:*

http://www.earlytraumagrief.anu.edu.au/

**Australian Childhood Foundation**

The Australian Childhood Foundation has developed a reputation for providing high quality education and training programs which focus on the neurobiology of trauma, attachment and related practice issues.

*Website:*

http://www.childhood.org.au/home/

*Events calendar:*

http://www.childhood.org.au/ProfessionalDevelopmentSeminars/

**Australian Institute for Family Studies (AIFS) – Seminar series**

The Australian Institute for Family Studies seminar series presents eminent speakers focusing on contemporary issues in national and international family research. All seminars are free and open to the public.

*Events calendar:*


**Adult Survivors of Child Abuse (ASCA)**

ASCA is an Australian national charity which advances the health and wellbeing of people and communities affected by child abuse, for this and future generations. There are an estimate 4-5 million adult survivors of childhood trauma in Australia. This includes people who have experienced childhood abuse in all its forms, neglect, family and community violence in childhood and/or other adverse childhood events (complex trauma). ASCA provides professional support, education and training programs, as well as a trauma-informed approach to care to improve the lives of adults abused as children. It also advocates nationally for the often complex needs of trauma survivors to be better met.

*Website:*


*Workshops:*

Caraniche Training and Research

Caraniche draws on the applied expertise of its staff to deliver professional development training in the health and welfare sector, including supervision and clinical skills, professional practice and critical incidents. They provide customized in-house training that can be modified to meet specific learning needs and participant requirements.

Website:

Training and research:

Centre for Community Child Health (CCCH)

CCCH offers a wide range of professional development activities that are designed to meet the needs of all professionals who work with children and families. Drawing on its world-class research and its clinical practice, CCCH's training and seminars are run by experienced early childhood facilitators.

Website:
http://www.rch.org.au/rch/home.cfm

Events calendar:
http://www.rch.org.au/ccch/events.cfm

Child Abuse Consultancy Education and Training (CACET)

CACET (Kay-set) Global offer a wide range of awareness seminars designed to equip professionals and volunteers who work with children to manage and appropriately respond to suspicions of, or disclosures of child maltreatment throughout Australia and the Asia-Pacific region.

Website:

Child Wise

Child Wise provides a range of specialized training packages, consultancies and services to protect children when they are in someone else’s care; to inform parent’s and carers about how they can keep their children safe; and to help children recover from the trauma of abuse.

Website:
http://www.childwise.net/

Professional training programs:
http://www.childwise.net/Table/Available-Training-Programs/

Compass Seminars Australia

Compass is Queensland's newest professional development training provider for people who work with children, young people and families.

Website:

Events calendar:

Education Centre Against Violence (ECAV) NSW Health

Education Centre Against Violence (ECAV) NSW Health, administered by Sydney West
Area Health Service. ECAV is committed to enhancing the quality and accessibility of services to people whose lives have been affected by interpersonal violence.

**Website:**  

**Events calendar:**  

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**ENCOMPASS - Family and Community**

ENCOMPASS regularly develop and deliver small group and workplace-based training for child protection workers, family support workers, youth workers, and community support workers. All training is informed by latest research and thinking, is evidence-based where applicable, and regularly updated.

**Website:**  

**Training schedule:**  

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**Family and Relationship Services Australia (FRSA)**

FRSA list a range of training and workshop events for professionals looking to refresh their skills in a range of areas related to family relationship service provision.

**Website:**  

**Training and events calendar:**  

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**In Safe Hands**

In Safe Hands offers a wide variety of child protection workshops and online training for all sectors, including educators, community and health professionals. The workshops can be tailored to meet the service requirements of individual agencies.

**Website:**  
http://www.insafehands.net.au/

**Online child protection courses:**  
http://www.insafehands.net.au/courses

**In service training courses:**  
http://www.insafehands.net.au/our-services

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**Mental Health Professionals Network**

The Mental Health Professionals Network (MHPN) establishes and supports interdisciplinary mental health networks across Australia. MHPN further provides a range of online learning and networking opportunities for people working in primary mental health care. This includes a series of regular, free webinars with panels of expert presenters participating in a facilitated case study discussion.

**Website:**  

**Webinars:**  

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**National Guide to Training Programs in Psychotherapy and Counseling**

This guide provides information on the many different training programs in psychotherapy
and counseling offered by numerous training bodies across Australia and New Zealand.

**Website:**

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**Relationships Australia**

Relationships Australia provides training for professionals and human services workers to develop specialist counseling, mediation and management skills in the area of relationships. Training is provided from basic to advanced professional competency levels.

**Website:**
http://www.relationships.org.au/

**Training guide:**
http://www.relationships.org.au/what-we-do/courses/professional-training

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**Secretariat of National Aboriginal and Islands Child Care**

SNAICC lists a range of Indigenous-focused professional development training resources in the areas of governance and management, community and family services and family violence and sexual assault.

**Website:**
http://www.snaicc.asn.au/index.cfm

**Training:**

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**Signs of Safety (resolutions consultancy)**

Resolutions Consultancy provides training and consultancy in safety-organized child protection practice across the globe. They are constantly developing new practice-based materials and resources to help agencies and professionals build their practice. Tailored training and implementation options are available for a fee.

**Website:**
http://www.signsofsafety.net/home

**Events calendar:**
http://www.signsofsafety.net/calendar

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**Training.gov.au (TGA)**

TGA is a database on Vocational Education and Training in Australia. It is the official National Register of information on Training Packages, Qualifications, Courses, Units of Competency and Registered Training Organizations (RTOs) and has been developed for experienced training sector users.

**Website:**

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**International**

**The American Professional Society on the Abuse of Children (APSAC)**

USA

The American Professional Society on the Abuse of Children is a national organization whose mission is to enhance the ability of professionals to respond to children and families affected by abuse and violence. APSAC tries to fulfil this mission in a number of ways, most notably through providing education and other sources of information to
professionals who work in the child maltreatment and related fields.

*Website:*  
http://www.apsac.org/

*Events calendar:*  
http://www.apsac.org/events

**British Association for the Study and Prevention of Child Abuse and Neglect (BASPCAN)**  
**UK**

BASPCAN is primarily a membership association for professionals and volunteers working in the field of child protection who can demonstrate active participation or interest in the aims of the Association. It is the only multi-disciplinary association of its kind in the UK, bringing together personnel from all agencies who work in the field with children in need, and with those who are abused and neglected.

*Website:*  
http://www.baspcan.org.uk/index.php

*Events calendar:*  
http://www.baspcan.org.uk/calendar.php

**Chadwick Center for Child and Families**  
**USA**

The centre promotes the health and well-being of abused and traumatized children and their families through excellence and leadership in evaluation, treatment, prevention, education, advocacy, and research.

*Website:*  
http://www.chadwickcenter.org/default.htm

*2012 conference proceedings:*  
http://www.sandiegoconference.org/

**International Society for Prevention of Child Abuse and Neglect (ISPCAN)**  
**USA**

The International Society for Prevention of Child Abuse and Neglect (ISPCAN) is the only multidisciplinary international organization that brings together a worldwide cross-section of committed professionals to work towards the prevention and treatment of child abuse, neglect and exploitation globally.

*Website:*  
http://www.ispcan.org/

*Events Calendar*  
http://www.ispcan.org/events/event_list.asp

*Training Calendar*  
http://www.ispcan.org/?page=TrainingEvents

**UK**

This website is for all practitioners, researchers, trainers, policy-makers and other professionals, and provides free access to the most current information on child abuse, child protection and safeguarding in the UK.
NEARI Press

USA

For over 20 years, NEARI has been providing nationally recognized “cutting edge” work with seriously emotionally disturbed children and youth as well as providing “state of the art” resources about sexual abuse prevention. NEARI’s mission is to provide education and treatment services for emotionally disturbed, traumatized, neurologically challenged and learning disabled children and adolescents, and to create effective learning opportunities for the organizations, professionals and other adults who care about these children, youth and other at-risk populations. NEARI Press further organizes online trainings and free webinars.

Website:
http://www.neari press.org/

Stop It Now! – Preventing Sexual Abuse of Children

USA

Stop It Now! aims to prevent the sexual abuse of children by mobilizing adults, families and communities to take actions that protect children before they are harmed. Stop It Now! further offers (free) online training to help adults prevent child sexual abuse. Webinars help parents, professionals and all adults learn about the Stop It Now! approach and research, and about using online tools for prevention.

Website
http://www.stopitnow.org/

Past and current webinars:
http://www.stopitnow.org/training
Professional Interest

National

Australian Centre for the Study of Sexual Assault (ACSSA)
The Australian Centre for the Study of Sexual Assault (ACSSA) is a central collection point for research, information and resources about sexual assault in Australia. ACSSA’s key role is to facilitate access to the growing evidence-base on sexual assault and to support organizations, agencies and others who use research and evidence in shaping policy, practice and research directions in responding to, and reducing, sexual assault.

Website:

Australian Domestic & Family Violence Clearinghouse
The Australian Domestic & Family Violence Clearinghouse is a national organisation, providing high quality information about domestic and family violence issues and practice. The primary goal of the Clearinghouse is to prevent domestic and family violence. We do this by supporting specialist and generalist service providers, government agencies, researchers, advocates and activists in their efforts, through the dissemination of information and research, and through facilitating discussion.

Website:
http://www.austdvclearinghouse.unsw.edu.au/home.html

Child Protection Special Interest Group – RACP
The Child Protection Special Interest Group (CPSIG) is a special interest group within the Chapter of Community Child Health of the Royal Australasian College of Physicians (RACP). RACP – CPSIG is collective of doctors interested in the field of child protection. Membership is open to all doctors regardless of qualifications and experience. Interests range from the forensic evaluation of children’s injuries to concern for vulnerable and disadvantaged children.

Website:
RACP Home:
http://www.racp.edu.au/

Commission for Children and Young People and Child Guardian (CCYPCG)
The Commission for Children and Young People and Child Guardian promotes and protect the rights, interests and wellbeing of children and young people in Queensland, particularly those who are in care or detention, have no one to act on their behalf, are not able to protect themselves or those disadvantaged because of a disability, geographic isolation, homelessness or poverty.

Commission’s latest reports:
National Association for the Prevention of Child Abuse and Neglect (NAPCAN)

Child abuse and neglect is one of Australia's most significant social problems. Last year over 30,000 Australian children were proven to have been abused or neglected. The mission of the National Association of Child Abuse and Neglect (NAPCAN) is to prevent child abuse and neglect and to ensure the safety and wellbeing of every Australian child.

Website:  

National Child Protection Clearing House (NCPCH)

The NCPCH is an information, advisory and research unit focused on child abuse prevention, child protection and out-of-home care.

Website:  

Events calendar:  

Subscribe to news alerts:  

CPCH publications:  

International

California Evidence Based Clearinghouse (CEBC)

USA

The California Evidence Based Clearinghouse for Child Welfare (CEBC) provide child welfare professionals with easy access to vital information about selected child welfare related programs. The primary task of the CEBC is to inform the child welfare community about the research evidence for programs being used or marketed in California.

Website:  
http://www.cebc4cw.org/

Events calendar:  
http://www.cebc4cw.org/resources/cebc-calender/

The 1371 projects and publications included in this Register cover a range of topics relating to the protection of Australia’s children including:

- The prevention of child abuse and neglect
- Early intervention
- Child protection services
- Out of home care; and
- Support for children who have experience abuse or neglect

The projects and publications included in the Register were identified through a literature search and through details provided by researchers working in the field.

Website:  
Child Protection Special Interest Group – BACCH & RCPCH

UK

The Child Protection Special Interest Group (CPSIG) is a special interest group of the British Association for Community Child Health (BACCH) and the Royal College of Paediatrics and Child Health (RCPCH). CPSIG provides peer support at local and national level as well as regional and national study days. CPSIG membership is open to BACCH and RCPCH members, and to doctors from other appropriate professional organisations.

Website:
http://www.cpsig.org.uk/

BACCH Home:
http://www.bacch.org.uk/index.php

RCPCH Home:
http://www.rcpch.ac.uk/

Child and Woman Abuse Studies Unit

UK

The Child and Woman Abuse Studies Unit conducts independent research into the abuse of children and women, working from a feminist perspective. The website contains information on the Unit’s research projects and publications, as well as an FAQ section including rape and sexual assault and trafficking in women and children for sexual exploitation.

Website:
http://www.cwasu.org/

CORE INFO

UK

Cardiff Child Protection Systematic Reviews. The Welsh Group provides a series of systematic reviews defining the evidence base behind the diagnosis of physical child abuse.

Website:
http://www.core-info.cardiff.ac.uk/

Division of Violence Prevention, Centers for Disease Control and Prevention (CDC)

USA

The Division of Violence Prevention is a division within the Centers of Disease Control and Prevention (CDC) of the US Department of Health and Human Services. It provides general information on violence and violence prevention, as well as statistics on sexual violence, preventing violence against women, fact sheets, definitions and data sources.

Website:
http://www.cdc.gov/ViolencePrevention/overview/index.html

DynaMed

DynaMed is a clinical reference tool created by physicians for physicians and other health care professionals for use at the point-of-care. With clinically-organized summaries for more than 3,200 topics, DynaMed provides the latest content and resources with validity, relevance and convenience.
FirstConsult

FirstConsult leverages evidence-based medical information to deliver answers that are trusted, quick, and accessible anytime, anywhere. Content is subject to rigorous oversight by expert peer reviewers, a renowned editorial board, physician editors, and the Editor-in-Chief.

Access First Consult:
https://www.mdconsult.com/lookup/345178969-4?type=med

Institute on Violence, Abuse and Trauma (IVAT)

USA

The Family Violence and Sexual Assault Institute has now merged with Alliant International University to form The Institute on Violence, Abuse and Trauma (IVAT). The IVAT is an important International resource, research and training centre that includes all areas of violence, abuse and trauma. The Institute encompasses multiple centres, which focus on family violence in the broad sense, including sexual assault, youth and school violence, workplace violence, violence prevention and traumatic stress.

Website:
http://www.ivatcenters.org/

Minnesota Center Against Violence and Abuse (MINCAVA)

USA

MINCAVA provides research, education, and access to violence related resources through the MINCAVA Electronic Clearinghouse. As well as articles, research and bibliographies the website contains information about training resources and courses.

Website:
http://www.mincava.umn.edu/

National Clearinghouse for Family Violence Canada

The National Clearinghouse on Family Violence (NCFV) is a resource centre for information on the prevention of violence and abuse within the family. Operating on behalf of the 15 partners that make up the Family Violence Initiative (FVI), the NCFV facilitates knowledge exchange between those working on the prevention, protection and treatment aspects of violence. It also helps increase public awareness, encouraging Canadian communities to become more involved in reducing family violence.

Website:

National Sexual Violence Resource Center (NSVRC)

USA

The National Sexual Violence Resource Center
(NSVRC) is a central clearinghouse for resources and research on sexual violence in the USA. NSVRC aims to strengthen the support system for sexual assault survivors, provide information and assistance for effective interventions in preventing sexual violence, and identify emerging policy issues and research needs. The National Sexual Violence Resource Center Library contains library collections of both the NSVRC and the Pennsylvania Coalition Against Rape (PCAR). To search and access one or both collections, use the link provided below.

**Website:**
http://www.nsvrc.org/

**Search the NSVRC Library database:**
http://207.67.203.54/N80002Staff/OPAC/index.asp

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**National Criminal Justice Reference Services USA**

The NCJRS website contains a wide collection of criminal justice publications organised by subject and a searchable abstracts database. You can search for national and international upcoming events around juvenile and criminal justice, victim assistance and drug policy here.

**Website:**
http://www.ncjrs.gov/

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**New Zealand Family Violence Clearinghouse**

The New Zealand Family Violence Clearinghouse is a national center for collating and disseminating information about family violence in Aotearoa New Zealand. The aim of the Clearinghouse is to provide resources for people interested in working towards the elimination of family violence. An outcome of the Government's Te Rito: New Zealand Family Violence Prevention Strategy, the Clearinghouse supports the vision of Te Rito: to create a society families/whanau are living free from violence.

**Website:**
http://www.nzfvc.org.nz/

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**PediatricRadiology.com**

PediatricRadiology.com is a paediatric radiology and paediatric imaging digital library. The goal of PediatricRadiology.com is to provide a starting point for entry into paediatric radiology places of enlightenment, entertainment and education on the Internet. PediatricRadiology.com identifies high quality paediatric radiology World-Wide Web sites that can teach, illuminate, and inspire. In essence, PediatricRadiology.com is meant to serve as a "pico portal" for users interested in paediatric radiology.

**Website:**
http://www.pediatricradiology.com/

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**Sexual Abuse Survivors Trust NZ**

The Sexual Abuse Survivors Trus (SAST) offers information and support for those who have experienced sexual abuse.
Sexual abuse of Males - Jim Hopper

USA

Jim Hopper is a clinical psychologist and researcher specialising in childhood sexual abuse in boys. This page provides resources around the sexual abuse of boys and the lasting effects of childhood sexual abuse in the lives of men.

Website:
http://www.jimhopper.com/male-ab/

Welsh Child Protection Systematic Review Group

UK

The Welsh Group provides a series of systematic reviews defining the evidence base behind the diagnosis of physical child abuse.

Website:
http://www.core-info.cf.ac.uk/index.html
## Events

### March 2013

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<thead>
<tr>
<th>5</th>
<th>Webinar</th>
<th>An Introduction to autism spectrum disorders, sexual behaviours, and therapeutic intervention</th>
<th>ONLINE</th>
<th>Free</th>
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</thead>
<tbody>
<tr>
<td>6</td>
<td>Webinar</td>
<td>Confidential family counselling in a family law context: mind the gap</td>
<td>ONLINE</td>
<td>Free</td>
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<tr>
<td>7</td>
<td>Webinar</td>
<td>Susan’s story: parents with an intellectual disability</td>
<td>ONLINE</td>
<td>Free</td>
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<tr>
<td>7</td>
<td>Conference</td>
<td>Understanding financial abuse in family violence</td>
<td>Melbourne</td>
<td>VIC</td>
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<tr>
<td>12-14</td>
<td>Conference</td>
<td>Australian bureau of statistics NatStats conference</td>
<td>Brisbane</td>
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<tr>
<td>14-15</td>
<td>Conference</td>
<td>Carers NSW</td>
<td>Sydney</td>
<td>NSW</td>
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<tr>
<td>17-20</td>
<td>Conference</td>
<td>6th World congress on family law and children’s rights</td>
<td>Sydney</td>
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<tr>
<td>21</td>
<td>Conference</td>
<td>Family law conference</td>
<td>Melbourne</td>
<td>VIC</td>
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</tbody>
</table>

### April 2013

| 7-10 | Conference | 12th National Rural Health Conference | Adelaide | SA |
| 11-12 | Conference | Child aware approaches conference: making child wellbeing and safety your responsibility | Melbourne | VIC |
| 14-17 | Conference | Annual congress of the Perinatal Society of Australia and New Zealand (PSANZ) | Adelaide | SA |
| 14-17 | Conference | Child Welfare League of America - National Conference | Washington DC | USA |
| 17-18 | Conference | SA Youth workers conference | Adelaide | SA |
| 18-20 | Conference | Society for Research in Child Development | Seattle | USA |
| 28-30 | Conference | National Conference on eliminating all forms of violence against CALD women | Canberra | ACT |
| 30 | Webinar | Collaborative Care for Complex Trauma presentations | Online | Free |
| 29 – 1 May | Conference | Youth, technology and virtual communities conference (hosted by QPS) | Gold Coast | QLD |
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