

CECILIA CASANUEVA

Summary of Professional Experience

Cecilia Casanueva is a research psychologist and public health analyst with a special interest in child maltreatment and early childhood. Dr. Casanueva's specific activities include basic research, secondary analysis of child welfare related data, child maltreatment prevention and evaluation. Dr. Casanueva has published extensively in peer-reviewed journals. Her research experience includes design, implementation, and evaluation of interventions to prevent child emotional and developmental problems; prevention and interventions for child maltreatment, recurrence, and permanency; service delivery systems related to the developmental and mental health needs of children; intimate-partner violence; and parenting. She also conducts implementation and translational research on interventions that promote safe, supportive, and nurturing caregiving environments among vulnerable families. Dr. Casanueva is an alumna of the prestigious *Leaders for the 21st Century Fellowship* of the ZERO TO THREE National Center for Infants, Toddlers, and Families (2009–2011).

Education

PhD, Maternal and Child Health, with a minor in Epidemiology, School of Public Health, the University of North Carolina at Chapel Hill, Chapel Hill, NC, 2005.

Clinical Psychologist, School of Psychology, Catholic University of Chile, Santiago, Chile, 1988.
Graduated with class honors.

Selected Project Experience

Evaluation of the Infant Toddlers Court Team Program (ITCP) (2018 to date)—*Project Director*.

Under a grant from the Maternal and Child Health Bureau in the Health Research and Services Administration, ZERO TO THREE is providing support and training for the implementation of the Infant-Toddler Court Programs in over 100 judicial circuits across the country. RTI is conducting the evaluation of this program, focusing on 26 evaluation sites multiple states. The ITCP evaluation uses a mixed-methods design consisting of three components: continuous quality improvement (CQI), a process evaluation, and an outcome evaluation. The Process Evaluation includes a stakeholder web survey, phone interviews with 5 key stakeholders, and the review of court hearing transcripts and other site-relevant documents. The Outcome Evaluation includes direct data collection from parents and caregivers of children involved with the Infant-Toddler Court Program using Audio Computer-Assisted Self Interviewing (pre-pandemic) and phone interviews since the pandemic, the collection of administrative data on those children from the child welfare system. The outcome evaluation uses a quasi-experimental design with a comparison group from the National Survey of Child and Adolescent Well-Being (NSCAW II), the only nationally representative sample of children involved with the child welfare system (CWS) and a second comparison group from counties with similar vulnerability index without an infant court. The comparison groups are created by using propensity score matching (PSM) to select subsamples of infants and toddlers with a maltreatment investigation and a placement history similar to the children in ITCP sites. The outcome evaluation focuses on child safety, placement, permanency, and well-being outcomes. Responsible for project overall management, IRBs and DUAs with states' child welfare system

to acquire access to administrative data on placements and maltreatment incidents, data collection and analysis, reports, brief, and papers.

Evaluation of the Child First Intervention in Palm Beach Florida Study (2017 to date)—*Project Director*. Sponsored by the Children’s Services Council of Palm Beach County and a grant from the Robert Wood Johnson Foundation, this quasi-experimental evaluation examines the process and outcomes of various home-visiting programs available to vulnerable families with young children in Palm Beach County. RTI is gathering evidence of the degree to which Child First—when compared to other home-visiting programs—reduces child maltreatment, improves child and parent outcomes, and prevents families from entering the child welfare system. The study sample includes 200 Child First-eligible families who have been referred either to Child First or to an alternate service in the community. Propensity-score matching is used to identify the comparison group. RTI conducts in-person parent interviews and child assessments, and collects administrative data from both intervention and comparison group families at two timepoints: immediately following their enrollment to a service (Baseline) and 12 months after they enrolled in the service (Follow-Up). Outcomes include child safety, child behavioral/emotional health, child executive functioning, parent depression. Responsible for overall management, work plans, IRB and DUA with Florida DCF to acquire access to administrative data on placements and maltreatment incidents deliverables schedule, and reports.

The National Survey of Child and Adolescent Well-Being: Third Cohort (NSCAW III) (2016 to date)—*Researcher*. Sponsored by the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services, this congressionally mandated series of projects is the most comprehensive study ever undertaken of the child welfare system. NSCAW is the first national study that examines child and family well-being outcomes in detail and seeks to relate those outcomes to their experience with the child welfare system. Collaborates on NSCAW instrumentation, oversees product development for ACF including briefs, reports, and manuscripts.

The National Survey of Child and Adolescent Well-Being: First and Second Cohort (NSCAW and NSCAW II) (2007 to 2014)—*Researcher*. Sponsored by the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services, this congressionally mandated, \$74 million series of projects is the most comprehensive study ever undertaken of the child welfare system. NSCAW is the first national study that examines child and family well-being outcomes in detail and seeks to relate those outcomes to their experience with the child welfare system. The NSCAW I sample includes a cohort of more than 6,200 children and adolescents who were followed with multiple measures of development over 5 to 7 years. NSCAW II built a second cohort of children and adolescents who came into contact with the child welfare system in 2008–2009. Responsible for the production of reports to ACF on safety, permanency, well-being, and services for children and their families investigated nationwide for maltreatment reports. Analyze the prevalence and correlates for different age, gender, race/ethnicity, and placement groups of multiple safety, permanency, and well-being indicators with a focus on children 0-5 years old, including chronic health conditions, special health care needs, adverse childhood experiences (ACEs), and developmental and behavioral needs using standardized developmental measures and caregiver reports of developmental problems. Collaborated on decision making on NSCAW policy and practice, oversee product development for ACF, conducted analyses and reported results on key NSCAW outcomes, and provided technical assistance to researchers on analysis and reporting of NSCAW.

Post Adoption and Guardianship Instability Project (PAGI) (2019 to date)—*Researcher*. The PAGI project, funded by ACF, is being conducted by RTI International, University of North Carolina at Chapel Hill, University of Wisconsin at Milwaukee, and Mathematica Policy Research. The purpose of the project is to improve understanding of the risk and protective factors associated with placement instability as well as post adoption and permanency support services among children adopted from the child welfare

system. Assists the Project Director with preparation of IRB and OMB materials, acquiring access to administrative data and, instrumentation for survey of caregivers and youth/young adults.

Evaluation of the Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-ITCT) (2014 to 2018)—*Project Director*. RTI conducted the independent evaluation of the QIC-ITCT implemented in eleven sites and six states. The process evaluation included baseline and follow visits to 11 sites with interviews with stakeholders from multiple systems covering topics related to children service's needs, referrals and service receipt, systems collaboration to support children and family's needs, and use of evidence-based programs. The outcome evaluation focused on secondary data analysis of a large data set managed by QIC-IITCT on child safety, placement, and permanency outcomes. Responsible for project overall management, site visits, data collection and analysis, and reports.

National Survey on Drug Use and Health (NSDUH) (2014 to date)—*Special Studies Analyst*. Conducted for SAMHSA, this survey collects data to provide national- and state-level estimates of tobacco use, alcohol use, use of illicit drugs, nonmedical use of prescription drugs, and related mental health issues. RTI's responsibilities include sample selection and weighting, questionnaire development and testing, data collection, data processing, preparation of public use files, data analysis and reporting, and ad hoc methodological analyses and special reports. During 2005–2011, RTI staff screened approximately 1,000,000 dwelling units and completed about 475,000 in-person CAI/ACASI interviews with respondents 12 years and older. In 2012, RTI will screen approximately 140,000 dwelling units and complete about 67,500 interviews with respondents 12 years and older. Contributes to special studies focused on mental health topics.

Analysis of Administrative and Survey Data Regarding Children in or at Risk of Entering Foster Care, Including Analysis of the National Survey of Children in Nonparental Care (2014 to 2016)—*Project Director*. RTI conducted this project under contract with the Office of the Assistant Secretary for Planning and Evaluation (ASPE) to help inform policy through secondary data analysis on topics related to children in or at risk of entering foster care and the production of research briefs with the goal of informing upcoming federal child welfare legislation. This project included analyses based on the National Survey of Children in Nonparental Care (NSCNC), the Longitudinal Studies of Child Abuse and Neglect (LONGSCAN), and the National Survey of Child and Adolescent Well-Being (NSCAW). Managed project schedule and budget, prepared deliverables and reports.

Evaluation of the Child First Intervention in Connecticut Feasibility Study (2014 to 2016)—*Associate Project Director*. This study for the Robert Wood Johnson Foundation, Children Services Council of Palm Beach, and the Grossman Family Foundation was to determine the feasibility of a randomized control trial (RCT) with several follow up waves. The goal of an RCT was to determine whether the program created in Connecticut by Dr. Lowell for high risk families to prevent child maltreatment, improves child and caregiver functioning, enhances child safety, and is cost beneficial relative to usual care. Responsible for supporting overall management, work plans, deliverables schedule, and reports.

National Survey of Foster Parents Feasibility Study (2014 to 2015)—*Project Director*. This study for the Annie E. Casey Foundation serves as a feasibility study for a national survey effort to assess the needs of foster caregivers, and capacity and quality of the U.S. foster care system. Responsible for overall management, work plans, deliverables schedule, and budget; supervises survey operations; and prepares reports.

Evaluation of the Program Promoting Responsive Relationships: Changing Practice in Child Care (2010 to 2012)—*Principal Investigator*. Funded by the Doris Duke Foundation, this initiative seeks to reduce child maltreatment by promoting protective factors at the family level through coaching to directors and teachers of child care centers using an innovative curriculum developed by ZERO TO

THREE. The project included a process evaluation to assess implementation of coaching in three states. Developed and coordinated evaluation activities: developed data collection protocols; supervised data collection; and selected, adapted, and piloted implementation measures. Analyzed process data and prepared deliverables and reports.

RTI-UNC Evidence-based Practice Center III (2010 to 2012)—*Researcher*. RTI collaborates with the five health profession schools of the University of North Carolina at Chapel Hill and the Cecil G. Sheps Center for Health Services Research to produce systematic reviews and comparative effectiveness reviews to support the Agency for Healthcare Research and Quality (AHRQ) as an Evidence-based Practice Center. Provided support to a comparative effectiveness review on interventions for children exposed to maltreatment. Supported the development of rationale for topic refinement, communicated with key informants for stakeholder input, reviewed interventions for maltreated children, and prepared sections of the written report within the strict guidelines and rigorous methods defined by AHRQ.

Translating Child-Parent Psychotherapy into the Juvenile Court System (2009 to 2013)—*Co-Investigator-Project Director*. Funded by the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention (CDC), this 3-year, multisite, multidisciplinary translational research study focused on the dissemination of an innovative court model (the Miami Child Well Being Court Model) for improving systems integration across the judiciary, child welfare, and child mental health. Specifically, the model aimed to increase the reach and effectiveness of interventions with maltreated young children and their mothers. This project was implemented in Detroit as the Baby Court Docket. Responsible for all technical aspects of this complex, mixed-methods study examining the implementation processes and outcomes associated with dissemination of the court model. Maintained close collaborations with research partners at the Linda Ray Intervention Center at the University of Miami, the Merrill-Palmer Skillman Institute at Wayne State University, and the Center for Prevention and Early Intervention Policy at Florida State University. Led analyses, developed manuscripts for publication, led the production of the “Miami Child Well Being Court Model: A Handbook for Clinicians” and the “Miami Child Well Being Court Model: Essential Elements and Implementation Guidance,” and presented findings at national conferences.

National Intimate Partner and Sexual Violence Surveillance System (NISVSS) (2009 to 2012)—*Research Psychologist*. Sponsored by CDC, the NISVSS is building a surveillance system to systematically and routinely collect valid and reliable information on the magnitude of and trends in intimate partner violence, sexual violence, and stalking. The NISVSS is a dual-frame national telephone survey of men and women drawn from a list-assisted random-digit-dialing sample and a cell phone sample. The base year included a telephone survey of a random sample of active duty female personnel and wives of married male service members. Conducted training and monthly groups to support debriefing of staff.

Legacy for Children (2009)—*Process Evaluator*. Funded by the National Center for Birth Defects and Developmental Disabilities at CDC, Legacy for Children was a longitudinal, randomized control study evaluating the efficacy of a parenting intervention for promoting healthy child outcomes in low-income families. The process analysis focused on the development of a sense of community among mothers and how participants’ characteristics and program factors affected mothers’ level of engagement in the parent group sessions. Analyzed process data, with the goal of providing an in-depth description of how the intervention affected and was perceived by participants in the context of their individual lives and the reasons mothers did or did not continue their involvement in the intervention over time.

Independent Evaluation of the National Weed and Seed (W&S) Strategy (2009)—*Evaluator*. Funded by the U.S. Department of Justice’s Community Capacity Development Office, this initiative sought to reduce violence and crime and support community development in hundreds of communities nationwide.

The project included a process evaluation to assess implementation of locally developed strategies at 13 sentinel sites. The evaluation drew on RTI's experience conducting evaluations of similar large-scale, comprehensive initiatives that addressed multiple, interrelated problems through partnerships, service integration, and resource leveraging; expertise in advanced statistical techniques; and extensive survey data collection capabilities. Conducted interviews with key stakeholders and performed in-depth analysis of site processes and outcomes, including analysis of information gathered from a survey of target and comparison community residents, site visits, and document review, as well as commercially available data on local business activity.

Lost in Transition: Substance Abuse and Service Use Among At-Risk Youth (2008 to 2010)—*Principal Investigator*. This grant, funded by the Robert Wood Johnson Foundation, used data from NSCAW I to analyze the misuse of substances and use of mental health and substance abuse services among children who were adolescents at the time of initial contact with child protective services and during the subsequent 6 to 7 years. Provided overall project administration, financial management, and staff coordination. Led data analysis and manuscript preparation.

National Survey of Child and Adolescent Well-Being, I, II (NSCAW) (2007 to 2014)—*Researcher*. Sponsored by the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services, this congressionally mandated, \$74 million series of projects is the most comprehensive study ever undertaken of the child welfare system. NSCAW is the first national study that examines child and family well-being outcomes in detail and seeks to relate those outcomes to their experience with the child welfare system. The NSCAW I sample includes a cohort of more than 6,200 children and adolescents who were followed with multiple measures of development over 5 to 7 years. NSCAW II built a second cohort of children and adolescents who came into contact with the child welfare system in 2008–2009. Responsible for the production of reports to ACF on safety, permanency, well-being, and services for children and their families investigated nationwide for maltreatment reports. Analyze the prevalence and correlates for different age, gender, race/ethnicity, and placement groups of multiple safety, permanency, and well-being indicators with a focus on children 0-5 years old, including chronic health conditions, special health care needs, and developmental and behavioral needs using standardized developmental measures and caregiver reports of developmental problems. Collaborates on decision making on NSCAW policy and practice, oversees product development for ACF, conducts analyses and reports results on key NSCAW outcomes, and provides technical assistance to researchers on analysis and reporting of NSCAW.

Infant Maltreatment and Infants with Disabilities (2006)—*Postdoctoral Fellow*. At the Frank Porter Graham Child Development Institute at the University of North Carolina at Chapel Hill, primary projects included the National Early Intervention Longitudinal Study, the first nationally representative study of young children and their families who were Part C early intervention services recipients, and NSCAW I. Performed data analysis, with the goal of comparing the developmental characteristics and service needs of infants and toddlers in substantiated maltreatment cases with infants in early intervention.

Professional Experience

2008 to date	<p>School of Public Health, University of North Carolina at Chapel Hill, Chapel Hill, NC.</p> <p><u>Adjunct Assistant Professor.</u> Maternal and Child Health.</p>
2007 to date	<p>RTI International, Research Triangle Park, NC.</p> <p><u>Health Research Analyst.</u> Serves as an expert in the field of maltreated children's developmental needs, mental health services research, parenting services, methods, and measurement. Manages, designs, conducts, and analyzes child development and public health research and evaluation studies. Prepares manuscripts for publication and presentation at professional conferences.</p>
2006	<p>Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill, Chapel Hill, NC.</p> <p><u>Postdoctoral Fellow.</u> Analyzed the developmental characteristics and services needs of infants and toddlers investigated for abuse and neglect (NSCAW), based on the creation of indicators of developmental delay collected through field assessments.</p>
2004	<p>School of Public Health, University of North Carolina at Chapel Hill, Chapel Hill, NC.</p> <p><u>Teaching Assistant.</u> Principles of Statistical Inference; Epidemiology and Prevention of Women's Health.</p>
2003 to 2006	<p>School of Social Work, Chapel Hill, NC</p> <p><u>Graduate Research Assistant.</u> Worked on the UNC-NSCAW Data Analysis Team. Performed data analysis and interpretation using stratified samples and weighted data with various forms of regression, use of propensity scores matching for services evaluation, and other analytical strategies.</p>
2001 to 2005	<p>School of Public Health, University of North Carolina at Chapel Hill, Chapel Hill, NC.</p> <p><u>Graduate Research Assistant.</u> Worked with the Transitions in Pregnancy Study. Performed research management, trained staff, interviewed victims of intimate partner violence, oversaw data entry, and performed data analyses. Designed and implemented pilot study where mother-infant interactions were videotaped and child development evaluated among children of maltreated and comparison mothers.</p>
Fall 1997	<p>School of Nursing, Catholic University of Chile, Maule, Chile.</p> <p><u>Instructor.</u> Human Development.</p>
1988 to 1997	<p>Community Outreach and Professional Service, Chuquicamata, Chile.</p> <p><u>Clinical Psychologist.</u> Planned, organized, and delivered programs for family violence prevention and healthy child development. Created and directed a</p>

project that ended the practice of isolating children during hospitalizations at the Roy H. Glover Hospital of Chuquicamata.

1988 to 1997

Private Practice, Santiago, Chuquicamata, Talca, Chile.

Clinical Psychologist. Diagnosis and psychotherapy with children, adolescents, and adults. Family psychotherapy: couples and mother-child dyads.

Honors and Awards

RTI Impact Innovation Award 2020

RTI Highly Published Author's Award, 2008, 2009, 2010, 2011, 2015, 2018

Fellow, ZERO TO THREE, National Center for Infants, Toddlers, and Families, 2009 to 2011

RTI President's Award for outstanding performance as a member of the National Survey of Child and Adolescent Well-Being team, 2007

Carolina Interdisciplinary Large Scale Policy Research Fellow, 2006

Royster Fellow, University of North Carolina, 2000 to 2005

National Award from the Chilean Association of Psychologists, Best Dissertation of the Year 1988

Professional Associations

American Public Health Association

Association of Chilean Psychologists

Selected Peer-Reviewed Journal Articles

Casanueva, C., Harris, S., Carr, C., Burfeind, C., & Smith, K. (2019). Evaluation in Multiple Sites of the Safe Babies Court Team Approach. *Child Welfare*, 97(1), 85-107.

Latzman, N. E., Casanueva, C., Brinton, J., & Forman Hoffman, V. L. (2019). The promotion of well-being among children exposed to intimate partner violence: A systematic review of interventions. *Campbell Systematic Reviews* 15, e1049.

Latzman, N. E., Casanueva, C., & Dolan, M. (2017). *Understanding the scope of child sexual abuse: Challenges and opportunities*. Research Triangle Park, NC.: RTI Press. (RTI Press Publication No. OP-0044-1711).

Latzman, N. E., Vivolo-Kantor, A., Clinton-Sherrod, A., Casanueva, C., & Carr, C. (2017). Children's exposure to intimate partner violence: A systematic review of measurement strategies. *Aggression and Violent Behavior*, 37, 220-235.

Ringeisen, H., Stambaugh, L., Bose, J., Casanueva, C., Hedden, S., Avenevoli, S., . . . West, J. (2017). Measurement of Childhood Serious Emotional Disturbance State of the Science and Issues for Consideration. *Journal of Emotional and Behavioral Disorders*, 25(4), 195-210.

Casanueva, C. E., Tueller, S. J., Dolan, M. M., Testa, M., Smith, K. R., & Day, O. A. (2015). Examining predictors of re-reports and recurrence of child maltreatment using two national data sources. *Children and Youth Services Review*, 48, 1-13.

- Dolan, M. M., Casanueva, C. E., Smith, K. R., Day, O. A., & Dowd, K. (2014). Child abuse and neglect re-reports: Combining and comparing data from two national sources. *Children and Youth Services Review*, 47(3), 323–333.
- Casanueva, C. E., Smith, K. R., Ringeisen, H., Dolan, M. M., & Tueller, S. J. (2014). Families in need of domestic violence services reported to the child welfare system: Changes in the National Survey of Child and Adolescent Well-Being between 1999–2000 and 2008–2009. *Child Abuse and Neglect*, 38(10), 1683–1693. DOI: 10.1016/j.chiabu.2014.05.013
- Casanueva, C. E., Dozier, M., Tueller, S. J., Dolan, M. M., Smith, K. R., Webb, M. et al. (2014). Caregiver instability and early life changes among infants reported to the child welfare system. *Child Abuse and Neglect*, 38(3), 498–509.
- Casanueva, C. E., Dolan, M. M., Smith, K. R., Ringeisen, H., & Dowd, K. (2012). Indicators of well-being among children in the United States child welfare system. *Child Indicators Research*, 5(3), 547–565. DOI: 10.1007/s12187-012-9148-4
- Casanueva, C. E., Stambaugh, L. F., Urato, M. P., Fraser, J. G., & Williams, J. (2011). Lost in transition: Illicit substance use and services receipt among at-risk youth in the child welfare system. *Children and Youth Services Review*, 33, 1939–1949.
- Casanueva, C. E., Cross, T., Ringeisen, H., & Christ, S. (2011). Prevalence, trajectories, and risk factors for depression recurrence among caregivers of young children involved in child maltreatment investigations. *Journal of Emotional and Behavioral Disorders*, 19(2), 98–116.
- Casanueva, C. E., Goldman-Fraser, J., Ringeisen, H., Osofsky, J., Lederman, C., & Katz, L. (2010). Maternal perceptions of temperament among infants and toddlers investigated for maltreatment: Implications for risk determination and referral. *Journal of Family Violence*, 25(6), 557–574.
- Casanueva, C. E., Kotch, J., & Zolotor, A. J. (2010). Intimate partner violence and child abuse and neglect. *Family and Intimate Partner Violence Quarterly*, 2(3), 253–276.
- Casanueva, C. E., Martin, S. L., & Runyan, D. K. (2009). Repeated reports for child maltreatment among intimate partner violence victims: Findings from the National Survey of Child and Adolescent Well-Being. *Child Abuse & Neglect*, 33(2), 84–93.
- Ringeisen, H., Casanueva, C. E., Cross, T. P., & Urato, M. P. (2009). Mental health and education services for children involved with the child welfare system as infants. *Journal of Emotional and Behavioral Disorders*, 17(3), 177–192.
- Cross, T. P., & Casanueva, C. E. (2009). Caseworker judgments and substantiation. *Child Maltreatment*, 14(1), 38–52.
- Dolan, M. M., Casanueva, C. E., Smith, K. R., & Bradley, R. H. (2009). Parenting and the home environment provided by grandmothers of children in the child welfare system. *Children and Youth Services Review*, 31(7), 784–796.
- Ringeisen, H., Casanueva, C. E., Urato, M. P., & Stambaugh, L. F. (2009). Mental health service use during the transition to adulthood for adolescents reported to the child welfare system. *Psychiatric Services*, 60, 1084–1091.
-

- Southerland, D., Casanueva, C. E., & Ringeisen, H. (2009). Young adult outcomes and mental health problems among transition age youth investigated for maltreatment during adolescence. *Children and Youth Services Review*, 31(9), 947–956. DOI: 10.1016/j.childyouth.2009.03.010
- Casanueva, C. E., Cross, T. P., & Ringeisen, H. (2008). Developmental needs and individualized family service plans among infants and toddlers in the child welfare system. *Child Maltreatment*, 13, 245–258.
- Casanueva, C., Martin, S. L., Runyan, D., Barth, R., & Bradley, R. (2008). Parenting services for mothers involved with child protective services: Do they change maternal parenting and spanking behaviors with young children? *Children and Youth Services Review*, 30(8), 861–878.
- Casanueva, C. E., Martin, S. L., Runyan, D. K., Barth, R. P., & Bradley, R. H. (2008). Quality of maternal parenting among intimate-partner violence victims involved with the child welfare system. *Journal of Family Violence*, 23(6), 413–427.
- Ringeisen, H., Casanueva, C. E., Urato, M. P., & Cross, T. P. (2008). Special health care needs among children in child welfare. *Pediatrics*, 122(1), 232–241.
- Casanueva, C., & Martin, S. L. (2007). Intimate partner violence during pregnancy and mothers' child abuse potential. *Journal of Interpersonal Violence*, 22, 603–622.
- Macy, R., Martin, S. L., Kupper, L., Guo, S., & Casanueva, C. (2007). Partner violence among women before, during, and after pregnancy: Multiple opportunities for intervention. *Women's Health Issues*, 17, 290–299.
- Casanueva, C., Foshee, V., & Barth, R. (2005). Intimate partner violence as a risk factor for children's use of the emergency room and injuries. *Children & Youth Services Review*, 27(11), 1223–1242.

Selected Technical Reports

- Casanueva, C., Harris, S., Carr, C., Burfeind, C., & Smith, K. (2017). Final Evaluation Report of the Quality Improvement Center for Research-Based Infant-Toddler Court Teams. Research Triangle Park: RTI International.
- Casanueva, C. E., Harris, S., Johnson, C. & Carr, C. (2016). *Baseline Evaluation Report of the Quality Improvement Center for Research-Based Infant-Toddler Court Teams*. Prepared for ZERO TO THREE and Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.
- Casanueva, C. E., Harris, S., & Smith, K. R. (2014, October). *Disconnected youth involved in child welfare* (Report No. 2014-63). Prepared for Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Stambaugh, L. F., Ringeisen, H., Casanueva, C. E., Tueller, S. J., Smith, K. R., & Dolan, M. M. (2013, August). *Adverse childhood experiences in NSCAW* (Report No. 2013-26). Prepared for Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
-

- Casanueva, C., Tueller, S., Smith, K., Dolan, M., Ringeisen (2014). *NSCAW II Wave 3 Tables*. OPRE Report #2013-43, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Casanueva, C. E., Tueller, S. J., Dolan, M. M., Smith, K. R., & Ringeisen, H. (2012, October). *NSCAW II Wave 2 Report: Child Permanency* (Report No. 2013-28). Prepared for Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services
- Casanueva, C. E., Ringeisen, H., Smith, K. R., & Dolan, M. M. (2013, March). *NSCAW Child Well-Being Spotlight: Parents Reported for Maltreatment Experience High Rates of Domestic Violence* (Report No. 2013-04). Prepared for Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
- Casanueva, C. E., Smith, K. R., Dolan, M. M., Tueller, S. J., & Lloyd, S. W. (2013, March). *NSCAW II Wave 2 Report: Child Safety* (Report No. 2013-07). Prepared for Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.
-