Child Abuse

Finkelhor D, Shattuck A, Turner HA, Hamby SL.
Using data from three national representative telephone surveys of children and caregivers from 2003-2011, significant declines were noted for child assault victimization, bullying, and sexual victimization. [Note however only age 2 and older were included, and under age 2 constitutes a large abused group.]

Ling C, Johnson H.
Caring for military children in the emergency department: the essentials.
Discussion of the military lifestyle and effects of relocation and deployment on military children, with suggestions for recognizing families at risk.

Toth SL, Gravener-Davis JA, Guild DJ, Cicchetti D.
Relational interventions for child maltreatment: past, present, and future perspectives.
Review of effects of child maltreatment on attachment relationships, and neurobiology, interventions, and recommendations for advancing treatment.

Mukwege D.
Classification of gender-based genitourinary and rectovaginal trauma in girls under 5 years of age.
For girls under age 5 who have experienced sexual violence, providers at the Panzi Hospital in the Congo (established to treat victims of sexual abuse) propose a classification system of five levels of genital trauma for clinical research and forensic purposes.

Walsh JA, Krienert JL.
Siblicide accounts for 8-10% of all family homicides. In the most common scenario, male adolescents kill a slightly older brother with a gun during an argument. “It is unlikely the resulting siblicide was a solitary event but rather a culminating event following a pattern or series of escalating behaviors...suggesting avenues to pursue for intervention regarding bullying behaviors, power struggles, sibling rivalry, and access to firearms.”

Adult Manifestations of Child Abuse

Afifi TO, MacMillan HL, Boyle M, et. al.
Child abuse and mental disorders in Canada.
CMAJ. 2014 Jun 10;186(9):E324-32. PMID: 24756625
From a large Canadian health survey with 23,395 participants, 32% reported a history of childhood physical or sexual abuse, or exposure to IPV. After adjusting for sociodemographic variables, all types of abuse were robustly associated with a wide variety of self-reported mental health conditions including suicidality.

Strüber N, Strüber D, Roth G.
Impact of early adversity on glucocorticoid regulation and later mental disorders.
Neurosci Biobehav Rev. 2014 Jan;38:17-37. PMID: 24216122
Extremely detailed German review article on the effects of early adversity on stress hormones. Two pathways are suggested: 1) adversity in the context of maternal support leading to elevated adult stress hormones and increased emotional sensitivity, and 2) adversity in the context of lack of maternal support and/or certain serotonin genes leading to initial acutely elevated stress hormones followed by lifelong low levels of stress hormones and subsequent decreased emotional sensitivity/empathy predisposing to psychopathy.
Singh AB, Bousman CA, Ng CH, Berk M.  
**High impact child abuse may predict risk of elevated suicidality during antidepressant initiation.**  

Medication for depression carries a risk of increased suicidality upon starting treatment. In this study of 51 adults, those reporting high impact childhood abuse were 31.5 times more likely to experience increased suicidality in the first week of treatment compared to those without childhood abuse.

Bruskas D, Tessin DH.  
**Adverse childhood experiences and psychosocial well-being of women who were in foster care as children.**  
Perm J. 2013 Summer;17(3):e131-41. PMID: 24355905

From an anonymous online survey of 101 adult women who had been placed in the foster care system (at mean age 8.35 for mean duration 6.47 years with mean 6.2 different placements and 3.8 different schools), 56% experienced current psychological distress. 70% reported ≥5 and 33% ≥8 adverse childhood experiences, and while physical neglect decreased after foster care placement, emotional and physical abuse did not.

Saunders EF, Nazir R, Kamali M, et. al.  
**Gender differences, clinical correlates, and longitudinal outcome of bipolar disorder with comorbid migraine.**  

Comparing 412 adults with bipolar disorder and healthy controls, migraine was more common with bipolar disorder (31% vs. 6%) and 3.5 times more common in woman than men. Migraines were significantly associated with childhood emotional abuse or neglect and sexual abuse. “Effective treatment of migraine may impact mood outcome in bipolar disorder as well as headache outcome” as there may be important joint physiologic pathways.

Lu S, Wei Z, Gao W, et. al.  
**Childhood trauma and metabolic syndrome.**  

Using data from a US national Midlife study, “We find that emotional and physical abuse increase the risk of developing MetS [metabolic syndrome – obesity and elevated blood pressure, cholesterol, blood sugar] for both sexes, whereas sexual abuse is a predictor for women only. For both sexes, individuals who experienced more cumulative abuse have a greater risk of developing MetS.... Among the potential mediators, poor sleep quality was a significant pathway for men and women, while stress-induced eating was a significant pathway for women only.”

Joung KE, Park KH, Zaichenko L, et. al.  
**Early life adversity is associated with elevated levels of circulating leptin, irisin, and decreased levels of adiponectin in midlife adults.**  
J Clin Endocrinol Metab. 2014 Jun;99(6):E1055-60. PMID: 24650014

To help analyze the association between childhood abuse/neglect and metabolic syndrome, in a cross-sectional group of 95 adults and after adjusting for multiple factors, early-life adversity was directly associated with elevated circulating levels of leptin and irisin, proteins involved with fat and energy metabolism.

**Abuse victimization in childhood or adolescence and risk of food addiction in adult women.**  
Obesity (Silver Spring). 2013 Dec;21(12):E775-81. PMID: 23637085

Using data from 57,321 participants in the Nurses’ Health Study II, 8% overall met criteria for food addiction, a measure of stress-related overeating, which was strongly associated with a history of childhood severe physical or sexual abuse.

![Figure 1: Age-adjusted food addiction risk by severity of physical and sexual child abuse history: Nurses’ Health Study II, 2009.](image)

**Adolescents**

Canders CP, Merchant RC, Pleet K, Fuerch JH.  
**Internet-initiated sexual assault among U.S. adolescents reported in newspapers, 1996-2007.**  

In reviewing 11 years of newspaper reports of internet-initiated sexual assaults among US adolescents, 79.2% were female, and the median age was 14 years. Rates increased over time for females but not males.
Halpern CT, Tucker CM, Bengtson A, et al.  
**Somatic symptoms among US adolescent females: associations with sexual and physical violence exposure.**  
Matern Child Health J. 2013 Dec;17(10):1951-60. PMID: 23340952  
For 8,531 adolescent females from a national study, "Findings support an exposure-response association between violence exposure and somatic symptoms [vague physical complaints], suggesting that symptoms can be markers of victimization. Treating symptoms alone, without addressing the potential violence experienced, may not adequately improve adolescents' somatic complaints and well-being."

Marston C, Lewis R.  
**Anal heterosex among young people and implications for health promotion: a qualitative study in the UK.**  
In a study of 130 British teens, females characterized anal heterosex as painful, risky and coercive; but narratives normalized this practice, citing pornography as well as competition between men, normalization of coercion and “accidental” penetration. “This study suggests an urgent need for harm reduction efforts targeting anal sex to help encourage discussion about mutuality and consent, and challenge views that normalise coercion.”

Kvist T, Annerbäck EM, Sahlqvist L, Flodmark O, Dahllöf G.  
**Association between adolescents' self-perceived oral health and self-reported experiences of abuse.**  
Of 7262 Swedish adolescents, “poor self-perceived oral health was associated with self-reported experience of physical abuse, IPV, forced sex, and bullying. The likelihood of reporting poor oral health increased from an adjusted OR [odds ratio] of 2.1 for a single incident of abuse to an adjusted OR of 23.3 for multiple abuses.”

### Domestic Violence – Physical Health

Hassan M, Kashanian M, Hassan M, Roohi M, Yousefi H.  
**Maternal outcomes of intimate partner violence during pregnancy: study in Iran.**  
Public Health. 2014 May;128(5):410-5. PMID: 24656724  
Of 1300 pregnant women in two cities in Iran, 72.8% reported IPV during their last pregnancy (emotional abuse highest category). Abused women were 1.54 times more likely to have experienced preterm labor, 11.84 caesarean section, 6.34 antenatal hospitalization and 1.51 vaginal bleeding.

Gentry J, Bailey BA.  
**Psychological intimate partner violence during pregnancy and birth outcomes: threat of violence versus other verbal and emotional abuse.**  
498 women with no history of physical abuse, who were verbally threatened, were twice as likely to deliver a low birth weight baby. This was accounted for by mediating health behaviors of decreased prenatal care and decreased pregnancy weight gain.

#### Table 2. Percentage of Women Who Delivered a Low Birth Weight Baby by Psychological Abuse Status

<table>
<thead>
<tr>
<th>Type of Psychological Abuse</th>
<th>Any Abuse</th>
<th>High Frequency of Abuse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insulted</td>
<td>13.8%</td>
<td>14.3% 17.5%</td>
</tr>
<tr>
<td>Screamed at</td>
<td>14.3%</td>
<td>14.1% 16.7%</td>
</tr>
<tr>
<td>Threatened</td>
<td>13.8%</td>
<td>14.9% 33.3%</td>
</tr>
<tr>
<td>All types</td>
<td>14.2%</td>
<td>15.4% 17.2%</td>
</tr>
</tbody>
</table>

Note. N = 489. Cell values represent a percentage who delivered a low birth weight (<2,500 g) baby.

*Based on responses on the HITS intimate partner violence assessment administered during pregnancy.

*p < .05 for corresponding χ² test.

Gustafsson HC, Coffman JL, Harris LS, et al.  
**Intimate partner violence and children's memory.**  
J Fam Psychol. 2013 Dec;27(6):937-44. PMID: 24188084  
From a sample of 140 socioeconomically and racially diverse children, and after controlling for multiple variables, mother-reported IPV when the children were 30 months old was a significant predictor of decreased short-term, working and deliberate memory function at age 5.

### Domestic Violence – Effects on Children

Wong JY, Fong DY, Lai V, Tiwari A.  
**Bridging intimate partner violence and the human brain.**  
Trauma Violence Abuse. 2014 Jan;15(1):22-33. PMID: 23878144  
“This literature review aims to describe the connections among IPV, neurophysiology, neurochemistry, and neuroanatomy by reviewing the current literature on (1) the biological mechanisms linking IPV, stress, and the brain; (2) the functional and anatomical considerations of the brain in abused women; and (3) the abused women’s behavioral responses to IPV, including fear, pain, and emotion regulation, using functional neuroimaging studies...Research on neurological damage and neuropsychological damage in women survivors of IPV is seriously lacking.”
Domestic Violence – Mental Health

In a survey of 2157 currently-serving Canadian Forces personnel, of 81% in a current relationship, up to 19% reported perpetration and 22% victimization of IPV. “Male and female CAF personnel are both victims and perpetrators of the full spectrum of physical and psychological IPV, which often co-exist and occur reciprocally.” IPV was associated with mental health disorders and high-risk drinking.

For 7174 pregnant women in 6 northern European countries, “A history of abuse is common among pregnant women in northern Europe. About one in ten women reports severe suffering from previous or current abuse. Routine antenatal care provides a window of opportunity to identify suffering and offer specialized care.”

From a US telephone survey of 13,765 males, 9.5%-12.5% reported IPV victimization. Associated increased rates of depression, smoking and binge drinking were the same regardless of veteran status.

Of 101 multi-ethnic males with a history of childhood sexual abuse, the 2% who also experienced IPV victimization reported significantly higher symptoms of PTSD.

Elder/Dependent Adult Abuse

In a case-controlled study of severe physical elder abuse at two Chicago area Level I trauma centers, 2/3 of cases were not reported, and there was a significantly increased death rate of victims during the following year compared to controls.

Report of a successful British online program to help train health and social care professionals on detecting elder financial abuse. Free online training and multiple materials at http://www.elderfinancialabuse.co.uk.

Sexual Assault

Around the world, 7.2% of women 15 years or older had ever experienced non-partner sexual violence. Report graphs out worldwide rates.

For 281 first year college women, those having experienced sexual assault in the prior 3 months and who used thought suppression as a coping strategy were more likely to have disordered eating behaviors. “Thought suppression, compared to other avoidance strategies, may be particularly detrimental to mental health,” as there is a rebound effect leading to increased stress and need for other strategies such as disordered eating.
Of 78,660 Norwegian women followed during pregnancy, 12.0% reported a history of being pressured to sexual acts, 2.8% forced with violence, and 3.6% reported rape. Compared to controls, a history of sexual violence was associated with significantly increased hyperemesis, bleeding, preterm labor, and multiple pregnancy admissions.

From a survey of 365 female veterans, 14.7% reported military sexual assault and 34.8% military sexual harassment. PTSD symptoms relating to combat were significantly higher in women who also experienced military sexual trauma.

Human Trafficking
Outstanding, thorough review article for medical personnel.

From interviews with 247 stakeholders in eight cities around the world, barriers to involvement of the health care system in human trafficking are described. Detailed recommendations are made for healthcare to “participate in five areas: (1) prevention, (2) victim identification, (3) trauma-informed health and mental health care, (4) rehabilitation and referral, and (5) advocacy and policy engagement.”

Perpetrators
Of 182 New Zealand firesetting children and adolescents followed for 10 years, only 2% repeated arson, but 59% subsequently committed an offence with 12.6% becoming incarcerated. Subsequent offending was predicted by experience of abuse at the time of initial firesetting behavior, and becoming a perpetrator of family violence was associated with more severe offending behavior.

Authors report significant lack of research available on what is known about sex offenders with intellectual disabilities, making prevention and risk management difficult.

Cultural Issues
Police and Court Systems

Detailed discussion of the benefits and liabilities of victim impact statements via interviews with victims of sexual assault, victim service providers, feminist advocates and prosecuting attorneys.

Providers

From a review of research about IPV disclosure: the majority of individuals disclose to at least one informal support; disclosure is associated with various demographic, intrapersonal and situational factors; positive reaction to disclosure is associated with psychological and physical health benefits.

In this small British study, women experiencing IPV did not disclose to ED personnel, when asked, for a number of reasons including "guilt about repeated ED attendance as a result of their injuries and 'time wasting', not being able to respond to staff advice to 'leave abusive partners' and the lack of opportunity for 'privacy' within the ED environment."

At a level 1 trauma center in Michigan, 32% of 494 nurses from multiple departments returned a survey which showed that their biggest barrier to screening was lack of training. 82.6% stated they had only encountered 0-2 patients with IPV in the prior year, with greater than half of those stating they had had 0 encounters.

In a review of articles looking at DV screening in the mental health setting, authors concluded “Mental health services were reported to give little consideration to the role of domestic violence in precipitating or exacerbating mental illness, and the dominance of the biomedical model and stigma of mental illness were found to inhibit effective responses.”

Prevention

In a review of teen relationship abuse interventions, those considered more effective were of longer duration, were based in multiple settings, and focused on key people in the adolescents’ environment.

Bennett S, Banyard VL, Garnhart L. To act or not to act, that is the question? Barriers and facilitators of bystander intervention. J Interpers Violence. 2014 Feb;29(3):476-96. PMID: 24097909
From a survey of college students, detailed analysis of barriers and facilitators to helping either a stranger or a friend at risk.

Researchers

Authors analyze the individual components of Coordinated Community Response to IPV, finding that there is a significant lack of research on various components as well as component integration, and offer future research suggestions.

This small study of an online IPV safety planning/decision program specific for pregnant women in either urban or rural areas was found to be feasible, acceptable and safe.
Parrish J, Baldwin-Johnson C, Volz M, Goldsmith Y. 
**Abusive head trauma among children in Alaska: a population-based assessment.**
Int J Circumpolar Health. 2013 Aug 5;72. PMID: 23986886
In a review of abusive head trauma in Alaskan children age 2 and under during 2005-2010 using CDC specific definitions, the Alaska Trauma Registry and Medicaid each identified 51% of cases, followed by the Hospital Discharge Database with 38%. Combined they captured 91% of cases, 49% more than any individual database.

**Item non-response when measuring elder abuse: influence of methodological choices.**
Analysis of missing values on an instrument assessing elder abuse given to older home-dwelling women in Europe showed that non-response is influenced by social status, sensitivity of content, order of questions, type of collection and the presence of assistance.

**Other of Interest**

Dickson P. 
**Understanding victims of honour-based violence.**
Community Pract. 2014 Jul;87(7):30-3. PMID: 25167728
Practical British article for healthcare and service providers to increase knowledge about the complexities of honor-based violence, how it differs from DV, and how to recognize and support patients.

**Institutional abuse and societal silence.**
The Australian Royal Commission into Institutional Responses to Child Sexual Abuse established in 2013 “arguably represents the most wide-ranging attempt by any national government in history of examine the institutional processes (or lack thereof) for addressing such abuse...The Commissioners can look at any private, public or non-governmental organisation that is, or was in the past, involved with children, including government agencies, schools, sporting clubs, orphanages, foster care, and religious organisations. This includes where they consider an organisation caring for a child is responsible for the abuse or for not responding appropriately, regardless of where or when the abuse took place.”

Keyes KM, Shmulewitz D, Greenstein E, et. al. 
**Exposure to the Lebanon War of 2006 and effects on alcohol use disorders: the moderating role of childhood maltreatment.**
Drug Alcoh Depend. 2014 Jan 1;134:296-303. PMID: 24262650
Israelis with a history of childhood abuse were much more likely to turn to alcohol when exposed to high personal threat in a war zone.

Mason L, Nyothach E, Alexander K, et. al. 
**'We keep it secret so no one should know'--a qualitative study to explore young schoolgirls attitudes and experiences with menstruation in rural western Kenya.**
Focus groups with 120 girls in school in rural Kenya regarding onset of menses — “In the absence of parental and school support, girls cope, sometimes alone, with menarche in practical and sometimes hazardous ways.” Girls described difficulties engaging in class due to fear of smelling and leakage, teasing, improvising alternatives to sanitary pads including rags and grass, and participating in transactional sex to buy pads.

Levine AB, Levine LM, Levine TB. 
**Posttraumatic stress disorder and cardiometabolic disease.**
“PTSD is not simply a psychiatric disorder. Traumatic stress increases the risk for inflammation-related somatic diseases and early mortality. The metabolic syndrome reflects the increased health risk associated with stress and PTSD. Obesity, dyslipidemia, hypertension, diabetes mellitus, and cardiovascular disease are prevalent among PTSD patients. However, there has been little appreciation for the need to address these somatic PTSD comorbidities.”