

October 2015

ABUSE RESEARCH

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Child Abuse

Chevignard MP, Lind K.

Long-term outcome of abusive head trauma.

Pediatr Radiol. 2014 Dec;44 Suppl 4:S548-58. PMID: 25501726

"Overall, abusive head trauma is a very severe, avoidable condition, leading to high rates of mortality and long-term visual, neurological, cognitive, behavioral and developmental impairments, even when apparent initial early recovery is observed. Focus should be brought on systematic long-term follow-up of injured children, with adequate and timely developmental and cognitive assessments throughout the school years." Of children with abusive head trauma prior to age 2, there is approximately 20-25% mortality, "motor deficits (15-64%); epilepsy, often intractable (11-32%); decreased brain size (61-100%); visual impairment (18-48%); language disorders (37-64%), and cognitive, behavioral and sleep disorders, including intellectual deficits, agitation, aggression, tantrums, attention deficits, memory, inhibition or initiation deficits (23-59%)."

Center on the Developing Child, Harvard University
2012 Report

The Science of Neglect: The Persistent Absence of Responsive Care Disrupts the Developing Brain

<http://developingchild.harvard.edu/wp-content/uploads/2015/05/The-Science-of-Neglect-The-Persistent-Absence-of-Responsive-Care-Disrupts-the-Developing-Brain.pdf>

Wissink IB, van Vugt E, Moonen X, Stams GJ, Hendriks J.
Sexual abuse involving children with an intellectual disability (ID): a narrative review.

Res Dev Disabil. 2015 Jan;36:20-35. PMID: 25310832

In a research review, children with intellectual disability are more vulnerable to becoming involved with sexual abuse both as a victim and as a perpetrator, with discussion of prevention and intervention methods.

Jackson AM, Deye KP, Halley T, et. al.

Curiosity and critical thinking: identifying child abuse before it is too late.

Clin Pediatr (Phila). 2015 Jan;54(1):54-61. PMID: 25200364

From an analysis of 18 cases of delayed diagnosis of childhood physical abuse, delay factors included "inattention to skin and subconjunctival findings, acceptance of inadequate explanations for injuries, no history obtained from verbal children, insufficient exploration of signs and symptoms, nonadherence to the maltreatment pathway, and incorrect diagnoses from radiologic examinations."

Adult Manifestations of Child Abuse

Vaughn MG, Salas-Wright CP, DeLisi M, Larson M.

Deliberate self-harm and the nexus of violence, victimization, and mental health problems in the United States.

Psychiatry Res. 2015 Feb 28;225(3):588-95. PMID: 25500323

Using data from a large national epidemiological survey, almost 3% of 18-50 year olds had a lifetime prevalence of deliberate self-harm, which was also associated with diverse psychiatric diagnoses, substance abuse, and multiple forms of violent behavior toward others, including animals. Highest rates of self-harm were found in survivors of childhood sexual abuse (38.5%).

Sartor CE, Kranzler HR, Gelernter J.

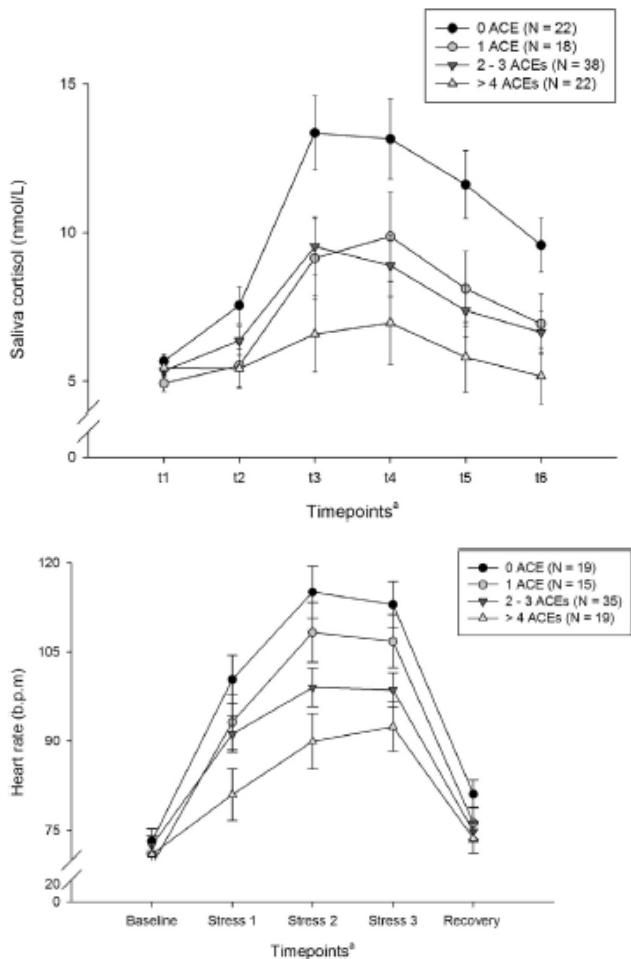
Rate of progression from first use to dependence on cocaine or opioids: a cross-substance examination of associated demographic, psychiatric, and childhood risk factors.

Addict Behav. 2014 Feb;39(2):473-9. PMID: 24238782

From a multisite study of drug dependence with almost 10,000 participants, although numerous psychiatric conditions and childhood risk factors were associated with cocaine and opioid dependence, childhood physical abuse was associated with rapid progression from first use to dependence, especially for Blacks/African Americans.

Voellmin A, Winzeler K, Hug E, et. al.
Blunted endocrine and cardiovascular reactivity in young healthy women reporting a history of childhood adversity.
Psychoneuroendocrinology. 2015 Jan;51:58-67. PMID: [25290347](#)

In this study of healthy young women, adverse childhood experiences (ACEs), particularly if multiple and chronic, showed a strong association with decreases in stress reactivity of stress hormones and heart rate. This is hypothesized to be the body's adaptation to frequent stress surges.



Lopez-Castroman J, Jaussent I, Beziat S, et. al.
Posttraumatic Stress Disorder following childhood abuse increases the severity of suicide attempts.
J Affect Disord. 2015 Jan 1;170:7-14. PMID: [25217758](#)

Of 726 adult patients who had attempted suicide, "Several types of childhood abuse when combined with a lifetime diagnosis of PTSD showed an increased risk for more suicide attempts, serious attempts, and a higher level of suicidal intent compared with the absence of risk factors."

Remigio-Baker RA, Hayes DK, Reyes-Salvail F.
Adverse childhood events and current depressive symptoms among women in Hawaii: 2010 BRFSS, Hawaii.
Matern Child Health J. 2014 Dec;18(10):2300-8. PMID: [24178156](#)

From a state survey of Hawaiian adult women, the odds of having current depressive symptoms were directly increased per increasing number of adverse childhood experiences, and individual experiences, especially childhood verbal abuse, were also independently associated with depression.

Allbaugh LJ, O'Dougherty Wright M, Atkins Seltmann L.
An exploratory study of domains of parenting concern among mothers who are childhood sexual abuse survivors.
J Child Sex Abus. 2014;23(8):885-99. PMID: [25255840](#)

Three areas of parenting concerns from 60 mothers who had themselves experienced childhood sexual abuse were: "(a) concerns regarding the child's sexuality and safety, (b) boundary disturbances within the child-survivor relationship, and (c) lack of energy for parenting due to recovery issues."

Adolescents

Lucenko BA, Sharkova IV, Huber A, Jemelka R, Mancuso D.
Childhood adversity and behavioral health outcomes for youth: An investigation using state administrative data.
Child Abuse Negl. 2015 Sep;47:48-58. PMID: [26234784](#)

Using extensive databases of publicly funded social and health services for 125,123 teens, "more adverse experiences in the family of origin are associated with the presence of both mental health and substance abuse problems identified during adolescence". Particularly impactful on adolescent outcomes was parental involvement with the child welfare system.

Nilon PH, Vivolo-Kantor AM, Latzman NE, et. al.
Prevalence of teen dating violence and co-occurring risk factors among middle school youth in high-risk urban communities.
J Adolesc Health. 2015 Feb;56(2 Suppl 2):S5-13. PMID: [25620454](#)

From multi-site high-risk urban middle schools, "Of the students who had dated, 77% reported perpetrating verbal/emotional abuse, 32% physical abuse, 20% threatening a partner, 15% sexual abuse, 13% relational abuse, and 6% stalking. Bullying predicted perpetration of teen dating violence."

Jones JG, Cohen AL, Worley KB, Worthington T.

Accidental scratch--or a sign of self-cutting?

J Fam Pract. 2015 May;64(5):277-81. PMID: [26009745](#)

Adolescent girls are 2-4 times more likely than boys to engage in self-cutting. Girls primarily cut, scratch, or otherwise injure their skin, whereas boys more commonly hit or burn themselves. 67% of self-cutting is done only on the arms. This practice may be a coping mechanism that releases serotonin or endorphins. Authors discuss how to identify, ask about and support these patients.

Havlicek J.

Maltreatment histories of foster youth exiting out-of-home care through emancipation: a latent class analysis.

Child Maltreat. 2014 Aug-Nov;19(3-4):199-208. PMID: [24920250](#)

From 801 foster youth in Illinois, "Study findings highlight the heterogeneity of maltreatment in the lives of foster youth transitioning to adulthood and draw attention to a need to raise awareness among service providers to screen for chronic maltreatment and multiple types of victimization."

Domestic Violence – Effects on Children

Ibrahim ZM, Sayed Ahmed WA, El-Hamid SA, Hagras AM.

Intimate partner violence among Egyptian pregnant women: incidence, risk factors, and adverse maternal and fetal outcomes.

Clin Exp Obstet Gynecol. 2015;42(2):212-9. PMID: [26054122](#)

Of 1857 Egyptian pregnant women, 32.6% experienced emotional, 15.9% physical (most commonly kicking), and 10% sexual abuse by their partner during pregnancy. Abused women had significantly higher rates of miscarriage, preterm labor, premature rupture of membranes, fetal distress, fetal death, and low birth weight.

Jouriles EN, McDonald R.

Intimate partner violence, coercive control, and child adjustment problems.

J Interpers Violence. 2015 Feb;30(3):459-74. PMID: [24923886](#)

For 107 mothers experiencing physical IPV and their children aged 7-10 years old, the dynamic of coercive control underlying physical IPV was an important factor in children's behavioral problems.

Domestic Violence –

Physical Health

Hayman LW Jr, Lee HJ, Miller AL, Lumeng JC.

Low-income women's conceptualizations of emotional- and stress-eating.

Appetite. 2014 Dec;83:269-76. PMID: [25218718](#)

From interviews with low-income women with small children, emotional- and stress-eating were viewed as uncommon, severe, pitiable behaviors that reflect a lack of self-control and were highly stigmatized; whereas bored-eating was viewed as a distinct, common and humorous behavior with which participants readily self-identified.

Domestic Violence –

Mental Health

Lara MA, Natera-Rey G, Berenzon S, et. al.

Intimate partner violence and depressive symptoms in pregnant Mexican women: national survey results.

Rev Invest Clin. 2014 Sep-Oct;66(5):431-8. PMID: [25695386](#)

16.2% of pregnant Mexican women experienced symptoms of depression. IPV during the past year was 6.23 times more likely in depressed vs. non-depressed pregnant women.

Du Mont J, Forte T.

Intimate partner violence among women with mental health-related activity limitations: a Canadian population based study.

BMC Public Health. 2014 Jan 18;14:51. PMID: [24438484](#)

From a large national Canadian survey, adult non-institutionalized women with serious or chronic mental illness were 3.65 times more likely to have experienced IPV than those without mental illness.

Elder/Dependent Adult

Abuse

Gibbs LM, Mosqueda L.

Medical implications of elder abuse and neglect.

Clin Geriatr Med. 2014 Nov;30(4):xv-xvi. PMID: [25439649](#)

General review article introducing this journal issue on Elder Abuse and Neglect. (Kudos to Editors Lisa Gibbs and Laura Mosqueda on an excellent lineup of articles!) Other articles include:

Aging: Physiology, Disease, and Abuse PMID: [25439635](#)

Understanding the Medical Markers of Elder Abuse and Neglect: Physical Examination Findings PMID: [25439636](#)

Medical and Laboratory Indicators of Elder Abuse and Neglect PMID: [25439637](#)

Common Presentations of Elder Abuse in Health Care Settings PMID: [25439638](#)

Prevention and Early Identification of Elder Abuse PMID: [25439639](#)

Elder Physical Abuse PMID: [25439640](#)

Elder Neglect PMID: [25439641](#)

Case Series of Sexual Assault in Older Persons PMID: [25439642](#)

Medical Implications of Elder Abuse: Self-Neglect PMID: [25439643](#)

Evaluating Abuse in the Patient with Dementia PMID: [25439644](#)

Mental Health/Psychiatric Issues in Elder Abuse and Neglect PMID: [25439645](#)

The Role of Capacity Assessments in Elder Abuse Investigations and Guardianships PMID: [25439646](#)

Care of the Victim PMID: [25439647](#)

Health Professionals' Roles and Relationships with Other Agencies PMID: [25439648](#)

Mariam LM, McClure R, Robinson JB, Yang JA.

Eliciting change in at-risk elders (ECARE): evaluation of an elder abuse intervention program.

J Elder Abuse Negl. 2015;27(1):19-33. PMID: [24295523](#)

This program involved building alliances with the elder and family members, connecting the elder to supportive services, and utilizing motivational interviewing-type skills to help elders overcome ambivalence regarding making difficult life changes. Risk factors of elder abuse decreased over the course of the intervention.

Dong X, Simon M, Evans D.

A population-based study of physical function and risk for elder abuse reported to social service agency.

J Appl Gerontol. 2014 Oct;33(7):808-30. PMID: [25231755](#)

From a Chicago aging survey, lower levels of elder physical performance were associated with increased risk for elder abuse including psychological abuse, caregiver neglect, and financial exploitation.

Friedman B, Santos EJ, Liebel DV, Russ AJ, Conwell Y.

Longitudinal prevalence and correlates of elder mistreatment among older adults receiving home visiting nursing.

J Elder Abuse Negl. 2015;27(1):34-64. PMID: [25208218](#)

From monthly visits to elders by visiting home nurses, 7.4% of elders were being mistreated, and it took a mean of 10.5 visits for the nurses to discern the mistreatment.

Sexual Assault

Reingold RB, Gostin LO.

Sexual Assaults Among University Students: Prevention, Support, and Justice.

JAMA. 2015 Aug 4;314(5):447-8. PMID: [26241593](#)

Review of role of university policies and services in providing for unique needs of college sexual assault survivors, which may include changes in housing, academic schedules, dining, transportation and extracurricular activities.

Edwards KM, Sylaska KM, Barry JE, et. al.

Physical dating violence, sexual violence, and unwanted pursuit victimization: a comparison of incidence rates among sexual-minority and heterosexual college students.

J Interpers Violence. 2015 Feb;30(4):580-600. PMID: [24923891](#)

In a survey of 6472 students from 8 New England universities, compared to heterosexual students, sexual minority students experienced significantly higher 6-month incidence rates of physical DV (30.3% vs. 18.5%), sexual assault (24.3% vs. 11.0%), and stalking (53.1% vs. 36.0%).

Waldron JC, Wilson LC, Patriquin MA, Scarpa A.

Sexual victimization history, depression, and task physiology as predictors of sexual revictimization.

J Interpers Violence. 2015 Feb;30(4):622-39. PMID: [24923892](#)

For 14 young adult women with a history of sexual abuse, those who exhibited reduced or blunted physiological heart rate activity during a laboratory stressor test were more likely to report sexual revictimization during the following 6 months. "The findings suggest that sexual victimization survivors may benefit from interventions that address physiological blunting and the recognition of sexual threat cues in their environment."

[See Voellmin article page 2.]

Messman-Moore T, Ward RM, Zerubavel N, et. al.
Emotion dysregulation and drinking to cope as predictors and consequences of alcohol-involved sexual assault: examination of short-term and long-term risk.
J Interpers Violence. 2015 Feb;30(4):601-21. PMID: [24919992](#)
For 424 female mid-western college students, difficulties with emotional coping, or using alcohol for coping, predicted alcohol-involved sexual assault (AISA) in the following 10 weeks. Sexual assault then increased these issues in a cyclic fashion. "Interventions focused on improving emotion regulation skills may decrease short-term risk for AISA."

Subramanian S, Green JS.
The General Approach and Management of the Patient Who Discloses a Sexual Assault.
Mo Med. 2015 May-Jun;112(3):211-7. PMID: [26168593](#)
General review of coordinated, compassionate care after sexual assault including medical, mental health, legal and safety issues.

Wellman A.
Identifying and treating adult survivors of sexual assault.
JAAPA. 2014 May;27(5):51-2. PMID: [24758981](#)
Article identifies mental or behavioral health symptoms that might occur down the road from sexual assault.

Human Trafficking

Baldwin SB, Fehrenbacher AE, Eisenman DP.
Psychological Coercion in Human Trafficking: An Application of Biderman's Framework.
Qual Health Res. 2015 Sep;25(9):1171-81. PMID: [25371382](#)
Excellent, insightful article. "Participants reported experiencing the range of nonphysical coercive tactics outlined by Biderman, including isolation, monopolization of perception, induced debility or exhaustion, threats, occasional indulgences, demonstration of omnipotence, degradation, and enforcement of trivial demands. Our analysis demonstrates how these coercion tactics reinforced the submission of trafficked persons to their traffickers even in the absence of physical force or restraints. Such psychological abuse creates extreme stress that can lead to acute and chronic, physical and mental health problems."

Cultural Issues

Zannettino L, Bagshaw D, Wendt S, Adams V.
The role of emotional vulnerability and abuse in the financial exploitation of older people from culturally and linguistically diverse communities in Australia.
J Elder Abuse Negl. 2015;27(1):74-89. PMID: [25343720](#)
Elders who are culturally and linguistically disconnected from the general community may be more vulnerable and at increased risk of abuse, especially financial abuse, by family members.

Gostečnik C, Repič Slavič T, Lukek SP, Cvetek R.
Trauma and religiousness.
J Relig Health. 2014 Jun;53(3):690-701. PMID: [23187617](#)
"Victims of traumatic events who experience re-traumatization often develop a highly ambivalent relationship to God and all religiosity as extremely conflictual."

Tailor K, Piotrowski C, Woodgate RL, Letourneau N.
Child sexual abuse and adult religious life.
J Child Sex Abus. 2014;23(8):865-84. PMID: [25255927](#)
Review of research and future research needs on the religious consequences in adulthood of non-clergy child sexual abuse.

McMullin S, Nason-Clark N, Fisher-Townsend B, Holtmann C.
When Violence Hits the Religious Home: Raising Awareness about Domestic Violence in Seminaries and amongst Religious Leaders.
J Pastoral Care Counsel. 2015 Jun;69(2):113-24. PMID: [26227940](#)
Discussion of challenges faced when including instruction about DV in a religious context to seminaries or religious leaders, including "unique vulnerabilities of highly religious clients who have been abused or who act abusively."

Lee SJ, Altschul I.
Spanking of young children: do immigrant and U.S.-born Hispanic parents differ?
J Interpers Violence. 2015 Feb;30(3):475-98. PMID: [24923887](#)
Of almost 2,000 Hispanic mothers and fathers in the US, foreign-born parents were less likely to spank young children than US born Hispanic parents.

Perpetrators

Bennett N, O'Donohue W.
The construct of grooming in child sexual abuse.
J Child Sex Abus. 2014;23(8):957-76. PMID: [25258355](#)
Analysis of the definition and process of "grooming" by child abusers, and how it is distinguished from normal adult-child interactions.

Post M, Haymes L, Storey K, Loughrey T, Campbell C.
Understanding stalking behaviors by individuals with Autism Spectrum Disorders and recommended prevention strategies for school settings.
J Autism Dev Disord. 2014 Nov;44(11):2698-706. PMID: [23207743](#)

"Specific interventions for addressing stalking behavior by students with autism spectrum disorders are analyzed and evaluated with suggestions for best practices."

Police and Court Systems

Haynes SH, Cares AC, Ruback RB.
Reducing the Harm of Criminal Victimization: The Role of Restitution.
Violence Vict. 2015;30(3):450-69. PMID: [26118266](#)

Review of the concept of restitution and justice – financial, procedural, informational and interpersonal.

Lewis AL, Sommervold SL.
Death, but is it murder? The role of stereotypes and cultural perceptions in the wrongful convictions of women.
Albany Law Rev. 2015;78(3):1035-58. PMID: [26245002](#)

Current tendency is to heavily prosecute women suspected of harming or killing children. Two types of flawed mothers are portrayed within the criminal justice system: the "mad" mother, the superior caretaker who committed an irrational act because she was mentally ill; and the "bad" mother, who simply is a cold, callous woman incapable of caregiving and therefore nonfeminine. "Studies show that women who are perceived as gender inappropriate in court receive harsher sentences than women who appear more feminine in court. Once a woman is typecast as "mad" or "bad," that stamp will follow her throughout the entirety of the criminal proceedings. The use of these stereotypes by prosecutors lead finders of fact to convict and sentence women based not on their criminal culpability, but on behavior that is perceived to fall outside of gender norms."

Golden GS.
Bite-Mark and Pattern Injury Analysis: A Brief Status Overview.
J Calif Dent Assoc. 2015 Jun;43(6):309-14. PMID: [26126346](#)

Discussion of the grey areas of forensic bite mark analysis.

Providers

Zakocs R, Freire KE.
The DELTA PREP Initiative: Accelerating Coalition Capacity for Intimate Partner Violence Prevention.
Health Educ Behav. 2015 Aug;42(4):458-70. PMID: [26245934](#)

Description of a coordinated project to build the prevention capacity of domestic violence coalitions by offering eight supports: modest grant awards, training events, technical assistance, action planning, coaching hubs, the Coalition Prevention Capacity Assessment, an online workstation, and the online documentation support system.

Schober DJ, Fawcett SB.
Using Action Planning to Build Organizational Capacity for the Prevention of Intimate Partner Violence.
Health Educ Behav. 2015 Aug;42(4):449-57. PMID: [26245933](#)

Companion article to above, on staff and leadership planning for organizational changes in six goal areas: leadership, structures and processes, staffing, resource development, partnership development, and member agency development.

MacGregor JC, Wathen N, Kothari A, Hundal PK, Naimi A.
Strategies to promote uptake and use of intimate partner violence and child maltreatment knowledge.
BMC Public Health. 2014 Aug 21;14:862. PMID: [25146253](#)

Evidence-based suggestions toward implementation and evaluation of provider assessment and management of IPV and child abuse.

Kvist T, Wickström A, Miglis I, Dahllöf G.
The dilemma of reporting suspicions of child maltreatment in pediatric dentistry.
Eur J Oral Sci. 2014 Oct;122(5):332-8. PMID: [25039643](#)

From focus groups with Swedish dentists and dental students, "Reporting a suspicion about child maltreatment seems to be a clinical and ethical dilemma arising from concerns of having contradicting professional roles, difficulties confirming suspicions of maltreatment, and perceived shortcomings in the child-protection system."

International Federation of Gynecology and Obstetrics
Int J Gynaecol Obstet. 2015 Jan 128(1)
Ethical guidance on healthcare professionals' responses to violence against women. PMID: [25458409](#)

Ethical considerations on the health consequences of child or adolescent marriage. PMID [25458407](#)

Spoont MR, Williams JW Jr, Kehle-Forbes S, et. al.

Does This Patient Have Posttraumatic Stress Disorder?

JAMA. 2015 Aug 4;314(5):501-10. PMID: [26241601](#)

Based on a review of brief screening tools for PTSD, authors recommend two options for primary care clinics or community settings – the 4-item Primary Care PTSD Screener (PC-PTSD) and the 17-item PTSD Check List (PCL). [Find PC-PTSD with instructions at http://www.mirecc.va.gov/docs/visn6/2_primary_care_ptsd_screen.pdf]

In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you:

1. Have had nightmares about it or thought about it when you did not want to?
YES / NO
2. Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?
YES / NO
3. Were constantly on guard, watchful, or easily startled?
YES / NO
4. Felt numb or detached from others, activities, or your surroundings?
YES / NO

Current research suggests that the results of the PC-PTSD should be considered "positive" if a patient answers "yes" to any three items.

Spoont M.

JAMA PATIENT PAGE. Posttraumatic Stress Disorder (PTSD).

JAMA. 2015 Aug 4;314(5):532. PMID: [26241611](#)

One page PDF "patient page" explaining PTSD. Click on "supplemental content" tab to get PDF in Spanish.

Prevention

Child Health and Development Institute of Connecticut
September, 2015

Advancing Trauma-Informed Systems of Care for Children

http://www.chdi.org/files/7514/4405/4524/Trauma_IMPACT_FINAL.pdf

Thorough discussion of trauma-informed care of children, with recommendations for development of coordinated, multi-system involvement.

Head Start and Childhood Domestic Violence Association
2013

Breaking Through (22 min. video)

<https://youtu.be/ApdB44WDLc>

Benefits of collaboration between trauma-informed healthcare providers and a Headstart program to educate parents about ACEs, toxic stress and resilience – focus on trauma in both generations.

Pulido ML, Dauber S, Tully BA, et. al.

Knowledge Gains Following a Child Sexual Abuse Prevention Program Among Urban Students.

Am J Public Health. 2015 Jul;105(7):1344-50. PMID: [25973809](#)

For 2nd and 3rd grade low income racially diverse students at 6 NY public elementary schools, the one-time intervention "Safe Touches" led to increased knowledge of inappropriate touching. Authors suggest research prior to second grade to determine optimal age for participation.

Lundgren R, Amin A.

Addressing intimate partner violence and sexual violence among adolescents: emerging evidence of effectiveness.

J Adolesc Health. 2015 Jan;56(1 Suppl):S42-50. PMID: [25528978](#)

In a research review of interventions to prevent adolescent IPV and sexual violence, promising approaches included school-based dating violence interventions, community-based interventions to form gender equitable attitudes, and parenting interventions. "Results suggest that programs with longer term investments and repeated exposure to ideas delivered in different settings over time have better results than single awareness-raising or discussion sessions."

Svanemyr J, Amin A, Robles OJ, Greene ME.

Creating an enabling environment for adolescent sexual and reproductive health: a framework and promising approaches.

J Adolesc Health. 2015 Jan;56(1 Suppl):S7-14. PMID: [25528980](#)

WHO article looking at promising interventions for adolescent sexual health from the individual, relationship, community and societal levels.

Researchers

Subica AM, Claypoole KH.

Supporting trauma-informed recovery care through clinical feedback in community mental health research.

Psychiatr Rehabil J. 2014 Dec;37(4):321-3. PMID: [24564343](#)

Of 172 ethnoculturally diverse mental health consumers participating in a study of trauma and PTSD, 68% (including 81% of childhood sexual abuse survivors) gave permission for researchers to disclose consumer personal trauma information to their treatment providers.

Other of Interest

Sumner SA, Mercy JA, Dahlberg LL, et. al.

Violence in the United States: Status, Challenges, and Opportunities.

JAMA. 2015 Aug 4;314(5):478-88. PMID: [26241599](#)

Although homicide and aggravated assault rates have decreased from peaks in the 1980s and 1990s, "More than 12 million adults experience intimate partner violence annually and more than 10 million children younger than 18 years experience some form of maltreatment from a caregiver, ranging from neglect to sexual abuse, but only a small percentage of these violent incidents are reported to law enforcement, health care clinicians, or child protective agencies. Moreover, exposure to violence increases vulnerability to a broad range of mental and physical health problems over the life course."

Sumner SA, Mercy AA, Saul J, et. al.

Prevalence of sexual violence against children and use of social services - seven countries, 2007-2013.

MMWR Morb Mortal Wkly Rep. 2015 Jun 5;64(21):565-9.

PMID: [26042646](#)

From a CDC international study looking at seven countries, "lifetime prevalence of experiencing any form of sexual violence in childhood ranged from 4.4% among females in Cambodia to 37.6% among females in Swaziland, with prevalence in most countries greater than 25.0%. In most countries surveyed, the proportion of victims that received services, including health and child protective services, was ≤10.0%."

MacIntosh J, Wuest J, Ford-Gilboe M, Varcoe C.

Cumulative Effects of Multiple Forms of Violence and Abuse on Women.

Violence Vict. 2015;30(3):502-21. PMID: [26118269](#)

In this 5 year survey of Canadian women who had left an abusive partner, 76% experienced workplace bullying. Women perceived that being bullied affected their health, work, social relations, and levels of distress...more than half the women in this sample had left jobs because of workplace bullying. "These findings contribute to increasing awareness of how cumulative effects of abuse may interfere with a broad range of dimensions of women's health and lives and thereby may limit their abilities to build capacity."

Alaska Mental Health Board and Advisory Board on Alcoholism and Drug Abuse, 2015

The Economic Costs of ACEs in Alaska: The Price of Not Intervening Before Trauma Occurs

<http://dhss.alaska.gov/abada/ace-ak/Documents/ACEsEconomicCosts-AK.pdf>

Example of crafting an economic argument for addressing ACEs early on.

Belur J, Tilley N, Daruwalla N, Kumar M, Tiwari V, Osrin D.

The social construction of 'dowry deaths'.

Soc Sci Med. 2014 Oct;119:1-9. PMID: [25129569](#)

Discussion of dowry deaths in India, chiefly through burning, and the biases in research and injustice in the treatment of victims and alleged offenders.

Bayat M.

The stories of 'snake children': killing and abuse of children with developmental disabilities in West Africa.

J Intellect Disabil Res. 2015 Jan;59(1):1-10. PMID: [24467696](#)

"Killing, abandonment and abuse of children with intellectual disabilities are explained within the context of indigenous African religions, animism and folk culture. The concept of disability 'otherness' and inferiority is also explored."

Sweet PL.

'Every bone of my body:' domestic violence and the diagnostic body.

Soc Sci Med. 2014 Dec;122:44-52. PMID: [25441316](#)

"...the boundaries of the abused body have been extended...as one example of the power of biomedicine to define past, present, and future somatic experiences. Like 'patients-in-waiting' or patients marked 'at-risk', abuse victims are strung up between health and sickness. All of victims' current and future ailments are linked up to their abuse, making them permanently mired in that relationship even if they have left it. The liminal space between health and illness carved out by the logic of health is less a zone of possibility than it is a marker of bad embodiment, a web of potentialities for pathology."

[I would argue that what we are learning about acute and chronic effects of abuse is vital toward prevention and treatment, and that it is all about how it is presented to the patient/client. We ought to strive to give information in the context that knowledge is power, that we are only beginning to understand resilience factors, that there is ongoing discovery of effective treatments, that the body is always trying to heal itself, and that health IS a zone of possibility.]