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Child Abuse

Hooley G, Garcia SE.

Emergency department evaluation and management of nonaccidental trauma in pediatric patients.

Pediatric emergency medicine practice. 2023;20(9):1-20.

PMID: [37606603](#)

This issue of the journal covers risk factors; sentinel injuries; clinical decision rules, historical features, and physical examination findings; recommendations for when screening laboratory and radiology studies are indicated and which studies should be ordered; recommendations for which specialists and organizations to involve to help ensure appropriate care and follow-up; and guidance for documentation and reporting.

Lewis KN, McKelvey LM, Zhang D, et al.

Risks of adverse childhood experiences on healthcare utilization and outcomes in early childhood.

Child Abuse Negl. 2023;145:106396. PMID: [37573799](#)

Of 1647 children aged 3-5 years from low income families, Family Map Inventory (FMI) screening scores (which include ACEs) were 32.4% - 0, 31.7% - 1, 19.7% - 2, and 16.3% - 3+. Higher scores were associated with greater use of non-preventive outpatient visits, filled prescriptions, and overall use of healthcare. Incidences of adjustment disorders were 4 times and attention-deficit conducts were 2 times higher among children with the highest FMI-ACE scores than those with zero FMI-ACEs.

Wade C.

Trajectories for children and young people who experience out of home care: Examining the influences of pre-care characteristics on later wellbeing and placement stability.

Child Abuse Negl. 2023:106398. PMID: [37612203](#)

In this analysis of children in out-of-home care, "Children who were older at entry to care (mean 7.6 years) showed the poorest socio-emotional and cognitive functioning at Wave 2, and despite improvements by Wave 4, the poor starting point may explain why their cognitive functioning scores

never catch up to children entering care younger (mean 1.5 years). Younger on entry children who also tended to come from less socio-economically disadvantaged backgrounds showed the most positive cognitive and socio-emotional functioning over study waves...Placement changes between waves were lowest for children who entered care younger."

Kim H, Song EJ, Windsor L.

Longitudinal changes in the county-level relationship between opioid prescriptions and child maltreatment reports, United States, 2009-2018.

Am J Orthopsychiatry. 2023;93(5):375-88. PMID: [37184964](#)

Combining multiple national databases, "the county-level relationship between opioid prescriptions and county maltreatment reports was four times as strong in 2018 as it had been in 2012. This trend was also observed within all subgroups of child age and sex. By type, this trend was somewhat more pronounced for neglect, but somewhat less for sexual abuse. Our findings suggest a growing need for greater efforts to prevent child maltreatment in communities with high opioid prescription rates."

Klebanov B, Tsur N, Katz C.

"Many bad things had been happening to me": Children's perceptions and experiences of polyvictimization in the context of child physical abuse.

Child Abuse Negl. 2023;145:106429. PMID: [37683405](#)

From forensic interviews with 117 children aged 5-14, authors note the importance of the interview as a means of revealing the entire burden of polyvictimization instead of focusing on the physical abuse alone, understanding the context of how children view the abuse and how they cope, and aspects of self-blame and negative self-image to be addressed in treatment.

Adult Manifestations of Child Abuse

Kumsta R.

The role of stress in the biological embedding of experience.

Psychoneuroendocrinology. 2023;156:106364. PMID: [37586308](#)

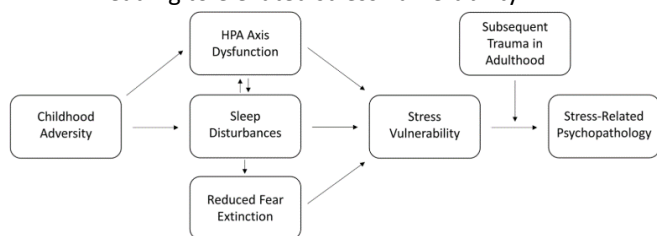
“This review summarises evidence showing that experience of early adversity in the form of childhood abuse or neglect and exposure to severe institutional deprivation influences multiple interconnected bio-behavioural, physiological and cellular processes. This paper focusses on dysregulations of hormonal stress regulation, altered DNA methylation pattern, changes to transcriptomic profiles in the context of stress-immune interplay, and mitochondrial biology.”

Simon L, Admon R.

From childhood adversity to latent stress vulnerability in adulthood: the mediating roles of sleep disturbances and HPA axis dysfunction.

Neuropsychopharmacology. 2023;48(10):1425-35. PMID: [37391592](#)

“Childhood adversity is a prominent predisposing risk factor for latent stress vulnerability, expressed as an elevated likelihood of developing stress-related psychopathology upon subsequent exposure to trauma in adulthood. Sleep disturbances have emerged as one of the most pronounced maladaptive behavioral outcomes of childhood adversity and are also a highly prevalent core feature of stress-related psychopathology...the current review addresses the notion that childhood adversity-induced sleep disturbances may play a causal role in elevating individuals' stress vulnerability in adulthood...Next, we present evidence to support the contribution of the hypothalamic-pituitary-adrenal (HPA) axis to these associations, stemming from its critical role in stress and sleep regulatory pathways...sleep disturbances and HPA axis dysfunction reinforce each other, leading to elevated stress vulnerability.”



Nicolson KP, Mills SEE, Senaratne DNS, Colvin LA, Smith BH.

What is the association between childhood adversity and subsequent chronic pain in adulthood? A systematic review.

BJA Open. 2023;6:100139. PMID: [37588177](#)

From a research review including 196,130 patients, “There were consistent associations between

adverse childhood experiences and chronic pain in adulthood, with a 'dose'-dependent relationship. Poor mental health was found to mediate the detrimental connection between adverse childhood experiences and chronic pain...Adverse childhood experiences should be considered in patient assessment, and early intervention to prevent adverse childhood experiences may help reduce the genesis of chronic pain.”

Pierce J, Harte SE, Afari N, Bradley CS, Griffith JW, Kim J, et al.

Mediators of the association between childhood trauma and pain sensitivity in adulthood: a Multidisciplinary Approach to the Study of Chronic Pelvic Pain Research.

Pain. 2023;164(9):1995-2008. PMID: [37144687](#)

“Our findings suggest that sexual and nonsexual violent trauma during childhood are indirectly associated with pain sensitivity among adult patients with urogenital chronic pelvic pain syndrome. Heightened generalized sensory sensitivity played a unique role in conveying these effects, highlighting the need for clinicians and researchers to recognize the importance of physiological sensitivity to the pain experience for individuals with a history of childhood trauma.”

Njoroge A, Shariff MA, Khan HW, et al.

Assessment of Adverse Childhood Experiences in the South Bronx on the Risk of Developing Chronic Disease as Adults.

Cureus. 2023;15(8):e43078. PMID: [37680403](#)

For 454 adults seen at a primary care clinic in the South Bronx, with average age 53.1 years, 30% reported 4+ ACEs. There was a significant relationship between total and specific ACEs and chronic illness, including hyperlipidemia, hypertension, diabetes, mental illness, and substance use. “Such data elucidates the need for physicians to prioritize and incorporate social services, education, physical environment, and nutritional access in overall patient well-being.”

Amos RLM, Cresswell K, Hughes K, Bellis MA.

ACEtimation-The Combined Effect of Adverse Childhood Experiences on Violence, Health-Harming Behaviors, and Mental Ill-Health: Findings across England and Wales.

Int J Environ Res Public Health. 2023;20(17). PMID: [37681773](#)

Of 21,716 adults aged 18-69 years in England and Wales, 56.6% female, “Exposure to child maltreatment and household dysfunction in isolation were strong predictors of...being involved in violence, engaging in health-harming behaviors, and experiencing mental ill-health...witnessing violence amplified the measured risk beyond expected levels for being a victim or perpetrator of violence.”

McDonagh D, de Vries J, Cominsky C.

The Role of Adverse Childhood Experiences on People in Opiate Agonist Treatment: The Importance of Feeling Unloved.

Eur Addict Res. 2023;1-10. PMID: [37669628](#)

Of 131 Irish adults participating in opiate agonist treatment (e.g. methadone), “While a summation of all ten ACEs predicted higher levels of PTSD, the factor “feeling unloved” as a child provided the single strongest predictor and may represent an overarching risk of PTSD and continued substance use in later life among adults in treatment for an opiate use disorder.”

Gibbs V, Hudson J, Pellicano E.

The Extent and Nature of Autistic People's Violence Experiences During Adulthood: A Cross-sectional Study of Victimization.

J Autism Dev Disord. 2023 Sep;53(9):3509-3524. PMID: [35821545](#)

“Autistic (n = 118) and non-autistic (n = 110) adults completed a questionnaire about their experiences of sexual harassment, stalking, sexual violence and physical violence since the age of 15. Autistic adults reported higher rates of all violence types, multiple forms of violence and repeated instances of the same type of violence. Typical gender differences in the patterns of violence (more physical violence reported by men and more sexual violence reported by women) were apparent in the non-autistic but not the autistic group. Findings add to the limited research in this area and highlight the need to identify risk and protective factors.”

Moorman J, Romano E.

The experience of childhood sexual abuse: An exploratory description of psychological and adaptive functioning in Canadian men.

Child Abuse Negl. 2023;145:106402. PMID: [37603934](#)

Of 69 Canadian men aged 25-60 years who experienced childhood sexual abuse (CSA) compared to a control group, “CSA men were an average of 8.5 years old at abuse onset. Most (62.3 %) had disclosed their CSA experience, waiting an average of 13.6 years before disclosure. After controlling for covariates (i.e., other types of maltreatment, non-maltreatment adversities, education, income), results indicated a significant association between CSA and men's psychological functioning [cognition and learning, motivation, social and emotional dimensions, context and learning], but not their adaptive functioning [a person's ability to cope with the demands of everyday life and adapt to changing situations].”

Mamun A, Biswas T, Scott J, et al.

Adverse childhood experiences, the risk of pregnancy complications and adverse pregnancy outcomes: a systematic review and meta-analysis.

BMJ Open. 2023;13(8):e063826. PMID: [37536966](#)

“Pooled analyses showed that exposure to ACEs increased the risk of pregnancy complications (OR 1.37) and adverse pregnancy outcomes (OR 1.31). Maternal ACEs were associated with gestational diabetes mellitus (OR 1.39), antenatal depression (OR 1.59), low offspring birth weight (OR 1.27), and preterm delivery (OR 1.41)...Preventive strategies, screening and trauma-informed care need to be examined to improve maternal and child health.”

Associations between Childhood Trauma and Tobacco Use Outcomes in Adults after Overnight Abstinence.

Nicotine Tob Res. 2023 Aug 11:ntad135. PMID: [37565294](#)

Of 205 smoking adults who had a variety of tests done after a night of smoking abstinence, “Relative to those with no/minimal abuse, those with moderate/severe abuse had higher negative affect, withdrawal severity, and plasma cotinine levels [a metabolite of nicotine and marker of smoking intensity]...women were more likely than men to have urges to smoke...and have higher withdrawal severity...childhood trauma history may be a marker for smoking susceptibility and suggests that individuals [especially] with experiences of emotional and sexual abuse may require targeted forms of smoking cessation interventions.”

Adolescents

Schiff M, Auslander WF, Gerke DR.

Child Maltreatment, Mental Health, and Self-Reported Health Among Adolescent Girls in Child Welfare.

Journal of child & adolescent trauma. 2023;16(3):759-71. PMID: [37593056](#)

Of 249 girls aged 12-19 years in the child welfare system, “Higher levels of emotional, physical, and sexual abuse, and physical neglect were significantly associated with poorer ratings of health. PTSD and depression were significant mediators between histories of childhood emotional, physical, and sexual abuse and physical health...Trauma focused interventions to reduce symptoms of PTSD and depression among this vulnerable group of adolescents are essential to improve health.”

Kamke K, Mullin TM, Goodman KL.

Barriers to Seeking Medical Care Among Youth Victims of Sexual Violence.

J Adolesc Health. 2023 Sep 5:S1054-139X(23)00345-2. PMID: [37676193](#)

Using data from 520 young victims who contacted the National Sexual Assault Online Hotline with physical health concerns and who had not received medical care, "Victims' barriers were rooted in individual beliefs and contextual realities reflected in three categories: (1) perception that medical care was not needed, (2) anticipated consequences of seeking medical care, and (3) inability to physically access medical care. Victims who perceived care as unnecessary did not understand the health implications of abuse or minimized their need for care. Anticipated consequences included privacy and control over disclosure, stigmatization, retaliation from the perpetrator, family disruptions, and retraumatizing medical treatment. Victims unable to physically access care were uncertain how to access care independently, lacked social support, or were prevented from care by the perpetrator."

Ball B, Hoefler S, Ding X, Sevillano L, Faulkner M.

Promoting Healthy Relationships in Foster Care-"If I Had Seen What a Healthy Relationship Looks Like, that Would Have Changed My Perspective".

Violence Against Women. 2023;10778012231199106. PMID: [37674405](#)

From interviews with 27 young adults, "From the perspective of the youth, foster care modelled controlling or disconnected relationships, and did not provide them with working models for healthy relationships...Restrictive placement rules, meant to promote safety, did not allow for normal social activities and development. Furthermore, youth responded to the controlling environment either with silent conformity or rebellion, such as running away and abrupt exit from foster care, which increased risk for IPV as youth experienced instability and homelessness and some engaged in survival sex. Particularly striking was the widespread absence of conversations with caregivers about dating and sexuality...Our study also highlighted fragile connections with peers...A majority of participants in this study perceived themselves as missing social skills or experienced anxiety around people their own age." Authors make recommendations.

Van der Watt ASJ, Kidd M, Roos A, Lesch E, Seedat S.

Romantic relationship dissolutions are significantly associated with posttraumatic stress symptoms as

compared to a DSM-5 Criterion A event: a case-case-control comparison.

European journal of psychotraumatology. 2023;14(2): 2238585. PMID: [37526098](#)

"Non-marital romantic relationship dissolutions are common among emerging adult students and may result in severe distress and suicidality." In a survey of 2,022 university students, comparing a group with a romantic relationship dissolution vs. a DSM recognized trauma experience vs. a control group with a stressful life event, both the romantic breakup group and the trauma group significantly scored positive for probable PTSD, with the romantic group having a higher percentage of post-traumatic stress symptoms than the trauma group (72.9% vs. 55.4%).

Domestic Violence – Effects on Children

Lévesque S, Rousseau C, Jean-Thorn A, et al.

Reproductive Coercion by Intimate Partners: Prevalence and Correlates in Canadian Individuals with the Capacity to be Pregnant.

PLoS One. 2023;18(8):e0283240. PMID: [37535635](#)

From a survey of 427 Canadian adults aged 18-55 years, 92% women, "63.9% of participants reported at least one lifetime experience of RC [reproductive coercion]...contraceptive sabotage was the most common form (62.8%). Of the participants who had been pregnant, 9.8% reported control of pregnancy outcomes...low education level and IPV increased the risk for control of pregnancy outcomes...These findings underscore the importance of RC in the lives of many Canadian individuals."

Thomas SA, Clements-Nolle KD, Wagner KD, et al.

Adverse childhood experiences, antenatal stressful life events, and marijuana use during pregnancy: A population-based study.

Prev Med. 2023;174:107656. PMID: [37543311](#)

Of 2483 pregnant women in Nevada, 9.8% used marijuana during the most recent pregnancy. Risk factors for marijuana use included 1+ ACE (adjusted prevalence ratio 1.96), 3+ ACE (3.58), 4+ ACE (3.67), and 4+ antenatal stressful life events (ASLE) (3.12). "There was evidence of interaction for high ACE and ASLE exposure on an additive scale...Screening for ACEs and ASLEs during pregnancy, referrals to appropriate behavioral health services, and trauma-informed approaches are important to address marijuana use during pregnancy."

Domestic Violence – Physical Health

Cho H, Kim W, Nelson A, Allen J.

Intimate Partner Violence Polyvictimization and Health Outcomes.

Violence Against Women. 2023:10778012231192585. PMID: [37551097](#)

From a survey of 8587 IPV survivors, “Polyvictimization included six categories: sexual violence, physical and psychological violence, coercive control, multiple violence, stalking, and psychological aggression. Multiple violence was associated with chronic pain, headache, difficulty sleeping, and poor health perception. Females experiencing coercive control were more likely to have chronic pain than males.”

Gris JC, Nikolaeva MG, Khizroeva J, et al.

Is intimate partner abuse underestimated as a precipitating factor for venous thromboembolism in women?

J Thromb Haemost. 2023 Aug 19:S1538-7836(23)00639-6.

PMID: [37598883](#)

“Major and minor trauma increase the risk of venous thromboembolism (VTE = blood clots in veins, sometimes breaking off and traveling to lungs), but violence against young women is not reported as a precipitating factor for thrombosis. Here, we report 20 cases of first VTE events in women of childbearing age after evidence of intimate partner violence. Other risk factors for VTE were often associated. In most cases, women did not report this state of violence at the first consultation and their doctors did not suspect it. We imagine that it is an underdiagnosed situation and should call for a systematic evaluation. Screening for intimate partner abuse could have significant consequences, both on protecting women who are affected by it and better evaluating the risk of bleeding with anticoagulant treatment in this situation.”

Skoczek AC, Haggag A.

Neurological Complications Secondary to Intimate Partner Violence: A Brief Review and Case of Posterior Cerebral Artery Cerebrovascular Accident Following Domestic Abuse.

Cureus. 2023;15(8):e42823. PMID: [37664282](#)

This case report describes a patient who experienced physical IPV and head trauma, leading to a variety of neurological symptoms, and was subsequently diagnosed with stroke.

Domestic Violence – Mental Health

Walker SJ, Hester M, McCarthy E.

The Use of Chemical Control Within Coercive Controlling Intimate Partner Violence and Abuse.

Violence Against Women. 2023:10778012231197579. PMID: [37661810](#)

“Based on testimonies of 37 victims-survivors and nine domestic abuse practitioners in the UK we identify varying tactics used to chemically coerce and control...the use of chemical restraints amongst victims-survivors is much more of a problem than we currently know and that people accessing support for IPVA do not tend to disclose this type of behavior because often they do not recognize it as abuse...perpetrators do not necessarily need to use physical violence to coerce and control the victim, which would be more likely to bring them to the attention of the authorities.”

Table 1. Victim-survivor experiences (n = 37).

	N	%
Partner or ex-partner deliberately withheld essential medication or treatment (including vaccines) from them and/or their child(ren)	11	30
Partner or ex-partner controlled, or tried to control, their access to medication/treatment, for example, by withholding the money or other means necessary for them to access it	9	24
Partner or ex-partner used, or tried to use, other substances (apart from prescribed medication), including illegal drugs and/or alcohol, to make them do something they did not want to do	19	51
Partner or ex-partner had controlled, or tried to control, their contraception (e.g., tried to get them pregnant, or tried to get pregnant, against their wishes by sabotaging birth control method(s))	9	24
Partner or ex-partner had interfered, or tried to interfere, with them getting a COVID-19 vaccination, or had forced them to do so	5*	16

van Gelder NE, Ligthart SA, van Rosmalen-Nooijens K, et al.

Key Factors in Helpfulness and Use of the SAFE Intervention for Women Experiencing Intimate Partner Violence and Abuse: Qualitative Outcomes From a Randomized Controlled Trial and Process Evaluation.

J Med Internet Res. 2023;25:e42647. PMID: [37603391](#)

From and evaluation of an eSAFE intervention by Dutch women experiencing IPV, “The intervention was helpful in the domains of acknowledgment, awareness, and support. However, participants also identified points for improvement: the availability of a simplified version for acute situations; more attention for survivors in the aftermath of ending an abusive relationship; and more information on certain topics, such as technological IPV, support for children, and legal affairs.”

Elder/Dependent Adult Abuse

Elman A, Cox S, Gottesman E, et al.

The critical role of the specialized social worker as part of ED/hospital-based elder mistreatment response teams.

J Elder Abuse Negl. 2023 Sep 10:1-11. PMID: [37691425](#)

“Social workers play a critical role in responding to elder mistreatment. Their unique skillset allows them to establish close connections with community resources, collaborate with various hospital stakeholders, support patients/families/caregivers through challenging situations, navigate the legal and protective systems, and balance patient safety and quality of life in disposition decision-making. The role of the social worker on multi-faceted teams includes conducting a comprehensive biopsychosocial assessment, helping to develop a safe discharge plan, and making appropriate referrals, among other responsibilities.”

Sexual Assault

Usher K, Jones R, Rice K, Jackson D.

Technology-facilitated sexual abuse and mental health: What mental health nurses and mental health professionals need to know.

Int J Ment Health Nurs. 2023;32(5):1191-2. PMID: [37249194](#)

“Severe forms of online sexual abuse, including stalking or harassment, can lead to serious mental health outcomes and emotional distress, self-censorship, and withdrawal from social media and other online spaces as well as PTSD, problematic alcohol use, and suicidal behaviour...mental health outcomes include distress, shame, panic, anxiety, depression, self-harm, and attempted suicide. In addition, victims may experience professional consequences such as loss of their job, school withdrawal, and challenges related to anonymity. It is important to recognize the gravity of this situation; technology-facilitated abuse can shatter lives; it can make an individual feel as if their life is not worth living. As a result of this outcome, some women have chosen to end their lives rather than be subjected to the scrutiny of others. These are serious and life-changing consequences of technology misuse that need to be urgently addressed.”

Ennis N, Rheingold A, Zinzow HM, et al.

Women's Behavioral Coping Responses During Sexual Assault: Association With Posttraumatic Stress Disorder Symptoms and the Moderating Role of Alexithymia.

Violence Against Women. 2023;29(11):2216-38. PMID: [36862797](#)

For 152 college women who had experienced sexual assault, immobilized responses, childhood sexual

abuse, and alexithymia (difficulty identifying and labeling emotions), and particularly immobilized response plus alexithymia, were significantly associated with PTSD.

Weingarten CA, Baker CK, Einolf CJ.

"There Is No One Way to Get Over It": An Examination of Psychotherapy and Complementary Therapy Use Within a Sample of Survivors Who Experienced Sexual Violence.

Violence Against Women. 2023;10778012231196053. PMID: [37603583](#)

From a survey of 303 sexual assault survivors on healing, “Results show varied therapy use including psychotherapy (76.9%), yoga (50.2%), and massage (32.1%), among others. Mean number of therapies used was over three. Service utilization was delayed over a decade on average.” Barriers to use included stigma, financial, and lack of awareness.

Table 1. Percentage of Therapy Use Reported Within the Sample, by Type of Therapy.

Therapy	Frequency	Percent (%)
Psychotherapy	190	76.9
Yoga	123	50.2
Group therapy	89	35.9
Massage	80	32.1
Chiropractic medicine	81	31.9
Art therapy	80	31.4
Eye Movement Desensitization Reprocessing (EMDR)	51	20.5
Acupuncture	49	18.8
Reiki	39	15.9
Naturopathic medicine	37	15.0
Dance and movement therapy	33	13.1
Equine- or horse-assisted therapy	20	8.0
Somatic experiencing	19	7.8
Biofeedback	19	7.5

Human Trafficking

Hodgins E, Mutis J, Mason R, Du Mont J.

Sex Trafficking of Women and Girls in Canada: A Scoping Review of the Scholarly Literature.

Trauma Violence Abuse. 2023;24(4):2363-78. PMID: [35596558](#)

“Key findings highlighted challenges in conceptualizing sex trafficking centered largely around issues of coercion and consent. Pathways into trafficking (economic displacement, past abuse, and broken ties with family and community) and gaps and barriers in anti-trafficking responses (narrow or conflicting definitions, stigmatization and criminalization of sex work, and a lack of accessible or appropriate services) particularly impacted Indigenous, im/migrant, and other marginalized women and girls. There is a paucity of empirical studies on sex trafficking in Canada and this has implications for the development of data-driven policies and protocols.”

LGBTQ Concerns

Chen M.

"Are You-?" "Are You?" Queer Advocacy at Contemporary Neoliberal Rape Crisis Centers.

Violence Against Women. 2023;10778012231192606. PMID: [37545388](#)

"This article draws on semistructured interviews with 23 LGBTQ+ advocates to explore how they navigate their sexual, gender, and racial identities at rape crisis centers today. Results show that LGBTQ+ advocates choose the ways that their sexual and gender identities are visible or invisible at their agency, usually to improve LGBTQ+ survivor services."

Cook JM, Cations M, Simiola V, Ellis AE, Bellamy C, Martino S. Comparisons Between Young, Middle-Aged, and Older Adult Sexual and Gender Minority Male Sexual Assault Survivors.

Am J Geriatr Psychiatry. 2023;31(10):833-43. PMID: [37217371](#)

From a large online survey of sexual and gender minority males in the US and Canada, "older and younger groups did not differ on any childhood sexual assault variable, the frequency of or number of attackers for adult sexual assault, the frequency of accidents and other injury traumas, or the occurrence or frequency of mental health treatment. Trauma load, including childhood and adult sexual assault, were more strongly related to current depressive symptoms than age group...Implications for working clinically with middle-aged and older SGM men with untreated sexual assault-related mental health difficulties are discussed."

Race/Cultural Concerns

Armstrong-Mensah E, Rasheed N, Williams D, et al.

Implicit Racial Bias, Health Care Provider Attitudes, and Perceptions of Health Care Quality Among African American College Students in Georgia, USA.

Journal of racial and ethnic health disparities. 2023;10(5):2600-12. PMID: [36331715](#)

From a survey of 63 African American school of public health students in Georgia, "Provider brushes off patient concerns when providing medical care (29.9%), stereotyping (26.9%), and the lack of communication during medical care (25.4%) were the three main implicit racial attitudes identified by GSU SPH students. Owing to the poor quality of care

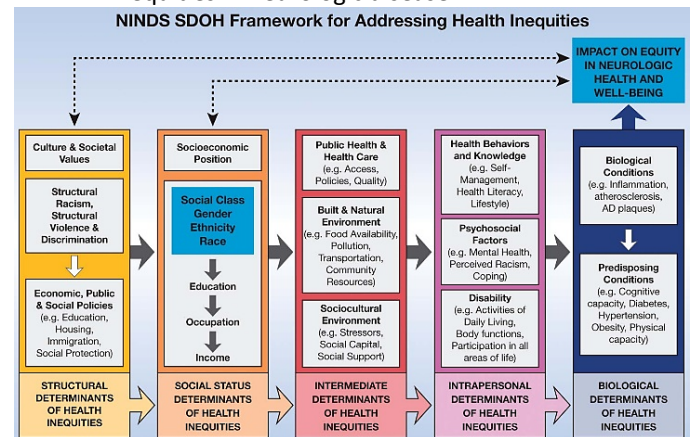
they receive from their health care providers, some students (28.4%) are reluctant to utilize health care services, distrust doctors that are not from their race (34.3%), do not adhere to treatment (19.4%), and prefer to use home remedies (28.4%) when ill. Students recommended cultural competency training, holding health care providers accountable for their actions, and increasing African American health care providers in Georgia as ways to address health care provider attitudes and quality of care."

Griffith DM, Towfighi A, Manson SM, et al.

Determinants of Inequities in Neurologic Disease, Health, and Well-being: The NINDS Social Determinants of Health Framework.

Neurology. 2023;101(7 Supplement 1):S75-s81. PMID: [37580154](#)

"We offer this framework to...illustrate how behavioral and biological factors occur in a social and economic context, factors that have been understudied as points of intervention to reduce inequities in neurologic disease."



Mehta LS, Velarde GP, Lewey J, et al.

Cardiovascular Disease Risk Factors in Women: The Impact of Race and Ethnicity: A Scientific Statement From the American Heart Association.

Circulation. 2023 May 9;147(19):1471-1487. PMID: [37035919](#)

"Language barriers, discrimination, acculturation, and health care access disproportionately affect women of underrepresented races and ethnicities. These factors result in a higher prevalence of cardiovascular disease and significant challenges in the diagnosis and treatment of cardiovascular conditions...This scientific statement reviews the current evidence on racial and ethnic differences in cardiovascular risk factors and current cardiovascular preventive therapies for women in the United States."

Briggs E, Hanson R, Klika JB, et al.

Addressing Systemic Racism in the American Professional Society on the Abuse of Children Publications.

Child Maltreat. 2023;10775595231191394. PMID: [37554071](#)

“In this commentary, the authors detail concrete steps over the coming years that will advance diversity, equity, inclusion and justice through American Professional Society on the Abuse of Children's (APSACs) flagship journal, Child Maltreatment.”

Goel N, Hernandez A, Thompson C, et al.

Neighborhood Disadvantage and Breast Cancer-Specific Survival.

JAMA Netw Open. 2023 Apr 3;6(4):e238908. PMID: [37083666](#)

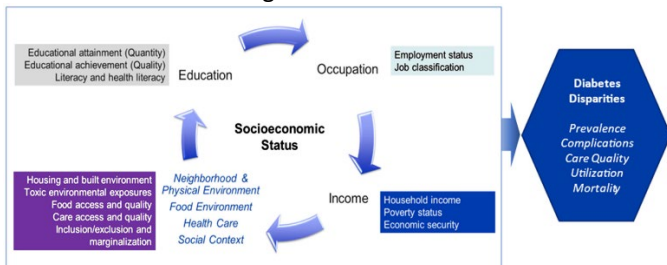
“A total of 5027 women with breast cancer were included: 55.8% were Hispanic, 17.5% were non-Hispanic Black, and 27.0% were non-Hispanic White. Mean age was 55.5 years. Women living in the most disadvantaged neighborhoods had shorter breast cancer-specific survival compared with those living in the most advantaged neighborhoods after controlling for individual-level sociodemographic, comorbidity, breast cancer risk factor, access to care, tumor, and National Comprehensive Cancer Network guideline-concordant treatment characteristics (hazard ratio, 1.29).

Hill-Briggs F, Fitzpatrick SL.

Overview of Social Determinants of Health in the Development of Diabetes.

Diabetes care. 2023;46(9):1590-8. PMID: [37354331](#)

“The incorporation of socioeconomic and political systems and racism as root causes and current drivers of adverse SDOH into U.S. SDOH frameworks enables an emphasis shift from primary individual- and neighborhood-level time-limited solutions to multisector and all-of-government initiatives that bring requisite policy change and permanent structural change.”



Perpetrators

Steely Smith M.

"I'm Not a Child Molester, But a Victim Myself": Examining Rationalizations Among Male Sex Offenders Who Report Histories of Childhood Sexual Abuse.

Int J Offender Ther Comp Criminol. 2023;67(12):1254-71. PMID: [35670571](#)

“Persons convicted of sexual offenses hold distorted attitudes and beliefs, or rationalizations that minimize the severity of their offending.” This study looked at the differences in distortions of male sex offenders who themselves had experienced child sexual abuse and those who had not. (Below: defeasibility = under the influence, scapegoating = blaming those who had sexually abused the perpetrator)

Table 1. Comparison of Sexually Abused and Non-Sexually Abused Accounts.

Account type*	Sexually abused (n=40)	Non-sexually abused (n=40)
Excuses	27	15
Biological drive	0	0
Defeasibility	3	8
Accident	0	3
Scapegoating	24	4
Justifications	17	19
Denial of injury	17	18
Denial of victim	0	0
Condemnation of condemners	0	0
Appeal to loyalties	0	1
Denial	6	5

Bennett A, Jackson Y, Gabrielli J.

A social network analysis of perpetrators of child maltreatment reported by youth in foster care.

Child Abuse Negl. 2023;145:106432. PMID: [37683404](#)

Using data from 503 youth in foster care (8-21 years old), “Biological parents and peers were the most common perpetrators of physical and psychological abuse with peers and non-family adults being most common for sexual abuse.”

Swaby H, Lievesley R.

"Falling Through the Cracks": A Retrospective Exploration of the Barriers to Help-Seeking Among Men Convicted of Sexual Crimes.

Sex Abuse. 2023;35(7):812-41. PMID: [36537848](#)

“This research has explored the emotional experience of living with offense-related sexual thoughts. It has illuminated the narrative accounts of individuals who suffered immensely with their attractions before going on to offend, offering insight into how, and with more support services available, their actions could have been prevented.”

Police and Court Systems

Kennedy N, Win TL, Bandyopadhyay A, et al.
Insights from linking police domestic abuse data and health data in South Wales, UK: a linked routine data analysis using decision tree classification.

The Lancet Public health. 2023;8(8):e629-e38. PMID: [37516479](#)

Using linked police and health data for 8709 IPV victims from a police report, within one year following the report, 41.9% were either seen in the ED, hospitalized, or died. Healthcare data prior to the police incident included ED and hospital admissions, smoking, smoking cessation advice, obstetric codes, and prescription of antidepressants and antibiotics. “The evidence presented in this study demonstrates the preventive opportunities for stakeholders across multiple sectors, which can be facilitated when agencies communicate and link data.”

Pinchevsky GM, Augustyn MB, Kennedy AH, Rennison CM.
Perceptions of Sexual Violence Terms Used in Statutes Throughout the United States.

Violence Against Women. 2023;10778012231188088. PMID: [37518987](#)

“Nine different terms are used to identify the primary offense of sexual violence in state statutes, with significant differences in perceived severity for these terms. The findings have implications for the public's (mis)understanding of sexual violence and the treatment of survivors and perpetrators.”

Table 3. Mean Severity Scores for Each Term (n = 1,215).

	Range	Full analytic sample (n = 1215)	Survivors (n = 430)	Non-survivors (n = 785)
Criminal sexual conduct	0–10	9.11 (1.83)**	8.85 (2.15)**a	9.25 (1.60)**
Criminal sexual penetration	0–10	9.36 (1.64)**	9.11 (1.98) ^a	9.50 (1.41)**
Criminal sexual intercourse	0–10	9.40 (1.61)**	9.13 (1.90) ^a	9.55 (1.41)**
Gross sexual imposition	0–10	8.97 (1.83)**	8.77 (1.99)**a	9.08 (1.73)**
Rape	0–10	9.53 (1.56)	9.23 (1.95) ^a	9.69 (1.27)
Sexual abuse	0–10	9.39 (1.56)**	9.20 (1.80) ^a	9.50 (1.40)**
Sexual assault	0–10	9.37 (1.60)**	9.14 (1.89) ^a	9.50 (1.40)**
Sexual battery	0–10	9.31 (1.64)**	9.01 (1.99) ^a	9.48 (1.38)**
Sexual intercourse without consent	0–10	9.37 (1.60)**	9.14 (1.91) ^a	9.50 (1.38)**

Note. Mean severity score for term was significantly different from the mean severity score for the term rape within group: * p ≤ .006 and ** p ≤ .001; mean scores between survivors and non-survivors were significantly different: ^a p ≤ .006

Roberts SCM, Schulte A, Zaugg C, Leslie DL, Corr TE, Liu G.
Association of Pregnancy-Specific Alcohol Policies With Infant Morbidities and Maltreatment.

JAMA network open. 2023;6(8):e2327138. PMID: [37535355](#)

Of 1,432,979 birthing person-infant pairs, 2.1% of infants had injuries associated with maltreatment, and 3.1% of infants had morbidities associated with alcohol use during pregnancy. “Most pregnancy-specific state alcohol policies were not associated with decreased odds of infant injuries or morbidities. Policy makers should not assume that pregnancy-specific alcohol policies improve infant health.”

Field N, Katz C.

The Experiences and Perceptions of Sexually Abused Children as Participants in the Legal Process: Key Conclusions From a Scoping Literature Review.

Trauma Violence Abuse. 2023;24(4):2758-71. PMID: [35762223](#)

From a research review, “The analysis yielded a major theme of children's need for validation, with four subthemes relating to the need to be protected, the need to be seen and heard, the need to be believed, and the need to be provided with support. The themes and how they relate to other aspects of sexually abused children's lives are discussed as well as practical implications for future studies.”

Providers

Berry OO, Kaufman P, Weiss M, Fitelson E, Monk C.

Co-location of specialized mental health services in an intimate partner violence advocacy organization.

Med Sci Law. 2023;258024231195496. PMID: [37606565](#)

“A novel, integrated care model, comprised of psychiatrists, clinical psychologists, and social workers were embedded into the five New York City Family Justice Centers (FJCs), to provide free co-located mental health care to adult survivors of IPV alongside the existing advocacy, social, and legal services...Clients reported increased access to care, with 67.2% seeing a mental health clinician within two weeks of a request, and improvement in symptom relief, including sleep, mood, irritability, reduction in thoughts of self-harm, improved relationships with others, especially their children, and improved self-efficacy in parenting skills. FJC staff reported satisfaction with the FJCMHP model, and increased understanding of clients' mental health needs. The evaluation results highlight the feasibility and tolerability of integrated mental health services in a non-medical setting.”

Guo N, Muurlink O, Doyle S.

Psychological risks experienced by interpreters in the domestic violence cases: a systematic review.

Front Sociol. 2023;8:1139431. PMID: [37664822](#)

In this research review “Various themes involving interpreters emerged from the ensuing analysis, including intrinsic difficulties, misguided expectations, role requirements, psychological impacts, posttraumatic growth, coping strategies, and recommendations for future research and practice...with findings holding implications for interpreting in other traumatic domains.”

Lee CH, Santos CD, Brown T, Ashworth H, Lewis JJ.

Trauma-Informed Care for Acute Care Settings: A Novel Simulation Training for Medical Students.

MedEdPORTAL. 2023;19:11327. PMID: [37520013](#)

“Our simulation-based training enabled students to practice conversations and interventions related to trauma. This novel training represents a feasible and effective means for teaching TIC for acute care settings, including in the emergency department and in-patient settings.” Cases include IPV, transgender patient, and health care discrimination. [Full article with links to training materials.](#)

Mullen JE.

Recognizing Child Abuse.

AACN Adv Crit Care. 2023;34(3):240-5. PMID: [37644630](#)

This brief review of child abuse recognition and management for nurses includes 4 cases with Q&A.

Estrada-Darley I, Chen P, McBain R, et al.

Patient and Caregiver Perspectives on Implementation of ACE Screening in Pediatric Care Settings: A Qualitative Evaluation.

J Pediatr Health Care. 2023 Aug 16:S0891-5245(23)00174-8. PMID: [37589629](#)

“One-on-one semistructured phone interviews were conducted with 44 adolescents and 95 caregivers of children less than 12 years old...Most participants reported feeling comfortable discussing ACEs with their providers. Some reported that screening helped build trust. Others expressed privacy concerns and did not receive information about the reason for screening. Adolescent patients shared conflicting feelings -- of both comfort and discomfort. Caregivers attending to multiple children, foster parents, and monolingual Spanish speakers disclosed unique challenges to ACEs screening. We found no evidence of lasting adverse effects...clinics planning to adopt routine ACEs screening should ensure clear messaging on why screening is occurring, anticipate and address privacy concerns, and adopt workflows to discuss screening results.”

Chelemedos K.

Moving From Adverse Childhood Experiences to Celebrating Supportive Nurturing Relationships.

Pediatrics. 2023 Sep 7:e2023062439. PMID: [37675479](#)

This winning personal essay from a pediatric resident discusses screening patients for ACEs, her own ACE score of 7, the safe, stable, and nurturing relationships and environments (SSNREs) that helped her growing up, and how she incorporates asking about and helping children and teens find their SSNREs.

Prevention

So M, Woodward KP, Schlafer RJ, Testa A, Davis L, Jackson DB.
Positive Early Childhood Experiences and School Readiness among United States Preschoolers.

J Pediatr. 2023;113637. PMID: [37532124](#)

“We analyzed national data on children ages 3-5 from 2016 to 2020 (n = 26,871) to examine associations between key PECE [positive early childhood experiences] domains (nurturing relationships, home learning opportunities, safe and stable environments, and family routines) with being on track for school readiness...Two-fifths of children were healthy and ready to learn. Exposure to PECEs was associated with higher school readiness, irrespective of relative ACE exposure.” Children with moderate or high levels of PECEs were 2-4 times more likely to be school ready, and “associations were robust across demographic groups (eg, race and ethnicity), ACE levels, and ACE types (eg, parental incarceration).”

Sonsteng-Person M, Jagers JW, Loomis AM.

Academic Achievement After Violence Exposure: The Indirect Effects of School Attachment and Motivation to Succeed.

Journal of child & adolescent trauma. 2023;16(3):717-29.

PMID: [37593062](#)

“Disparities in educational outcomes for students living in communities burdened with high rates of violence are striking as they are at an increased risk for misbehavior, low GPA, poor school attendance, and decreased standardized test scores...findings indicate that school attachment and motivation to succeed mediate the relationship between exposure to violence and grades. Implications for adapting school programs and policies as well as providing teacher training to increase school attachment and motivation are discussed.”

Ochoa MK, Constantin K.

Impacts of child sexual abuse: The mediating role of future orientation on academic outcomes.

Child Abuse Negl. 2023;145:106437. PMID: [37659153](#)

From a multigenerational study of 2084 children, child sexual abuse was associated with negative future orientation (negative attitudes about the future), which was associated with lower grades in school, more likely to drop out, and lower levels of education. Positive future orientation contributed to better academic outcomes.

Constantino JN, Buchanan G, Tandon M, et al.
Reducing Abuse and Neglect Recurrence Among Young Foster Children Reunited With Their Families.

Pediatrics. 2023;152(3). PMID: [37622236](#)

For 272 young children who experienced family reunification after protective placement, “Judicious implementation of evidence-based parenting education, 2-generation psychiatric care, and clinical consultation were associated with marked reduction in court re-entry versus care-as-usual.”

Researchers

Krzyzanowski MC, Ives CL, Jones NL, et al.

The PhenX Toolkit: Measurement Protocols for Assessment of Social Determinants of Health.

Am J Prev Med. 2023;65(3):534-42. PMID: [36935055](#)

“Nineteen social determinants of health protocols were released in the PhenX Toolkit (<https://www.phenxtoolkit.org>) in May 2020 to provide measures at the individual and structural levels for built and natural environments, structural racism, economic resources, employment status, occupational health and safety, education, environmental exposures, food environment, health and health care, and sociocultural community context. Promoting the adoption of well-established social determinants of health protocols can enable consistent data collection and facilitate comparing and combining studies, with the potential to increase their scientific impact.”

Tomás JM, Georgieva S, Navarro-Pérez JJ, Sancho P.

Structural Validity and Internal Consistency of the Adolescents and Children Risk of Abuse and Maltreatment Parental Scale (ACRAM-PS).

J Interpers Violence. 2023;8862605231189509. PMID: [37537893](#)

“The aim of this study is to examine the structural validity, internal consistency, and convergent validity of a newly developed child maltreatment assessment instrument. A total of 286 professionals of the child protection system participated in the study, completing a total of 645 cases of children and adolescents” from four continents and 53 nationalities. The Adolescents and Children Risk of Abuse and Maltreatment Parental Scale (ACRAM-PS) is the result.

Schnarrs PW, Dorri AA, Yockey RA, et al.

The Sexual and Gender Minority Adverse Childhood Experiences Scale.

Am J Prev Med. 2023 Aug 10:S0749-3797(23)00320-3. PMID: [37572853](#)

A survey of 4445 sexual and gender minority (SGM) adults was used to help develop an SGM ACEs scale with good-to-excellent psychometric properties. “Vicarious trauma (81%) and school bullying (67%) were the most common experiences and all SGM ACEs were frequently occurring...Participants with more SGM adverse childhood experiences exposure had worse anxiety, depression, and post-traumatic stress disorder symptoms after controlling for ACEs exposure and demographic factors.”

SGM-ACE experiences

You were bullied in school by other children, teachers, staff, or school administrators (i.e., principal) because of your sexuality or gender identity. (School bullying)

You were in foster care, juvenile detention, or a mental hospital. (Institutionalization)

Family members said transphobic, homophobic, or biphobic things about you or other people on a regular basis in person or on social media. (Cisheterosexist family environment)

Religious leaders at your church or other faith community said homophobic and transphobic things, such as teaching that the Bible or other texts condemn homosexuality or transgenderism. (Religious trauma)

You were punished, shamed, or yelled at by family members for not conforming to gender expectations (being too much or not manly enough, being too feminine or not feminine enough). (Punishment for gender nonconformity)

You felt pressure to have sex or relationships that you did not want to protect your family from discovering your gender or sexuality. (Cisheteronormative relationships)

You saw/heard of other LGBTQ+ people being physically harmed. (Vicarious trauma)

You were kicked out of your home or ran away because you were LGBTQ. (Kicked out/ran away)

Other of Interest

Peterson C, Aslam MV, Rice KL, Gupta N, Kearns MC.

Systematic Review of Per Person Violence Costs.

Am J Prev Med. 2023 Aug 10:S0749-3797(23)00321-5. PMID: [37572854](#)

“Per-person cost estimates related to adverse childhood experiences, community violence, sexual violence, intimate partner violence, homicide, firearm violence, youth violence, workplace violence, and bullying from 73 studies (majority focusing on the U.S.) were summarized. For example, among 23 studies with a focus on adverse childhood experiences, monetary estimates ranged from \$390 for adverse childhood experience-related annual healthcare out-of-pocket costs per U.S. adult with ≥ 3 adverse childhood experiences to \$20.2 million for the lifetime societal economic burden of a U.S. child maltreatment fatality.”