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Questions: Harise Stein, MD harise@stanford.edu

Child Abuse

Badger S, Waugh MC, Hancock J, Marks S, Oakley K.

Short term outcomes of children with abusive head trauma two years post injury: A retrospective study.

J Pediatr Rehabil Med. 2020;13(3):241-253. PMID: [32831205](#)

For 85 children with abusive head trauma who received follow-up care at one hospital's rehabilitation department, "42% of children had a good recovery, 34% had a moderate disability and 24% had a severe disability. For whom there was data, more than half had abnormal cognition, behaviour and personal-social skills, whilst more than a third had abnormal speech and language... vision, play skills, and gross and fine motor skills. Factors that predicted poorer prognosis included paediatric intensive care unit admission, longer length of hospital stay, breathing difficulty and lower Glasgow Coma Scale [more severe coma] on presentation."

Wallace F, Collins JA, Talawila Da Camara N, et. al.

Fifteen-minute consultation: Bruising in the premobile child.

Arch Dis Child Educ Pract Ed. 2021 Sep 6:edpract-2021-321661. PMID: [34489327](#)

"Bruising in premobile babies is rare and raises serious concerns about physical abuse." This article details categories of findings, documentation, and laboratory and xray tests to look for underlying medical problems and hidden injuries.

Awasthi S, Ornelas J, Armstrong A, Johnson JA, Eisen DB.

Anogenital warts and relationship to child sexual abuse: Systematic review and meta-analysis.

Pediatr Dermatol. 2021 Jul;38(4):842-850. PMID: [34060139](#)

From a research review, location of anogenital warts on penis or vulva (but not perianal area) was 5.93 times more likely to be associated with child sexual abuse. Also, finding anogenital warts in children age >2 years was about 7 times more likely to be due to sexual abuse than in those younger than 2. Typing of wart was not a reliable indicator of sexual abuse.

Hamilton-Giachritsis C, Hanson E, Whittle H, et. al.

Technology assisted child sexual abuse: Professionals' perceptions of risk and impact on children and young people.

Child Abuse Negl. 2021 Sep;119(Pt 1):104651. PMID: [32854947](#)

From a survey of child abuse professionals, "Professionals often demonstrated a limited understanding of the wide range of 'online' child sexual abuse [CSA]. Online CSA was often seen by organizations and some professionals as less serious than offline CSA...and some professionals noted that organizations are more likely to perceive online victims as 'active' participants or to blame for their abuse...this can lead to victims remaining at risk, a systemic failure to protect, and a decreased chance of accessing appropriate interventions. Drawing on our findings, we make a number of recommendations."

Qualls C, Hewes HA, Mann NC, Dai M, Adelgais K.

Documentation of Child Maltreatment by Emergency Medical Services in a National Database.

Prehosp Emerg Care. 2021 Sep-Oct;25(5):675-681. PMID: [32870747](#)

From a national EMS database, the percentage of impression of child abuse/neglect among children ≤3 years of age was very low at 0.10%. Documentation was primarily associated with findings of injury whereas documentation of nonspecific symptoms such as vomiting and seizure was infrequent. These findings suggest that recognition of abuse primarily occurred in young patients with overt signs of trauma.

Lugo-Candelas C, Corbeil T, Wall M, et. al.

ADHD and risk for subsequent adverse childhood experiences: understanding the cycle of adversity.

J Child Psychol Psychiatry. 2021 Aug;62(8):971-978. PMID: [33289088](#)

From a long-term study of Puerto Rican children, and controlling for multiple factors, those with inattentive type of ADHD (vs. hyperactive/impulsive) predicted subsequent risk for ACEs. "The present study suggests a pathway for the perpetuation of adversity, where bidirectional relationships between ADHD and ACEs may ensnare children in developmental pathways predictive of poor outcomes."

Nazer D, Kannikeswaran N, Schmidt C.

Commotio cordis: A case report of a fatal blow.

J Forensic Sci. 2021 Aug 30. PMID: [34462926](#)

This case report of sudden death of a 6-month-old baby brings up the condition of “commotio cordis”, which is a stopping of the heart due to a blunt blow to the chest wall. “While it is commonly reported in adolescents during sporting activities, it may result from non-accidental trauma especially in infants and younger children...Since there are no structural and microscopic abnormalities in the heart autopsy in cases of commotio cordis, timely on-scene investigation and a thorough investigation regarding the mechanism of injury are required to make this diagnosis. Early identification is crucial and can prevent further abuse in other siblings.”

Adult Manifestations of Child Abuse

Binnie V, Le Brocque R, Jessup M, Johnston ANB.

Adult frequent presentation to emergency departments and adverse childhood experiences: a scoping review.

Australas Emerg Care. 2021 Dec;24(4):264-279. PMID: [33358578](#)

Studies in this review suggest childhood adversity is common among adults who frequently attend the emergency department. “and there is no standardized approach described to documenting childhood adversity, nor any consistent intervention reported by emergency departments to address its sequelae in adulthood...Screening frequent presenters for childhood adversity, while monitoring the outcomes of doing so through research, may provide a platform upon which to develop future directions.”

Merrill SM, Moore SR, Gladish N, et. al.

Paternal adverse childhood experiences: Associations with infant DNA methylation.

Dev Psychobiol. 2021 Sep;63(6):e22174. PMID: [34333774](#)

Stress experienced preconception by mothers can cause DNA changes in the next generation. This study of 45 3-month-old infants found that fathers' exposure to ACEs were also associated with infant DNA changes. Analysis did not find any contribution to the infant's DNA from fathers' education, income, marital status, and postpartum depression, but did with smoking and body mass index. This same DNA association was found between paternal ACEs and offspring attention problems at 3 years.

Gordon JB.

The importance of child abuse and neglect in adult medicine.

Pharmacol Biochem Behav. 2021 Sep 6:173268. PMID: [34499948](#)

“At least one out of every ten USA adults has a significant history of childhood maltreatment...a past history of childhood abuse and neglect [CAN] makes substantial contributions to physical disease in adults, including asthma, chronic obstructive pulmonary disease, lung cancer, hypertension, stroke, kidney disease, hepatitis, obesity, diabetes, coronary artery disease, pelvic pain, endometriosis, chronic fatigue syndrome, irritable bowel syndrome, fibromyalgia, auto immune diseases, and shortened life expectancy. The contribution of CAN trauma to these many pathologies remains largely underappreciated...Recommendations are made for managing these patients.”

Population attributable fractions (PAFs) for health conditions, health risk behaviors, and socioeconomic challenges, by adverse childhood experience score^{a,b}. From the Behavioral Risk Factor Surveillance System^c in 25 states, 2015–2017.

	Adverse childhood experience score			Overall PAF %
	1	2–3	≥4	
	PAF %			
Chronic condition				
Coronary heart disease	2.6	3.4	6.6	12.6
Stroke	— ^a	5.0	9.6	14.6
Asthma	4.2	8.1	11.7	24.0
Chronic obstructive pulmonary disease	4.1	9.1	13.8	27.0
Cancer (excluding skin)	—	2.4	3.5	5.9
Kidney disease	3.7	5.5	6.5	15.7
Diabetes	—	2.2	3.5	5.7
Overweight or obesity ^d	—	0.7	1.0	1.7
Mental health				
Depression	6.4	14.7	23.0	44.1
Health risk behavior				
Current smoker	5.9	11.1	15.9	32.9
Heavy drinker	5.6	9.0	9.3	23.9
Socioeconomic challenge				
Less than high school education	—	—	4.6	4.6
Unemployment	—	5.7	9.2	14.9
No health insurance	—	—	3.8	3.8

Herrenkohl TI, Fedina L, Hong SH, Lee JO, Saba S.

Associations between prospective and retrospective measures of child abuse and self-reported adult health at midlife.

Child Abuse Negl. 2021 Oct;120:105203. PMID: [34280710](#)

Of 457 children followed to adulthood, adults retrospectively reporting physical child abuse “were moderately related to reports of overall health, as well as...back and chest pain, hypertension, and certain forms of cancer. Associations were also observed for lifetime alcohol problems and past-year doctor and emergency room visits.” Retrospective reports correlated with child welfare records, but not with caregiver reports.

Adolescents

Lippert T, Clary M, Bleoaja C, Walsh WA, Jones LM.

Statutory Rape: Case Characteristics When Offenders are Younger Than 21 Years of Age Versus Older.

J Interpers Violence. 2020 Nov 27;886260520975807. PMID: [33246375](#)

From an analysis of 105 statutory rape cases, “victims of offenders 21 and over compared with offenders under 21 were over six times as likely to have a prior history of a high number of psychosocial problems, and were seven times more likely to experience multiple forms of coercion versus no coercion by the offender.”

Schwab-Reese LM, Cash SJ, Lambert NJ, Lansford JE.

"They Aren't Going to Do Jack Shit": Text-Based Crisis Service Users' Perceptions of Seeking Child Maltreatment-Related Support From Formal Systems.

J Interpers Violence. 2021 Sep 10;8862605211043577. PMID: [34507498](#)

“We conducted a qualitative content analysis of all conversations from a text-based crisis service [regarding adolescent nonsexual maltreatment disclosures] that resulted in a report to CPS (n = 244). Many of the texters had previously sought support from their peers or parents, and some had engaged with more formal systems. Many young people were hesitant to reach out to formal systems in the future, in part because of negative experiences during past disclosure experiences. Young people may be more likely to seek support through their preferred communication medium, so providing text- and chat-based communication may be one way to encourage and facilitate disclosure.”

Domestic Violence – Effects on Children

Renner LM.

The Co-Occurrence of Child Maltreatment and Intimate Partner Violence: A Commentary on the Special Issue.

Child Maltreat. 2021 Nov;26(4):464-469. PMID: [34463156](#)

“Historically, child maltreatment and intimate partner violence (IPV) have been treated independently along separate trajectories with respect to research, policy, and service provision. These two forms of family violence, however, routinely overlap, with common risk factors, co-occurrence in the same family system or household,

intergenerational effects, and common and compounding adverse effects across the lifespan...The ten articles in this special issue are excellent examples of integration by scholars who are advancing the field through their research on the co-occurrence of child maltreatment and IPV, specifically in the areas of child welfare services, parenting and intergenerational transmission, health-related outcomes, and approaches to polyvictimization. [Table of Contents and abstracts](#)

Paulson JL.

Intimate Partner Violence and Perinatal Post-Traumatic Stress and Depression Symptoms: A Systematic Review.

Trauma Violence Abuse. 2020 Nov 28;1524838020976098. PMID: [33252020](#)

From a world-wide research review, “Findings suggested a strong relationship between IPV exposure and perinatal mental health. Results were more consistent between perinatal mental health and IPV sustained close to or during the perinatal period than for lifetime IPV exposure. In general, physical, sexual, and psychological IPV were independently associated with perinatal depression and post-traumatic stress symptoms.”

Ravi KE, Black BM.

The Relationship Between Children's Exposure to Intimate Partner Violence and an Emotional-Behavioral Disability: A Scoping Review.

Trauma Violence Abuse. 2020 Dec 16;1524838020979846. PMID: [33323045](#)

This research review found that “children exposed to IPV were more likely to have EBD [emotional-behavioral disability] compared to other disabilities...Higher frequency of violence exposure was associated with EBD...Special education evaluators assessing children for EBD should consider screening for children's exposure to IPV and providing resources for IPV.”

Fuller-Thomson E, Rivière RN, Carrique L, Agbeyaka S.

The Dark Side of ADHD: Factors Associated With Suicide Attempts Among Those With ADHD in a National Representative Canadian Sample.

Arch Suicide Res. 2020 Dec 21:1-19. PMID: [33345733](#)

From a large Canadian health survey, 14.0% of adults diagnosed with ADHD vs. 2.7% of those without had attempted suicide. One in four women with ADHD had attempted suicide. “Female gender, lower education attainment, substance abuse, lifetime history of depression, and childhood exposure to chronic parental domestic violence were found to be independent correlates of lifetime suicide attempts among those with ADHD.”

Domestic Violence – Physical Health

Raphael E, Van Den Eeden SK, Gibson CJ, et. al.

Interpersonal violence and painful bladder symptoms in community-dwelling midlife to older women.

Am J Obstet Gynecol. 2021 Sep 20:S0002-9378(21)01045-0.

PMID: [34555321](#)

Among 1974 diverse women aged 40-80 years, 22% reported lifetime interpersonal violence exposure, and 22% reported bladder pain. Lifetime experiences of sexual assault (odds ratio 1.39) and current PTSD symptoms (odds ratio 1.96) were associated with current bladder pain.

Domestic Violence – Mental Health

Potter LC, Morris R, Hegarty K, García-Moreno C, Feder G. Categories and health impacts of intimate partner violence in the World Health Organization multi-country study on women's health and domestic violence.

Int J Epidemiol. 2021 May 17;50(2):652-662. PMID: [33326019](#)

Using WHO data, “All categories of IPV are detrimental to women’s physical and mental health and this persists after the abuse ends. Psychological IPV is at least as harmful to women’s physical and mental health as physical IPV. Combined categories of abuse cause the greatest physical and mental health damage, particularly with regards to suicidal behaviours, and they are also more prevalent than singular forms of IPV.” Relative risk of physical IPV alone – 1.34, psychological IPV alone – 1.49, sexual IPV alone – 1.43, combined psychological and physical IPV – 1.65, and combined sexual and psychological and/or physical IPV 1.77.

Elder/Dependent Adult Abuse

Kayser J, Morrow-Howell N, Rosen TE, et. al.

Research priorities for elder abuse screening and intervention: A Geriatric Emergency Care Applied Research (GEAR) network scoping review and consensus statement.

J Elder Abuse Negl. 2021 Mar-May;33(2):123-144. PMID:

[33797344](#)

The Geriatric Emergency Care Applied Research (GEAR) Network performed a research review and concluded that “research to identify best practices for elder abuse assessment and intervention in emergency departments is still needed”, and delineated specific gaps that need to be addressed.

Koga C, Tsuji T, Hanazato M, Suzuki N, Kondo K.

Elder Abuse and Depressive Symptoms: Which is Cause and Effect? Bidirectional Longitudinal Studies From the JAGES.

J Interpers Violence. 2020 Dec 7:886260520967135. PMID:

[33280484](#)

From a Japanese study of elders who were not initially depressed, three years later those who had experienced abuse were 2.28 times more likely to have depression. In a second analysis, those with mild or severe depression initially were 2.23 times more likely to have experienced abuse after 3 years than those who were not depressed. “After adjusting for several demographic factors, the results showed that abuse can lead to depression and that depression can be a cause of abuse. Therefore, preventing abuse should be considered from both directions.”

Roberto KA, Teaster PB, Lindberg BW, Blancato R.

A First (and Disturbing) Look at the Relationship Between the Opioid Epidemic and Elder Abuse: Insights of Human Service Professionals.

J Appl Gerontol. 2021 Oct;40(10):1231-1235. PMID:

[32772619](#)

From focus groups with 20 elder abuse professionals from four states, four themes evolved regarding the relationship between elder abuse and opioid misuse: “(a) Opioid-Related Elder Abuse is an Escalating Problem; (b) Vulnerable Older Adults are Prisoners in Their Own Home; (c) Health Care Professionals Perpetrate Opioid-Related Elder Abuse; and (d) Older Adults Abuse and Deal Opiates. In addition, all participants noted the lack of reliable, retrievable data to address cases of elder abuse when opioids are involved.”

LGBTQ Concerns

Zeglin RJ, Terrell KR, Barr EM, Moore MJ.

Depression in High School: Lesbian, Gay, and Bisexual Identity as a Moderator of Sexual Assault.

J Sch Health. 2020 Sep;90(9):703-710. PMID: [32696480](#)

From a study of Florida high school students, LGB status was associated with 3-fold increase in the odds of reporting depression for both boys and girls.

King WM, Restar A, Operario D.

Exploring Multiple Forms of Intimate Partner Violence in a Gender and Racially/Ethnically Diverse Sample of Transgender Adults.

J Interpers Violence. 2021 Oct;36(19-20):NP10477-NP10498. PMID: [31526070](#)

Using data from a national multi-ethnic survey of transgender adults, rates of IPV were high: “42.0% endorsed psychological IPV, 39.9% endorsed physical IPV, 30.4% endorsed trans-related IPV, 18.0% endorsed stalking, and 21.5% endorsed forced sex by an intimate partner.”

Wike TL, Bouchard LM, Kemmerer A, Yabar MP.

Victimization and Resilience: Experiences of Rural LGBTQ+ Youth Across Multiple Contexts.

J Interpers Violence. 2021 Sep 7:8862605211043574. PMID: [34490826](#)

From interviews with LGBTQ+ young people aged 12-21 living in rural areas of the Southeastern US, “Four themes emerged related to how rural youth navigate bullying, harassment, and victimization across different social contexts and the support that is available to them: (1) conflicting family messages, (2) navigating personal safety at school, (3) connecting through technology, and (4) confronting negative religious sentiment. A fifth theme captures the strengths of young people in the mid of victimization: (5) demonstrating individual and collective resilience.”

Race/Cultural Concerns

Dhurjati R, Main E, Profit J.

Institutional Racism: A Key Contributor to Perinatal Health Inequity.

Pediatrics. 2021 Sep;148(3):e2021050768. PMID: [34429337](#)

In this commentary on an article showing that in New York City, compared with white infants, Black and Hispanic term infants had increased risk of complications, authors note that “infants born to mothers from vulnerable populations are being sorted into lower-performing hospitals. Barriers that prevent racial and ethnic minority and vulnerable populations from accessing high-quality care are a form of institutional racism that perpetuates disadvantage.” Authors discuss remedies, including supporting hospitals that predominantly care for vulnerable populations with quality improvement programs, directing patients to better-performing hospitals, or models of co-ownership and joint ventures to strengthen available resources throughout a region.

Butler A, Covington K, Parsh B.

Identifying and tackling racial disparities in healthcare.

Nursing. 2021 Sep 1;51(9):40-43. PMID: [34463653](#)

“The US healthcare system is plagued with inequities that disproportionately impact people of color and other marginalized communities. This article discusses some of the key reasons behind these historic and current health disparities, identifies key terms, and discusses strategies...to tackle inequity and racism in American healthcare.”

Key terms to know

Explicit bias: individuals being aware of their prejudices, attitudes, or preferences toward certain groups.¹⁰

Health disparities: differences in health outcomes and their causes among groups of people.³

Health equity: every person has the opportunity to attain their full health potential and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances.¹

Implicit bias: subconscious attitudes, stereotypes, prejudice, or beliefs that have developed over time and may affect decision-making, actions, and understanding without the individual being aware of it.¹⁰

Microaggression: an apparently minor and innocuous degradation or putdown of a member or members of an oppressed, systematically disadvantaged, or marginalized community.²⁶

Racism: a combination of stereotypes and prejudice that leads to unfair treatment solely based on race and how it is embedded and normalized within structures of our society.⁸

Structural racism: The Aspen institute (2021) describes structural racism as a system in which public policies, institutional practices, and other norms reinforce ways to perpetuate racial group inequity.²⁷

Auguste EE, Cruise KR, Jimenez MC.

The Effects of Microaggressions on Depression in Young Adults of Color: the Impact of Traumatic Event Exposures.

J Trauma Stress. 2021 Oct;34(5):985-994. PMID: [33772872](#)

From an online survey of 140 young adults of color, microaggressions were uniquely associated with depression symptoms after controlling for various factors. “Microaggressions are a clinically relevant factor in understanding mental health problems reported by Black, Indigenous, and People of Color in the United States and warrant analysis, assessment, and intervention.”

Bird CM, Webb EK, Schramm AT, et. al.

Racial Discrimination is Associated with Acute Posttraumatic Stress Symptoms and Predicts Future Posttraumatic Stress Disorder Symptom Severity.

J Trauma Stress. 2021 Oct;34(5):995-1004. PMID: [33715212](#)

For 113 African American and/or Black patients recruited from a Wisconsin emergency department after a traumatic injury, pre-trauma exposure to racial discrimination significantly predicted PTSD symptoms at follow-up, even after controlling for multiple factors. “Experiences of racial discrimination add significant additional risk for PTSD symptom development following traumatic injury.”

Sexual Assault

Miyamoto S, Thiede E, Wright EN, et. al.

The Implementation of the Sexual Assault Forensic Examination Telehealth Center: A Program Evaluation.

J Forensic Nurs. 2021 Jul-Sep 01;17(3):E24-E33. PMID: [34132652](#)

One year after the inception of a sexual assault telehealth center to assist rural hospitals with forensic sexual assault services, “The Sexual Assault Forensic Examination Telehealth model resulted in improved local nurse confidence in provision of SA care, nurse perception of improvement in care quality, and high patient care experience ratings.”

Rothman K, Georgia Salivar E, Roddy MK, Hatch SG, Doss BD. Sexual Assault Among Women in College: Immediate and Long-Term Associations With Mental Health, Psychosocial Functioning, and Romantic Relationships.

J Interpers Violence. 2021 Oct;36(19-20):9600-9622. PMID: [31423886](#)

“Comparing women who experienced C-SA [college sexual assault] (n = 201) to women with no C-SA history (n = 203) controlling for age, education, race, and ethnicity...women with a history of C-SA reported lower grade-point averages, more missed classes, and fewer serious romantic relationships in college following the assault...approximately 9 years later, women who experienced C-SA reported greater symptoms of depression, anxiety, and PTSD as well as lower emotional and sexual intimacy.”

Youngren WA, Hamilton NA, Preacher KJ.

Assessing Triggers of Posttrauma Nightmares.

J Trauma Stress. 2020 Aug;33(4):511-520. PMID: [32521086](#)

From a study of 27 female college students who reported frequent nightmares related to sexual trauma, “the co-occurrence of presleep arousal [being very physically or mentally stimulated such as exercise or computer work] and delayed sleep onset latency [difficulty falling asleep] may influence posttrauma nightmare occurrence, suggesting that the time immediately before sleep is crucial to the production of the posttrauma nightmares.”

Isaacs RA, Balendran J, Tran L, Dobbie ML, Templeton DJ. Sleep, waking and sleep inertia in sexual assault.

J Forensic Leg Med. 2021 Aug;82:102222. PMID: [34358925](#)

“Women who wake from sleep during sexual assault commonly report confusion and disorientation. Confusion and disorientation, with impaired decision making after waking, are symptoms of 'sleep inertia', and part of the normal transition from sleep to full wakefulness which is maximal in

the minutes after waking and can be prolonged.” Of 305 adult females who presented for a sexual assault forensic medical examination, 12% woke to find sexual acts already in progress, and 23% of the entire 305 women in the study had no memory on waking of the alleged sexual assault despite having other reasons to believe that a sexual assault had occurred. “Forensic medical examiners can assist both the justice process, and patient care, by considering the possibility of sleep inertia among victims who report disorientation and slow or confused decision making on waking during a sexual assault.”

Human Trafficking

Abrams LS, Godoy SM, Bath EP, Barnert ES.

Collaborative Responses to Commercial Sexual Exploitation as a Model of Smart Decarceration.

Soc Work. 2020 Oct 10;65(4):387-396. PMID: [33275664](#)

In this article, the authors describe how federal, state, and local policy and practice innovations have supported reframing commercial sexual exploitation as a form of child maltreatment and rerouted girls and young women away from the juvenile justice system to specialized services.

Ertl S, Bokor B, Tuchman L, Miller E, Kappel R, Deye K.

Healthcare needs and utilization patterns of sex-trafficked youth: Missed opportunities at a children's hospital.

Child Care Health Dev. 2020 Jul;46(4):422-428. PMID: [32037615](#)

39 adolescent patients were referred to a child protection center for confirmed or suspected domestic minor sex trafficking (DMST). In a retrospective chart review for 5 years prior, 90% had been seen in the healthcare system, with 57% of these visits in the emergency department. The most common presenting complaint was psychiatric (21%). Only 43% had had any documented provider concern about DMST.

Perpetrators

Wright PJ, Paul B, Herbenick D.

Pornography, impersonal sex, and sexual aggression.

Aggress Behav. 2021 Sep;47(5):593-602. PMID: [34076267](#)

From a US national survey “Extreme pornography exposure and impersonal sexuality were both associated with a higher probability of sexual aggression.

Leiding D, Kaiser F, Steffens M, Puiu AA, Habel U.

What determines violent behavior in men? Predicting physical, psychological, and sexual violent offending based on classification and regression tree analysis.

Aggress Behav. 2021 Sep;47(5):570-582. PMID: [34096633](#)

From a survey of 5385 German men, “Results indicate that violence is best predicted by previous exposure to violence and polyvictimization. Physical violence is best predicted by prior exposure to physical violence and this is further influenced by the frequency of and the age at which violence was experienced. Drug use was a strong predictor of physical and psychological violence. The latter is best predicted by a history of polyvictimization, the severity and the originator of violence. Sexual violence is strongly predicted by one's sexual violence experience. Other factors such as demographic characteristics are less predictive.”

Stephens TN.

"Two Hours on a Sunday": Fatherhood Following an Intimate Partner Violence Incident-A Theory of Excision.

J Interpers Violence. 2020 Dec 21;886260520976214. PMID: [33345676](#)

“Fathers who are arrested after an intimate partner violence (IPV) incident must navigate multiple systems, including child welfare, criminal justice and family court, that regulate their interactions with their family members post-arrest. Contact between fathers and their children is highly regulated in the name of safety, often creating lengthy separations and putting strain on already frayed parent-child relationships. While concerns for the safety of victims and survivors of IPV are warranted, there is increased acknowledgement of the important role that fathers, including those with a history of IPV, play in their children's lives...14 fathers are interviewed about their experience of stages of separation from their children – extraction, re-assignment of identity, exclusion, and what remains.”

Police and Court Systems

Valentine JL, Presler-Jur P, Mills H, Miles S.

Evidence Collection and Analysis for Touch Deoxyribonucleic Acid in Groping and Sexual Assault Cases.

J Forensic Nurs. 2021 Apr-Jun 01;17(2):67-75. PMID: [33843809](#)

With improvement of DNA analysis, this article describes innovative evidence collection for touch DNA in groping cases (rather than needing bodily fluids).

Providers

Kulkarni SJ, Kohl PL, Edmond T.

From "Stop Family Violence" to "Build Healthy Relationships to End Violence": The Journey to Reenvision a Grand Challenge.

Soc Work. 2020 Oct 10;65(4):401-405. PMID: [32974679](#)

Combining attention to child maltreatment, IPV, and gender-based violence, “Build healthy relationships to end violence’ represents an inclusive framework that invites scholars who study violence, oppression, prevention, intervention, relationships, and health across a range of theoretical perspectives, developmental stages, social contexts, funding mechanisms, and service systems.”

Randell KA, Ragavan MI, Query LA, et. al.

Intimate Partner Violence and the Pediatric Electronic Health Record: A Qualitative Study: Intimate Partner Violence and Electronic Health Records.

Acad Pediatr. 2021 Aug 26:S1876-2859(21)00432-0. PMID: [34455099](#)

From interviews with 28 pediatric IPV experts, “Participants identified the primary source of risk as an abuser's potential access to a child's EHR [Electronic Health Record] by legal and illegal means. They noted that abuser's access to multiple pediatric EHR components (e.g., online health portals, clinical notes, contact information) may result in escalated violence, stalking, and manipulation of IPV survivors. Suggested risk mitigation strategies included limited and coded documentation, limiting EHR access, and discussing documentation with the IPV survivor...Reported potential benefits of the pediatric EHR for IPV survivors included ensuring continuity of care, decreasing need to repeatedly talk about trauma histories, and communication of safety plans.”

Gore DJ, Prusky M, Solomon CJ, et. al.

Creation of a Medical Student Training to Improve Comfort Providing Trauma-Informed Care to Sexual Assault Survivors.

MedEdPORTAL. 2021 Apr 20;17:11140. PMID: [34466657](#)

“A 1-hour didactic lecture discussing the needs of SA survivors followed by small-group sessions during which they practiced trauma-informed communication skills...The training significantly improved medical student comfort in providing trauma-informed care across all collected metrics. The training can be feasibly reproduced at other institutions.” [Full article and training materials](#)

Tillman S.

Consent in Pelvic Care.

J Midwifery Womens Health. 2020 Nov;65(6):749-758. PMID: [33283429](#)

“Health care providers and students who seek to improve consent practices can look to evidence-based frameworks such as trauma-informed care and shared decision making...Scripting for common procedures allows health care providers to practice trauma-informed language, include evidence-based guidance, and avoid unintentional bias.”

Table 1. The Consent Process
Disclose the information that a reasonable provider would share and/or a reasonable patient would want to know in a similar situation, ²⁹ including the following: <ul style="list-style-type: none">diagnosis or condition prompting the recommendation or treatmentbenefits, and probability that the treatment will succeedrisks and complicationsavailable alternatives, and their risks and benefitspossible consequences of forgoing treatment²⁶
Tailor information to the patient's literacy and numeracy levels ³¹
Speak in the patient's preferred language, with a certified medical interpreter unless it is a shared native language with the health care provider ³²
Share information through the patient's preferred delivery system: verbal communication, decision aids, surveys, checklists, or interactive online models ^{24,30}
Ensure the decision can be made free from bias or coercion by the health care provider or the patient's family ^{24,33}
Document all processes of consent, including information shared and the patient's questions and answers, in the clinical record ^{34,35}

Gordinier ME, Shields LBE, Davis MH, Cagata S, Lorenz DJ. Impact of Screening for Sexual Trauma in a Gynecologic Oncology Setting.

Gynecol Obstet Invest. 2021 Sep 2:1-7. PMID: [34515127](#)

Of 1423 consecutive patients screened for sexual abuse at a gynecologic cancer clinic, 12% disclosed a history of sexual abuse, the majority as a young child or early teen, which was lower than expected. 92% of those identified declined counseling. “The screening questions were normalized by the statement ‘we ask this because we recognize that patients with a history of sexual abuse may have difficulties with examinations’...Identification of an undisclosed sexual trauma history allows for an opportunity to offer counseling and minimize the emotional distress that may be precipitated by treatment and exams.” (Wonder if disclosure and counseling uptake would be greater at a subsequent visit, as people may be scared, overwhelmed and only focused on cancer diagnosis at first visit.)

Voth Schrag RJ, Ravi K, Robinson S, et. al.

Experiences With Help Seeking Among Non-Service-Engaged Survivors of IPV: Survivors' Recommendations for Service Providers.

Violence Against Women. 2021 Oct;27(12-13):2313-2334. PMID: [33073720](#)

Because the majority of IPV survivors do not engage with services, authors interviewed 23 survivors who

were not currently engaged with formal IPV services. Barriers revealed those in common with women who had received services, but also participants' intense sense of personal shame and fear of reactions of others, damage from being rebuffed or dismissed at their initial point of contact, and their desire for service providers to “just follow up, compassionately” – that they would start to disclose but then shut down and providers “would leave it alone. No one would try to get me to open up to get more help...if they understood that they get scared sometimes because they don't know what is going to happen, they should do a little bit more to continue to help you so you can open up to accept that you need the help.”

Nicol B, van Donkelaar P, Mason K, Gainforth H.

Using Behavior Change Theory to Understand How to Support Screening for Traumatic Brain Injuries Among Women Who Have Experienced Intimate Partner Violence. Womens Health Rep (New Rochelle). 2021 Aug 16;2(1):305-315. PMID: [34476413](#)

From interviews with 150 women's shelter workers regarding factors influencing screening clients for traumatic brain injury (TBI), authors recommend: establish formal policies and procedures requiring clients to be assessed for TBI, train staff, assess for TBI in a conversational style and not at intake, educate clients about TBI, and develop a referral system for clients at risk for TBI.

McElvaney R, Nixon E.

Parents' Experiences of Their Child's Disclosure of Child Sexual Abuse.

Fam Process. 2020 Dec;59(4):1773-1788. PMID: [31715020](#)

From interviews with 10 mothers and fathers whose children had experienced sexual abuse, “The first theme-making sense of the abuse in retrospect-captured the process through which parents sought to make sense of their child's disclosure, focusing on why their child had not disclosed the abuse to them earlier, and how they had noticed something was wrong but misattributed their child's behavior to other factors. The second theme-negotiating parental identity as protector-reflected how parents' identity as a protector was challenged, their perception of their world had been forever altered, and they now experienced themselves as hypervigilant and overprotective. The final theme-navigating the services-pertained to parents' struggle in navigating child protection and police services, and feelings of being isolated and alone. These findings highlight the need for empathy and parental support following child disclosure of sexual victimization.”

Prevention

Anderson KM, Bernhardt C.

Resilient Adult Daughters of Abused Women: Turning Pain Into Purpose.

Violence Against Women. 2020 May;26(6-7):750-770. PMID: [31053052](#)

From interviews with 29 resilient adult daughters of abused women, “Coping processes included distancing from the family, seeking understanding and acceptance, and finding meaning and purpose. Motivating factors included learning what not to do from their families and breaking the cycle of violence and dysfunction from occurring in their adult lives. We learn how daughters of abused women may create a life informed, rather than directed, by their childhood adversity.”

Spawton-Rice JH, Walker Z.

Do cognitive training applications improve executive function in children with adverse childhood experiences?

Appl Neuropsychol Child. 2020 Dec 8:1-10. PMID: [33290097](#)

“Executive function (EF)...includes problem solving, reasoning and planning. Adverse childhood experiences (ACE) negatively impact the development of these skills and in turn life outcomes. This pilot-study showed a significant positive impact on executive function in 32 children aged 6-11 years with 4+ ACEs, using computerized cognitive training applications (CCTA) (software-based training programs) in school.

Huebner RA, Hall MT, Walton MT, et. al.

The Sobriety Treatment and Recovery Teams program for families with parental substance use: Comparison of child welfare outcomes through 12 months post-intervention.

Child Abuse Negl. 2021 Oct;120:105260. PMID: [34391128](#)

The Sobriety Treatment and Recovery Teams (START) program is an intervention proven effective in preserving families with parental substance use and child welfare involvement. In this study of 784 START children at four sites matched with 784 children receiving child welfare treatment as usual (TAU), the odds of START children being placed in out-of-home care were half that of the TAU group, and results were sustained through 12 months post intervention.

Hamby S, Mariscal ES.

Next Steps in Untangling the Web of Violence: A Research Agenda.

Child Maltreat. 2021 Nov;26(4):470-475. PMID: [34554007](#)

“In this commentary, we outline four key trends in violence and trauma research and describe needed research to advance our ability to understand, prevent, and respond to these problems. The trends are the move toward evidence-based policy, the recognition of the importance of trauma dosage, the shift to strengths-based approaches, and increased attention to race, gender, and other personality and community characteristics regarding health disparities and culturally appropriate interventions. For each trend, we have identified needed research areas.”

Reidy DE, Niolon PH, Estefan LF, et. al.

Measurement of Adverse Childhood Experiences: It Matters.

Am J Prev Med. 2021 Sep 3:S0749-3797(21)00388-3. PMID: [34489139](#)

“Results demonstrate potentially drastic differences in the interpretation of the association between ACEs and outcomes based on the chosen measurement model...a great deal more attention needs to be paid to the best way to measure ACEs to clearly understand their vast impacts and consequences...In almost all instances, measuring ACEs individually, rather than as a sum score, substantially improved the amount of variance explained in the overall outcome...These patterns were observed across both men and women, incarcerated and general population participants, and White and racial/ethnic minority participants ...better measurement of ACEs might help identify which ACEs are most critical to certain outcomes when designing prevention strategies.

Arimoto A, Tadaka E.

Developing and Validating a New Scale to Assess Signs of Neglect of Infants and Caregivers.

J Interpers Violence. 2021 Oct;36(19-20):8960-8983. PMID: [31328652](#)

“The SIGN [Signs of Neglect in Infants Assessment Scale] is an innovative scale with good psychometric properties for assessing signs of infant neglect. It has the potential to contribute to preventing infant neglect by providing early support to infants and their caregivers.”

Researchers

Other of Interest

Applebaum JW, MacLean EL, McDonald SE.

Love, fear, and the human-animal bond: On adversity and multispecies relationships.

Compr Psychoneuroendocrinol. 2021 Aug;7:100071. PMID: [34485952](https://pubmed.ncbi.nlm.nih.gov/34485952/)

This article discusses “the ways in which intimate partner violence, housing discrimination, LGBTQ+ identity-based discrimination, racism, neighborhood disadvantage, and economic inequality each impact, and are impacted by, the human-animal bond.”

