ABUSE RESEARCH

Child Abuse
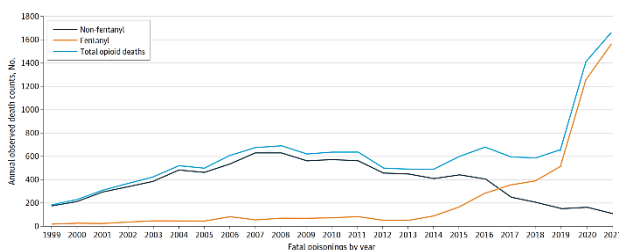
Gaither JR.
National Trends in Pediatric Deaths From Fentanyl, 1999-2021.
JAMA Pediatr. 2023 Jul 1;177(7):733-735. PMID: 37155161

> "Fentanyl was implicated in 5194 of 13,861 (37.5%) fatal pediatric opioid poisonings between 1999 and 2021. Most deaths were among adolescents aged 15 to 19 years (89.6%) and children aged 0 to 4 years (6.6%). For all ages, 43.8% of deaths occurred at home, and 87.5% were unintentional…Fentanyl is now the primary agent noted in the pediatric opioid crisis. Mirroring trends seen among adults, pediatric deaths from fentanyl began to increase substantially in 2013, resulting in a more than 30-fold increase in mortality between 2013 and 2021. A surge that began in 2018 has led to a nearly 3-fold increase in deaths among older adolescents and a nearly 6-fold increase among children younger than 5 years."

Figure. Fatal Pediatric Opioid Poisonings Stratified by Fentanyl vs Non-Fentanyl, 1999-2021

Camp EA, Greeley CS, Donaruma M, Isaac R.
Current Weight Status of Sexually Assaulted Pediatric Female Patients in an Emergency Department Setting.
Child Obes. 2023 Oct;19(7):443-451. PMID: 36206056

> Using data from a single pediatric ED (2016-2018) from identified female patients (6-17 years old) with a chief complaint of sexual assault, this group had a 67% increased odds of living with childhood obesity at the time of ED arrival when compared with trauma registry patients. "Further research is needed to identify the biopsychosocial implications for this relationship and the potential to augment clinical care."

Naik-Mathuria B, Johnson BL, Todd HF, et al.
Development of the Red Flag Scorecard Screening Tool for Identification of Child Physical Abuse in the Emergency Department.
J Pediatr Surg. 2023 Sep;58(9):1789-1795. PMID: 36841704

> A screening tool ("Red Flag Scorecard") was developed utilizing available evidence-based findings and expert consensus, using a chart review of suspected or confirmed child physical abuse at a level 1 pediatric trauma center. "Of 408 cases, median age was 7 months and 60% were male. The majority (69%) were under 1 year of age. The most common history finding was delay in seeking care (58%), the most common physical exam finding was bruising located away from bony prominences (45%), and the most common imaging finding was unexplained brain injury (49%). The majority (84%) had at least 2 history findings. The combination score of at least 2 history findings and 1 physical/imaging finding was most sensitive (79%). The scorecard would have identified 94% of children who presented with no trauma history. The Red Flag Scorecard may serve as a quick and effective screening tool to raise suspicion for child physical abuse in emergency centers."

Mele F, Introna F, Santoro V.
Child abuse and neglect: oral and dental signs and the role of the dentist.
The Journal of forensic odonto-stomatology. 2023;41(2):21-9. PMID: 37634173

> "Many of the injuries are within the scope of dentistry or easily observed by the dental professional during routine dental treatment, and it is essential that the dentist recognizes them. Concerning neglect, it is appropriate to make a distinction between deliberate parental behavior that has the consequence of unavoidable and voluntary neglect towards their children and those conditions of involuntary carelessness determined by socio-economic and cultural factors such as family isolation, lack of finances, parental ignorance, or lack of perceived value of oral health."
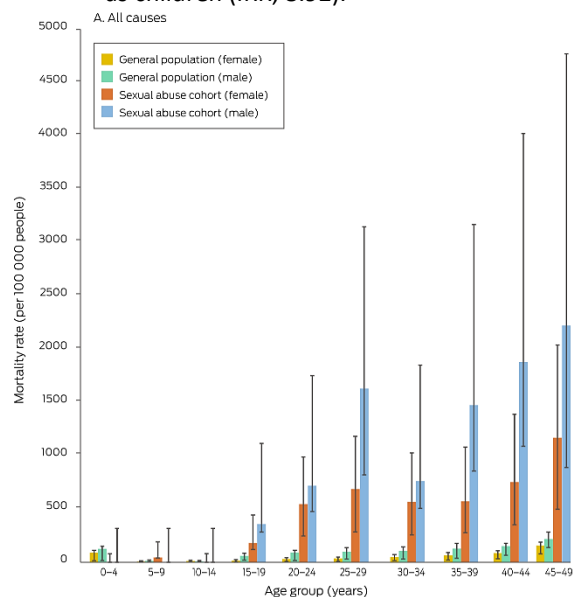
Adult Manifestations of Child Abuse

Papalia N, Spivak BL, Ashford L, et al.
Sexual abuse during childhood and all-cause mortality into middle adulthood: an Australian cohort study.
Med J Aust. 2023 Oct 2;219(7):310-315. PMID: 37612256

2759 people (79.8% women) who had experienced medically assessed contact sexual abuse in Victoria while aged 16 years or younger during 1964-1995 were linked to a national mortality database. 115 people under age 50 from this group died (4.2%). In each age group from 15-19 years, the mortality rates for people sexually abused as children were higher than for the general population, and highest for people aged 25-29 years. The age- and sex-adjusted mortality rate was higher than in the general population for all-cause (incident rate ratio 8.25), internal cause (IRR 5.92), and external cause deaths (IRR 12.6). The differences in external cause mortality were greater for people who had experienced penetrative (IRR 14.9) than for those who had experienced non-penetrative sexual abuse as children (IRR, 8.92).

A. All causes

Segal L, Hiscock H.
Child abuse and premature mortality: disrupting the harm cascade.
Med J Aust. 2023 Oct 2;219(7):301-302. PMID: 37622210

In an editorial regarding the above article: "Disrupting the inter-generational transmission of trauma — whereby a parent who has suffered serious child abuse does not provide a safe and nurturing environment for their own child, despite their desperate wish to be a good parent — is critical. A regional family hub could provide a platform for improving the skills and capacity of health, education, justice, and social care workers and facilitate a whatever-it-takes service response, driven by a deep understanding of complex trauma

to meeting the needs of distressed families in a timely fashion. While such a model may seem radical, something has to change. The terrible health, social, and monetary costs of child abuse and neglect are indefensible on ethical, medical, and financial grounds."

Basile KC, Chen J, Smith SG, Clayton HB, Simon TR, Mercy JA.
Violent Victimization During Childhood in the United States:
Violence Vict. 2023 Jun 1;38(3):375-395. PMID: 37308183

This CDC national phone survey "examined the prevalence and characteristics of five forms of childhood violence victimization and their association with revictimization and negative health conditions among adults…Ages 14-17 were the most common age at first victimization for most violence types; almost half of male (46.7%) and a quarter of female (27.0%) rape victims reported first victimization before age 10. Most victimization was associated with revictimization and negative health, controlling for adult victimization. Primary prevention of childhood violence may reduce later health risks."

Convertino AD, Mendoza RR.
Posttraumatic stress disorder, traumatic events, and longitudinal eating disorder treatment outcomes: A systematic review.
Int J Eat Disord. 2023 Jun;56(6):1055-1074. PMID: 36916450

From a research review, results indicated that while traumatic event exposure was associated with greater eating disorder treatment dropout and greater post-treatment relapse, individuals with a traumatic event history still benefited from treatment similarly to their unexposed peers.

Deol E, Siddiqui Z, Paracha A, et al.
Exploring the link between ACEs and opioid use: A systematic review.
Journal of opioid management. 2023;19(4):343-64. PMID: 37644792

From a research review, "Increased frequency of ACEs was directly related to increased risk of OUD [opioid use disorder] and lower onset age. ACEs were also associated with OUD severity. ACEs linked to OUD included childhood neglect, emotional abuse, physical abuse, and sexual abuse. Additionally, dysfunctional childhood home environment, female gender, and psychiatric/behavioral comorbidities increased the risk of OUD, while resilience was found to be a protective factor."

Lee HY, Song J, Choi EY.
Childhood abuse and opioid prescription use in adulthood: Differences between non-Hispanic Whites and non-Hispanic Blacks in the United States.
PLoS One. 2023;18(9):e0291752. PMID: 37733706
> From a US national midlife study, "Among non-Hispanic Whites, higher exposure to physical abuse during childhood was associated with greater odds of opioid prescription use in adulthood, even after adjusting for chronic pain, physical and mental health, and sociodemographic characteristics. However, the association…was non-significant among non-Hispanic Black individuals."

Zhu J, Racine N, Devereux C, Hodgins DC, Madigan S.
Associations between adverse childhood experiences and substance use: A meta-analysis.
Child Abuse Negl. 2023:106431. PMID: 37689565
> From a research review, "Pooled effect sizes between ACEs and smoking [OR = 1.803], problematic alcohol use [OR = 1.812], heavy alcohol use [OR = 1.537], cannabis use [OR = 1.453] and illicit drug use [OR = 1.695] were significant. Significant moderators contribute to the understanding of the association between ACEs and substance use, and are discussed extensively."

Adolescents

Fung HW, Cong CW, Tan CS, Yuan GF, Liu C, He KL, et al.
Is teacher violence a form of betrayal trauma? Relationship with mental health problems among young adults.
Child Abuse Negl. 2023;145:106436. PMID: 37690435
> "Considering the substantial amount of time that young people spend in school during their early years, it is important to understand the potential impacts of teachers' behaviors on students' mental health." From an international sample of 283 young adults aged 18-24, exposure to teacher violence "could be reliably and validly measured using the Teacher Violence Scale (TVS). Current mental health problems - including depressive symptoms, post-traumatic stress, and alcohol misuse - were associated with exposure to teacher violence during high school years…Our findings expand the application of the betrayal trauma theory to school settings and point to the importance of preventing and managing teacher violence."

Liu J, Teh WL, Tan RHS, et al.
Sleep disturbance as transdiagnostic mediator between adverse childhood experiences and psychopathology in children and adolescents.
JCPP Adv. 2023;3(3):e12156. PMID: 37720578
> From a research review, the pooled correlations among ACEs, sleep disturbance, and psychopathology were significant; the effect sizes ranged from moderate to high. The indirect effect from ACEs via sleep disturbance to psychopathology was significant, and the direct effect of ACEs on psychopathology was significant.

Islam MI, Salam SS, Kabir E, Khanam R.
Identifying Social Determinants and Measuring Socioeconomic Inequalities in the Use of Four Different Mental Health Services by Australian Adolescents Aged 13-17 Years: Results from a Nationwide Study.
Healthcare (Basel, Switzerland). 2023;11(18). PMID: 37761734
> From a national Australian adolescent sample, "Overall, 31.9% of the total analytical sample (n = 2268) aged 13-17 years old visited at least one mental health service, with 21.9% accessing a single service and 10% accessing multiple services. The highest percentage of adolescents used online services (20.1%), followed by general mental health services (18.3%), while school services (2.4%) were the least used service. Age, gender, family type and family cohesion significantly increased the use of mental health service usage." Area of residence was also found to be a significant factor, with teens in richer socioeconomic areas using online services and poorer areas using telephone services. Authors stress the e need to tailor approaches to ten socioeconomic backgrounds.

McCarthy V, Wright-Kelly E, Steinhart B, et al.
Assessment of Reported Time to Access a Loaded Gun Among Colorado Adolescents.
JAMA Pediatr. 2023 May 1;177(5):543-545. PMID: 36972035
> "Time to access a firearm matters; nearly half of individuals who attempted suicide reported time between ideation and action of under 10 minutes." From a voluntary, anonymous survey of 41,090 Colorado middle and high school students, 32.3% reported any access to a firearm. Of those, over 25% reported access in under 24 hours and 12.1% in under 10 minutes. A higher proportion of males than females reported access. The highest proportion of access was reported by students who identified as American Indian/Alaska Native (17.5% reported access in <10 minutes), followed by those identifying as White or multiracial or multiethnic. Nearly 40% of students living in rural and town settings reported access to firearms, with roughly 17% reporting access in under 10 minutes. Differences in access by age and sexual orientation were negligible.

Domestic Violence – Effects on Children

Ayala Quintanilla BP, Taft A, McDonald S, et al.
Social determinants and exposure to intimate partner violence in women with severe acute maternal morbidity in the intensive care unit: a systematic review.
BMC Pregnancy Childbirth. 2023;23(1):656. PMID: 37700244
> Limited research "found that women exposed to intimate partner violence before and during pregnancy had a nearly four-fold risk of severe acute maternal morbidity requiring ICU admission." Authors note major research gaps in relation to severely injured pregnant women due to IPV.

Maruyama JM, Valente JY, Tovo-Rodrigues L, et al.
Maternal depression trajectories in childhood, subsequent maltreatment, and adolescent emotion regulation and self-esteem: the 2004 Pelotas birth cohort.
Eur Child Adolesc Psychiatry. 2023;32(10):1935-45. PMID: 35731302
> In this long-term study of Brazilian children and their mothers, maternal depression was negatively associated with offspring self-esteem and emotion regulation at age 15 compared to a group with low maternal depression, while child maltreatment significantly increased negative outcomes. There were no sex differences in child outcomes.

Williams A, Parlier-Ahmad AB, Thompson E, et al.
Peripartum Traumas and Mental Health Outcomes in a Low-Income Sample of NICU Mothers.
Children (Basel, Switzerland). 2023;10(9). PMID: 37761438
> Of "119 lower-income, racially diverse mothers in a Level IV NICU, mental health concerns were prevalent and highly comorbid, including 51.3% postpartum anxiety, 34.5% postpartum depression, 39.5% post-traumatic stress, and 37% with ≥4 ACEs." 53.8% of mothers reported multiple peripartum traumas. NICU admission was the most common trauma (61%), followed by birth (19%), pregnancy (9%), and a medical event in the NICU (9%). ACEs predicted peripartum distress. "Trauma-informed care efforts should…recognize that women commonly present to the NICU with childhood trauma history and cumulative peripartum traumas."

Domestic Violence – Physical Health

Freedman DE, Krysko KM, Feinstein A.
Intimate partner violence and multiple sclerosis.
Mult Scler. 2023:13524585231197926. PMID: 37732567
> "This article aims to summarize the available literature on IPV in people with MS, identify future research questions, and aid MS clinicians in safely addressing IPV while awaiting vital MS-specific knowledge."

Domestic Violence – Mental Health

Kuskoff E, Parsell C.
Bystander Intervention in Intimate Partner Violence: A Scoping Review of Experiences and Outcomes.
Trauma Violence Abuse. 2023:15248380231195886. PMID: 37650242
> From a research review, "victims (and perpetrators) tend to react differently to bystander intervention depending on the type of intervention, the type of violence, and their relationship to the bystander. However, we have little to no understanding of the outcomes of bystander intervention…crucial if we are to maximize the effectiveness and minimize the potential for harm."

Drouin M, Flanagan M, Carroll J, et al.
Piloting a Peer Support Program for Patients Who Screen Positive for Intimate Partner Violence, Suicidal Ideation, and Depression.
Healthcare (Basel, Switzerland). 2023;11(17). PMID: 37685456
> "In this pilot program, we developed a peer support network to address multimorbidity involving intimate partner violence (IPV), suicidal ideation, and depression. Over one year, our Suicide Obviation Support (SOS) navigators enrolled and provided at-elbow support to 108 patients (67.6% women) who screened positive for IPV, many of whom also screened at moderate or high risk for suicidality (64.8%) and/or exhibited depression symptoms. At a 6-month follow-up, 63 participants (58.3%) were retained. Those who stayed enrolled in the program…analyses showed that IPV, depression, and suicide risk scores declined significantly in this group. The SOS navigators provided direct support and continuity of care for these high-risk patients, which included referrals to mental health treatment and other types of support services, such as transportation and emergency housing."

Mendez E, Munguia L, Ramirez Molina R, et al.
Our voices, our lives: Unforeseen stories after the violence and opening the door to becoming whole again.
Womens Health (Lond). 2023;19:17455057231197159.
PMID: 37727110

> "We are a group of 11 women in Albuquerque, New Mexico. Nine of us are immigrants from Mexico. We have been working collaboratively on a research study called Tertulias (Spanish for "a social gathering"), which is an innovative women's peer support group approach we created to reduce social isolation, depression, and stress among women immigrants from Mexico, and to increase their resilience and sense of empowerment…But we are also exposing the immensity and scope of trauma, fear, loneliness, depression, and self-blame that exist in the Mexican immigrant community because of domestic violence…We wanted to be included as co-authors of this article because we want our stories to be received and heard by other women. We want to plant seeds to help other women find their inner strength to be able to escape from their chains."

Elder/Dependent Adult Abuse

Steinman KJ, Burnett J, Hoffman R.
Racial/Ethnic Group Differences in Older Adults' Involvement with Adult Protective Services.
J Gerontol Soc Work. 2023;66(7):864-73. PMID: 36939147

> "Across 3 independent county programs, the rate of APS reports was about twice as high for Black older adults compared to White older adults. These differences were greater for clients who were older and male but remained similar across allegation type. The percent of reports validated was slightly but consistently lower for Black clients than for White clients, and a lower percentage of Black clients' cases were closed due to investigation or service refusal…Further studies with larger data sets are needed to guide APS practice and ensure equity for all clients served."

Sexual Assault

Edwards C, Tilley DS, Maeker B.
Caring for patients who experienced sexual violence.
Nursing. 2023;53(10):11-2. PMID: 37734011

This brief summary explains to a hospital nurse how to respond to and manage a patient who has experienced sexual assault, how to refer to a sexual assault nurse examiner (SANE), what the SANE will do per protocol, and how to coordinate services.

Ullman SE.
Aspects of Selective Sexual Assault Disclosure: Qualitative Interviews With Survivors and Their Informal Supports.
J Interpers Violence. 2023:8862605231195808. PMID: 37650426

> "Two-thirds of survivors typically disclose their experience to informal supports (e.g., friends, family, partners) at some point following sexual assault…In the current study, a diverse sample of 45 sexual assault survivors and their informal support providers (e.g., family, friends, romantic partners) were interviewed separately about experiences of disclosure, social reactions, and help-seeking following the assault…Several subthemes emerged specific to (a) the circumstances of disclosure (prompted or coerced), (b) withholding details (framing disclosures to avoid rape myths and blame, strategic use of language, protecting others by not disclosing or limiting details), and (c) sharing details (selecting who was told, selecting trusted others for disclosure, selective details told to specific people, sharing with strangers easier). Implications are drawn for future research…and clinical practice implications for supporting survivors and their informal support networks."

Bhuptani PH, Fleming CE, Orchowski LM.
Timing of Sexual Assault Disclosure: A Study of College Women.
Violence Against Women. 2023;29(12-13):2372-92. PMID: 37501601

> Of 83 college women who experienced sexual assault, "The use of physical resistance and experiencing a 'freeze response' was positively associated with delayed disclosure [>48 hours]. Identifying the perpetrator as a friend/acquaintance, compared to a romantic partner, increased the likelihood of immediate disclosure. Other individual characteristics (i.e., assault characteristics, a history of childhood sexual abuse, attitudes towards seeking help, and sexual assertiveness) and microsystem-level characteristics (i.e., perceived social support) did not impact the timing of disclosure.

Majeed-Ariss R, Mattison M, Rodriguez PM, White C.
Exploring the similarities and differences amongst service users with and without learning disabilities attending Saint Marys Sexual Assault Referral Centre.
J Appl Res Intellect Disabil. 2023 Nov;36(6):1288-1296. PMID: 37503887

> Of 52 service users with learning disabilities at a UK sexual assault referral center, compared to a control group without learning disabilities, those with learning disabilities more frequently reported the perpetrator as someone known to them, such as a family member or friend, and the location to be their home. "These findings highlight the possibility that perpetrators are targeting people with learning disabilities." There also was more likely to be a time delay before being seen, with uncertainty about the delay being due to delay in reporting to police, or delay in police referral.

Johnson NL, Gutekunst MHC, Rocchino GH, et al.
"There Are Good and Bad Elements to It for Sure": Students' and Faculty/Staff's Perceptions of the Title IX Mandated Reporting Policy.
J Interpers Violence. 2023;38(19-20):10771-94. PMID: 37212364

> "Faculty, staff, and students employed by or who serve as representative of universities in the US are required by the Title IX federal law to report all instances of sexual harassment, discrimination, and sexual assault on college campuses…This exploratory mixed-methods study examines student (n = 88) and faculty and staff (n = 77) thoughts, concerns, and experiences regarding this policy at a mid-sized Northeastern University…the majority of participants were aware of their 'mandated reporter' status…varied regarding their support of the policy and the majority of faculty/staff had not had students disclose sexual violence to them." Participants offer several ideas for improvement.

Human Trafficking

Eickhoff L, Kelly J, Zimmie H, et al.
Slipping through the cracks-detection of sex trafficking in the adult emergency department: An integrative review.
J Clin Nurs. 2023 Sep;32(17-18):5948-5958. PMID: 37078099

> "An estimated 87% of trafficked persons visit the emergency department during their captivity." Authors review sex trafficking identification methods in the adult ED, and note the importance of (1) Provider and personnel education; (2) Protocol establishment; (3) Legal consultation; and (4) Multidisciplinary teamwork. "There is a

> recognised lack of education on sex trafficking recognition nationwide."

LGBTQ Concerns

Huff M, Edwards KM, Littleton H.
Past 6-Month Prevalence of IPV Victimization among Transgender and Gender-Diverse Undergraduate Students: A Brief Report.
J Interpers Violence. 2023:8862605231195803. PMID: 37688489

> "Participants were 280 TGD [transgender and gender diverse] undergraduate students attending 20 US medium- and large-sized residential public universities…27.5% endorsed past 6-month IPV victimization (20.0% psychological, 6.1% physical, 8.9% sexual, 11.4% coercive control, and 5.7% LGBTQIA+-specific)…55.8% of victims reported their perpetrator was a man, 22.1% a woman, and 22.1% a TGD individual."

McCauley HL, Reid TA, Anderson RE, et al.
Contextualizing Cisgender Women's Histories of Intimate Partner Violence Victimization With Men and Women.
Violence Against Women. 2023:10778012231199110. PMID: 37710991

> "We conducted in-depth interviews with a clinic-based sample of plurisexual sexual minority women (n = 25) ages 18 to 34 about the gender of their perpetrators. Participants primarily experienced physical and sexual IPV in relationships with men and emotional abuse in relationships with women. IPV perpetrated by men often included weapons with women fearing for their lives."

Race/Cultural Concerns

Anderson N, Nguyen M, Marcotte K, et al.
The Long Shadow: A Historical Perspective on Racism in Medical Education.
Acad Med. 2023 Apr 19:10.1097/ACM.0000000000005253. PMID: 37071703

> The authors trace racist ideology through the history of medicine, examine how it manifests in medical education in the United States today, and how it affects admissions, assessments, faculty and trainee diversity, retention, racial climate, and the physical environment. The authors then recommend steps for confronting racism in medical education.

Donthi N, Lucey CR, Albert MA.
Stages of Dismantling Structural Racism in Medicine: A Focus on Medical Training.
Circulation. 2023;148(9):800-2. PMID: 37639505

> In this article from the American Heart Association, "As institutions embark on the challenging yet transformative journey toward racial equity, they may experience 6 phases as described by dRworks (Dismantling Racism Works), including familiar dysfunction; explicit commitment to diversity, equity, inclusion, and belonging (DEIB); culture shift/not knowing; relational trust; DEIB goals clarified; and DEIB practice. We adapted this framework for the context of medical education to serve as anticipatory guidance for DEIB efforts supported by examples from undergraduate medical education and cardiology."

Royeen CB.
Increasing Diversity, Equity, and Inclusion (DEI) in Allied Health Using Ten Best Practices.
Journal of allied health. 2023;52(3):e99-e102. PMID: 37728357

> "This commentary summarizes ten best practices as operationalized at a midwestern college within an academic medical center. These best practices include systematic assessment, committed funding, appropriate selection of who does the work, intentionality, setting expectations, identity formation, dissemination, record keeping, and prioritization of DEI. Additionally, adoption of a strong diversity statement, allotment of scholarship support, an inventory of diversity and inclusion activities, the appointment of a Director of Diversity and Inclusion, and two DEI training initiatives are discussed: SEED training focuses on individual development and self-awareness, while Stepping In training provides concrete skills to address instances of racism. The commentary concludes by emphasizing the need for ongoing formal assessments to gage degree of change and DEI competence achieved."

Barber Doucet H, Wilson T, Vrablik L, Wing R.
Implicit Bias and Patient Care: Mitigating Bias, Preventing Harm.
MedEdPORTAL : the journal of teaching and learning resources. 2023;19:11343. PMID: 37731596

> "Learners were presented with a case of a classic toddler's fracture in an African American child. The learners interacted with an orthopedic resident who insisted on child welfare involvement, with nonspecific and increasingly biased concerns about the child/family. The learners were expected to identify that this case was not concerning for nonaccidental trauma and that the orthopedic resident was demonstrating bias. They were expected to communicate with both the resident and the parent effectively to defuse the situation and prevent harm from reaching the family." Full article with teaching materials

Stephens KC, Redman T, Williams R, Bandstra B, Shah R.
Considering Culture and Conflict: A Novel Approach to Active Bystander Intervention.
MedEdPORTAL : the journal of teaching and learning resources. 2023;19:11338. PMID: 37649621

> "While bystander workshops customarily provide guidance on direct interventions to a general audience, the literature does not yet address workshops in an academic setting that consider the individual's motivations and behavior patterns. We implemented a psychologically informed approach to microaggression training to increase participants' understanding and willingness to undergo behavioral change." Full article and teaching materials.

The cultural concepts[16] included the following:

- Power distance: the degree to which less powerful individuals accept and expect an unequal distribution of power.
- Individualism versus collectivism: the degree to which individuals act in the service of their own interests compared to those of the community.
- Task orientation versus person orientation: the degree to which individuals are motivated by success and achievement compared to group harmony and caring for the weak.
- Uncertainty avoidance: the degree of risk aversion an individual may feel given their cultural background.

Phillips JA, Davidson TR, Baffoe-Bonnie MS.
Identifying latent themes in suicide among black and white adolescents and young adults using the National Violent Death Reporting System, 2013-2019.
Soc Sci Med. 2023;334:116144. PMID: 37678110

> Using national data for suicides in black and white individuals aged 10-29, "Our findings reveal distinct patterns by race. Guns, violence and the criminal justice system are prominent features of Black suicide, whether through the mechanism used in the suicide, either by firearm or other violent means such as fire or electrocution, the existence of criminal or legal problems/disputes, the location of death in a jail, or the presence of police. In contrast, the narratives of white adolescent/young adults are more likely to reference mental health or substance abuse problems."
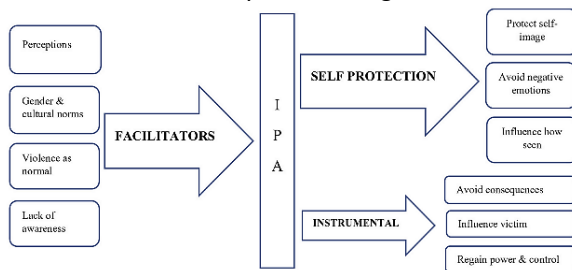
Perpetrators

Smyth MR, Teicher S, Wilde DJ.
How Does Denial, Minimization, Justifying, and Blaming Operate in Intimate Partner Abuse Committed by Men.
Trauma Violence Abuse. 2023:15248380231196108. PMID: 37702188

> From a research review on IPV perpetrator denial, minimization, justifying, and blaming (DMJB), "The findings indicate the way DMJB operates in this group is complex. It can represent facilitators of abusive behavior, a way to protect the individual's identity and self-esteem, and a tool men use instrumentally to achieve goals."

Oliver E, Coates A, Bennett JM, Willis ML.
Narcissism and Intimate Partner Violence.
Trauma Violence Abuse. 2023:15248380231196115. PMID: 37702183

> A research review revealed "physical IPV perpetration was not significantly related to trait narcissism while cyber and psychological IPV perpetration were significantly, positively, weakly related to trait narcissism. No significant difference in the strength of the relationship with IPV perpetration was found between males and females. The relationship between trait narcissism and IPV perpetration was significantly greater for vulnerable narcissism [withdrawal, shame, and hypersensitivity to rejection or criticism] than grandiose narcissism [social dominance, excessive self-confidence, and subjective well-being]."

Thulin EJ, Florimbio AR, Philyaw-Kotov M, et al.
Measuring Electronically Shared Rape Myths.
J Interpers Violence. 2023:8862605231197140. PMID: 37650611

> "Data were analyzed from 2,609 18-25-year-old participants (mean age = 20.9 years; 46.1% male; 71.6% White) recruited in 2017 through social media to complete an online survey on experiences and perceptions of sexual violence…Greater exposure to online rape myths was associated with greater likelihood of attempted rape perpetration, rape victimization, use of illicit drugs, being male, and being younger. Our findings support assessing exposure to online rape myths, which may be important for informing sexual violence prevention and intervention efforts."

Police and Court Systems

Campbell R, Gregory K, Goodman-Williams R, et al.
Victim Notification Protocols for Untested Sexual Assault Kits: Survivors' and Advocates' Perspectives on Law Enforcement-Led Outreach Methods.
Violence Against Women. 2023 Dec;29(15-16):3101-3125. PMID: 37700717

> "Current estimates suggest there are 300,000-400,000 untested sexual assault kits in US police department storage facilities. As these kits are being discovered and then submitted for forensic DNA testing, legal system personnel may recontact victims…Both survivors and advocates expressed strong concerns about police conducting notifications without an advocate present."

Hernandez-Meier J, Xu Z, Kohlbeck SA, et al.
Linking emergency care and police department data to strengthen timely information on violence-related paediatric injuries.
Emerg Med J. 2023 Sep;40(9):653-659. PMID: 37611955

> Combining ED, police department (PD) and EMS data for a US city, "Many violence locations in ED and EMS data were not present in PD records. A combined PD, ED and EMS database resulted in new knowledge of the geospatial distribution of violence-related paediatric injuries and can be used for data-informed and targeted prevention of violence in which children are injured-especially in and around schools and parks."

Cho S, Kim C, Owens JG.
Understanding of Factors Associated with Reporting to the Police, Helping Seeking, and Adopting in Self-protection among Stalking Victims: A Latent Class Analysis.
Psychosoc Interv. 2023;32(3):141-54. PMID: 37691714

> "Victims of stalking use multiple help-seeking behaviors including reporting their experiences to the police, obtaining a restraining order, blocking communication, and relying on informal social networks like friends, family, or therapists." Of 1459 persons who experienced stalking from a national survey…Victims whose stalkers had a criminal record, whose stalkers threatened themselves or others, as well as those who suffered stalking lasting for months, were more likely to ask for help actively and ask family, friends, and non-professional people for help."
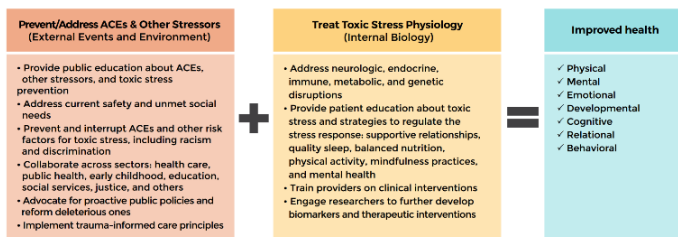
Providers

Gilgoff R, Schwartz T, Owen M, Bhushan D, Burke Harris N.
Opportunities to Treat Toxic Stress.
Pediatrics. 2023 Jan 1;151(1):e2021055591. PMID: 36450652

> "The field of ACEs and toxic stress has advanced beyond "What is wrong with you?" to "What happened to you?" and "What is right with you?" We believe we need to go one step further and also ask, "What is healing for you?" The answer is multifactorial and can include evidence-based interventions that specifically target an individual's underlying neurologic, endocrine, metabolic, immune, and genetic dysregulation if they have toxic stress. We believe the field of pediatrics has a vital opportunity to advance a multidisciplinary approach to treatment and healing from toxic stress."

Williams RC.
From ACEs to early relational health: Implications for clinical practice.
Paediatr Child Health. 2023;28(6):377-93. PMID: 37744756

> "This statement describes how clinicians can bring a relational health approach to any medical encounter by understanding: what toxic stress is and how it can affect the developing brain, family relationships, and child development; how positive relationships, experiences, and behaviours can help buffer such effects and build resilience; observable signs of relational health and risk in parent-child interactions; the attributes of trustful, therapeutic relationships with families; and how to optimize these benefits through conversation and clinical practice." (ERH = early relational health)

> **BOX 3.** DISCUSS, MODEL, PRAISE
>
> Developers of the Keystones of Development curriculum recommend a three-step approach to promoting ERH in clinical practice:
>
> 1. **Discuss** the specific parenting behaviours that support the concept (e.g., noticing and responding to baby's cues helps promote secure attachment).
> 2. **Model** the behaviours during the visit (e.g., through warm, back-and-forth interactions).
> 3. **Praise** what you observe (e.g., the baby calms down when the parent holds them).
>
> Adapted from reference 54

Yoshihama M, Hammock AC.
Assessing Community Readiness to Develop a Socioculturally Relevant IPV Prevention Program.
Prev Sci. 2023 Oct;24(7):1340-1351. PMID: 37436561

> "We assessed levels of readiness to address IPV in an Asian Indian community in the midwestern USA…we developed a health communications campaign and implemented it in phases. We discuss methodological issues and lessons learned in assessing community readiness, including implications for study design and future research."

Alhusen J, McDonald M, Emery B.
Intimate partner violence: A clinical update.
Nurse Pract. 2023;48(9):40-6. PMID: 37643145

> Basic review article for nurse practitioners, includes prevalence and risk factors, health impact, screening, management, and resources.

Sherin KM, Stillerman AJ, Chandrasekar L, et al.
Recommendations for Population-Based Applications of the Adverse Childhood Experiences Study: Position Statement by the American College of Preventive Medicine.
AJPM Focus. 2022 Oct 8;1(2):100039. PMID: 37791246

> This position statement by the American College of Preventive Medicine (ACPM) reviews available research and related statements from other major medical organizations on use of ACEs. "ACPM's recommendation is to expand the implementation of population-level surveillance and research but not universal or risk-based ACE screening. Sensitive trauma inquiry rather than ACE screening can be an important part of individual patient care encounters in the context of therapeutic relationships, shared decision making, and concomitant emphasis on the celebration and enhancement of strengths and positive experiences. Because childhood experiences shape the trajectory of health across the lifespan, investment in further research on strategies that strengthen protective factors and prevent, mitigate, and treat the consequences of childhood adversity is essential."

Beranbaum S, D'Andrea W.
Trauma-Informed Yoga: A Capacity Building and Wellness Strengthening Intervention for Female Survivors of Intimate Partner Violence and Affiliative Staff.
Violence Against Women. 2023:10778012231203002. PMID: 37743664

> "526 female survivors and staff from 66 domestic violence agencies revealed improved stress, somatic complaints, and self-efficacy following a single TIY [trauma-informed yoga] session." TIY serves as a capacity-building intervention that is suitable and adaptable for IPV survivors and service staff.

Findley E.
"It's already stressful being a foster parent": A qualitative inquiry into foster parenting stress during COVID-19.
Child Abuse Negl. 2023;146:106455. PMID: 37717544
> "Findings from this study demonstrated foster parents experienced both shared and unique parenting challenges during COVID-19. Three areas for further consideration and development in practice included improving online service delivery, strengthening guidance for online parent-child visitation, and enhancing support for foster parents of children with special needs. Developing social support and self-care practices should continue to be ongoing priorities for foster parents and foster parent-serving agencies."

Prevention

Weissman DG, Hatzenbuehler ML, Cikara M, et al.
State-level macro-economic factors moderate the association of low income with brain structure and mental health in U.S. children.
Nat Commun. 2023 May 2;14(1):2085. PMID: 37130880
> In an adolescent study across 17 states, lower income was associated with smaller hippocampal volume (brain hippocampus is involved in memory and is sensitive to effects stress and PTSD), and higher internalizing psychopathology such as depression and anxiety. These associations were stronger in states with higher cost of living. However, in high cost of living states that provide more generous cash benefits for low-income families, hippocampal volume resembled that in the lowest cost of living states, with similar patterns for internalizing psychopathology…These findings suggest that state-level macrostructural characteristics, including the generosity of anti-poverty policies, are potentially relevant for addressing the relationship of low income with brain development and mental health."

Marçal K, Chang OD, Park Y, Maguire-Jack K.
Material hardship in the postpartum year: Links to child maltreatment.
Child Abuse Negl. 2023;145:106438. PMID: 37657171
> For 3966 at-risk mothers, compared to "Stable" mothers, "Cost-Burdened" mothers - who displayed high levels of missed rent and utility payments - were significantly more likely to psychological abuse or neglect their children. "Severely Housing Insecure Mothers" - characterized by elevated rates of doubling up, eviction, and homelessness - were significantly more likely to engage in physical assault, psychological aggression, and neglect. "Difficulty maintaining stable and affordable housing is associated with elevated risk of child maltreatment. Efforts to prevent child maltreatment must incorporate access to housing screening and supports, particularly among families with infants."

Researchers

Cappa C, Cecchetti R, Jijon I.
Ending violence against children: A new international standard to foster data availability.
Child Abuse Negl. 2023;144:106330. PMID: 37566972
> "The newly released International Classification of Violence against Children (ICVAC) holds potential for filling data gaps and thus promoting accountability towards the ambitious global goal of ending violence against children."

Dams-O'Connor K, Bulas A, Haag HL, et al.
Screening for Brain Injury Sustained in the Context of Intimate Partner Violence (IPV): Measure Development and Preliminary Utility of the Brain Injury Screening Questionnaire IPV Module.
J Neurotrauma. 2023 Oct;40(19-20):2087-2099. PMID: 36879469
> "Intimate partner violence (IPV) is associated with risk for multi-etiology brain injury (BI), including repetitive head impacts, isolated traumatic brain injuries (TBI), and anoxic/hypoxic injury [lack of oxygen] secondary to nonfatal strangulation (NFS). IPV-related injuries are often unreported, but evidence suggests that survivors are more likely to report when asked directly. There are currently no validated tools for screening of brain injury related to IPV that meet World Health Organization guidelines for this population. Here, we describe measure development methods and preliminary utility of the Brain Injury Screening Questionnaire IPV (BISQ-IPV) module…findings suggest that standard TBI screening tools are inadequate for identifying IPV-BI, and structured cueing of IPV-related contexts yields greater reporting of both IPV- and non-IPV-related violent BI. When not queried directly, IPV-BI remains a hidden variable in TBI research studies."

Hubbell JT.
Elucidating Intimate Partner Violence Rate Disparities Between Same- and Opposite-Sex Couples: A Demographic Approach.
J Interpers Violence. 2023:8862605231197781. PMID: 37705427

> "The present study applies direct age standardization…to data from the National Incident-Based Reporting System and the American Community Survey…The results of the direct standardization procedures indicate physical IPV rates for same-sex male and same-sex female households would be 11.8% and 27.3% lower, respectively, if they had the same population age structure as opposite-sex households…differences in population age structure contribute 48% and 44% of the elevation in IPV rates in same-sex male and same-sex female households, respectively, compared to opposite-sex households. These findings demonstrate the promise of demographic methods to explain differences in offending rates between groups."

Molock SD, Boyd RC, Alvarez K, et al.
Culturally responsive assessment of suicidal thoughts and behaviors in youth of color.
Am Psychol. 2023 Mar 13:10.1037/amp0001140. PMID: 36913280

> "While suicide rates for White groups have declined, there has been a precipitous rise in suicide deaths and suicide-related phenomena in Black youth; rates remain high among Native American/Indigenous youth. Despite these alarming trends, there are very few culturally tailored suicide risk assessment measures or procedures for youth from communities of color. This article attempts to address this gap in the literature…and concludes with recommendations for factors that should be considered in suicide risk assessment for youth from communities of color."

Other of Interest

Lanfear CC, Bucci R, Kirk DS, Sampson RJ.
Inequalities in Exposure to Firearm Violence by Race, Sex, and Birth Cohort From Childhood to Age 40 Years.
JAMA Netw Open. 2023 May 1;6(5):e2312465. PMID: 37159198

The study followed multiple groups of children in Chicago over time. "Male respondents were much more likely than female respondents to have been shot (adjusted hazard ratio [aHR], 4.23), but only moderately more likely to have seen someone shot

(aHR, 1.48). Compared with White individuals, Black individuals experienced higher rates of all 3 forms of exposure (been shot: aHR, 3.05; seen someone shot: aHR, 4.69; nearby shootings: adjusted incidence rate ratio [aIRR], 12.40), and Hispanic respondents experienced higher rates of 2 forms of violence exposure (seen someone shot: aHR, 2.59; nearby shootings: aIRR, 3.77). Respondents born in the mid-1990s who grew up amidst large declines in homicide but reached adulthood during city and national spikes in firearm violence in 2016 were less likely to have seen someone shot…However, the likelihood of having been shot did not significantly differ between these cohorts."

Song Z, Zubizarreta JR, Giuriato M, Koh KA, Sacks CA.
Firearm Injuries In Children And Adolescents: Health And Economic Consequences Among Survivors And Family Members.
Health Aff (Millwood). 2023 Nov;42(11):1541-1550. PMID: 37931194

Of 2,052 child and adolescent survivors compared to 9,983 matched controls who did not incur firearm injuries, along with 6,209 family members of survivors compared to 29,877 matched controls, and 265 family members of decedents compared to 1,263 matched controls, "Through one year after firearm injury, child and adolescent survivors experienced a 117% increase in pain disorders, a 68% increase in psychiatric disorders, and a 144% increase in substance use disorders relative to the controls. Survivors' health care spending increased by an average of $34,884-a 17.1-fold increase-with 95% paid by insurers or employers. Parents of survivors experienced a 30-31% increase in psychiatric disorders…and 5-14% reductions in mothers' and siblings' routine medical care. Family members of decedents experienced…at least 15.3-fold more mental health visits among parents. Firearm injuries in youth have notable health implications for the whole family, with large effects on societal spending.

Pain, psychiatric, and substance use disorders among child and adolescent survivors before and after firearm injury, 2007–21