

MEDICAL RESEARCH SUMMARY ON ABUSE FOR SANTA CLARA COUNTY DOMESTIC VIOLENCE COUNCIL FEBRUARY 2012

This summary includes selected research articles relating to abuse indexed by the National Library of Medicine December 2011. To obtain a copy of the abstracts, go to pubmed.gov, and place the Pubmed ID numbers (PMID) in the search box, separated by commas. PTSD = Post Traumatic Stress Disorder IPV = Intimate Partner Violence

Child Abuse

Berger RP, Fromkin JB, Stutz H, Makoroff K, Scribano PV, Feldman K, Tu LC, Fabio A.

Abusive head trauma during a time of increased unemployment: a multicenter analysis.

Pediatrics. 2011 Oct;128(4):637-43. PMID: 21930535

Yet another study, looking at 3 different regions of the US, documenting an increase in child abusive head trauma during the economic recession.

Toth SL, Pickreign Stronach E, Rogosch FA, Caplan R, Cicchetti D.

Illogical thinking and thought disorder in maltreated children.

J Am Acad Child Adolesc Psychiatry. 2011 Jul;50(7):659-68. PMID: 21703493

Compared to non-maltreated children, 91 maltreated children in this study were less able to formulate ideas and communicate them logically – for some the level of illogical thinking was in the clinically pathological range.

Adult Manifestations of Child Abuse

O'Donovan A, Epel E, Lin J, Wolkowitz O, Cohen B, Maguen S, Metzler T, Lenoci M, Blackburn E, Neylan TC.

Childhood trauma associated with short leukocyte telomere length in posttraumatic stress disorder.

Biol Psychiatry. 2011 Sep;70(5):465-71. PMID: 21489410

43 adults with chronic PTSD and childhood trauma had significantly shorter telomere length (meaning premature cellular aging) than a control group.

Gavin AR, Hill KG, Hawkins JD, Maas C.

The role of maternal early-life and later-life risk factors on offspring low birth weight: findings from a three-generational study.

J Adolesc Health. 2011 Aug;49(2):166-71. PMID: 21783049

In a 3 generation study, second generation childhood low socioeconomic status predicted third generation low birth weight, as did second generation childhood abuse, through an increase in adolescent and perinatal substance abuse.

Steeves RH, Parker B, Laughon K, Knopp A, Thompson ME.

Adolescents' experiences with uxoricide.

J Am Psychiatr Nurses Assoc. 2011 Mar-Apr;17(2):115-23. PMID: 21659301

34 adults who had experienced as adolescents loss of one or both parents through parental homicide (uxoricide is murder of one's wife) or homicide/suicide recalled abuse both before and after the event, and vivid memories of the homicide. "As adults, most participants reported difficulties with intimate relationships, legal problems, and substance use."

Clark C, Goodwin L, Stansfeld SA, Hotopf M, White PD.

Premorbid risk markers for chronic fatigue syndrome in the 1958 British birth cohort.

Br J Psychiatry. 2011 Oct;199(4):323-9. PMID: 21852302

In a group of British children followed for 42 years, and controlling for mood disorders, those with a history of parental physical abuse were 2.1 times more likely to have an adult diagnosis of chronic fatigue syndrome.

Markowitz SM, O'Cleirigh C, Hendriksen ES, Bullis JR, Stein M, Safren SA.

Childhood sexual abuse and health risk behaviors in patients with HIV and a history of injection drug use.

AIDS Behav. 2011 Oct;15(7):1554-60. PMID: 21161362

Of 119 HIV-infected individuals with an injection drug use history, 47% reported childhood sexual abuse (CSA). Those with a CSA history had behaviors leading to "increased risk for HIV transmission, poor adherence to medication, and vulnerability to substance use relapse."

Young ME, Deardorff J, Ozer E, Lahiff M.

Sexual abuse in childhood and adolescence and the risk of early pregnancy among women ages 18-22.

J Adolesc Health. 2011 Sep;49(3):287-93. PMID: 21856521

Among 1790 young women, sexual abuse in childhood was associated with a 20% higher risk of early pregnancy, sexual abuse in adolescent had a 30% high risk, and sexual abuse in both childhood and adolescent had an 80% greater risk of early pregnancy. Higher educational attainment decreased this risk.

Domestic Violence – Effects on Children

Hon KL.

Dying with parents: an extreme form of child abuse.

World J Pediatr. 2011 Aug;7(3):266-8. PMID: 21822993

This analysis of a database of parents committing suicide and filicide (murder of one's child) from the city of Hong Kong showed filicide of children of both sexes and all ages. The majority jumped from a height (tall building or bridge).

Domestic Violence – Physical Health

Brownridge DA, Taillieu TL, Tyler KA, Tiwari A, Ko Ling Chan, Santos SC.

Pregnancy and intimate partner violence: risk factors, severity, and health effects.

Violence Against Women. 2011 Jul;17(7):858-81. PMID: 21775311

Women who experienced IPV during pregnancy in this Canadian study were more likely to be in a relationship with an abuser who inflicted repeated and severe IPV.

Johri M, Morales RE, Boivin JF, et al

Increased risk of miscarriage among women experiencing physical or sexual intimate partner violence during pregnancy in Guatemala City, Guatemala: cross-sectional study.

BMC Pregnancy Childbirth. 2011 Jul 6;11:49. PMID: 21733165

In a study of almost 2000 pregnant women in Guatemala, 10% experienced physical and 3% sexual IPV during pregnancy. Both physical and sexual abuse were significantly associated with increased miscarriage rates.

Domestic Violence – Mental Health

Devries K, Watts C, Yoshihama M, Kiss L, et al.

WHO Multi-Country Study Team. Violence against women is strongly associated with suicide attempts: evidence from the WHO multi-country study on women's health and domestic violence against women.

Soc Sci Med. 2011 Jul;73(1):79-86. PMID: 21676510

In a World Health Organization cross-sectional study of women from 13 different worldwide sites, consistent risk factors for suicide attempts (after adjusting for common mental health disorders) were: intimate partner violence; non-partner physical violence; ever being divorced, separated or widowed; childhood sexual abuse; and having a mother who had experienced intimate partner violence.

Okuda M, Olfson M, Hasin D, Grant BF, Lin KH, Blanco C.

Mental health of victims of intimate partner violence: results from a national epidemiologic survey.

Psychiatr Serv. 2011 Aug;62(8):959-62. PMID: 21807838

As part of a national survey of over 25,000 adults, being a victim of IPV was associated with a 2.6 times increase in a new mental health diagnosis, and increase was related to frequency of violent acts.

Cultural Issues

Anderson ML, Leigh IW.

Intimate partner violence against deaf female college students.

Violence Against Women. 2011 Jul;17(7):822-34. PMID: 21676984

A sample of deaf college women was approximately two times as likely to have experienced IPV in the past year than non-deaf college women.

Barnett S, Klein JD, Pollard RQ Jr, Samar V, Schlehofer D, Starr M, Sutter E, Yang H, Pearson TA.

Community participatory research with deaf sign language users to identify health inequities.

Am J Public Health. 2011 Dec;101(12):2235-8. PMID: 22021296

With community partnering and using an American Sign Language-accessible health survey, the deaf community identified 3 health inequities: obesity, partner violence, and suicide.

Cavanaugh CE, Messing JT, Del-Colle M, O'Sullivan C, Campbell JC.

Prevalence and correlates of suicidal behavior among adult female victims of intimate partner violence.

Suicide Life Threat Behav. 2011 Aug;41(4):372-83. PMID: 21535096

Of 662 racially diverse adult female victims of IPV, one in five had threatened or attempted suicide during her lifetime. African American IPV victims were less likely to have done so compared to Latina victims.

Barkho E, Fakhouri M, Arnetz JE.

Intimate partner violence among Iraqi immigrant women in Metro Detroit: a pilot study.

J Immigr Minor Health. 2011 Aug;13(4):725-31. PMID: 20924789

Of 55 Iraqi immigrant women in Detroit recruited from a cultural community center and a hair salon, 93% reported controlling behavior by their partners, 76% threatening behaviors, and 80% physical violence. Self-rated health was inversely related to exposure to threatening behaviors and physical violence.

Raj A, Sabarwal S, Decker MR, Nair S, Jethva M, Krishnan S, Donta B, Saggurti N, Silverman JG.

Abuse from in-laws during pregnancy and post-partum: qualitative and quantitative findings from low-income mothers of infants in Mumbai, India.

Matern Child Health J. 2011 Aug;15(6):700-12. PMID: 20680670

In a survey of over 1,000 women in Mumbai, India seen at an immunization clinic for their 6 month old children, 26.3% reported perinatal abuse from in-laws - including heavy domestic labor, food denial, and prevention of medical care. Those who reported perinatal physical or sexual abuse from husbands were 5.33 times more likely to report in-law abuse also.

Elder/Dependent Adult Abuse

Tetterton S, Farnsworth E.

Older women and intimate partner violence: effective interventions.

J Interpers Violence. 2011 Sep;26(14):2929-42. PMID: 21156690

This article discusses the needs of women victims of IPV who are over the age of 60. "Professionals must consider the generational values held by older IPV victims and understand how values may impact decision making."

Peak T, Ascione F, Doney J.

Adult protective services and animal welfare: should animal abuse and neglect be assessed during adult protective services screening?

J Elder Abuse Negl. 2012 Jan;24(1):37-49. PMID: 22206511

Discussion of a national survey of APS departments on their practices for assessing elder as well as concurrent animal welfare issues, plus suggestions for a model protocol.

Perpetrators

Falb KL, McCauley HL, Decker MR, Gupta J, Raj A, Silverman JG.

School bullying perpetration and other childhood risk factors as predictors of adult intimate partner violence perpetration.

Arch Pediatr Adolesc Med. 2011 Oct;165(10):890-4. PMID: 21646570

Of 1491 men seeking care at 3 urban community health centers, a history of school bullying perpetration was significantly associated with IPV perpetration as an adult – 3.82 times more likely in those who bullied peers frequently.

Lipsky S, Caetano R.

Intimate partner violence perpetration among men and emergency department use.

J Emerg Med. 2011 Jun;40(6):696-703. PMID: 18993018

Using data from a national survey, male IPV perpetrators were almost 50% more likely to use emergency department services in the prior year than non-perpetrators. IPV perpetrators were mainly seen in the ED for transportation-related risk-taking, aggression-related arrest, substance abuse, and serious mental illness.

Saunders DG, Kurko JF, Barlow K, Crane CE.

What attracts men who batter to their partners? An exploratory study.

J Interpers Violence. 2011 Sep;26(14):2747-63. PMID: 21282125

Of 181 batterers in treatment, those who chose their partners because that partner fulfilled a need scored higher on borderline personality, alcohol abuse, and psychotic thinking. Those who chose a partner because of physical traits were significantly more likely to be violent again with that partner after treatment.

Thompson MP, Koss MP, Kingree JB, Goree J, Rice J.

A prospective meditational model of sexual aggression among college men.

J Interpers Violence. 2011 Sep;26(13):2716-34. PMID: 21118861

Of 652 young men surveyed at the end of their first and second years of college, attitudes conducive to sexual aggression and perceived norms supportive of sexual aggression were associated with a higher likelihood of having been sexually aggressive one year later. This study identified potentially changeable risk factors for prevention programs.

Lipsky S, Caetano R, Roy-Byrne P.

Triple jeopardy: impact of partner violence perpetration, mental health and substance use on perceived unmet need for mental health care among men.

Soc Psychiatry Psychiatr Epidemiol. 2011 Sep;46(9):843-52. PMID: 20582398

Using data from the National Survey on Drug use and Health of multi-ethnic males aged 18-49, those with a history of IPV perpetration were much more likely to have unmet mental health needs (12.1 vs 3.4% for non-perpetrators), and higher rates of alcohol and drug abuse.

Police and Court System

Corwin DL, Keeshin BR.

Estimating present and future damages following child maltreatment.

Child Adolesc Psychiatr Clin N Am. 2011 Jul;20(3):505-18. PMID: 21683916

“The child psychiatric forensic evaluation of children and adolescents who are plaintiffs in civil lawsuits regarding their present and future damages from child maltreatment requires knowledge of current research findings on the short-term and long-term consequences of child maltreatment, evidence-based treatments for psychological trauma, and relevant professional guidelines....”

Montgomery SA, Street DF.

Visitation arrangements for impaired parents.

Child Adolesc Psychiatr Clin N Am. 2011 Jul;20(3):495-503. PMID: 21683915

“The authors describe their methodology for providing useful clinical information to the court to help guide their decisions regarding visitation with impaired parents.”

Freeman BW.

Children of divorce: the differential diagnosis of contact refusal.

Child Adolesc Psychiatr Clin N Am. 2011 Jul;20(3):467-77. PMID: 21683913

Through clinical vignettes, the author discusses an approach to defining and categorizing various types of child contact refusal.

Logan TK, Cole J.

Exploring the intersection of partner stalking and sexual abuse.

Violence Against Women. 2011 Jul;17(7):904-24. PMID: 21665857

This study looked at stalking and sexual abuse including rape experiences of women with protective orders against their ex-partners. Of women who had experienced both stalking as well as partner rape prior to the protective order, 69.8% of their ex-partners violated the subsequent restraining order an average of 16 times.

Dakil SR, Sakai C, Lin H, Flores G.

Recidivism in the child protection system: identifying children at greatest risk of reabuse among those remaining in the home.

Arch Pediatr Adolesc Med. 2011 Nov;165(11):1006-12. PMID: 21727259

Of 2578 children remaining in the home following an abuse report, 44% were re-reported. Risk factors for repeat report were children with behavior problems, caregivers with an abuse or child welfare history, and families with an annual income lower than \$20,000.

Providers

Westad C, McConnell D.

Child welfare involvement of mothers with mental health issues.

Community Ment Health J. 2012 Feb;48(1):29-37. PMID: 21243432

In this Canadian study of over 11,000 child welfare investigations, almost 20% of cases involved mothers with mental health issues. These mothers, besides mental health care, “need a broad spectrum of support including addressing trauma, strengthening social relationships, and alleviating poverty”.

Draucker CB, Martsolf DS, Roller C, Knapik G, Ross R, Stidham AW.

Healing from childhood sexual abuse: a theoretical model.

J Child Sex Abus. 2011 Jul-Aug;20(4):435-66. PMID: 21812546

Using in-depth interviews with almost 100 female and male adult survivors of childhood sexual abuse, stages of healing were described, as well as patterns, dynamics and modifying factors.

Schnur JB, Goldsmith RE.

Through her eyes.

J Clin Oncol. 2011 Oct 20;29(30):4054-6. PMID: 21768455

Powerful article describes difficulties adult survivors of childhood sexual abuse may have with cancer procedures, and ways both that women can prepare themselves and that clinicians can be of help.

Wygant C, Hui D, Bruera E.

Childhood sexual abuse in advanced cancer patients in the palliative care setting.

J Pain Symptom Manage. 2011 Aug;42(2):290-5. PMID: 21444190

Researchers from MD Anderson Cancer Center discuss a comprehensive management approach to dying cancer patients who had experienced childhood sexual abuse – the impact on the patient, the family, health care delivery, and how to initiate the conversation.

Cicchetti D, Rogosch FA, Toth SL, Sturge-Apple ML.

Normalizing the development of cortisol regulation in maltreated infants through preventive interventions.

Dev Psychopathol. 2011 Aug;23(3):789-800. PMID: 21756432

In a prospective interventional study of 13-month-old infants from maltreating families and their mothers, a psycho-educational intervention maintained child cortisol at the same levels as children from non-maltreated families, as opposed to levels from a usual care group.

Sherer I.

Narrative matters. 'Oh, my father hit me'.

Health Aff (Millwood). 2011 Jul;30(7):1382-5. PMID: 21734213

UCSF pediatric resident narrative on difficulties with working with CPS in reporting child abuse in a teen.

Gerlock AA, Grimesey JL, Pisciotta AK, Harel O.

Ask a few more questions.

Am J Nurs. 2011 Nov;111(11):35-9. PMID: 22030925

Article discusses appropriately screening and responding to IPV perpetrators in the medical setting.

Jaeger JR, Spielman D, Cronholm PF, Applebaum S, Holmes WC.

Screening male primary care patients for intimate partner violence perpetration.

J Gen Intern Med. 2008 Aug;23(8):1152-6. PMID: 18459009

Men were more likely to disclose IPV perpetration with an anonymous survey than face-to-face.

Zverina M, Stam HJ, Babins-Wagner R.

Managing victim status in group therapy for men: a discourse analysis.

J Interpers Violence. 2011 Sep;26(14):2834-55. PMID: 21282127

Various aspects of a counseling group for heterosexual men abused by their female partners are discussed.

Fleury-Steiner RE, Thompson Brady L.

The importance of resources and information in the lives of battered mothers.

Violence Against Women. 2011 Jul;17(7):882-903. PMID: 21705361

In-depth interviews with mothers involved with CPS and also experiencing IPV revealed difficulties, benefits, and suggestions for improvement in CPS interventions when IPV is occurring.

Scribano PV, Stevens J, Marshall J, Gleason E, Kelleher KJ.

Feasibility of computerized screening for intimate partner violence in a pediatric emergency department.

Pediatr Emerg Care. 2011 Aug;27(8):710-6. PMID: 21811196

In an Ohio Pediatric Emergency Department, patient self-use of a computerized kiosk for safety screening (covering a variety of issues) showed a 14% rate of IPV.

Nicolaidis C, Gregg J, Galian H, McFarland B, Curry M, Gerrity M.

"You always end up feeling like you're some hypochondriac": intimate partner violence survivors' experiences addressing depression and pain.

J Gen Intern Med. 2008 Aug;23(8):1157-63. PMID: 18443884

Using focus group interviews with internal medicine clinic female patients with depressive symptoms and a history of IPV, women were more concerned with their physical symptoms. Regarding IPV they felt "hesitant to discuss such issues with providers because of their fear that such information would make providers think their symptoms were 'all in their head' or would encourage providers to discount their pain". Women also experienced difficulties relating to trust and control in provider relationships.

Researchers

Krienert JL, Walsh JA.

Sibling sexual abuse: an empirical analysis of offender, victim, and event characteristics in National Incident-Based Reporting System (NIBRS) data, 2000-2007.

J Child Sex Abus. 2011 Jul-Aug;20(4):353-72. PMID: 21812542

With sibling sexual abuse identified as the most common form of familial sexual abuse, analysis of 8 years from a national database shows a need for expanded definitional criteria.

Bhargava R, Temkin TL, Fireman BH, Eaton A, McCaw BR, Kotz KJ, Amaral D.

A predictive model to help identify intimate partner violence based on diagnoses and phone calls.

Am J Prev Med. 2011 Aug;41(2):129-35. PMID: 21767719

In a Kaiser study of 1276 IPV identified patients comparing telephone advice calls to electronic medical records, predictors of IPV were: a past history of IPV, calls or diagnoses for psychiatric problems, calls for HIV concerns, and a clinical diagnosis of prenatal complications.

Shorey RC, Cornelius TL, Bell KM.

Reactions to participating in dating violence research: are our questions distressing participants?

J Interpers Violence. 2011 Sep;26(14):2890-907. PMID: 21156687

This research study looked at reactions among college students to completing a survey on dating violence. "Participants reported numerous positive experiences as a result of their research participation, with only mildly increased negative emotional reactions evident for some. Findings are discussed in relation to IRB proposals and appropriate informed consent for research participants."

Other of Interest

Palladino CL, Singh V, Campbell J, Flynn H, Gold KJ.

Homicide and suicide during the perinatal period: findings from the National Violent Death Reporting System.

Obstet Gynecol. 2011 Nov;118(5):1056-63. PMID: 22015873

In findings of a multi-state sample from the National Violent Death Reporting System 2003-2007, the rate of suicide while pregnant was 2.0 deaths per 100,000 live births, with 54.3% of cases associated with IPV. Homicide while pregnant had a rate of 2.9 deaths per 100,000 live births, with 45.3% associated with IPV.

Rothman EF, Miller E, Terpeluk A, Glauber A, Randel J.

The proportion of U.S. parents who talk with their adolescent children about dating abuse.

J Adolesc Health. 2011 Aug;49(2):216-8. Epub 2011 Jun 24. PubMed PMID: 21783057

In a national survey of 500 parents of 11-18 year olds, 55% had discussed dating abuse with their children. "Parents' age, income, and region of the United States were not related to having discussed DA. However, DA was substantially less likely to be discussed than school work, drugs, alcohol, family finances, the economy, money management, dating relationships in general, and sex. Parents who did not discuss DA reported that their children were not dating, that they were too young, that their children would learn about it through experience, that they would not know what to say, or that it was too embarrassing to discuss."

Stam B, van Gemert MJ, van Leeuwen TG, Aalders MC.

3D finite compartment modeling of formation and healing of bruises may identify methods for age determination of bruises.

Med Biol Eng Comput. 2010 Sep;48(9):911-21. PMID: 20556661

This engineering study from the Netherlands looked at a 3D model to date bruises, using skin thickness, bruise diameter, and diffusivities and spatial kinetics of hemoglobin and bilirubin.