Child Abuse

Wildeman C, Emanuel N, Leventhal JM, et. al.  

From the National Child abuse and Neglect Data System, there is confirmed cumulative child maltreatment for 1 in 8 US children by 18 years of age (1 in 5 for black children, 1 in 7 for Native American children).

Moles RL, Asnes AG.  
Has this child been abused? Exploring uncertainty in the diagnosis of maltreatment.  

“Uncertainty in the diagnosis of abuse can have profound implications for the health and safety of the child, the emotional burden of a family, and investigative and criminal proceedings. This article suggests a logical approach to managing uncertainty.”

Saunders BE, Adams ZW.  
Epidemiology of traumatic experiences in childhood.  

“The epidemiology of traumatic experiences in childhood is a key context for research, clinical treatment, program management, and policy development. This article discusses the conceptual, methodological, and programmatic challenges in precisely answering even relatively simple questions concerning the basic prevalence and incidence of important trauma types among American youth.”

De Bellis MD, Zisk A.  
The biological effects of childhood trauma.  

Review of “Developmental traumatology, the systemic investigation of the psychiatric and psychobiological effects of chronic overwhelming stress on the developing child.”

Neural correlates of cognitive and affective processing in maltreated youth with posttraumatic stress symptoms: does gender matter?  
Dev Psychopathol. 2014 May;26(2):491-513. PMID: 24621958

Brain scans showed distinct differences between groups of maltreated girls and boys in brain areas of decision-making and emotional processing compared to controls and to each other.
Murray LK, Nguyen A, Cohen JA.
Child sexual abuse.
Review of childhood sexual abuse including clinical physical and mental health outcomes, services involved, treatment strategies, cultural considerations and family dynamics.

Harper NS.
Neglect: failure to thrive and obesity.
“Screening for food security and psychosocial risk factors is an integral tool to identify families at risk for nutritional deficits and child maltreatment.”

Petska HW, Sheets LK.
Sentinel injuries: subtle findings of physical abuse.
In pre-cruising infants, “a history or observation of a sentinel skin injury, intraoral injury, or musculoskeletal injury without a plausible explanation, is concerning for physical abuse.”

Zolotor AJ.
Corporal punishment.
“Corporal punishment is used for discipline in most homes in the United States. It is also associated with a long list of adverse developmental, behavioral, and health-related consequences.

Adult Manifestations of Child Abuse

Bertone-Johnson ER, Whitcomb BW, Missmer SA, et. al.
Early life emotional, physical, and sexual abuse and the development of premenstrual syndrome: a longitudinal study.
Using data from the Nurses’ Health Study 2, childhood emotional or physical abuse was associated with over two times increased risk of premenstrual syndrome in the middle-to-late reproductive years.

Elton A, Tripathi SP, Mletzko T, et. al.
Childhood maltreatment is associated with a sex-dependent functional reorganization of a brain inhibitory control network.
“The study findings support the hypothesis that childhood maltreatment alters the functional neurodevelopment of inhibitory behavioral control and suggest mechanisms by which early life adversity confers risk for drug use and other disorders in susceptible individuals and resilience in others.”

Van Dam NT, Rando K, Potenza MN, Tuit K, Sinha R.
Childhood maltreatment, altered limbic neurobiology, and substance use relapse severity via trauma-specific reductions in limbic gray matter volume.
3 months after a 12 step recovery inpatient addiction treatment program for 79 adults, childhood maltreatment predicted a shorter time to drug relapse, while brain scans showing certain brain changes (in the limbic area) relating to childhood maltreatment predicted severity of relapse.

Potthast N, Neuner F, Catani C.
The contribution of emotional maltreatment to alcohol dependence in a treatment-seeking sample.
Addict Behav. 2014 May;39(5):949-58. PMID: 24561015
For 72 German treatment-seeking adults with alcohol dependence, childhood emotional maltreatment (vs. other types of childhood maltreatment including peer victimization) was the strongest predictor of alcohol dependence severity.

Smith PH, Homish GG, Saddleson ML, et. al.
Nicotine withdrawal and dependence among smokers with a history of childhood abuse.
From a national phone survey of 751 adult cigarette smokers, “All 3 forms of childhood abuse [emotional, physical, sexual] were associated with both dependence and withdrawal. The greater prevalence of smoking found among those with a history of childhood abuse may be explained by heightened vulnerability to nicotine dependence and withdrawal.”
Masculine norms, disclosure, and childhood adversities predict long-term mental distress among men with histories of child sexual abuse.
From an internet-based survey of 487 men with histories of childhood sexual abuse, subsequent adult mental distress was related to use of physical force by the abuser, number of other childhood adversities, years until disclosure, response to disclosure, and conformity to masculine norms.

Adolescents

Dank M, Lachman P, Zweig JM, Yahner J.
Dating violence experiences of lesbian, gay, bisexual, and transgender youth.
J Youth Adolesc. 2014 May;43(5):846-57. PMID: 23861097
In a survey of 5647 high school students from 10 schools, “Results indicated that lesbian, gay, and bisexual youth are at higher risk for all types of dating violence victimization (and nearly all types of dating violence perpetration), compared to heterosexual youth.”

Fry DA, Messinger AM, Rickert VI, et. al.
Adolescent relationship violence: help-seeking and help-giving behaviors among peers.
J Urban Health. 2014 Apr;91(2):320-34. PMID: 24030328
Of 1312 teens from 4 NY City high schools, teens who had disclosed adolescent relationship violence were more likely to tell a friend for support. Males and foreign-born teens were less likely to support a friend who disclosed, but Latinos were significantly more likely to report taking action with or on behalf of a friend in a violent relationship. “This research shows that adolescents often rely on each other to address relationship violence, underlining the importance of adolescents’ receipt of training and education on how to support their friends, including when to seek help from more formal services.”

Negriff S, Schneiderman JU, Smith C, Schreyer JK, Trickett PK.
Characterizing the sexual abuse experiences of young adolescents.
Of 303 maltreated youth ago 9-12, 38.3% experienced sexual abuse. For total group (boys and girls) 91.7% were victimized by a male – 13.3% biological father, 23.3% father figure, 20.0% male relative, 45.0% unrelated male.

Keelan CM, Schenck AM, McNally MR, Fremouw WJ.
The interpersonal worlds of bullies: parents, peers, and partners.
From a survey of 370 college students, “peer illegal behaviors, psychological aggression, physical assault, and sexual coercion in romantic relationships best predicted bullies from non-bullies.”

Bhatta MP, Jefferis E, Kavadas A, et. al.
Suicidal behaviors among adolescents in juvenile detention: role of adverse life experiences.
Of 3156 adolescents in a juvenile detention facility in Ohio, 19% reported suicidal ideation and 11.9% had attempted suicide. Childhood sexual abuse was a significant risk factor in suicidality (3 times increased risk).

Domestic Violence – Effects on Children

MacMillan HL, Wathen CN.
Children’s exposure to intimate partner violence.
Review of effects of children’s exposure to IPV, protective factors, assessment and interventions, and prevention.

Boeckel MG, Blasco-Ros C, Grassi-Oliveira R, Martinez M.
Child abuse in the context of intimate partner violence against women: the impact of women’s depressive and posttraumatic stress symptoms on maternal behavior.
This study from Spain looked at the relationship between the mental health status of abused women, their partner’s violence toward the children, and the various subsequent maternal behaviors.

Domestic Violence – Physical Health

From a national survey, recent violence and traumatic stress in women was significantly associated with weight gain and loss and waist circumference gain and loss (rather than remaining stable).


“…abuse of older men is especially invisible and underreported, compared to abuse of older women. It is proposed that attention should be directed not to gender, but to those conditions in different countries and cultures leading to abuse of both older men and women, including (but not limited to) economic problems, few alternatives to family care of the elderly, violence, changing characteristics of the family, ageism, and sexism.”


In-depth [and distressing] interviews with abused Chinese and Korean immigrant elders in the San Francisco bay area, who often do not report due to “shame and stigma, tolerance, protection of abusive children or spouse, preservation of family harmony and privacy, self-blame, and karma.” Authors note that elder abuse instruments need to be more culturally nuanced.


History of the evolution of World Elder Abuse Awareness Day with recommendations for using it to increase national impact. (June 15th, 2015)

Sexual Assault


For 89 women aged 18-25 who had been treated for PTSD after sexual assault, 3 years later “they were 2.4 times more likely to have a sexual dysfunction (lubrication problems and pain) and 2.7 times more likely to have pelvic floor dysfunction (symptoms of vulvar pain, general stress, lower urinary tract, and irritable bowel syndrome) than non-victimized controls.”


In a British review of 286 sexual assault cases during one year at one center, 70.6% of complainants had consumed alcohol before assault (0% age 12 to 100% age 24), with 76.2% of those drinking large amounts and almost 1/3 also taking drugs. There was one case of covert drug administration and one forcible drug usage. Authors recommend “public awareness campaigns to highlight the risk of rape associated with excessive alcohol consumption.”
Cowley AD. "Let's get drunk and have sex": the complex relationship of alcohol, gender, and sexual victimization. J Interpers Violence. 2014 May;29(7):1258-78. PMID: 24255066

From interviews with 43 college students, "participants reveal the ways in which the physiological effects of alcohol, beliefs about alcohol, gender norms, sex scripts, and rape myths all work together to normalize male dominance and violence against women."


In analyzing 89 British multiple perpetrator stranger rapes against female victims, "Degree of victim resistance was significantly and positively associated with suspect aggression. Older victims were the recipients of significantly higher levels of suspect aggression. Group leaders displayed more aggression towards the victim than the followers in the groups."


Using a specific Y chromosome-finding technique, forensic researchers were able to develop a method to detect male DNA 6-9 days after intercourse.


Discussion of a variety of alternate lights sources used to identify evidence of physical or sexual assault and also new technology to accurately date bruising.

Cultural Issues


"...how health professionals can resolve the tension between respecting cultural norms or child-rearing practices and the importance of determining what constitutes harm and child maltreatment."

Pitts KM. Latina immigrants, interpersonal violence, and the decision to report to police. J Interpers Violence. 2014 Jun;29(9):1661-78. PMID: 24366967

"Battered women of Latin American descent are less likely to seek help from either formal or informal sources and these women are more likely to stay longer in an abusive relationship before seeking help." From interviews with 568 immigrant Latina women who sought help at an agency, besides education and age, the decision to report DV to the police depended on situational factors of presence of an eyewitness, presence of children, victim injury, relationship status, and whether or not the victim had access to reliable transportation.


For 230 New York transgender women followed for 3 years, substance use was 76.2%. "Gender abuse, in conjunction with depressive symptoms, is a pervasive and moderately strong risk factor for substance use among transgender women.”

Human Trafficking


From a sample of 1354 serious youthful offenders, of whom 8% of males and females reported being paid for sex, risk of early age onset of commercial sexual exploitation increased with maternal substance use and earlier age of first sex; risk also increased for males experiencing rape and substance use dependency.
Turner D, Rettenberger M, Lohmann L, Eher R, Briken P.  
**Pedophilic sexual interests and psychopathy in child sexual abusers working with children.**  
Comparing sub-groups of 248 incarcerated Austrian child sexual abusers, those who had worked with directly with children (CSA-W) scored higher in pedophilic sexual interest but less general antisociality and psychopathology. “Future research should focus in particular on evaluating differences in the grooming strategies used by CSA-W to commit child sexual abuse.”

### Police and Court Systems

Carbone J.  
**Legal applications of the "best interest of the child" standard: judicial rationalization or a measure of institutional competence?**  
Historical review of what constitutes the “best interest of the child” and future directions.

COMMITTEE ON BIOETHICS.  
**Conflicts between religious or spiritual beliefs and pediatric care: informed refusal, exemptions, and public funding.**  
Discussion of the concept of medical neglect in the context of religious or spiritual beliefs, with recommendations for uniform legal modifications.

### Providers

Cairns J, Vreugdenhil A.  
**Working at the frontline in cases of elder abuse: 'it keeps me awake at night'**.  
“All participants found working in cases of elder abuse challenging and the work itself was perceived as difficult, complex and at times dangerous. The cumulative effect of intimidating work contexts, practice dilemmas and a lack of support resulted in frustration and stress for many practitioners. Nevertheless, participants were committed to providing ongoing services and support.”

American Academy of Pediatrics  
**Trauma Toolbox for Primary Care**  
Resources for clinicians and parents on ACEs and the effects of trauma on children, including specific materials relating to foster and adopted children.

Kellogg ND.  
**Working with child protective services and law enforcement: what to expect.**  
“This article aims to improve understanding of the community responses to a report of child abuse, and enable the clinician to work effectively with child protective services, law enforcement agencies, and legal professionals to ensure child safety and family integrity when appropriate.”

Stirling J.  
**The conversation: interacting with parents when child abuse is suspected.**  
“This article reviews some of the challenges and pitfalls in communicating with families when abuse is part of the differential diagnosis and offers some suggestions for improving communication with parents and children in these challenging clinical settings.”

Williams AA, Wright KS.  
**Engaging families through motivational interviewing.**  
Discussion of the concept of motivational interviewing with parents in order to address risk factors for child maltreatment.

Montgomery E.  
**Feeling safe: a metasynthesis of the maternity care needs of women who were sexually abused in childhood.**  
Summary of several research studies on needs of women giving birth who have experienced childhood sexual abuse. “In the absence of control and trusting relationships, maternity care can be experienced as a re-enactment of abuse.”

Sawyer S, Parekh V, Williams A, Williams B.  
**Are Australian paramedics adequately trained and prepared for intimate partner violence? A pilot study.**  
Paramedics sometimes are the only agency which deals with IPV victims in the out-of-hospital setting. In this survey of 50 Australian paramedics, 90% reported encountering at least 1 case of suspected IPV in the past year, with average of 3.66 cases. Only 22% reported feeling confident in managing these calls.
Carello J, Butler LD. 
*Potentially perilous pedagogies: teaching trauma is not the same as trauma-informed teaching.*
J Trauma Dissociation. 2014;15(2):153-68. PMID: 24313321 
Proposal of a trauma-informed approach to teaching students and trainees about traumatic subject matter that prioritizes student emotional safety.

**Other of Interest**

Chilton MM, Rabinowich JR, Woolf NH. 
*Very low food security in the USA is linked with exposure to violence.*
Public Health Nutr. 2014 Jan;17(1):73-82. PMID: 23432921 
Of 44 mothers of children under 3 participating in public assistance programs, “Exposure to violence affected mental health, ability to continue school and obtain work with living wages, and subsequently the ability to afford food...Descriptions of childhood trauma and life-changing violence are linked with severe food insecurity. Policy makers and clinicians should incorporate violence prevention efforts when addressing hunger.”

Imber-Black E. 
*Will talking about it make it worse? Facilitating family conversations in the context of chronic and life-shortening illness.*
J Fam Nurs. 2014 May;20(2):151-63. PMID: 24707033 
Interesting case reports on the impact of family secrets on health and behavioral issues in children/teens and the benefits of uncovering what has not been disclosed or talked about within the family.

Constantian MB, Lin CP. 
*Why some patients are unhappy: part 2. Relationship of nasal shape and trauma history to surgical success.*
“A trauma (abuse/neglect) history was the most significant mediator between patient satisfaction and number of operations and the most prominent factor driving surgery in patients with milder deformities.”
From Part 1 of this article: of one subgroup of patients who had started off with minimal defect and who had had an average of 7.56 nose surgeries, 85.4% had a history of childhood abuse or neglect.

**Prevention**

Lane WG. 
*Prevention of child maltreatment.*
Incorporation of child abuse prevention into pediatric practice, including anticipatory guidance, screening for risk factors, effectiveness of community-based prevention programs, and advocacy at local, state and national levels.

**Researchers**

Finkelhor D, Vanderminden J, Turner H, Hamby S, Shattuck A. 
*Upset among youth in response to questions about exposure to violence, sexual assault and family maltreatment.*
From a national sample of 10-17 year olds who were interviewed by phone about exposure to violence and who were asked at the end whether the questions had upset them – 4.5% reported being at all upset, 0.8% pretty or a lot upset, and 0.3% would not participate again (but regret was mostly due to the length of the survey, not types of questions asked).

Aarons GA, Fettes DL, Hurlburt MS, et. al. 
*Collaboration, negotiation, and coalescence for interagency-collaborative teams to scale-up evidence-based practice.*
Discussion of challenges in scaling-up program implementation including “differing organizational cultures, strategies, and approaches to collaboration; competing priorities across levels of leadership; power struggles; and role ambiguity...involves multiple stakeholders operating in a nexus of differing agendas, priorities, leadership styles, and negotiation strategies.”

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