

MEDICAL RESEARCH SUMMARY ON ABUSE FOR SANTA CLARA COUNTY DOMESTIC VIOLENCE COUNCIL MARCH 2011

This summary includes selected research articles relating to abuse indexed by the National Library of Medicine January 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

Mennen FE, Kim K, Sang J, Trickett PK.

Child neglect: definition and identification of youth's experiences in official reports of maltreatment.

Child Abuse Negl. 2010 Sep;34(9):647-58. PMID: 20643482

In a chart analysis of 303 maltreated children, neglect was present in 71.0%, but only classified as such in 41.5% of the CPS records. The most common type of neglect was supervisory neglect (72.5%), followed by environmental neglect (61.6%). Neglect was associated with other types of maltreatment in 95% of cases.

Barnes PD.

Imaging of nonaccidental injury and the mimics: issues and controversies in the era of evidence-based medicine.

Radiol Clin North Am. 2011 Jan;49(1):205-29. PMID: 21111136

Review of radiological findings in child abuse as well as need for correlation with clinical, laboratory and forensic evaluations [from Professor Barnes, Dept. of Radiology, Lucile Packard Children's Hospital].

Alriksson-Schmidt AI, Armour BS, Thibadeau JK.

Are adolescent girls with a physical disability at increased risk for sexual violence?

J Sch Health. 2010 Jul;80(7):361-7. PMID: 20591102

Using data from the 2005 US National Youth Risk Behavior Survey, female high school students who reported a physical disability or long-term health problem were more likely to report forced sexual intercourse than girls without these conditions (19.6% vs. 9.4%).

Adult Manifestations of Child Abuse

McCrory E, De Brito SA, Viding E.

Research review: the neurobiology and genetics of maltreatment and adversity.

J Child Psychol Psychiatry. 2010 Oct;51(10):1079-95. PMID: 20546078

This review summarizes studies looking at the effects of childhood maltreatment on neurobiological development and genetics research, including changes to the stress response, and structural and functional brain differences.

Frodl T, Reinhold E, Koutsouleris N, Reiser M, Meisenzahl EM.

Interaction of childhood stress with hippocampus and prefrontal cortex volume reduction in major depression.

J Psychiatr Res. 2010 Oct;44(13):799-807. PMID: 20122698

For forty-four depressed adults vs. age and gender matched healthy controls, brain scans showed significant changes associated with depression. In addition, childhood emotional neglect and physical neglect each manifested as particular changes in certain brain areas, and were predictive of the duration of depression.

Lalor K, McElvaney R.

Child sexual abuse, links to later sexual exploitation/high-risk sexual behavior, and prevention/treatment programs.

Trauma Violence Abuse. 2010 Oct;11(4):159-77. PMID:20679329

Review article on short and long term consequences of child sexual abuse, and evaluation of prevention strategies.

Chung EK, Nurmohamed L, Mathew L, Elo IT, Coyne JC, Culhane JF.

Risky health behaviors among mothers-to-be: the impact of adverse childhood experiences.

Acad Pediatr. 2010 Jul-Aug;10(4):245-51. PMID: 20599179

Of almost 1500 mainly African American, single, young, low-income pregnant women, there was a significant association between adverse childhood experiences and continuing risky health behaviors during pregnancy, including smoking and illicit drug use.

Poister Tusher C, Cook SL.

Comparing revictimization in two groups of marginalized women.

J Interpers Violence. 2010 Oct;25(10):1893-911. Epub 2010 Feb 2. PubMed PMID: 20129914

Incarcerated women were more likely to have experienced revictimization than a sample of poor, urban, nonincarcerated women. Among incarcerated women, those who reported child abuse almost all reported adult physical violence (96% or higher); for those who reported childhood sexual abuse, 79.8% to 90.7% experienced adult sexual revictimization.

Fuller-Thomson E, Brennenstuhl S, Frank J.

The association between childhood physical abuse and heart disease in adulthood: findings from a representative community sample.

Child Abuse Negl. 2010 Sep;34(9):689-98. PMID: 20663556

In a Canadian survey of over 13,000 people, and despite controlling for childhood stressors, adult health behaviors, adult stressors, depression and high blood pressure, those with a history of childhood physical abuse were 45% more likely to experience adult heart disease.

Wingo AP, Wrenn G, Pelletier T, Gutman AR, Bradley B, Ressler KJ.

Moderating effects of resilience on depression in individuals with a history of childhood abuse or trauma exposure.

J Affect Disord. 2010 Nov;126(3):411-4. PMID: 20488545

In a cross-sectional study of 792 adults, childhood abuse was significantly associated with adult depression, even after controlling for age, sex, race, education, employment, income, marital status, and family psychiatric history. However, the degree of resilience an individual possessed decreased the severity of the depression.

Domestic Violence – Effects on Children

Willis D, Hawkins JW, Pearce CW, Phalen J, Keet M, Singer C.

Children who witness violence: what services do they need to heal?

Issues Ment Health Nurs. 2010 Sep;31(9):552-60. PMID: 20701417

This article offers recommendations for screening, programming, and the development of healing interventions for children who witness violence, based on focus groups of mothers, adolescents, and knowledgeable professionals.

Domestic Violence – Physical Health

Gandhi S, Rovi S, Vega M, Johnson MS, Ferrante J, Chen PH.

Intimate partner violence and cancer screening among urban minority women.

J Am Board Fam Med. 2010 May-Jun;23(3):343-53. PMID: 20453180

Using chart audits of 382 adult urban minority women from 4 family medicine practices, prevalence of IPV was 16.5%; victims of physical and/or sexual abuse aged 40-74 were 87% less likely of being up to date on Pap smears, and 84% less likely on mammography. This was not true for those under age 40.

Domestic Violence – Mental Health

Anderson C, Logan D.

Impact of traumatic birth experience on Latina adolescent mothers.

Issues Ment Health Nurs. 2010 Nov;31(11):700-7. PMID: 20936891

Of 85 adolescent Latinas giving birth, 1/3 rated their deliveries as being traumatic, and 1/2 showed symptoms of trauma. Factors influencing their negative appraisal of delivery included unmarried status, fear of dying, fear of loss of control, and partner violence.

El-Bassel N, Gilbert L, Vinocur D, Chang M, Wu E.

Posttraumatic stress disorder and HIV risk among poor, inner-city women receiving care in an emergency department.

Am J Public Health. 2011 Jan;101(1):120-7. PMID: 21088271

Of 241 low income minority women receiving care in an urban emergency department, 29% met criteria for diagnosis of PTSD. Women with PTSD were more likely to report having multiple sexual partners, having had sex with a risky partner, and having experienced partner violence related to condom use in the preceding 6 months.

Katz J, May P, Sörensen S, DelTosta J.

Sexual revictimization during women's first year of college: self-blame and sexual refusal assertiveness as possible mechanisms.

J Interpers Violence. 2010 Nov;25(11):2113-26. PMID: 20065312

Eighty-seven female college freshman were prospectively followed during their academic year. Those who initially reported a history of sexual victimization were more likely to report revictimization during the year; associated factors were found to be increased self-blame for the first experience, leading to decreased sexual refusal assertiveness.

Masho SW, Alvanzo A.

Help-seeking behaviors of men sexual assault survivors.

Am J Mens Health. 2010 Sep;4(3):237-42. PMID: 19706673.

Of 91 male sexual assault survivors, only 17.6% had sought professional help. Those who had sought help were more likely to have experienced a physical injury or a serious threat at the time of the incident.

Cultural Issues

Amar AF, Bess R, Stockbridge J.

Lessons from families and communities about interpersonal violence, victimization, and seeking help.

J Forensic Nurs. 2010 Fall;6(3):110-20. PMID: 21175531

In focus groups held with 64 college age women, the main determinants of whether the women told anyone about IPV experiences were the messages from and experiences of mothers and extended family members. Authors suggest need for understanding of familial and cultural elements related to help seeking, to inform effective prevention efforts.

Belknap RA, Vandevusse L.

Listening sessions with Latinas: documenting life contexts and creating connections.

Public Health Nurs. 2010 Jul;27(4):337-46. PMID: 20626834

Authors describe the use of "listening sessions" with groups of immigrant Latinas, who shared knowledge of resources and emotional support regarding IPV, and discussed unmet needs from the community.

Fontes LA, Plummer C.

Cultural issues in disclosures of child sexual abuse.

J Child Sex Abus. 2010 Sep;19(5):491-518. PMID: 20924908

"This article explores the ways ethnic and religious culture affect child sexual abuse disclosure and reporting, both in the United States and internationally. Guidelines for culturally sensitive child abuse interviewing are provided."

Elder/Dependent Adult Abuse

Navarro AE, Wilber KH, Yonashiro J, Homeier DC.

Do we really need another meeting? Lessons from the Los Angeles County Elder Abuse Forensic Center.

Gerontologist. 2010 Oct;50(5):702-11. PMID: 20233729

Description from an Elder Abuse Forensic Center on their successful structure and process methods, to enable replication in other communities.

Perpetrators

Bair-Merritt MH, Crowne SS, Thompson DA, Sibinga E, Trent M, Campbell J.

Why do women use intimate partner violence? A systematic review of women's motivations.

Trauma Violence Abuse. 2010 Oct;11(4):178-89. PMID: 20823071

Review of the research literature and author study details information about female physical IPV perpetrators, with main themes being anger and not being able to get a partner's attention.

Gallagher KE, Hudepohl AD, Parrott DJ.

Power of being present: the role of mindfulness on the relation between men's alcohol use and sexual aggression toward intimate partners.

Aggress Behav. 2010 Nov;36(6):405-13. PMID: 20623578

In this study of 167 heterosexual males, there was a correlation between drinking alcohol and sexual coercion/aggression in a group with low, but not high levels of mindfulness. These results suggest a possible future intervention of mindfulness aimed at reducing alcohol-related aggression.

Olver ME, Stockdale KC, Wormith JS.

A meta-analysis of predictors of offender treatment attrition and its relationship to recidivism.

J Consult Clin Psychol. 2011 Feb;79(1):6-21. PMID: 21261430

In an analysis of research articles on offender treatment programs, 37.8% of DV program participants did not complete the program, and non-completion significantly predicted repeat offense. “The clients who stand to benefit the most from treatment (i.e.,high-risk, high-needs) are the least likely to complete it.”

Police and Court System

Bell ME, Perez S, Goodman LA, Dutton MA.

Battered women's perceptions of civil and criminal court helpfulness: the role of court outcome and process.

Violence Against Women. 2011 Jan;17(1):71-88. PMID: 21199810

Analysis of in depth interviews with almost 300 battered women about what was and was not helpful in the court process, contributing to “therapeutic jurisprudence” – “how the law can be used to enhance the well-being of participants.”

Block SD, Oran H, Oran D, Baumrind N, Goodman GS.

Abused and neglected children in court: knowledge and attitudes.

Child Abuse Negl. 2010 Sep;34(9):659-70. PMID: 20719384.

Eighty-five ethnically diverse children aged 7-10 were interviewed immediately after attending dependency court. “Lack of understanding and negative attitudes were common....a substantial minority of children did not feel believed or listened to, and most children wanted to return home.”

McGaw S, Scully T, Pritchard C.

Predicting the unpredictable? Identifying high-risk versus low-risk parents with intellectual disabilities.

Child Abuse Negl. 2010 Sep;34(9):699-710. PMID: 20674975

In this British study of 101 intellectually disabled (ID) parents, distinguishing factors for high risk parenting did not include main parent IQ level, but did include parental childhood trauma, having a child with special needs, and having a non-ID male partner with criminal or anti-social behaviors.

Kuehnle K, Connell M.

Child sexual abuse suspicions: treatment considerations during investigation.

J Child Sex Abus. 2010 Sep;19(5):554-71. PMID: 20924910

“This article addresses what, if any, psychotherapeutic interventions should be provided to meet the emotional and clinical needs of alleged child victims of sexual abuse while they await judicial determinations from the family, dependency, or criminal courts.”

Ingram M, McClelland DJ, Martin J, Caballero MF, Mayorga MT, Gillespie K.

Experiences of immigrant women who self-petition under the Violence Against Women Act.

Violence Against Women. 2010 Aug;16(8):858-80. PMID: 20679184

This article discusses the emotional, financial, and logistical barriers of undocumented immigrant women petitioning for legal status under the Violence Against Women Act.

Providers

Bemiller M, Williams LS.

The role of adaptation in advocate burnout: a case of good soldiering.

Violence Against Women. 2011 Jan;17(1):89-110. PMID: 21199811

Authors discuss burnout in DV and sexual assault advocates, and find that there is less burnout with the attitude of “good soldiering” – being adaptable to work that is worthwhile, but risky, demanding, and resource poor.

IOM (International Organization for Migration, based in Geneva, Switzerland)

Caring for Trafficked Persons – Guidance for Healthcare Providers [free manual download]

<http://www.unodc.org/documents/hiv-aids/publications/>

[Caring_for_Trafficked_Persons_Guidance_for_Health_Providers_2009.pdf](http://www.unodc.org/documents/hiv-aids/publications/Caring_for_Trafficked_Persons_Guidance_for_Health_Providers_2009.pdf)

Dass-Brailsford P, Myrick AC.

Psychological trauma and substance abuse: the need for an integrated approach.

Trauma Violence Abuse. 2010 Oct;11(4):202-13. PMID: 20823072

Article discusses an integrated approach to trauma and substance abuse treatment, and reviews and critically examines “the different integrated models that have been developed in terms of efficacy, effectiveness and empirical evidence. The paper concludes with suggestions on how the field can be improved.”

Anderst J, Dowd MD.

Comparative needs in child abuse education and resources: perceptions from three medical specialties.

Med Educ Online. 2010 Jul 20;15. PMID: 20661314

Focus groups from Family medicine, Emergency Medicine and Pediatrics discuss their common and differing educational needs with regard to identification and management of child abuse.

Torres-Vitolas C, Bacchus LJ, Aston G.

A comparison of the training needs of maternity and sexual health professionals in a London teaching hospital with regards to routine enquiry for domestic abuse.

Public Health. 2010 Aug;124(8):472-8. PMID: 20638695

This study from a London teaching hospital evaluates the attitudes, knowledge and experience of domestic abuse screening in maternity and sexual health professionals, and suggests educational interventions that are tailored to the group and produce sustainable results after training.

Klingbeil CG, Johnson NL, Totka JP, Doyle L.

How to select the correct education strategy: when not to go online.

J Nurses Staff Dev. 2009 Nov-Dec;25(6):287-91. PMID: 19955977

Authors feel that online learning is not well suited to sensitive topics such as domestic abuse screening, and suggest a curriculum that includes a hospital-produced video, a role play, and discussion.

Eisbach SS, Driessnack M.

Am I sure I want to go down this road? Hesitations in the reporting of child maltreatment by nurses.

J Spec Pediatr Nurs. 2010 Oct;15(4):317-23. PMID: 20880280

When 23 nurses were interviewed about their experiences with child abuse reporting, authors noted three moderating points in the process. If there was hesitation at the first point (becoming aware of signs and symptoms), decision-making became complex and delayed.

Vanderburg S, Wright L, Boston S, Zimmerman G.

Maternal child home visiting program improves nursing practice for screening of woman abuse.

Public Health Nurs. 2010 Jul;27(4):347-52. PMID: 20626835

In a Canadian study of changing practices of visiting nurses at postpartum and at risk home visits, emphasis was placed on making sure and documenting that the woman was alone when abuse screening was asked. This practice change significantly improved abuse disclosures at postpartum visits from 3% to 11%, and during at risk visits from 48% to 75%.

Other of Interest

Shapiro CJ, Prinz RJ, Sanders MR.

Population-based provider engagement in delivery of evidence-based parenting interventions: challenges and solutions.

J Prim Prev. 2010 Aug;31(4):223-34. PMID: 20195773

“The US Triple P System Population Trial, designed to reduce child maltreatment at a population level, affords a unique opportunity to examine the steps involved in launching positive parenting support at a population level via an existing provider workforce. The implementation process is described; challenges and solutions are discussed.”

Howard J, Friend D, Parker T, Streker G.

Use of SMS to support parents who experience violence from their adolescents.

Aust J Prim Health. 2010;16(2):187-91. PMID: 21128582

An Australian text messaging program (“Who’s the Boss”) was found to be effective in supporting parents who were being abused by their adolescents.