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Child Abuse

Clinical Report, American Academy of Pediatrics

Clinical Considerations Related to the Behavioral Manifestations of Child Maltreatment, 2017

<http://pediatrics.aappublications.org/content/pediatrics/139/4/e20170100.full.pdf>

“Children who have suffered early abuse or neglect may later present with significant health and behavior problems that may persist long after the abusive or neglectful environment has been remediated.”

Paddock M, Sprigg A, Offiah AC.

Imaging and reporting considerations for suspected physical abuse (non-accidental injury) in infants and young children.

Part 1: initial considerations and appendicular skeleton.

Clin Radiol. 2017 Mar;72(3):179-188. PMID: [28063602](#)

Consideration of possible abuse due to fracture patterns of the appendicular skeleton (structures of arms and legs).

Paddock M, Sprigg A, Offiah AC.

Imaging and reporting considerations for suspected physical abuse (non-accidental injury) in infants and young children.

Part 2: axial skeleton and differential diagnoses.

Clin Radiol. 2017 Mar;72(3):189-201. PMID: [28027778](#)

Companion article to above, discussing the axial skeleton (head and trunk).

Hodgman EI, Pastorek RA, Saeman MR, et. al.

The Parkland Burn Center experience with 297 cases of child abuse from 1974 to 2010.

Burns. 2016 Aug;42(5):1121-7. PMID: [27268012](#)

From 1974 through 2010, 5.3% of 5553 pediatric burn admissions were due to abuse. “Clinicians should approach all burn injuries in young children with a high index of suspicion, but in particular those with scalds, or injuries to the buttocks, perineum, or bilateral feet.” Children with burns due to abuse were 3.3 times more likely to die from their injuries than accidental burn patients.

Pawlik MC, Kemp A, Maguire S, et. al.

Children with burns referred for child abuse evaluation: Burn characteristics and co-existent injuries.

Child Abuse Negl. 2016 May;55:52-61. PMID: [27088728](#)

From a dataset of children referred to child abuse pediatricians, 7% had burns. Risk factors for likelihood of abuse included “children with reported inflicted injury, absent or inadequate explanation, hot water as agent, immersion scald, a bilateral/symmetric burn pattern, total body surface area $\geq 10\%$, full thickness burns, and co-existent injuries.”

Madea B, Ortmann J, Doberentz E.

Forensic aspects of starvation.

Forensic Sci Med Pathol. 2016 Sep;12(3):276-98. PMID: [27145935](#)

Discussion of forensic findings and classification of deliberate withholding of food, helping to “clarify the cause of death and give an expert opinion on the degree and duration of starvation.”

Trotman GE, Young-Anderson C, Deye KP.

Acute Sexual Assault in the Pediatric and Adolescent Population.

J Pediatr Adolesc Gynecol. 2016 Dec;29(6):518-526. PMID: [26702774](#)

Excellent forensic review article on risk factors, presentation, assessment and management of acute pediatric sexual assault.

Abraham M, Kondis J, Merritt DF.

Case Series: Vaginal Rupture Injuries after Sexual Assault in Children and Adolescents.

J Pediatr Adolesc Gynecol. 2016 Jun;29(3):e49-52. PMID: [26746636](#)

Review to increase recognition and management of rare but life-threatening finding of vaginal rupture after child sexual assault.

Trisman ES.

Recognizing Maltreatment in Children with Special Needs.

Pediatr Ann. 2016 Aug 1;45(8):e273-7. PMID: [27517353](#)

Review article on risk factors for maltreatment of children with special needs, assessment in the office setting, and how to provide prevention education to the child, family, and caregivers.

Eastman AL, Mitchell MN, Putnam-Hornstein E.

Risk of re-report: A latent class analysis of infants reported for maltreatment.

Child Abuse Negl. 2016 May;55:22-31. PMID: [27082751](#)

Comparing linked birth and CPS records, 23,871 infants remaining in the home following an initial maltreatment report were followed for 5 years. Increased risk of re-report was associated with lack of established paternity, delayed or absent prenatal care, initial allegation of neglect, and a family history of CPS involvement involving an older sibling.

Honor G, Fischer BA.

Child Sexual Abuse Revictimization: Child Demographics, Familial Psychosocial Factors, and Sexual Abuse Case Characteristics.

J Forensic Nurs. 2016 Oct/Dec;12(4):151-159. PMID: [27749623](#)

[27749623](#)

In a review of charts assessing child sexual abuse revictimization, "children most at risk for sexual abuse revictimization often present with multiple familial psychosocial concerns and have parents/caregivers who are not supportive of them or their sexual abuse allegations."

Solaiman AZ, Kulaylat AN, Santos MC, et. al.

Delayed Presentation of Jejuno-Jejunal Fistula With Stricture After Physical Child Abuse.

Pediatr Emerg Care. 2016 Jul;32(7):462-4. PMID: [25899753](#)

Review of small intestinal injury, seldom described in the context of child abuse. "Delayed presentation of small intestinal injury should remain on the differential diagnosis in the evaluation of persistent abdominal symptoms in a child with a prior history of physical abuse, even if imaging studies do not reveal specific abnormalities."

Calderon LE, Carney LD, Kavanagh KT.

The Cry of the Child and its Relationship to Hearing Loss in Parental Guardians and Health Care Providers.

J Evid Inf Soc Work. 2016;13(2):198-205. PMID: [25844672](#)

From measuring sound levels and intensity of 26 pediatric patients, "elevated noise levels produced from crying children can cause acute discomfort and mild pain to those exposed. In addition, there is a theoretical risk that chronic exposure to these intense sound pressures may result in noise-induced hearing loss...Social workers and medical personnel should consider suggesting the use of ear plugs by parental guardians of frequently crying children as a modality for the prevention of child abuse."

Adult Manifestations of Child Abuse

Iniguez KC, Stankowski RV.

Adverse Childhood Experiences and Health in Adulthood in a Rural Population-Based Sample.

Clin Med Res. 2016 Dec;14(3-4):126-137. PMID: [27503793](#)

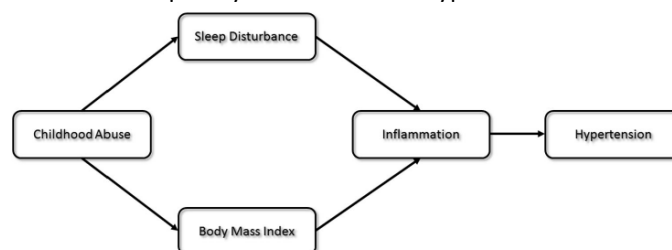
From a telephone survey of 800 residents of rural Wisconsin, and correlating with EMR data, "62% reported at least one ACE and 15% reported experiencing four or more. All self-reported measures of poor health were associated with increased ACE score...Emotional abuse was the most common ACE reported followed by substance abuse in the household...There was no clear correlation between abuse type and health outcomes."

Petrov ME, Davis MC, Belyea MJ, Zautra AJ.

Linking childhood abuse and hypertension: sleep disturbance and inflammation as mediators.

J Behav Med. 2016 Aug;39(4):716-26. PMID: [27098168](#)

In an analysis of 589 community-dwelling middle-aged adults, "Childhood abuse was significantly related to both body mass index and sleep disturbance, which, both in turn, were significantly associated with inflammation, which was subsequently associated with hypertension status."



Tesarz J, Eich W, Treede RD, Gerhardt A.

Altered pressure pain thresholds and increased wind-up in adult patients with chronic back pain with a history of childhood maltreatment: a quantitative sensory testing study.

Pain. 2016 Aug;157(8):1799-809. PMID: [27075429](#)

Of 176 German adults with non-specific chronic low back pain (nsCLBP) compared to controls, those with nsCLBP and a history of childhood maltreatment showed various changes to pain and touch sensitivity. "These results emphasize the importance of emotional abuse in nsCLBP and suggest that child maltreatment can induce long-term changes in adult somatosensory function."

Shultz SK, Shaw M, McCormick B, Allen J, Black DW.
Intergenerational Childhood Maltreatment in Persons with DSM-IV Pathological Gambling and Their First-Degree Relatives.

J Gambl Stud. 2016 Sep;32(3):877-87. PMID: [26749583](#)
94 subjects with diagnosed pathological gambling (PG) and their first-degree relatives (FDR) reported significantly higher rates of childhood maltreatment compared to controls (61% PG vs. 41% FDR vs. 25% controls). Maltreated subjects with PG also had more severe symptoms, and more co-occurring mood and anxiety disorders.

Bellis MA, Hardcastle K, Ford K, et. al.
Does continuous trusted adult support in childhood impart life-course resilience against adverse childhood experiences - a retrospective study on adult health-harming behaviours and mental well-being.

BMC Psychiatry. 2017 Mar 23;17(1):110. PMID: [28335746](#)
From a survey of 7,047 UK adults, increasing ACEs were associated with increased poor diet, daily smoking, heavy alcohol consumption, and poorer mental health. However these impacts were substantially reduced by “always having support from an adult you trust in childhood.”

Adolescents

Ulloa E, Salazar M, Monjaras L.
Prevalence and Correlates of Sex Exchange Among a Nationally Representative Sample of Adolescents and Young Adults.

J Child Sex Abus. 2016 Jul;25(5):524-37. PMID: [27266400](#)
From a national adolescent survey, almost 5% (and more males than females) reported sex exchange – for drugs, money, food, shelter, or other favors. While this phenomenon has been studied in homeless and runaway youth, the current study reveals that sex exchange also occurs in the general population.

Martin J, Bureau JF, Yurkowski K, et. al.
Family-based risk factors for non-suicidal self-injury: Considering influences of maltreatment, adverse family-life experiences, and parent-child relational risk.

J Adolesc. 2016 Jun;49:170-80. PMID: [27086083](#)
For 957 undergrads, maternal maltreatment was associated with initiation of non-suicidal self-injury, and adverse family-life events, such as parental divorce, socioeconomic challenges, and inter-parental violence, had an additive influence.

Domestic Violence – Effects on Children

Hoffman MC.
Stress, the Placenta, and Fetal Programming of Behavior: Genes' First Encounter with the Environment.

Am J Psychiatry. 2016 Jul 1;173(7):655-7. PMID: [27363547](#)
Editorial re: research findings of maternal perceived stress, methylation of placental genes, and altered fetal autonomic nervous system function.

Bidarra ZS, Lessard G, Dumont A.
Co-occurrence of intimate partner violence and child sexual abuse: Prevalence, risk factors and related issues.

Child Abuse Negl. 2016 May;55:10-21. PMID: [27060785](#)
This scoping review focused on the co-occurrence of IPV and intra-familial child sexual abuse, showing a prevalence of 12-70%. Authors discuss in detail future research needs on this topic.

Laslett AM, Rankin G, Waleewong O, et. al.
A Multi-Country Study of Harms to Children Because of Others' Drinking.

J Stud Alcohol Drugs. 2017 Mar;78(2):195-202. PMID: [28317499](#)
From surveys of randomly selected households from 8 countries, between 4 and 14% reported that children were affected in one or more ways by drinking in the home – by being physically hurt, verbally abused, exposed to domestic violence, or left unsupervised.

Domestic Violence – Physical Health

Johnson WA, Pieters HC.
Intimate Partner Violence Among Women Diagnosed With Cancer.

Cancer Nurs. 2016 Mar-Apr;39(2):87-96. PMID: [25950584](#)
Review of research on abusive partner behaviors toward women throughout their cancer trajectory, having a possible profound effect on health decisions and treatment outcomes. Article includes clinical guidelines for oncology healthcare providers.

Domestic Violence – Mental Health

Fonseca-Machado Mde O, Alves LC, Haas VJ, et. al.
[Under the shadow of maternity: pregnancy, suicidal ideation, and intimate partner violence].
Rev Panam Salud Publica. 2015 May;37(4-5):258-64.
Portuguese. PMID: [26208194](#)

In this survey of 358 Brazilian pregnant women, 17.6% reported some type of IPV during the current pregnancy. IPV was associated with a 6.29 times increased risk of suicidal ideation.

Elder/Dependent Adult Abuse

Hirst SP, Penney T, McNeill S, et. al.
Best-Practice Guideline on the Prevention of Abuse and Neglect of Older Adults.

Can J Aging. 2016 Jun;35(2):242-60. doi:
10.1017/S0714980816000209. PMID: [27086668](#)
Review of research on interventions/resources for “identifying, assessing, and responding to abuse and neglect of older adults; education, prevention, and health promotion strategies; and organizational and system-level supports to prevent and respond to abuse and neglect.”

Pickering CE, Ridenour K, Salaysay Z.
Best Practices for the Identification of Elder Abuse and Neglect in Home Health.

Home Healthc Now. 2016 Apr;34(4):182-8. PMID: [27023293](#)
Practical guidance on elder abuse/neglect risk factors, assessment tools, and reporting responsibilities for home healthcare professionals.

North C.
Comprehensive geriatric assessment of a mental health service user with safeguarding needs.
Nurs Older People. 2016 May 27;28(5):25-9. PMID: [27231083](#)

Case study example of use of a Comprehensive Geriatric Assessment (CGA) “used to determine frail older people's medical and mental health status, as well as any functional, social and environmental issues that might affect their care.” CGA can identify risks when there are significant transitions in care, and coordinate provision of multidisciplinary care.

Taverner T, Baumbusch J, Taipale P.
Normalization of Neglect: A Grounded Theory of RNs' Experiences as Family Caregivers of Hospitalized Seniors.
Can J Aging. 2016 Jun;35(2):215-28. PMID: [27223578](#)

From interviews with 12 Canadian RNs caring for elderly relatives at home after their relative was hospitalized, they describe a “normalization of neglect” in the hospital - a culture where “neglect of patients’ normal needs and dignity appeared to have become accepted practice” and resulted in malnourishment, pressure sores, falls, and pain. They described feeling a need to stay by the bedside to protect and care for relative. “I was embarrassed to be a nurse.”

Jackson SL.
All Elder Abuse Perpetrators Are Not Alike: The Heterogeneity of Elder Abuse Perpetrators and Implications for Intervention.

Int J Offender Ther Comp Criminol. 2016 Feb;60(3):265-85.
PMID: [25326465](#)

Review of history and types of elder abuse, and types of perpetrators. “Interventions must incorporate the heterogeneity of both perpetrators and victims, be specific to the type of abuse involved, and take into consideration the level of perpetrator culpability and the continuum of complexity among these cases.” For example, an overwhelmed family caregiver may need support services rather than prosecution.

Sexual Assault

Vrees RA.
Evaluation and Management of Female Victims of Sexual Assault.

Obstet Gynecol Surv. 2017 Jan;72(1):39-53. PMID: [28134394](#)
Review of the immediate evaluation and management of adult female victims of sexual assault - “Establishing standard protocols based on state laws and on victim-centered practices to avoid revictimization of the patient is critical. The primary goals of care include the assessment and treatment of physical injuries, psychological assessment and support, pregnancy assessment and prevention, and therapy for prevention of sexually transmitted infections. In addition, evidentiary collection is a critical component...”

Scannell M.

Centers for Disease Control and Prevention 2015 Human Papillomavirus Vaccine Recommendations for Sexually Assaulted Patients: A Review and Update.

J Forensic Nurs. 2016 Oct/Dec;12(4):160-166. PMID: [27782923](#)

The CDC has updated their recommendations for sexually assaulted patients to now receive the HPV vaccine. This article reviews information on HPV, HPV vaccines, and specific considerations for patients who have been sexually assaulted.

Zilkens RR, Phillips MA, Kelly MC, et. al.

Non-fatal strangulation in sexual assault: A study of clinical and assault characteristics highlighting the role of intimate partner violence.

J Forensic Leg Med. 2016 Oct;43:1-7. PMID: [27376175](#)

Of 1064 Australian women referred to a sexual assault resource center, 7.4% reported non-fatal strangulation (NFS) during the sexual assault. "Odds of NFS were 8.4 times higher in women sexually assaulted by an intimate partner compared to women assaulted by an acquaintance/friend and 4.9 times higher compared to women assaulted by a stranger...the highest proportion of NFS (33.9%) was in women aged 30-39 years sexually assaulted by an intimate partner."

Ashby BD, Kaul P.

Post-traumatic Stress Disorder After Sexual Abuse in Adolescent Girls.

J Pediatr Adolesc Gynecol. 2016 Dec;29(6):531-536. PMID: [26872713](#)

Discussion of the effects of PTSD after adolescent sexual abuse on presenting complaints, such as sexually transmitted infections, contraception, and chronic pain; clinical implications for chaperones and boundary issues; screening tools for PTSD; and PTSD treatment approaches.

Eckerlin DM, Kovalesky A, Jakupcak M.

Military Sexual Trauma in Male Service Members.

Am J Nurs. 2016 Sep;116(9):34-43. PMID: [27513073](#)

"This article discusses the unique ways in which men may experience MST, and examines how social stereotypes of masculinity, myths surrounding sexual assault, and military culture and structure often influence a man's interpretation of an attack and his likelihood of reporting the incident or seeking treatment."

Warren P.

UK's first maternity service for rape survivors opens in London.

BMJ. 2016 Aug 1;354:i4241. PMID: [27480969](#)

Hundreds of patients are requesting appointments to the first UK self-referral maternity service for rape survivors. Services include trained midwives and psychologists with particular attention to trauma-informed care, continuity of care, special classes and support including breastfeeding advice, and skype consultations for those non-local.

Human Trafficking

Stevens M, Berishaj K.

The Anatomy of Human Trafficking: Learning About the Blues: A Healthcare Provider's Guide.

J Forensic Nurs. 2016 Apr-Jun;12(2):49-56. PMID: [27195926](#)

Review of human trafficking for medical providers, including scope, definitions, types, role of clinicians, and clinical practice tools and guidelines.

Human Trafficking and Medicine

AMA J Ethics. 2017 Jan 1;19(1):1-131

<http://journalofethics.ama-assn.org/2017/01/pdf/joe-1701.pdf>

Entire journal issue (free full content with link above) devoted to ethical and policy aspects of human trafficking in the medical context.

Rezaeian M.

The frequency of burns among the victims of sex trafficking in some lower-middle-income countries.

Burns. 2017 Feb;43(1):245-246. PMID: [27524437](#)

Authors note that in addition to other forms of abuse/torture, victims of sex trafficking particularly in India, Pakistan and Bangladesh may present with abuser-inflicted burns due to flame, acid or cigarettes. Also, victims may use self-immolation as a way to escape trafficking, leading to painful death or extensive disfigurement.

Cultural Issues

Adams M, Fitzgerald S, Holbrook D.

Connecting Hispanic Women in Baltimore to the Mercy Medical Center Sexual Assault Forensic Examiners/Forensic Nurse Examiners Program.

J Forensic Nurs. 2016 Jul-Sep;12(3):104-10. PMID: [27428791](#)

A sexual assault forensic nurse examiner program found significantly less Hispanic program utilization than expected after chart review. Multiple barriers included lack of awareness that the services exist, cultural factors, language barriers, lack of awareness of legal rights, and a fear of deportation."

Nossier SA.

Violence against women in the Arab world.

J Egypt Public Health Assoc. 2015 Sep;90(3):85-6. PMID: [26544835](#)

Succinct look at Arabic violence against women, particularly in Egypt. Author discusses various research findings and places them in cultural context, including barriers to disclosure.

Perpetrators

Karakasi MV, Vasilikos E, Voultos P, Vlachaki A, Pavlidis P.

Sexual homicide: Brief review of the literature and case report involving rape, genital mutilation and human arson.

J Forensic Leg Med. 2017 Feb;46:1-10. PMID: [28024267](#)

Review of incidence, crime-scene patterns, offender characteristics, and victim selection of sexual homicide. Most offenders are in their late 20s to early 30s, and Caucasian. "Personal weapons were commonly used against women; strangulation is the prevalent killing method against children, and firearms against men."

Police and Court Systems

Mollard E, Brage Hudson D.

Nurse-Led Trauma-Informed Correctional Care for Women.

Perspect Psychiatr Care. 2016 Jul;52(3):224-30. PMID: [25980434](#)

"A history of trauma and victimization is related to complex mental health issues which affect the majority of justice-involved women. The correctional environment can exacerbate these issues." Article describes a guide for nurses in the correctional environment to educate, empathize, explain and empower traumatized incarcerated women.

Wolfman M, Brown D, Jose P.

Talking past each other: Interviewer and child verbal exchanges in forensic interviews.

Law Hum Behav. 2016 Apr;40(2):107-17. PMID: [26844909](#)

Discussion of communication mis-steps between forensic interviewers and children being interviewed for possible sexual abuse.

Providers

Kalmakis KA, Chandler GE, Roberts SJ, Leung K.

Nurse practitioner screening for childhood adversity among adult primary care patients: A mixed-method study.

J Am Assoc Nurse Pract. 2017 Jan;29(1):35-45. PMID: [27221514](#)

Of 188 NPs, barriers to inquiry of adult patients about history of childhood abuse included lack of time and lack of confidence.

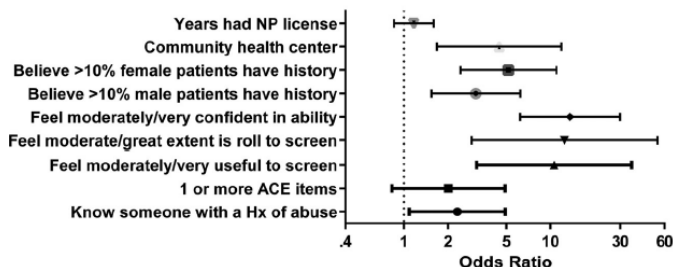


Figure 1 Odds ratios for usually/always screen for a history of childhood abuse.

Strait J, Bolman T.

Consideration of Personal Adverse Childhood Experiences during Implementation of Trauma-Informed Care Curriculum in Graduate Health Programs.

Perm J. 2017;21. pii: 16-061. PMID: [27673708](#)

From a survey of 967 graduate students from 9 health professions programs who received training focused on ACEs and trauma-informed care (TIC), "students and future health care practitioners voluntarily assessing their ACE Score are significantly more likely to understand the scientific and clinical findings of the ACE Study and TIC."

Xiao CL, Gavrilidis E, Lee S, Kulkarni J.

Do mental health clinicians elicit a history of previous trauma in female psychiatric inpatients?

J Ment Health. 2016 Aug;25(4):359-365. PMID: [26850075](#)

In a retrospective analysis of 100 Australian female mental health outpatient charts, in 51% there was no mention of whether or not the patient had a trauma/abuse history. If a trauma/abuse history was documented, in only 3% was a specific description provided.

Teeuw AH, Sieswerda-Hoogendoorn T, Sangers EJ, et. al.

Results of the implementation of a new screening protocol for child maltreatment at the Emergency Department of the Academic Medical Center in Amsterdam.

Int Emerg Nurs. 2016 Jan;24:9-15. [26067096](#)

Adding a fully undressed "top to toe" physical inspection to a Dutch protocol for suspected child maltreatment was only mildly successful and declined significantly with time.

Wilkins GG, Ball J, Mann NC, Nadkarni M, Meredith JW.
Increased Screening for Child Physical Abuse in Emergency Departments in a Regional Trauma System: Response to a Sentinel Event.

J Trauma Nurs. 2016 Mar-Apr;23(2):77-82. PMID: [26953535](#)
This article includes an algorithm for child protection in the hospital after abuse has been identified. The sentinel event was physical abuse of a child while in a curtained private area of the NICU, in a child whose presenting complaint was not originally associated with abuse. In addition to child abuse screening/identification, policies need to be in place for increased protection of identified children while hospitalized.

Paterno MT, Draughon JE.
Screening for Intimate Partner Violence.

J Midwifery Womens Health. 2016 May;61(3):370-5. PMID: [26990666](#)
“IPV screening best practices include using a systematic protocol, developing a screening script, using a validated screening tool, and considerations for privacy and mandatory reporting. Responding to a positive screen should include acknowledging the experience, asking if the woman desires help, offering support and referrals, encouraging safety planning, and completing additional assessments to determine level of danger and to identify any comorbidities.”

Gregory A, Feder G, Taket A, Williamson E.
Qualitative study to explore the health and well-being impacts on adults providing informal support to female domestic violence survivors.

BMJ Open. 2017 Mar 24;7(3):e014511. PMID: [28341690](#)
From interviews with friends, colleagues and relatives who had provided informal support to someone experiencing IPV, these supporters experienced substantial secondary traumatic stress. Authors note there are no direct services to support this group.

Valentine JL, Shaw J, Lark A, Campbell R.
Now We Know: Assessing Sexual Assault Criminal Justice Case Processing in an Urban Community Using the Sexual Assault Nurse Practitioner Evaluation Toolkit.

J Forensic Nurs. 2016 Jul-Sep;12(3):133-40. PMID: [27496646](#)
Case report of the use of a SANE Evaluation Toolkit, which provides step-by-step directions and an easy-to-use statistical program to assess criminal case outcomes. In one example, the kit revealed that only 6% of adult sexual assault cases were successfully prosecuted. The dissemination of this evaluation resulted in extensive community discussion, media attention, and a call to action.

van Toledo A, Seymour F.
Caregiver Needs Following Disclosure of Child Sexual Abuse.
J Child Sex Abus. 2016 May-Jun;25(4):403-14. PMID: [27266536](#)

From surveys of 60 New Zealand families who accessed a parenting support pilot program for families with child sexual abuse victims, “Caregivers identified a range of impacts of the disclosure on their children, themselves, and other family members...In particular, caregivers identified that they needed support with child behavior management and with their own coping.”

Prevention

Ortiz R, Sibinga EM.
The Role of Mindfulness in Reducing the Adverse Effects of Childhood Stress and Trauma.

Children (Basel). 2017 Feb 28;4(3). PMID: [28264496](#)
Review of the benefits of mindfulness in the context of adverse childhood experiences, suggesting benefits for mitigating the negative effects of stress and trauma, and potentially reducing poor health outcomes in adulthood.

Researchers

Hoft M, Haddad L.
Screening Children for Abuse and Neglect: A Review of the Literature.

J Forensic Nurs. 2017 Jan/Mar;13(1):26-34. PMID: [28212197](#)
“This literature review provides information for identifying children who have been abused and neglected but exposes the need for a comprehensive screening instrument or protocol that will capture all forms of child abuse and neglect. Screening needs to be succinct, user-friendly, and amenable for use with children at every point of care in the healthcare system.”

Crichton KG, Cooper JN, Minneci PC, et. al.
A national survey on the use of screening tools to detect physical child abuse.

Pediatr Surg Int. 2016 Aug;32(8):815-8. PMID: [27385110](#)
From a web-based survey of 103 children’s hospitals, 13% reported using a screening tool for child physical abuse. “While few respondents endorsed use of a ST for physical abuse, most believed that it increased detection of abuse. Future research should focus on development of a brief, uniform ST for physical abuse.”

Satapathy S, Choudhary V, Sagar R.

Tools to assess psychological trauma & its correlates in child sexual abuse: A review & current needs in Asia.

Asian J Psychiatr. 2017 Feb;25:60-73. PMID: [28262176](#)

From a review of child trauma assessment tools, “52 scales were obtained and analysed in terms of scale characteristics, reference to theory and DSM, and cultural competency. Despite of a wide variety of methods, and newer instruments, many of the traditionally used techniques of child’s internal thinking and emotional assessment appear outdated while reviewing the recent theories of CSA related psychological trauma. An integrated format, incorporating child-parent-clinician rating, with multiple domain specific items and verbal and non-verbal tasks, is the current need.”

Fagerlund M, Ellonen N.

Children’s Experiences of Completing a Computer-Based Violence Survey: Finnish Child Victim Survey Revisited.

J Child Sex Abus. 2016 Jul;25(5):556-76. PMID: [27472509](#)

From a Finnish online sexual victimization survey of 11,364 adolescents, 69% reflected free text comments about the effect taking the survey had on them. Article discusses positive and negative feelings in relation to victimized vs. non-victimized children, gender and age.

Lewin LC, Schim SM.

Development of a Child Abuse Level Management (CALM) Guide for Research with Young Children.

Appl Nurs Res. 2016 May;30:276-9. PMID: [26588859](#)

Description of the rationale for the development of a research protocol guide, Child Abuse Level Management (CALM), which addresses protection of children in research.

Tarzia L, Valpied J, Koziol-McLain J, Glass N, Hegarty K.

Methodological and Ethical Challenges in a Web-Based Randomized Controlled Trial of a Domestic Violence Intervention.

J Med Internet Res. 2017 Mar 28;19(3):e94. PMID: [28351830](#)

Authors discuss methodological and ethical issues during recruitment, retention, and evaluation of randomized controlled trials conducted online relating to abuse.

Woodyatt CR, Finneran CA, Stephenson R.

In-Person Versus Online Focus Group Discussions: A Comparative Analysis of Data Quality.

Qual Health Res. 2016 May;26(6):741-9. PMID: [26935719](#)

Analyzing results of in-person vs. online focus groups, content received was very similar, but sensitive topics were discussed more candidly in the online group.

Other of Interest

Schlegelmilch J, Petkova E, Martinez S, Redlener I.

Acts of terrorism and mass violence targeting schools : Analysis and implications for preparedness in the USA.

J Bus Contin Emer Plan. 2017 Jan 1;10(3):280-289. PMID: [28282019](#)

This paper looks at “the trends in acts of terrorism and mass violence carried out against schools, and provides recommendations for domestic school preparedness based on this information.”

Gravningen K, Mitchell KR, Wellings K, et. al.

Reported reasons for breakdown of marriage and cohabitation in Britain: Findings from the third National Survey of Sexual Attitudes and Lifestyles (Natsal-3).

PLoS One. 2017 Mar 23;12(3):e0174129. PMID: [28333973](#)

From a national survey of 15,162 British individuals aged 16-74 years, 10.9% of men and 14.1% of women reported live-in partnership breakdown in the past 5 years. Regarding reasons for leaving a relationship, 16% of women and 4% of men cited domestic violence.

Caspi A, Houts RM, Belsky DW, et. al.

Childhood forecasting of a small segment of the population with large economic burden.

Nature Human Behav 2016 Dec:e0005.

<https://www.nature.com/articles/s41562-016-0005>

From a longitudinal study of a New Zealand birth cohort, 22% of the group accounted for a large percentage of social and financial burden across 8 areas (see graph below). Childhood risks, including childhood maltreatment, “predicted this segment with large effect sizes. Early-years interventions that are effective for this population segment could yield very large returns on investment.”

