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Child Abuse

Rodriguez CM, Lee SJ, Ward KP, Pu DF.

The Perfect Storm: Hidden Risk of Child Maltreatment During the Covid-19 Pandemic.

Child Maltreat. 2021 May;26(2):139-151. PMID: [33353380](#)

In two pandemic-related studies, parents reported increased parent-child conflict, which contained concurrent child abuse and neglect risk, and which were associated with parental perceived stress, loneliness, employment loss, and food insecurity. "Findings are discussed in the context of a reactive welfare system rather than a pro-active public-health oriented approach to child maltreatment."

Legano LA, Desch LW, Messner SA, et. al.

Maltreatment of Children with Disabilities.

Pediatrics. 2021 Apr 19:e2021050920. PMID: [33875536](#)

This updated clinical report from the American Academy of Pediatrics includes guidance on identification and intervention, resources, and prevention strategies. "Children with disabilities are a vulnerable population at increased risk of child abuse and neglect...Children with milder forms of disability are at higher risk of abuse and neglect than more profoundly affected children. Certain types of disabilities are associated with different forms of abuse."

Harper NS, Eddleman S, Shukla K, et. al.

Radiologic Assessment of Skull Fracture Healing in Young Children.

Pediatr Emerg Care. 2021 Apr 1;37(4):213-217. PMID: [32868623](#)

"Healing or resolution of a skull fracture can take months in children younger than 24 months. With the high variability in skull fracture presentation and large window to fracture resolution, unexplained or multiple skull fractures in children younger than 24 months may be the result of a single or multiple events of head trauma."

Weldy E, Shimoda A, Patnaik J, Jung J, Singh J.

Long-term visual outcomes following abusive head trauma with retinal hemorrhage.

J AAPOS. 2019 Dec;23(6):329.e1-329.e4. PMID: [31655114](#)

In follow-up of 96 children seen with abusive head trauma and retinal hemorrhages at one children's hospital, 46% had abnormal vision for the given age in at least one eye, 21% required eye muscle surgery, and 3% retinal surgery.

Ruiz-Maldonado TM, Johnson KL, Sabo JL, et. al.

Palm Bruising in Infants: A Recognizable Pattern of Abuse.

J Emerg Med. 2021 Mar 29:S0736-4679(21)00153-0. PMID: [33795168](#)

Authors newly describe an 11-case series of physical abuse in infants <6 months old, in which the fingers/hand is hyperflexed and squeezed, giving a certain pattern of bruising on the palm and fingers. Frustration with infant crying was a cited cause. Abusive caregivers sometimes attributed injuries to the child tightly making a fist, but infants are not strong enough to cause these injuries. Some infants had additional findings of physical abuse.



Qin X, Melvin AJ.

Laboratory Diagnosis of Sexually Transmitted Infections in Cases of Suspected Child Sexual Abuse.

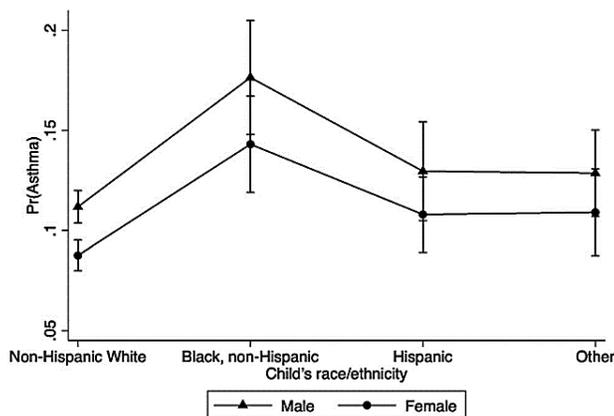
J Clin Microbiol. 2020 Jan 28;58(2):e01433-19. PMID: [31723015](#)

Detailed review of specific rapid tests for sexually transmitted infections in suspected child sexual abuse. [Full text.](#)

Panisch LS, Baiden P, Findley E, Jahan N, LaBrenz CA.
Examining the Association Between Adverse Childhood Experiences and Asthma Among Children in the United States: The Intersection of Sex and Race/Ethnicity.

J Asthma. 2021 Mar 30;1-15. PMID: [33783306](#)

Of 49,000 children aged 0-17 years, 11.5% of children had asthma, 42% had at least one ACE, and 9.7% had 3+ ACEs. Controlling for other factors, children with 3+ ACEs had 1.45 times higher odds of having asthma compared to children with no ACEs. There was also a sex and race/ethnicity effect, with increases for males and Black race.



Ehrlich KB, Miller GE, Rogosch FA, Cicchetti D.
Maltreatment exposure across childhood and low-grade inflammation: Considerations of exposure type, timing, and sex differences.

Dev Psychobiol. 2021 Apr;63(3):529-537. PMID: [32896910](#)

Of 155 low-income children aged 8-12, half of whom had been exposed to maltreatment, blood samples showed that maltreatment exposure was associated with higher inflammation for girls but not boys, and greater for those girls who experienced maltreatment across multiple time points. Highest inflammation was found for girls whose first maltreatment onset was before age 5.

Puetz VB, Viding E, Gerin MI, et. al.
Investigating patterns of neural response associated with childhood abuse and childhood neglect.

Psychol Med. 2020 Jun;50(8):1398-1407. PMID: [31190662](#)

Compared to a control group, brain scans of adults who experienced abuse showed increased reactivity in a particular area of the brain involving emotions such as fear, whereas those who experienced neglect showed increased reactivity more widely in parts of the brain dealing with complex social and thought processing. Unexpectedly, those with a history of both abuse and neglect showed decreased activity in both thinking and emotion areas of the brain.

Winters GM, Colombino N, Schaaf S, et. al.
Why do child sexual abuse victims not tell anyone about their abuse? An exploration of factors that prevent and promote disclosure.

Behav Sci Law. 2020 Dec;38(6):586-611. PMID: [33251613](#)

Of 76 undergraduate women who had experienced childhood sexual abuse, in approximately 50% the person informally disclosed, and only 10% formally disclosed to authorities.

TABLE 2 Victim's self-report reasons for not reporting the abuse

Reason	n	%
Shame	29	60.42
Perception that incident was not serious enough	28	58.33
Perceived lack of proof	25	52.08
Self-blame/perceived responsibility	24	50.00
Afraid of negative social reactions	24	50.00
Fear of not being taken being taken seriously	24	50.00
Fear	23	47.92
Intentional avoidance/urge to erase incident from consciousness	22	45.83
Relationship to perpetrator	21	43.75
Fear of causing trouble to perpetrator	21	43.75
Uncertainty of whether crime or harm was intended	20	41.67
Fear of being disloyal to family	17	35.42
Fear of re-victimization	17	35.42
Fear of receiving hostile responses	17	35.42
Disbelief	16	33.33
Fear of reprisal	16	33.33
Fear of being viewed as victim	15	31.25
Blame from others	13	27.08
Perceived lack of social support	12	25.00
Forgetting of the incident	11	22.92
Culture/ethnicity-related factors	6	12.50
Fear of losing emotional control	4	8.33
Fear of being viewed as homosexual/not manly	1	2.08
Lack of male-friendly services	0	0.00

Adult Manifestations of Child Abuse

Craner JR, Lake ES.
Adverse Childhood Experiences and Chronic Pain Rehabilitation Treatment Outcomes in Adults.

Clin J Pain. 2021 May 1;37(5):321-329. PMID: [33830091](#)

Of 269 adults participating in an interdisciplinary pain rehabilitation program, 78.5% reported at least 1 ACE, and 43% 3+ ACEs. Those with 3+ ACEs reported more mental health symptoms and difficulties in adjusting to chronic pain, however all ACE groups improved and there were no differences in response to treatment. "This model of treatment may be especially well situated to address the biopsychosocial contributions to pain among those with a history of adversity."

Rentscher KE, Carroll JE, Mitchell C.
Psychosocial Stressors and Telomere Length: A Current Review of the Science.

Annu Rev Public Health. 2020 Apr 2;41:223-245. PMID: [31900099](#)

Thorough review of research and research quality on various psychosocial factors associated with telomere length. The strongest association was found between poorer socioeconomic status and early life adversity and shortened adult TL.

Nguyen JK, Thurston RC.
Association of Childhood Trauma Exposure with Inflammatory Biomarkers Among Midlife Women.

J Womens Health (Larchmt). 2020 Dec;29(12):1540-1546. PMID: [32364816](#)

For 304 nonsmoking women aged 40-60, and controlling for many factors, childhood emotional abuse was associated with higher levels of IL-6 (a blood marker of inflammation).

Mundi MS, Hurt RT, Phelan SM, et. al.
Associations Between Experience of Early Childhood Trauma and Impact on Obesity Status, Health, as Well as Perceptions of Obesity-Related Health Care.

Mayo Clin Proc. 2021 Feb;96(2):408-419. PMID: [33549259](#)
 From a national survey, respondents reporting being a victim of childhood abuse increased significantly with increasing levels of obesity. Obese patients with a history of childhood abuse also reported lower self-esteem, feeling more judged, and less treated with respect by their health care providers.

Lindsay KL, Entringer S, Buss C, Wadhwa PD.
Intergenerational transmission of the effects of maternal exposure to childhood maltreatment on offspring obesity risk: A fetal programming perspective.

Psychoneuroendocrinology. 2020 Jun;116:104659. PMID: [32240906](#)

Authors present a detailed physiological framework for thinking about the effects of maternal childhood maltreatment on obesity risk in children.

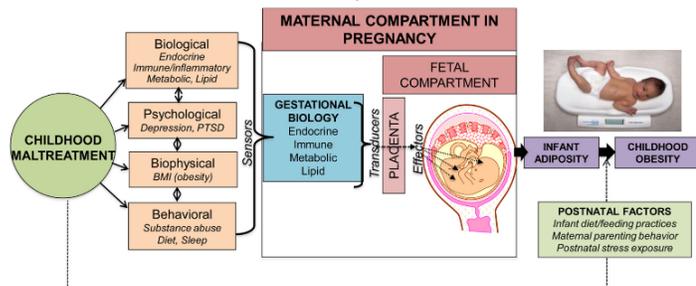


Fig. 1. Intergenerational transmission during gestation of the effects of maternal exposure to childhood maltreatment: a conceptual framework.

Stickley A, Waldman K, Sumiyoshi T, et. al.

Childhood physical neglect and psychotic experiences: Findings from the National Comorbidity Survey Replication.

Early Interv Psychiatry. 2021 Apr;15(2):256-262. PMID: [32048480](#)

From a large national survey, childhood physical neglect was associated with significantly increased odds of lifetime psychotic episodes (losing touch with reality) in the general population, especially for being unsupervised, going without medical care, or doing chores that were too difficult/dangerous.

Etain B, Aas M.
Childhood Maltreatment in Bipolar Disorders.

Curr Top Behav Neurosci. 2021;48:277-301. PMID: [32653999](#)

“We will review how childhood maltreatment and trauma not only predispose to the development of bipolar disorder but also to a more unstable, pernicious, and severe clinical expression of the disorder...We will also review how childhood maltreatment may modify the brain functioning and circuits and alter some biological pathways.”

Tang S, Jones CM, Wisdom A, Lin HC, Bacon S, Houry D.
Adverse childhood experiences and stimulant use disorders among adults in the United States.

Psychiatry Res. 2021 Mar 13;299:113870. PMID: [33780857](#)
 From a large national study, authors found a strong relationship between increasing ACE exposures and stimulant use and use disorders (amphetamine-type stimulants and cocaine).

Weetman C, Kiemle G, Lowe M, Balfour R.
The Experience of Partner Relationships for Male Survivors of Childhood Sexual Abuse: A Qualitative Synthesis.

Trauma Violence Abuse. 2021 Mar 17:1524838021998311. PMID: [33729052](#)

“Key findings were that male childhood sexual abuse survivors can face considerable barriers to relational intimacy; however, romantic relationships also offer a space to heal and experience post-traumatic growth.”

Adolescents

Wood L, Voth Schrag R, Busch-Armendariz N.
Mental health and academic impacts of intimate partner violence among IHE-attending women.

J Am Coll Health. 2020 Apr;68(3):286-293. PMID: [30557086](#)

Of 6,818 female undergraduates, since enrollment 31% had experienced IPV. “Significant correlations were observed between severity of IPV and extent of PTSD, depression, school disengagement, and academic impacts.”

Hawkins MAW, Layman HM, Ganson KT, et. al.
Adverse childhood events and cognitive function among young adults: Prospective results from the national longitudinal study of adolescent to adult health.

Child Abuse Negl. 2021 May;115:105008. PMID: [33706023](#)

From a large national survey, "Higher ACEs, especially deprivation-type, were prospectively linked to poorer cognition [immediate and delayed verbal memory, and working memory]. Early wide-scale screening/tailored treatments addressing ACEs and cognitive function may be warranted."

Hazzard VM, Ziobrowski HN, Borg SL, et. al.
Past-Year Abuse and Eating Disorder Symptoms Among U.S. College Students.

J Interpers Violence. 2021 Apr 1:8862605211005156. PMID: [33794702](#)

"In summary, past-year emotional abuse emerged as a key correlate of all eating disorder symptoms examined in this sample of 10,204 U.S. college students, while past-year sexual abuse also emerged as a key correlate of shape/weight overvaluation and purging. Findings emphasize the need to screen for abuse and implement abuse prevention efforts on college campuses."

Domestic Violence – Effects on Children

Gartland D, Conway LJ, Giallo R, et. al.

Intimate partner violence and child outcomes at age 10: a pregnancy cohort.

Arch Dis Child. 2021 Apr 21:archdischild-2020-320321. PMID: [33883191](#)

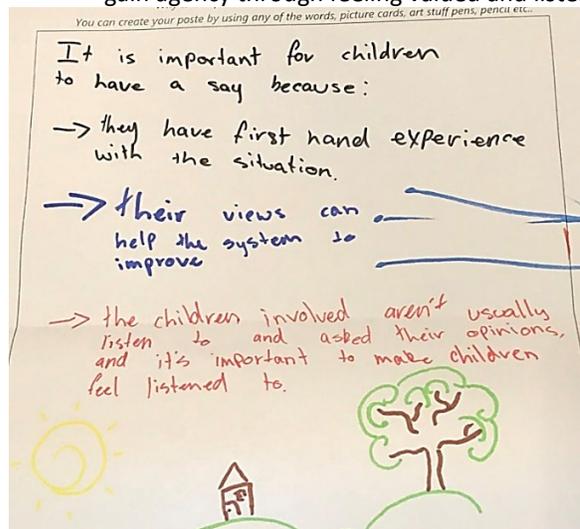
For 615 Australian mother and child dyads followed from birth to age 10, "Any IPV exposure from infancy to age 10 was associated with poorer child outcomes at age 10. Specifically, twice the odds of a probable psychiatric diagnosis, emotional/behavioural difficulties, impaired language skills, and having consulted a health professional about asthma or sleep problems...Fewer difficulties where exposure was limited to the early years builds the case for better identification, understanding and resourcing of effective early intervention."

Stafford L, Harkin JA, Rolfe A, Burton J, Morley C.
Why having a voice is important to children who are involved in family support services.

Child Abuse Negl. 2021 May;115:104987. PMID: [33725537](#)

"Emergent themes that the study identified, namely: each child has their own unique knowledge

and insights; children are part of the family so they should be recognized and should have a say; expressing their needs leads to them and their families getting required help and support; children gain agency through feeling valued and listened to."



Domestic Violence – Physical Health

Khurana B, Sing D, Gujrathi R, et. al.

Recognizing Isolated Ulnar Fracture as a Potential Marker for Intimate Partner Violence.

J Am Coll Radiol. 2021 Apr 3:S1546-1440(21)00228-3. PMID: [33823142](#)

In a chart review from 3 level-1 trauma centers, "Up to one-third of adult women with isolated ulnar fractures [lower arm bone] may be IPV victims."

Jónasdóttir D, Thorsteinsdóttir T, Ásgeirsdóttir TL, et. al.
Women and intimate partner violence: Prevalence of hospital visits and nature of injuries in the Icelandic population.

Scand J Public Health. 2021 May;49(3):260-267. PMID: [32308135](#)

Of visits to one Icelandic hospital 2005-2014 from women subjected to IPV, average age 34 years, prevalence 1.69 per 1000 women, 92.6% were seen in the Emergency Department, and 3.2% were admitted. Injuries were mostly minor (92.4%), and mostly located on the upper body (64.3%). "The majority of injuries were superficial (76.2%) and punching (29.7%), shoving (17.8%), kicking (10.5%) and attempted strangulation (9.8%) were the most common types of aetiology. Repeated visits were 37.8%."

Schemitsch C, Nauth A.

Psychological factors and recovery from trauma.

Injury. 2020 May;51 Suppl 2:S64-S66. PMID: [31676072](#)

“Recent research has identified a high prevalence of psychological illnesses in patients who have sustained orthopaedic [bone and joint] trauma. Depressive symptoms in this patient population have been reported to range from 13% to as high as 56%. Moreover, symptoms of depression, catastrophic thinking, and post-traumatic stress disorder (PTSD), have been consistently shown to negatively impact patient outcomes following treatment for their traumatic injuries...increased levels of pain, disability, and complications throughout their recovery...More research which evaluates the significant impact of psychological and social factors on recovery from trauma is needed.”

Domestic Violence – Mental Health

Jackson DB, Lynch KR, Testa A.

Intimate partner violence, firearms, and sleep disturbances: The influence of coercive control and partner firearm ownership.

Sleep Health. 2020 Dec;6(6):723-730. PMID: [32684488](#)

From surveys of 215 women recruited from domestic violence shelters, “Coercive control appears to be central to the sleep health of IPV victims, and partner gun ownership may represent an additional risk factor for sleep disturbances beyond experiences of abuse.”

Elder/Dependent Adult Abuse

Cimino-Fiallos N, Rosen T.

Elder Abuse-A Guide to Diagnosis and Management in the Emergency Department.

Emerg Med Clin North Am. 2021 May;39(2):405-417. PMID: [33863468](#)

“Older adults exposed to abuse are more likely to utilize the ED and to require hospitalization. They experience higher morbidity and mortality than older adults who do not experience mistreatment.” This review article covers signs, symptoms, screening tools, and subsequent management.

Box 1

Observations from older adult/caregiver interaction that should raise concern for elder abuse or neglect

- Older adult and caregiver provide conflicting accounts of events
- Caregiver interrupts/answers for the older adult
- Older adult seems fearful of or hostile toward caregiver
- Caregiver seems unengaged/inattentive in caring for the older adult
- Caregiver seems frustrated, tired, angry, or burdened by the older adult
- Caregiver seems overwhelmed by the older adult
- Caregiver seems to lack knowledge of the patient's care needs
- Evidence that the caregiver and/or older adult may be abusing alcohol or illicit drugs

Data from Rosen, Tony, et al. Identifying and initiating intervention for elder abuse and neglect in the emergency department. Clinics in geriatric medicine 2018;34(3): 435-451.

Box 2

Injury patterns concerning for nonaccidental trauma

- Injuries in the maxillofacial, dental, and neck areas and the upper extremities⁵
- Injuries to the head and neck without injury to other parts of the body—a fall usually results in other signs of injury to extremities, back, or trunk.⁴⁴
- Neck injuries—the head and shoulders typically protect the neck from injury in a fall.⁴⁴
- Ear injuries—ear injuries typically are not seen in falls and are very concerning for nonaccidental trauma.⁴⁴
- Left-sided facial injuries—many abusers are right-handed and punches or hits affect the left side of the victim's face.⁴⁴
- Ligature marks²⁴
- Bruises larger than 5 cm or in the shape of objects³⁸

Wong JS, Breslau H, McSorley VE, et. al.

The Social Relationship Context of Elder Mistreatment.

Gerontologist. 2020 Aug 14;60(6):1029-1039. PMID: [31688922](#)

From a national survey, “Self-reported lifetime prevalence of elder mistreatment is as high as 21%, depending on the mistreatment behavior measured...12% of older adults experienced multiple types of mistreatment (polyvictimization), and 6% experienced primarily financial mistreatment...the most commonly reported perpetrators are children and relatives.”

Altendorf A, Draper B, Wijeratne C, Schreiber J, Kanareck D.

Neglect of Older People: Touching on Forensic and Pathophysiological Aspects.

Gerontologist. 2020 Aug 14;60(6):e449-e465. PMID: [31348828](#)

“Neglect is associated with poor physical, psychological, and mental health. Neglect can be a direct cause of death or contribute to a fatal outcome by exacerbating existing conditions.” Red flags of neglect included malnutrition, dehydration, poor hygiene, untreated skin ulcers and tendon shortening due to lack of movement while bedridden, hypothermia, and an uncooperative caregiver. “However, incontrovertible evidence of neglect is not always easy to obtain due to age and disease-related changes.”

Rowan JM, Yonashiro-Cho J, Wilber KH, Gassoumis ZD.

Who is in the revolving door? Policy and practice implications of recurrent reports to adult protective services.

J Elder Abuse Negl. 2020 Nov-Dec;32(5):489-508. PMID: [33308080](#)

From one California APS country program over 3 years, 19.9% of APS reports were recurrent, with self-neglect being the most common type of report to recur. Overall recurrence was predicted by female gender, older age, living alone, and multiple abuse types reported at baseline.

Fang B, Yan E, Tung K, Liu Z, Ip P.

Association between elder abuse and telomere shortening in older adults: A 2-year prospective study.

Int J Geriatr Psychiatry. 2021 Jan;36(1):54-63. PMID: [32748415](#)

For 300 abused and 300 not abused Chinese elders assessed at a two-year interval, "Adjusting for demographic, medical, and behavioral confounders, physical and psychological abuse exposure at baseline were independently associated with shorter TL [telomere length, a measure of cellular aging] at follow-up. The association was most significant between multiple forms of abuse (physical and psychological) and shorter TL."

Chopin J, Beauregard E.

Elderly Sexual Abuse: An Examination of the Criminal Event.

Sex Abuse. 2020 Sep;32(6):706-726. PMID: [31010404](#)

From a French police database comparing sex crimes against the elderly vs. other adults, sex crimes against the elderly occurred more often in the victim's residence, did not involve a weapon, and were more violent. Some explanations for these findings include the possibility that this act is a means of revenge for anger against the perpetrator's mother, leading to more violence; or that violence and the lack of a weapon reflect a more spontaneous act without planning and with lack of control; or that a weapon was not considered needed due to elder frailty; or that the location of the victim's home was chosen due to the added advantage of related burglary.

Myhre J, Saga S, Malmedal W, Ostaszkiwicz J, Nakrem S.

React and act: a qualitative study of how nursing home leaders follow up on staff-to-resident abuse.

BMC Health Serv Res. 2020 Dec 1;20(1):1111. PMID: [33261610](#)

"Nursing home leaders need to be clear about how they should follow up incidents of elder abuse on different levels in the organisation and about their role in preventing elder abuse. Evaluation tools that

facilitate systematic organisational learning are needed."

LGBTQ Concerns

Wolfe HL, Biello KB, Reisner SL, et. al.

Transgender-related discrimination and substance use, substance use disorder diagnosis and treatment history among transgender adults.

Drug Alcohol Depend. 2021 Apr 15;223:108711. PMID: [33866073](#)

Of 600 Northeastern transgender adults, there was a significant positive association between experiencing high levels of transgender-related discrimination and substance use – having a substance use disorder diagnosis, having received treatment, and higher past 12-month substance use.

Race/Cultural Concerns

Austin JM, Weeks K, Pronovost PJ.

Health System Leaders' Role in Addressing Racism: Time to Prioritize Eliminating Health Care Disparities.

Jt Comm J Qual Patient Saf. 2021 Apr;47(4):265-267. PMID: [33339750](#)

Per authors, key steps that health system leaders should take to identify and eliminate health care disparities include: to recognize that health care disparities exist in every health system and are system failures that occur at many levels, similar to other quality gaps that require system-based fixes; to declare that this work is important and that leadership will be held accountable; to be transparent with disparities and report them as part of their standard set of quality metrics; and to commit to increasing the diversity of senior leadership and those on the front lines.

Curtis DS, Washburn T, Lee H, et. al.

Highly public anti-Black violence is associated with poor mental health days for Black Americans.

Proc Natl Acad Sci U S A. 2021 Apr 27;118(17):e2019624118. PMID: [33875593](#)

From 2012 through 2017, Black respondents to a weekly behavioral risk factor surveillance system showed significantly more poor mental health days during weeks with two or more racial incidents relative to none; these events did not predict poor mental health days among White respondents.

Giovanelli A, Reynolds AJ.

Adverse childhood experiences in a low-income black cohort: The importance of context.

Prev Med. 2021 Apr 12:106557. PMID: [33857559](#)

For a group of Black Chicago youth followed since 1980, rates of ACEs-C [conventional ACEs] increased over the course of childhood and adolescence, with higher rates of ACEs-E [expanded ACEs including family financial problems; witness or victim of violent crime; death of a parent, relative or close friend; and out of home placement] reported by males. 1/5 of participants only reported ACEs-E, which are often not measured. "ACEs can have enduring impacts, but it is difficult to illuminate prevention and intervention strategies if adversity is not accurately assessed. Findings support the need for novel, comprehensive tools for measurement of adversity, particularly in impoverished settings."

Natal M.

Intimate Partner Violence Experiences Among Puerto Rican Mothers.

J Interpers Violence. 2021 Apr 11:886260520944556. PMID: [33843332](#)

In this small focus group of Puerto Rican mothers experiencing IPV, "All had multiple previous encounters with law enforcement but were afraid and ashamed to disclose the IPV. Lack of disclosure was associated with Hispanic cultural values and norms that included collectivism or keeping group cohesiveness, familism that socially emphasizes the family unit, marianismo as an ascribed female gender role of self-sacrifice and caregiving, and threats that their children would be removed from the home. Most of the women did not have knowledge of resources available to them and wanted to keep the family unit together. All believed they would be blamed for the incidents."

Sexual Assault

Foubert JD, Clark-Taylor A, Wall AF.

Is Campus Rape Primarily a Serial or One-Time Problem? Evidence From a Multicampus Study.

Violence Against Women. 2020 Mar;26(3-4):296-311. PMID: [30880639](#)

From a survey of 12,624 college men at 49 community and 4-year colleges, "More than 87% of alcohol-involved sexual assault was committed by serial perpetrators. Fraternity men and student athletes were significantly more likely to commit alcohol-involved sexual assault than other men on campus."

Papp LJ, McClelland SI.

Too Common to Count? "Mild" Sexual Assault and Aggression among U.S. College Women.

J Sex Res. 2021 May;58(4):488-501. PMID: [32615816](#)

From focus groups with 36 college women at a large midwestern public university, "women described routine experiences of 'mild' sexual assault and aggression, so common that often only imprecise counts of their frequency (e.g., 'all the time') were possible. Our findings document the many forms and frequencies of 'mild' assault and aggression in college women's lives, as well as the limits of campus climate surveys in measuring the mundane sexual mistreatment of women in campus life."

Human Trafficking

Sheu JC, Torres MIM, Gordon MR, Nguyen PT, Coverdale JH. **Potential Impact of Climate Change on Human Trafficking: A Narrative Review.**

J Nerv Ment Dis. 2021 May 1;209(5):324-329. PMID: [33835952](#)

"We review the potential impact of climate change on risk factors to human trafficking including poverty, gender inequality, political instability, migration or forced displacement, and weather disasters. We conclude that climate change is a crucially important consideration in understanding the complex and multifactorial risks for human trafficking."

Greenbaum J.

A Public Health Approach to Global Child Sex Trafficking.

Annu Rev Public Health. 2020 Apr 2;41:481-497. PMID: [32237991](#)

Although traditionally human trafficking has been treated as a law enforcement problem, a public health approach "promotes strategies to build a solid scientific evidence base that allows development, implementation, and evaluation of prevention and intervention efforts, informs policy and program development, and guides international efforts at eradication."

Table 1 Risk factors for child sex trafficking and sexual exploitation

Individual-level factors	Relationship-level factors	Community-level factors	Societal-level factors
"Stree" children, homeless, runaway	Family dysfunction (violence, substance abuse, etc.)	Natural disasters/social upheaval	Gender-based violence and bias
Prior abuse/neglect	Poverty and unemployment	High levels of violence	Strict gender roles for males
LGBTQ+ status	Migration	Corruption of officials	Cultural beliefs/stigma
Substance abuse	Bullying and ostracism	Drug use and sales	Racial, ethnic, religious, sexual, and cultural bias/discrimination
Marginalized status due to discrimination	Gang affiliation	Increased travelers, tourists	Lack of effective antitrafficking laws/policies
Limited education	Limited education	Mass migration	Low recognition of child rights
	Abandonment by husband or loss of caregiver	Commercial sex in area	

Perpetrators

Dietz P.

Denial and minimization among sex offenders.

Behav Sci Law. 2020 Dec;38(6):571-585. PMID: [33230865](#)
 “Denial of offenses and minimization of offending behavior are quite common at every stage of the criminal justice process. This is true during police interviews, during pretrial and presentencing mental health evaluations, among incarcerated offenders, among offenders seeking treatment, among offenders facing parole review, and among offenders already released into the community ...many sex offenders maintain their innocence in the face of evidence to the contrary or even criminal conviction, and many are able to recite additional crimes they have committed when they believe it is in their self-interest to do so.”

Buitelaar NJL, Posthumus JA, Bijlenga D, Buitelaar JK.

The Impact of ADHD Treatment on Intimate Partner Violence in a Forensic Psychiatry Setting.

J Atten Disord. 2021 May;25(7):1021-1031. PMID: [31619111](#)
 Of 209 offenders of IPV with ADHD, treatment for both resulted in a significant decrease in self-reported ADHD symptoms, as well as all IPV outcomes.

Shorey RC, Fite PJ, Menon SV, et. al.

The Association Between PTSD Symptoms and IPV Perpetration Across 6 Years.

J Interpers Violence. 2021 May;36(9-10):NP5340-NP5361. PMID: [30238845](#)

A sample of 1042 racially and ethnically diverse high school students were assessed annually for 6 years in Southeastern Texas. “PTSD symptoms were associated with IPV perpetration across time from adolescence to young adulthood. Prevention and intervention programs...may benefit from screening for, and potentially treating, PTSD symptoms.”

Police and Court Systems

Tozzo P, Gabbin A, Politi C, Da Pian M, Caenazzo L, Causin V.

Combined Statistical Analyses of Forensic Evidence in Sexual Assault: A Case Report.

J Forensic Sci. 2020 Sep;65(5):1767-1773. PMID: [32615002](#)
 In this case report of sexual assault wherein the victim was unable to remember details and no sperm or male DNA were found, identification of condom residue on vaginal swabs and other collected evidence allowed event reconstruction.

Providers

Green JS, Brummer A, Mogg D, Purcell J.

Sexual Assault Nurse Examiner/Forensic Nurse Hospital-based Staffing Solution: A Business Plan Development and Evaluation.

J Emerg Nurs. 2021 Apr 21:S0099-1767(21)00078-7. PMID: [33892950](#)

This paper “provides an example for assessment, construction, implementation, and evaluation of a business plan for a sustainable sexual assault nurse examiner/forensic nurse staffing solution” for a network of hospitals.

Notko M, Husso M, Piippo S, Fagerlund M, Houtsonen J.

Intervening in domestic violence: interprofessional collaboration among social and health care professionals and the police.

J Interprof Care. 2021 Mar 3:1-9. PMID: [33657958](#)

“In this study, we examine interprofessional collaboration among Finnish social and health care professionals and police officers...successful interprofessional collaboration requires comprehensive knowledge and education on domestic violence as a phenomenon, on the tasks and the duties of different professionals, as well as tolerance and flexibility in their joint efforts.”

Metheny N, Perri M, Velonis A, et. al.

Evidence for changing intimate partner violence safety planning needs as a result of COVID-19: results from phase I of a rapid intervention.

Public Health. 2021 Mar 4;194:11-13. PMID: [33845272](#)

To address need for modified safety planning during the pandemic, an expert panel created a list of strategies evaluated by 111 IPV survivors, who listed 19 as “highly recommended”.

Safety strategies as recommended by the survey respondents.

Highly recommended ($\mu > 3.0$), very helpful for promoting safety		
Plan for safety	Connect with others	Increase safety online
Duplicate or put aside important papers.	Talk to a doctor or nurse about the abuse.	Delete text, web browser and other online records more frequently.
Keep your phone and keys close by.	Alert a neighbour to the situation.	Change passwords to phone, email, accounts and so on more often.
Create a safety plan with children.	Talk to friends and/or family members.	
Pack an emergency kit.	Reach out to others who have experienced violence (in person or online).	
Create a mental list of potential safe havens.	Access online, virtual or app-based counselling.	
Use distancing techniques in the home.	Have someone call to check in on you regularly.	
Keep a record of incidents of abuse.	Seek out legal advice.	
Consider strategies for keeping pets safe.		
Work out an escape plan.		

Williams WA 2nd, Jain M, Laguna TA, McColley SA.

Preferences for disclosing adverse childhood experiences for children and adults with cystic fibrosis.

Pediatr Pulmonol. 2021 May;56(5):921-927. PMID: [33369260](#)

From a survey of parents (29% participation) and their adult children with cystic fibrosis (34% participation) at a university cystic fibrosis center, only 22% of parents and 17% of adults were willing to disclose specific ACEs, 57% of parents and 47% of adults were willing to disclose total number of ACEs, 76% of parents and 67% of adults were willing to participate in anonymous research about ACEs, and 63% of parents and 50% of adults would prefer ACEs screened separately from medical appointments.

Velonis A, Maddox R, Buhariwala P, et. al.

Asking the Right Questions: Screening Men for Partner Violence.

J Interpers Violence. 2021 Apr 13:8862605211005155. PMID: [33849303](#)

“The findings from this research suggest that the same questions that are useful for identifying violence with women would be acceptable and appropriate for use when screening men...We urge clinicians and others who are considering implementing IPV screening programs or expanding existing ones to familiarize themselves with the services and resources that are available in their communities for survivors of partner violence...regardless of gender.”

Ey LA, Campbell M.

Australian Early Childhood Teachers' Understanding of Bullying.

J Interpers Violence. 2021 Apr 13:8862605211006355. PMID: [33849346](#)

Of 95 Australian early childhood teachers, “teachers described some of the three characteristics of bullying, that is, the intention to harm, power difference, and repetition; however, many teachers had difficulty clearly explaining the distinguishing differences between bullying and fighting.”

Corona LE, Akselberg NJ, Stork BR.

Comment on "The Association Between Adverse Childhood Experiences and Burnout in a Regional Sample of Physicians".

Acad Psychiatry. 2021 Jun;45(3):399-400. PMID: [33851340](#)

In a letter to the editor commenting on a prior article showing an association between physician burnout and number of Adverse Childhood Experiences (ACEs), these authors note their similar study, unpublished, that showed a similar association between physician ACEs and burnout, but only for 3 specific ACEs: were routinely insulted

or afraid (bullied), felt unloved or supported, or lived with a mentally ill household member.

Williams BW, Welindt D, Hafferty FW, et. al.

Adverse Childhood Experiences in Trainees and Physicians With Professionalism Lapses: Implications for Medical Education and Remediation.

Acad Med. 2021 May 1;96(5):736-743. PMID: [32520753](#)

Of 123 cases of US trainees and physicians who had been referred to a center for professionalism issues (boundary violation, disruptive behavior, or potential substance use disorder), 70% reported at least 1 ACE, and 22% reported 4+ ACEs, both higher than the general public. “Remediating individuals with professionalism issues and exposure to ACEs can be complicated by heightened responses to stressful stimuli, difficulties with collaboration and trust, and decreased self-efficacy [belief in one’s ability to successfully manage life situations].”

Prevention

Narayan AJ, Lieberman AF, Masten AS.

Intergenerational transmission and prevention of adverse childhood experiences (ACEs).

Clin Psychol Rev. 2021 Apr;85:101997. PMID: [33689982](#)

“Part I of this review applies risk and resilience concepts to pathways of intergenerational ACEs, highlighting parental PTSD symptoms as a key mediator, and promotive or protective processes that buffer children against intergenerational risk. Part II examines empirical findings indicating that parents' positive childhood experiences counteract intergenerational ACEs. Part III recommends clinically-sensitive screening of ACEs and positive childhood experiences in parents and children. Part IV addresses tertiary prevention strategies that mitigate intergenerational ACEs and promote positive parent-child relationships.”

Doucette H, Collibee C, Rizzo CJ.

A Review of Parent- and Family-based Prevention Efforts for Adolescent Dating Violence.

Aggress Violent Behav. 2021 May-Jun;58:101548. PMID: [33613079](#)

“Prevention efforts for adolescent dating violence (ADV) have largely focused on adolescent-based interventions with little emphasis on parent- and family-based interventions, despite the integral role parents serve in adolescent relationship development. This literature review provides an overview of the existing parent- and family-based intervention efforts for ADV.”

Mennicke A, Kennedy SC, Gromer J, Klem-O'Connor M.
Evaluation of a Social Norms Sexual Violence Prevention Marketing Campaign Targeted Toward College Men: Attitudes, Beliefs, and Behaviors Over 5 Years.

J Interpers Violence. 2021 Apr;36(7-8):NP3999-NP4021.
 PMID: [29936905](#)

“The article evaluates the effectiveness of a 5-year social norms sexual violence prevention marketing campaign designed specifically for men on a large public university in the Southeastern United States...to target highly discrepant attitudes, beliefs, and behaviors. Results indicate that both self-reported and perception of peer attitudes and beliefs improved over time.”

Brown JR, Karikari I, Abraham S, Akakpo T.
Left Off the Route: A Qualitative Examination of Urban Bus Drivers Wanting to be Players in the Bully Prevention Solution.

J Interpers Violence. 2021 Apr;36(7-8):NP4271-NP4295.
 PMID: [29991322](#)

“Being bullied can have long-term negative consequences for both bullies and victims. The school bus has been identified as a potential hot spot for student bullying, wherein bus drivers may see, hear, and respond to several types of bullying on a daily basis that often require support from school officials. However, a bus driver’s ability to intercede effectively in cases of school bus bullying may be limited...bus drivers’ experiences overwhelmingly reflected a lack of both being taken seriously and being included in decision making.”

Table 1. Reported Bus Drivers’ Behavior Management Strategies.

Calling it Out	Rapport Building	Prepraising
“Calling it out as ‘Bullying.’ When I say that’s ‘bullying,’ that stops them.”	“... it helps a lot because it’s not like you are just up there fussing at them— ‘why you doing so and so?’ ... can help sometimes with the fights or the bullying on the bus.”	E.g., “This nice gentleman [student] he will take you.”
Strategic Seating	Projecting Power	Higher Power
“Now what I do. . . I say ‘Okay, you guys the last 8 seats on each side leave them blank.’ . . . they are close together and there is no bickering, no hitting, it’s just quiet.”	“Don’t be a friend because they will lose respect for you.”	“Please don’t let me get a new Johnny that won’t act right. . .”

Noga PM, Dermenchyan A, Grant SM, Dowdell EB.
Developing Statewide Violence Prevention Programs in Health Care: An Exemplar From Massachusetts.

Policy Polit Nurs Pract. 2021 May;22(2):156-164. PMID: [33504282](#)

“Workplace violence is on the rise in health care. This problem contributes to medical errors,

ineffective delivery of care, conflict and stress among health professionals, and demoralizing and unsafe work conditions.” The Massachusetts Health & Hospital Association provides an improvement process roadmap for other organizations.

Table 2. Key Themes From the MHA Survey of Workforce Safety and Violence Prevention Policies.

Violence prevention	<ul style="list-style-type: none"> • Internal workplace violence prevention committee • Annual worksite threat analysis • Comprehensive training program for staff • Patient/visitor code of conduct and policy and procedure for screenings or searches (person and room) • Facility and security preparedness • Program evaluation
Incident management (in the moment)	<ul style="list-style-type: none"> • Response team • Response plan and procedures for managing persons committing acts of violence
Post-incident management	<ul style="list-style-type: none"> • Incident record keeping, documentation, and reporting • Employee support and resources • Incident evaluations

Researchers

Douglas EM, Hines DA, Dixon L, Celi EM, Lysova AV.
Using Technology to Conduct Focus Groups With a Hard-to-Reach Population: A Methodological Approach Concerning Male Victims of Partner Abuse in Four English-Speaking Countries.

J Interpers Violence. 2021 May;36(9-10):NP5257-NP5280.
 PMID: [30226079](#)

“This article addresses recruitment methods, the use of technology in data collection, protecting the confidentiality of victims, methods for informed consent, and lessons learned to facilitate future research” with hard-to-reach groups.

Franchino-Olsen H.
Frameworks and Theories Relevant for Organizing Commercial Sexual Exploitation of Children/Domestic Minor Sex Trafficking Risk Factors: A Systematic Review of Proposed Frameworks to Conceptualize Vulnerabilities.

Trauma Violence Abuse. 2021 Apr;22(2):306-317. PMID: [31096869](#)

Authors discuss different vulnerability framework theories of child sex trafficking, including life-course perspective, ecological model, multilevel model, ecodevelopment model, traumagenic factors, and general strain theory.

Doucette ML, Crifasi CK.

Assessing the Magnitude of Nonworker Deaths During Workplace Homicide Incidents: An Epidemiological Analysis Using the National Violent Death Reporting System (NVDRS).

Workplace Health Saf. 2021 May;69(5):208-215. PMID: [33179585](#)

“Considering nonworkers killed as part of workplace homicide incidents is essential to understanding the true magnitude of violence associated with these incidents...Across the study period, there were 2,020 workplace homicides. The number of deaths associated with workplace homicide incidents increased 8.2% when considering nonworker deaths (n = 2,186). Including those nonfatally shot as part of a workplace homicide incident increased casualties by 18.2% (n = 2,388). If a firearm was used during perpetration, the odds that a nonworker was killed during a workplace homicide incident increased 3.76 times.”

Other of Interest

Chiba H, Lewis M, Benjamin ER, et. al.

"Safer at home": The effect of the COVID-19 lockdown on epidemiology, resource utilization, and outcomes at a large urban trauma center.

J Trauma Acute Care Surg. 2021 Apr 1;90(4):708-713. PMID: [33347094](#)

Data from the largest trauma center in Los Angeles March 20 – June 30, 2020, compared to the prior year same time period, showed “Following the lockdown, there was a reduction in the automobile versus pedestrian admissions by 42.5%, motorcycle injuries by 38.7%, and bicycle accidents by 28.4% but no significant effect on the number of motor vehicle accident admissions. There was an increase in ground level falls by 32.5%, especially in the elderly group. The absolute number of gunshot wounds increased by 6.2% and knife injuries by 39.3%. Suicides increased by 38.5%. Positive testing for substance use increased by 20.9%.”

Harkin D, Molnar A.

Operating-System Design and Its Implications for Victims of Family Violence: The Comparative Threat of Smart Phone Spyware for Android Versus iPhone Users.

Violence Against Women. 2021 May;27(6-7):851-875. PMID: [33843363](#)

“An investigation and analysis of consumer spyware products for smartphones reveals that Android devices are considerably more vulnerable to “stealthy,” non-consensual, and powerful spyware

when compared with iPhones...This is a consequence of the Android operating system being more permissive of software functionality...It raises a need for family violence advocates to engage more with operating-system developers and negotiate greater awareness of how coding choices affect victims of abuse, and what steps can be taken to prevent software infrastructure from being used abusively.”

Himmelstein G, Desmond M.

Association of Eviction With Adverse Birth Outcomes Among Women in Georgia, 2000 to 2016.

JAMA Pediatr. 2021 May 1;175(5):494-500. PMID: [33646291](#)

Of 45,122 mothers in Georgia who had experienced housing eviction, compared to pregnancies not during the actual eviction, eviction during a pregnancy, especially after the first 3 months of pregnancy, was associated with low birth weight and premature birth. These categories of outcomes have been shown to have lifelong and multigenerational consequences.

Roubinov D, Bush NR, Boyce WT.

How a Pandemic Could Advance the Science of Early Adversity.

JAMA Pediatr. 2020 Dec 1;174(12):1131-1132. PMID: [32716499](#)

Authors note that the pandemic could “aid in developing and implementing evidence-based practices that reduce risk and promote resilience within vulnerable families.” While the trauma and unpredictability of the pandemic has added to stressors, many families will also display resilience. Disruption of routines have exposed the importance of factors such as internet access for education; safe, walkable stress and recreational spaces; cross-generational support and childcare; and access to mental health and substance use counseling. Authors suggest that researchers as well as healthcare and community stakeholders may want to take this opportunity to: measure pandemic exposure and disruptions; conduct longitudinal assessments; measure resilience-promoting factors and positive adjustment; assess biological factors; consider the complexity of pandemic-induced consequences; measure caregiver mental health and functioning; collect data that foster the recognition and discussion of health disparities; evaluate prevention and intervention efforts; foster collaborations within the research community; and consider feasible, sensitive, and nonintrusive data collection methods.