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past 2 weeks, and 13.6% were assessed as high risk for suicide...Suicide screening and response at the CAC at the time of the forensic interview appears important and feasible."

Child Abuse

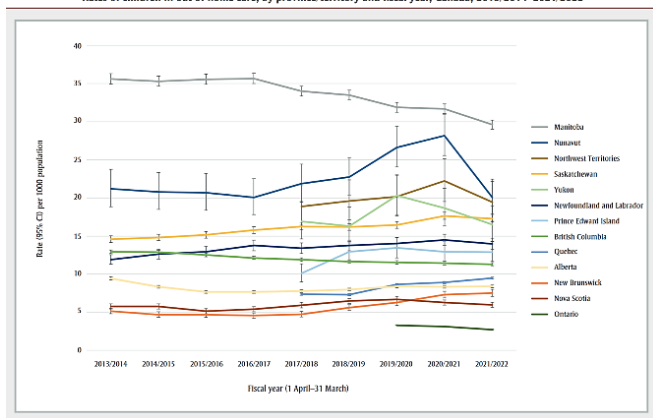
Pollock NJ, Ouédraogo AM, Trocmé N, et al.

Rates of out-of-home care among children in Canada: an analysis of national administrative child welfare data.

Health promotion and chronic disease prevention in Canada. 2024;44(4):152-65. PMID: [38353943](https://pubmed.ncbi.nlm.nih.gov/38353943/)

"An estimated 61 104 children in Canada were in out-of-home care on 31 March 2022. The national rate of out-of-home care was 8.24 children per 1000 population. Rate variations by province/territory were substantial and changed over time. Rates were highest among males and children aged 1 to 3 and 16 to 17 years. Foster homes were the most common type of placement, although kinship homes accounted for an increasing share...administrative data can be used to generate national indicators about children involved in the child welfare system."

Rates of children in out-of-home care, by province/territory and fiscal year, Canada, 2013/2014–2021/2022



Shepard LD, Campbell KA, Byrne KA, Thorn B, Keeshin BR.

Screening for and Responding to Suicidality Among Youth Presenting to a Children's Advocacy Center (CAC).

Child Maltreat. 2024;29(2):272-82. PMID: [36927222](https://pubmed.ncbi.nlm.nih.gov/36927222/)

Of 1651 youth (11-18 years) presenting to 16 children's advocacy centers (CAC) for a forensic interview investigating possible abuse, "46.2% of youth screened for traumatic stress and suicidality, endorsed thoughts of suicide or self-harm in the

Adult Manifestations of Child Abuse

Jia H, Lubetkin EI.

Ranking the Ten Adverse Childhood Experiences: Long-Term Consequences to Health-Related Quality of Life.

Am J Prev Med. 2024 Apr 8:S0749-3797(24)00111-9. PMID: [38599501](https://pubmed.ncbi.nlm.nih.gov/38599501/)

Using data from a US study covering 11 states, and after controlling for demographics, "certain ACEs play a greater role than others for health-related quality of life, with certain ACEs having a greater relative importance according to sex...Sexual abuse, parental separation, emotional abuse, and basic needs were not met were considerably more important among females, while household mental illness and household substance abuse were more important among males. "

Logue E, Hilsabeck RC, Melamed E.

Gender differences in the associations of psychosocial trauma and acute medical stressors with immune system activation and dementia risk.

The Clinical neuropsychologist. 2024;1-21. PMID: [38567869](https://pubmed.ncbi.nlm.nih.gov/38567869/)

"We review the cycle of stress leading to neuroinflammation via cortisol and neurochemical alterations, cell-mediated immune system activation, and pro-inflammatory cytokines, and how this is implicated in the development of dementia. We follow this by discussing sex differences in stress physiology and immune function. We then review the work on early life adversity (ELA) and adverse childhood experiences (ACEs), post-traumatic stress disorder, acute medical stressors, and their associations with cognitive dysfunction and dementia. Throughout, we emphasize women's presentations and issues unique to women (e.g. trauma disorder prevalence)."

Zara S, Kruse J, Brähler E, et al.

Suicidal ideation in patients with diabetes and childhood abuse - The mediating role of personality functioning.

Diabetes Res Clin Pract. 2024;210:111635. PMID: [38521129](#)

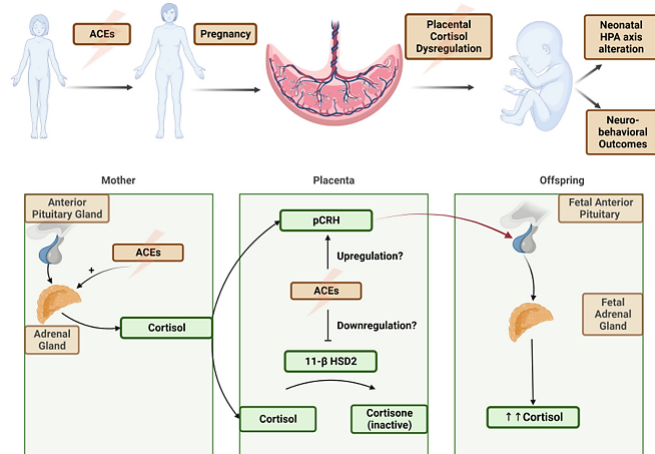
In a representative German sample of 2515 adults, “the prevalence of suicidal ideation (SID) (21.8%) was three fold higher in diabetes patients than the general population. Abuse further increased the likelihood to report SID in diabetes patients (sexual: 48.1 % vs. 18.2; emotional: 35.7 % vs. 15.7 %). A dose-response relationship between the number of abuse experiences and SID was observed (one abuse experience: OR = 1.138, >2 abuse experiences: OR = 2.693). Impaired personality functioning had an indirect effect on the association between emotional abuse and SID.”

George J, Muzik M, Townsel C.

Placental Cortisol Dysregulation in Mothers with Experiences of Childhood Adversity: Potential Mechanisms and Clinical Implications.

Journal of clinical medicine. 2024;13(7). PMID: [38610785](#)

“This present work will highlight what is known about pregnancy-related stress hormone physiology, discuss the potential mechanisms of action of ACEs on cortisol regulation, and suggest opportunities for further clinical and translational studies.”



von Känel R, Princip M, Holzgang SA, et al.

Cross-sectional study on the impact of adverse childhood experiences on coronary flow reserve in male physicians with and without occupational burnout.

J Psychosom Res. 2024;181:111672. PMID: [38636300](#)

Of 60 practicing male Swiss physicians, 43% reported at least one ACE, and 8% reported 4+ ACEs. A higher ACE score was associated with decreased coronary flow reserve (CFR), adjusting for age, body mass index, perceived stress and segment stenosis score. No significant interaction emerged between burnout and ACEs for CFR.

O’Gorman K, Pilkington V, Seidler Z, et al.

Childhood sexual abuse in boys and men: The case for gender-sensitive interventions.

Psychol Trauma. 2024;16(Suppl 1):S181-s9. PMID: [37326539](#)

“Boys and men suffer the negative sequelae of childhood sexual abuse [CSA] to the same (and sometimes greater) extent as girls and women. Boys and men also experience a number of unique challenges, as the abuse experience may undermine masculine identities and relations. This conflict may contribute to underreporting...Boys and men are less likely to disclose their abuse experience and wait longer to disclose compared to girls and women.”

Adolescents

Sahle BW, Reavley NJ, Morgan AJ, et al.

How much do adverse childhood experiences contribute to adolescent anxiety and depression symptoms?

BMC Psychiatry. 2024;24(1):289. PMID: [38632617](#)

For 3089 Australian children followed from age 4 to 17 years, “68.8% of the children had experienced two or more ACEs. In the analysis adjusted for confounding factors...Overall, 47% of anxiety symptoms and 21% of depressive symptoms were attributable to a history of bullying victimisation. Similarly, 17% of anxiety and 15% of depressive symptoms at age 16-17 years were attributable to parental psychological distress experienced between the ages of 4-15 years. The findings demonstrate that intervention to reduce ACEs, especially parental psychological distress and bullying victimisation, may reduce the substantial burden of mental disorders in the population.”

Théorêt V, Hébert É, Hébert M.

Investigating the role of alexithymia in the association between cumulative childhood maltreatment and teen dating violence victimization.

J Psychiatr Res. 2024;173:192-9. PMID: [38547741](#)

From a survey of 2780 Canadian adolescents aged 13 to 19, “cumulative childhood maltreatment is associated with higher levels of alexithymia [also called emotional blindness, characterized by significant challenges in recognizing, expressing, sourcing, and describing one’s emotions] among adolescent victims of TDV [teen dating violence], which, in turn, predicts higher TDV chronicity and TDV-related PTSD symptoms...Promoting emotional awareness and identification among youth victims of child maltreatment could reduce the risk of TDV occurrence, chronicity, and PTSD symptoms.”

Wendt S, Natalier K, Goudie S.

Young Women's Experiences of Violence and Homelessness.

Violence Against Women. 2024:10778012241243053. PMID: [38613403](#)

From interviews with 22 young Australian women with and without children experiencing homelessness, “Their experiences show that DFV [domestic and family violence] is a key driver of women’s homelessness and housing instability, over the immediate and longer term...homelessness contributes to women’s vulnerability to sexual assault and violent and exploitative relationships...As children, these young women had somewhere to live but felt scared and trapped...’homeless at home’—that is, they did not experience the safety, stability, control, and supportive relationships that give home its meaning and significance beyond a physical dwelling...the young women sought to leave their family home as soon as they could...This leaving was typically associated with unstable, inappropriate, or unsafe housing and experiences that intensified existing trauma...The young women felt uncared for, unwanted, and disregarded in their relationships and in their place in the world...policies and practices need to focus also on non-material aspects of homelessness through an emphasis on empowerment, self-respect, and autonomy.”

Domestic Violence – Effects on Children

Eaves LA, Harrington CE, Fry RC.

Epigenetic Responses to Nonchemical Stressors: Potential Molecular Links to Perinatal Health Outcomes.

Curr Environ Health Rep. 2024 Jun;11(2):145-157. PMID: [38580766](#)

“Multiple studies have found financial stress, psychosocial stress, and trauma to be associated with DNA methylation and/or miRNA and mRNA expression. Fewer studies have investigated the effects of racism...There is strong evidence for the role of epigenetics in driving health outcomes...Epigenetic changes related to inflammation, the immune and endocrine systems, and cell growth and survival were highlighted across numerous studies. Maternal exposure to nonchemical stressors is associated with epigenetic and/or genomic changes in a tissue-specific manner...which may act as mediating pathways to perinatal health outcomes.”

Society for Maternal-Fetal Medicine (SMFM).

Society for Maternal-Fetal Medicine Position Statement: Gun violence and pregnancy.

Am J Obstet Gynecol. 2024 Apr 8:S0002-9378(24)00512-X. PMID: [38599477](#)

“Position: The Society for Maternal-Fetal Medicine acknowledges gun violence as a public health crisis in the United States, with a substantial impact on pregnant and postpartum people...As such, the Society for Maternal-Fetal Medicine endorses the following policy principles: 1. The Society calls on relevant government agencies and public funders to support and finance antiviolenace and firearm safety research, public health surveillance activities, education, and other initiatives. These initiatives should acknowledge and address the connection between access to firearms and the health and safety of pregnant and postpartum people and their families and communities. 2. The Society strongly opposes legislation or regulations that impede or limit clinician-patient discussions about firearms. 3. The Society calls for enhanced access to mental healthcare services for pregnant and post-partum people. 4. The Society calls for additional support for individuals experiencing intimate partner violence and their families. 5. The Society supports the creation of and funding for training programs for maternal-fetal medicine subspecialists and all clinicians about firearms and domestic violence prevention. 6. The Society supports laws and regulations that restrict individuals with protective or restraining orders and those with intimate partner violence or stalking convictions from purchasing and owning firearms.”

Boyd C, Sutton D, Dawson M, et al.

Familicide in Canada, 2010 to 2019.

Homicide Stud. 2024;28(2):151-70. PMID: [38618556](#)

“This study analyzed 26 incidents of familicide [the murder of an entire family] that occurred in Canada between 2010 and 2019. The results show that familicide is a gendered crime involving primarily male accused who often target female victims, have a history of domestic violence, and commit the killings using firearms.” 46% of familicides involved 3 or more victims. Secondary victims included biological child of the accused (44%), stepchildren (29%), and other family members of the primary victim (16%). This research highlights the importance of developing risk assessment, risk management, and safety planning strategies to address warning signs and prevent future familicides.”

Walsh K.

The Failure to Recognize Continuing Harm: Post-Separation Domestic Abuse in Child Contact Cases.

Violence Against Women. 2024;10778012241243049. PMID: [38557267](#)

“This article presents findings from a case file review of post-separation parenting cases in England and Wales...It describes the types of abuse most frequently encountered in these cases [verbal and psychological abuse, harassment, stalking, threats of violence (including death threats), physical and sexual assaults and threats or attempts of suicide, threatened or actual abduction of children, undermining of mothers’ parental authority or capacity, and using parenting time arrangements to track and control mothers’ schedules]...The study finds that key legal provisions governing these cases are not being followed, with little understanding shown for the nature of post-separation abuse.”

Domestic Violence – Mental Health

Tutty LM, Nixon K.

"He Stole My Meds to Get High:" The Mental Health and Well-Being of Women Abused by Intimate Partners and Their Disability Status.

J Interpers Violence. 2024;8862605241243344. PMID: [38605564](#)

Of 660 Canadian women, “Women with both physical and mental health disabilities reported significantly more severe combined IPV, depression, psychological distress, PTSD symptoms, and lower quality of life than women without disabilities. Education about disabilities is needed for IPV advocates, and disability practitioners need education about IPV. Developing services specific to survivors of IPV with disabilities is recommended.”

Velasco Adams C, Gibson B.

Stories of strength: uncovering innate resilience in domestic violence survivors with ACEs scores of four or more.

Frontiers in public health. 2024;12:1352381. PMID: [38577283](#)

Authors describe the benefits of trauma-informed resiliency-focused interventions for IPV survivors living in a safe house. “During the months they call the safehouse home, families and advocates work together to begin reconstructing the foundation for safe and stable lives. Essential building blocks include employment, childcare, housing, and transportation. These depend on a gradually

strengthening foundation of physical, mental, and emotional health for greater stability over the long-term.”

Zhang B, Wong A, Constantino RE, Hui V.

The association between psychological distress, abusive experiences, and help-seeking among people with intimate partner violence.

BMC Public Health. 2024;24(1):1060. PMID: [38627699](#)

Using data from an 2015 to 2016 Allegheny County, Pennsylvania Health Survey with 8,012 adults, those reporting IPV experience were significantly more likely to also report feeling hopeless, restless, perceiving everything as an effort, and worthless. Feeling hopeless was associated with increased rates of contacting a hotline for support.

Elder/Dependent Adult Abuse

Lev S, Waksman Y, Schindler M.

Social Workers' Perceptions Regarding Legal Intervention for Older Adults without Significant Cognitive Decline Who Are Abused by Their Adult Child.

J Gerontol Soc Work. 2024;1-18. PMID: [38626335](#)

“Social workers aiding older adults facing abuse from their adult child confront an ethical dilemma: whether to honor autonomy or prevent harm. The study explores how social workers perceive legal intervention against the older adult's will.”

Lund SB, Malmedal WK, Mosqueda L, Skolbekken JA.

"Just pee in the diaper" - a constructivist grounded theory study of moral distress enabling neglect in nursing homes.

BMC geriatrics. 2024;24(1):366. PMID: [38658812](#)

From interviews with nursing staff at 17 different nursing homes in Norway, “Nursing staff strive to manage their moral distress related to neglectful care practices in different ways: by favouring efficiency and tolerating neglect they adapt to and accept these care practices. By disengaging emotionally and retreating physically from care they avoid confronting morally distressing situations. These approaches may temporarily mitigate the moral distress of nursing staff, whilst also creating a staff-centred and self-protecting work culture enabling neglect in nursing homes. Our findings represent a shift from a resident-centred to a staff-centred work culture, whereby the nursing staff use self-protecting strategies to make their workday manageable and liveable.”

Sexual Assault

Cowdery C, Halloran D, Henderson R, et al.

User Experience of Access to Sexual Assault Nurse Examiner and Emergency Contraception in Emergency Departments in the United States: A National Survey.

West J Emerg Med. 2024;25(2):291-300. PMID: [38596932](#)

This 2019 study employed a 'secret shopper', cross-sectional telephone survey. Of 1,046 calls to hospitals with a 91.7% response rate, access to sexual assault nurse examiners (SANEs) were reported to be available in 48.9% and access to emergency contraception (EC) in 42.5% of hospitals. Access to EC was positively correlated with SANE availability. The EDs reporting SANE and EC availability were more likely to be large, rural, and affiliated with an academic institution. Those reporting access to EC were more likely to be in the Northeast and in states with legislative requirements to offer EC...Results suggest that perceived access to sexual assault services and emergency contraception in EDs in the United States remains poor with regional and legislative disparities."

Kink A, Towns JM, Fairley CK, et al.

Management of acute sexual assault presenting to a large Australian sexual health clinic in 2012-2021.

Sex Health. 2024;21. PMID: [38603545](#)

Of 516 cases: 124 males (24.0%); 384 females (74.4%); and eight transgender (1.6%), "HIV post-exposure prophylaxis was prescribed for 64.5% of males and 12.5% of females. Among victims, 69.4% were tested for HIV and no one tested positive, while 71.9% were tested for syphilis, with 1.6% positive... Positivity for gonorrhoea and chlamydia were: 2.6% vs 2.0% at oropharynx [mouth], 1.4% vs 2.9% at genitals, and 5.5% vs 7.1% at anorectum...25.2% of victims sought police involvement, and 71.7% were offered counselling."

Coleman JN, Arthur SS, Shelby RA.

Psychological distress and pain related to gynecologic exams among female survivors of sexual and physical violence: A systematic review.

J Trauma Stress. 2024;37(2):217-30. PMID: [38123528](#)

From a research review, "survivors of violence experience mild-to-severe levels of distress and mild-to-moderate levels of pain related to gynecologic exams...higher levels of distress than women without this history, and this difference was further accentuated among women with more severe posttraumatic stress symptoms. Differences in pain by violence history and PTSS severity were

not consistently observed...Additional research is needed that bolsters the measurement of exam-related distress and pain, adjusts for confounding variables, and explores mechanisms by which sexual and physical violence impact care experiences."

Blais RK, Xu B, Tannahill H, Dulin P.

Male sex and hazardous alcohol use following military sexual assault increase suicide risk among US service members and veterans.

European journal of psychotraumatology.

2024;15(1):2312756. PMID: [38568596](#)

Of 400 US military service members, 50% female, who reported military sexual assault (MSA), "Average scores on the suicide risk measure were consistent with an inpatient psychiatric sample... Suicide risk was most pronounced among males who reported higher levels of hazardous alcohol use...Interventions to decrease suicide risk following MSA may consider alcohol reduction strategies, and optimizing these interventions in males."

Chen JA, Shofer J, Barnes ML, et al.

Military Sexual Trauma As a Risk Factor for Treatment Non-Response from an Online, Self-Management Posttraumatic Stress Disorder Treatment for Women Veterans.

J Interpers Violence. 2024;39(9-10):2214-37. PMID:

[38073465](#)

From a randomized clinical trial in a sample of 102 women veterans examining predictors of treatment response to a self-management, telehealth intervention for PTSD, women veterans who identified military sexual trauma as the primary trauma for which they were seeking PTSD treatment experienced significantly less improvement than those seeking PTSD treatment for other trauma (e.g., childhood abuse, combat trauma). Similar patterns were found for depression symptoms.

Human Trafficking

Gordon M, Chen R, Coverdale J, et al.

How Should Health Care Organizations Limit Roles of Human Trafficking in Their Labor and Supply Chains?

AMA journal of ethics. 2024;26(4):E348-56. PMID: [38564751](#)

"This article considers the nature and scope of health care organizations' corporate and social responsibilities to procure products and personnel justly, offers recommendations to minimize possibilities that supplies are produced by forced labor, and advocates for a public health approach to limiting human trafficking in organizations' supply chains."

Lin SC, Chang KSG, Marjavi A, et al.
Intimate Partner Violence and Human Trafficking Screening and Services in Primary Care Across Underserved Communities in the United States-Initial Examination of Trends, 2020-2021.

Public Health Rep. 2024;333549241239886. PMID: [38562004](#)

“We examined patients affected by IPV and HT [human trafficking] served by health centers in medically underserved US communities during the COVID-19 pandemic...The number of clinical visits for patients affected by IPV and HT decreased by 29.4% and 88.3%, respectively, from 2020 to 2021...Delayed care will pose challenges for future health care needs of these populations.”

Nhep R, Deck S, van Doore K, Powell M.

Detecting orphanage trafficking and exploitation.

Child Abuse Negl. 2024;152:106813. PMID: [38657489](#)

“There is growing awareness that a proportion of children in orphanages have been recruited or transferred into the facility for a purpose of exploitation and/or profit. These children are often falsely presented as orphans to evoke sympathy and solicit funding. This process is known as orphanage trafficking.” Interviews with Cambodian stakeholders “revealed a distinct set of indicators that may be used to detect orphanage trafficking, including the operation of an unauthorised facility, orphanage tourism and volunteering, and an overt focus on fundraising...point to the need for an effective and thorough monitoring system for orphanages, as well as adequate education and training of relevant personnel to aid in the detection of orphanage trafficking.”

LGBTQ Concerns

Morris SM, Gunter KE, Jia JL, Baig AA.

Factors Influencing Shared Decision-Making Between Healthcare Providers and Lesbian, Gay, Bisexual, Transgender, and Queer People of Color About Intimate Partner Violence.

J Interpers Violence. 2024;8862605241248434. PMID: [38666658](#)

From a survey and focus groups of LGBTQ POC (people of color) participants (n = 217) in Chicago and San Francisco, “Although 71% of survey participants experienced IPV, only 35% were asked about IPV in healthcare interactions within the previous year...Patients were hesitant to disclose IPV if they had never discussed their LGBTQ identity with their provider or thought providers would ignore their preferences for addressing IPV.

Deterrents to shared decision-making included providers denying the prevalence of IPV among LGBTQ individuals, or lacking resources to support LGBTQ IPV survivors of color.”

Race/Cultural Concerns

Randolph SD, Gonzalez-Guarda RM, Pearson J.

Addressing Systemic Racism and Racialized Violence to Reduce Firearm Injury and Mortality Inequities.

JAMA Health Forum. 2024;5(4):e241044. PMID: [38573649](#)

“In 2022, firearm injuries were among the 5 leading causes of deaths in the US, and, for the first time, firearm-related deaths surpassed motor vehicle crashes as the top cause of death for individuals younger than 19 years of age...Black children were 100 times more likely and Hispanic or Latino children were 25 times more likely to sustain firearm injuries than non-Hispanic White children. Urban communities with concentrated poverty experience disproportionately more firearm homicides, crime, and associated trauma than less disadvantaged neighborhoods...The tragic loss of life from firearms is compounded by the immense financial cost of firearm injuries, with an estimated annual financial burden of approximately \$2.8 billion from emergency department visits and inpatient admissions. Responding to firearm violence through strategies addressing systemic racism and racialized violence could save the US millions of dollars and protect the lives of generations in many communities.” Authors address promising strategies to do so.

Gomberg J, Stein LK, Dhamoon MS.

Risk of Recurrent Stroke and Mortality Among Black and White Patients With Poststroke Depression.

Stroke. 2024 May;55(5):1308-1316. PMID: [38567535](#)

Using data from a large Medicare database, Black patients with post-stroke depression (PSD) face a persistently 19.8% elevated risk of recurrent stroke compared with White patients, but a similar risk of all-cause mortality. “Our findings support that black race is an independent predictor of recurrent stroke in patients with PSD and highlight the need to address social determinants of health and systemic racism that impact poststroke outcomes among racial minorities.”

Simons RL, Ong ML, Lei MK, et al.

Racial discrimination during middle age predicts higher serum phosphorylated tau and neurofilament light chain levels a decade later: A study of aging black Americans.

Alzheimers Dement. 2024 May;20(5):3485-3494. PMID: [38597292](#)

“The present study used 17 years of data from a sample of 255 Black Americans to investigate the extent to which exposure to racial discrimination predicts subsequent changes in serum Alzheimer’s Disease Research Center (ADRC) biomarkers...Our findings indicate that exposure to various forms of racial discrimination during a person’s 40s and early 50s may contribute to increased Alzheimer’s Disease pathology and neurodegeneration later in life.”

Widanaralalage BK, Jennings S, Dando C, Mackenzie JM.

Prevalence, Disclosure, and Help Seeking in Black and Asian Male Survivors of Sexual Violence in the United Kingdom.

Trauma Violence Abuse. 2024:15248380241246217. PMID: [38629644](#)

“Sexual violence against men has been significantly overlooked, and under-researched, with minimal attention paid to the influence of culture and ethnicity on survivors’ experiences of abuse. This rapid review examines prevalence, disclosure, help-seeking, and criminal justice experiences of Black and Asian male survivors in the United Kingdom.” Findings suggest prevalence data underestimate the true extent of victimization in ethnic minority groups in the United Kingdom. Barriers to disclosure and help-seeking included pressures to conform to gender roles, fear of being disbelieved, and specific cultural factors unique to Asian and Black male experiences, such as reluctance among British South Asian men to disclose CSA to family members due to concerns about bringing shame and dishonor to the family and damaging community standing, and desires to protect family from judgment and marginalization for Black male survivors. “Accessing and reporting to the criminal justice system remains largely unexplored for Black and Asian male survivors.”

Perpetrators

Nurmi J, Paju A, Brumley BB, et al.

Investigating child sexual abuse material availability, searches, and users on the anonymous Tor network for a public health intervention strategy.

Scientific reports. 2024;14(1):7849. PMID: [38570603](#)

“Tor [privacy software] is widely used for staying anonymous online; unfortunately, Tor is popular for

distributing and viewing illicit child sexual abuse material (CSAM). CSAM is easily available using 21 out of the 26 most-used Tor search engines. We analyse 110,133,715 search sessions from the Ahmia.fi search engine and discover that 11.1% seek CSAM. When searching CSAM by age, 40.5% search for 11-year-olds and younger; 11.0% for 12-year-olds; 8.2% for 13-year-olds; 11.6% for 14-year-olds; 10.9% for 15-year-olds; and 12.7% for 16-year-olds. We...show a questionnaire for CSAM users, and analyse 11,470 responses. 65.3% of CSAM users first saw the material when they were children themselves, and half of the respondents first saw the material accidentally, demonstrating the availability of CSAM. 48.1% want to stop using CSAM. Some seek help through Tor, and self-help websites are popular...Help-seeking correlates with increasing viewing duration and frequency, depression, anxiety, self-harming thoughts, guilt, and shame. Yet, 73.9% of help seekers have not been able to receive it.”

McMaugh K, Roufeil L, Salter M, Middleton W.

Incestuous Abuse Continuing into Adulthood: Clinical Features and Therapists’ Conceptualisations.

J Trauma Dissociation. 2024:1-16. PMID: [38597594](#)

“This article draws on interviews with ten Australian therapists about their clinical work with clients subject to incestuous abuse continuing into adulthood...The therapists and their clients were female. The clients were highly dissociative and experienced significant psychiatric and medical comorbidity, and extensive socio-economic disadvantage. Reported abuse was sadistic, ongoing, often involved multiple perpetrators, and sometimes had links to organized abuse.”

Schalk D, Fernandes C.

How Health Professionals Identify and Respond to Perpetrators of Domestic and Family Violence in a Hospital Setting: A Scoping Review.

Trauma Violence Abuse. 2024:15248380241246783. PMID: [38656268](#)

From a research review, “Despite glimpses into how health professionals can identify and respond to perpetrators of DFV, the current knowledge base is sparse. The review did not identify any mandated or formal procedures for identifying and/screening or responding to perpetration of abuse in hospitals. Rather, responses to perpetrators are inconsistent and rely on the motivation, skill, and self-efficacy of health professionals rather than an embedded practice that is driven and informed by hospital policy or procedures.”

Uhlich M, Peterson ZD, Li Y, Brown A, Han J, McBride JAD. **Different Components of Sexual Narcissism Are Differentially Associated With Specific Sexual Aggression Strategies: An Exploratory Study Among Male and Female College Students.**

International journal of sexual health. 2024;36(1):111-25. PMID: [38596809](#)

From a survey of 508 college students, “Results showed that components of sexual narcissism [inflated view of their own sexual prowess, a strong sense of entitlement to sexual activity, reduced empathy for sexual partners, and a tendency toward sexual exploitation] were related to different strategies of sexual aggression, with sexual entitlement being associated with not providing the victim an opportunity to object, and exploiting intoxication.”

Police and Court Systems

Heward-Belle SL, Ali PA, Marotta J, et al.

Judicial Actors' Understanding of the Mental Health Impacts of Intimate Partner Violence: A Scoping Review.

Trauma Violence Abuse. 2024 Apr 17:15248380241244494.

PMID: [38629804](#)

In this research review, judicial professionals were lacking knowledge about awareness of IPV survivors' experiences, understanding of perpetrator tactics and risk factors, understanding of survivor reluctance to disclose mental health issues caused by the IPV, and overall lack of training and guidance. Authors “make policy and practice recommendations to build the capacity of the judicial workforce.”

MacIntyre MR, Sones AC, Li J, Darby WC, Weinstock R.

From posts to protection: Ethical considerations regarding forensic psychiatrists and a duty to warn based on social media.

Behav Sci Law. 2024;42(2):130-48. PMID: [38389201](#)

“Increasing use of social media in forensic mental health evaluations will lead to new challenges that must be resolved by forensic practitioners and the legal system. One such dilemma is the discovery of information that would typically trigger a legal duty and professional ethics obligation for mental health professionals to breach doctor-patient confidentiality to promote public safety and prevent harm to vulnerable third parties...For example, a forensic evaluator may find evidence on social media of an evaluatee's threats to seriously harm others, abuse of children and the elderly, or severely impaired driving. There are no clear

guidelines for how a forensic psychiatrist should respond in these complicated situations. We review the legal concepts and historical evolution of confidentiality, privilege, and mandated reporter duties. Finally, we discuss ethics frameworks practitioners can implement to determine their most ethical course of action when faced with such dilemmas.”

Providers

Huang CJ, Boulos AK, Field S, Wang VJ, Yen K.

Workplace Violence in the Pediatric Emergency

Department: A National Survey of Physicians in the United States.

Pediatr Emerg Care. 2024;40(4):249-54. PMID: [38563972](#)

“Surveys were completed by 207 (45%) invited participants, representing 31 US children's hospitals. The prevalence of WPV [workplace violence] exposure was 96%. Physical violence with a weapon was witnessed by 20% of participants. Injuries requiring medical attention or time off work were experienced by 10% of participants. Half of participants never reported violent events. Security guards were welcome by 99%, armed law enforcement officers by 70%, and metal detectors by 81% of physicians. Self-arming was opposed by 85% of respondents. Exposure to WPV is frequent among pediatric emergency medicine physicians with a prevalence similar to that of general emergency departments.”

Campbell JK, Nicolla S, Weissman DM, Moracco KE.

The Uptake and Measurement of Alternative Approaches to Domestic Violence Intervention Programs.

Trauma Violence Abuse. 2024:15248380241244398. PMID: [38591241](#)

“This scoping review explores the breadth and depth to which Domestic Violence Intervention Programs (DVIPs) in the United States and globally: (a) incorporate components that address the relationship between intimate partner violence (IPV) and social injustice, racism, economic inequality, and adverse childhood experiences (ACEs); (b) use restorative (RJ)/transformative justice (TJ) practices, individualized case management, partnerships with social justice actors, and strengths-based parenting training in current programming; and (c) measure effectiveness.” Authors find very few programs address these issues, and make recommendations.

Franchek-Roa K, Vala A, Goldman J, et al.

Patient Abuse, Neglect, and Exploitation: Why Physicians Need to Be Trauma-Informed.

MedEdPORTAL : the journal of teaching and learning resources. 2024;20:11391. PMID: [38654890](#)

“We developed an educational resource to teach residents about identifying and intervening with patients who experience trauma across the life span using a trauma-informed care (TIC) perspective. We created a 4-hour educational session that included didactics, a virtual visit with a domestic violence shelter, a discussion with a person who had experienced trauma, and role-playing...More than 90% reported the session met their educational needs and provided them with new ideas, information, and practical suggestions.”

Vander Ark DB.

The Faces of ACEs: Case Studies for Teaching About ACEs.

J Nurs Educ. 2024;63(4):269. PMID: [38581711](#)

In this innovative learning activity, “The Faces of ACEs” includes eight fictional case studies. “The patient’s story is presented in two sections...written in first-person language, as if the person were talking to the reader. The first section explains the patient’s childhood, including a description of ACEs the patient experienced as well as a description of any mitigating factors, such as supportive relationships with grandparents, teachers, or other adults. The second section describes the patient’s adult life, including any physical or behavioral health outcomes that may or may not be attributable to the adverse experiences. Because ACEs do not necessarily predict negative health outcomes, some of the case studies describe individuals who demonstrate resiliency, thriving in adulthood despite a difficult childhood...None of the case studies include the character’s ACE score so that students can be asked to determine an ACE score. Students often disagree about an ACE score, which can lead to productive discussion...Students have reported that they have greater empathy for patients they have cared for in the clinical setting who have a history of childhood trauma...The adults in the case studies demonstrate resiliency despite high ACE scores, which helps students understand factors that may mitigate the effects of ACEs on adult health. This is especially helpful for students who may have experienced ACEs in their own childhood; unfortunately, this is not uncommon.”

Keim J, Fortin K.

Specialized programs employing different models of care delivery work collaboratively to address the health care needs of children in foster care.

Curr Probl Pediatr Adolesc Health Care. 2024

Feb;54(2):101577. PMID: [38480042](#)

“Children in foster care have special health care needs including health impacts of trauma experiences. This population needs more frequent medical visits, and multiple different visit types are recommended.” Authors review relevant guidelines, different models of health care delivery that can be employed to meet the special health care needs of children in foster care, and provide examples of two such programs employing different models of care that work collaboratively.

Zilberstein K, Brown A, Hatcher AJ, Burton J, Gau J.

Providers' experiences collaborating with child welfare workers: The good, the bad, and the impacts.

Child Abuse Negl. 2024;152:106772. PMID: [38574602](#)

“Mental health professionals, foster and kinship parents, legal professionals, and other providers responded to an online survey distributed in a Northeastern State of the United States of America.” Results show that “Strategies are needed to improve communication, promote positive relationships, and address systemic barriers to enhance collaboration and, in turn, improve outcomes for child welfare-involved clients...Child welfare workers should understand that providers, in order to effectively perform their roles and help their joint clients, require information sharing, open discussion, and problem-solving. Responsiveness is highly valued and an important first step in building communication networks. As child welfare workers may have different communication needs, these should also be clearly articulated.”

Haen LS, McGown M, Taylor S, Conroy L, Velonis A.

Systemic Occupational Health Needs of Gender-Based Violence Advocates: Findings From the Early Months of the Pandemic.

J Occup Environ Med. 2024 May 1;66(5):e145-e152. PMID: [38349323](#)

“Through the experiences and perspectives of domestic and sexual violence advocates, this study highlights the critical occupational health burdens experienced by those working on the front lines of gender-based violence advocacy...Advocates experienced logistical, emotional, and systemic stressors, including loss of peer support and unempathetic workplace cultures. Recommendations prioritize advocate wellbeing and call for systemic changes...particularly during large-scale emergencies.”

Prevention

St Vil NM, Haley DF, Montgomery B, et al.

An Exploration of Geographic Access to Substance Use Treatment Programs and Violence Against Women.

J Interpers Violence. 2024;8862605241246000. PMID: [38605583](#)

“The study included 1910 women, ages 18 to 44, living in select geographic areas with high-ranked prevalence of HIV and poverty. The findings of this study indicate that among women who reside in census tracts with high prevalence rates of HIV: (1) substance use increases VAW [violence against women]; (2) VAW decreases as geographic access to SAMHSA-certified drug and alcohol treatment facilities increases; and (3) when looking at specific types of VAW, emotional and physical abuse decreases as geographic access to substance use treatment increases. Policies and programs to increase access to substance use treatment should be explored and evaluated, and more programs are needed that address the intersectionality of substance use and VAW.”

Chawla SA, Solomon J, Sarnquist C.

A Review of Evidence-Based Dating Violence Prevention Programs With Behavioral Change Outcomes for Adolescents and Young Adults.

Trauma Violence Abuse. 2024;15248380241246779. PMID: [38671574](#)

From a research review, “while multiple programs have demonstrated efficacy in preventing or reducing intimate partner violence in North American youth populations, more robust research on the replication of these programs outside researcher-controlled environments is needed. Furthermore, issues with program inclusivity, such as with sex and gender-minority individuals, should be considered in future intervention development and replication research.”

Guille C, King C, King K, Kruis R, Ford D, Maldonado L, et al.

Text And Telephone Screening And Referral Improved Detection And Treatment Of Maternal Mental Health Conditions.

Health Aff (Millwood). 2024;43(4):548-56. PMID: [38560794](#)

“This study demonstrates that text- and telephone-based screening and referral systems may improve rates of screening, identification, and attendance to treatment [5.7 times more likely] for perinatal mental health disorders and perinatal substance use disorders compared with traditional in-person screening and referral systems. System-level changes and complementary policies and insurance

payments to support adoption of effective text- and telephone-based screening and referral programs are needed.”

Tanis JM, Klein SM, Boyke H.

State paid family leave policies and infant maltreatment.

Child Abuse Negl. 2024;152:106758. PMID: [38574603](#)

From a 40 state analysis over 17 years, “Results suggest that paid family leave has a beneficial effect on infant maltreatment rates and add to growing evidence that policies aimed to support household economic stability could be a vital child maltreatment prevention policy tool.”

Rosen EM, Trangenstein PJ, Fullem PL, et al.

Interrupted Time Series Analysis of Bar/Tavern Closing Hours and Violent Crime.

JAMA Intern Med. 2024 Apr 1:e240255. PMID: [38557765](#)

“This interrupted time series analysis of 26 bars/taverns in Baltimore, Maryland, found that reducing hours of alcohol sales from 6 am to 2 am to 9 am to 10 pm was associated with a 23% annual decrease in all violent crime compared with control areas. Furthermore, homicide rates dropped by 51% in the first month post intervention and 40% annually thereafter.”

Researchers

Narayan AJ, Brown MP, Lawler JM.

The future of childhood maltreatment research: Diversity and equity-informed perspectives for inclusive methodology and social justice.

Dev Psychopathol. 2024;1-13. PMID: [38629230](#)

“A long-standing practice in clinical and developmental psychology research on childhood maltreatment has been to consider prospective, official court records to be the gold standard measure of childhood maltreatment and to give less weight to adults' retrospective self-reports of childhood maltreatment, sometimes even treating this data source as invalid. We argue that both formats of assessment - prospective and retrospective - provide important information on childhood maltreatment. Prospective data drawn from court records should not necessarily be considered the superior format, especially considering evidence of structural racism in child welfare...we recommend that future research on childhood maltreatment apply more inclusive, diversity and equity-informed approaches.”

Shum M, Robertson D, Ryus C, Tiyyagura G.
The Role of International Classification of Diseases 10 Codes in Intimate Partner Violence Surveillance: Examining the Sensitivity and Specificity of Current Practice.

Ann Emerg Med. 2024 Apr 24:S0196-0644(24)00166-5.
 PMID: [38661621](#)

In 2021 the Uniform Data System (UDS) outlined 5 ICD-10 codes required to identify intimate partner violence. However, using data from one health care system, authors found there was substantial variation in clinician use of these codes, with only 33% of encounters captured by UDS codes. Of the remaining encounters, the most common code was T74.91 (Unspecified adult maltreatment, confirmed), followed by Z91.41 (Personal history of adult physical and sexual abuse). “Researchers should consider including the code T74.91 when using UDS codes to identify encounters for intimate partner violence...Ultimately, a standardized, validated list of ICD-10 diagnostic codes to identify intimate partner violence will be essential for epidemiologic research and public health surveillance.”

Code	Description	Frequency
UDS codes[†]		
T74.1	Physical abuse, confirmed	39
T74.2	Sexual abuse, confirmed	16
Z69.1	Encounter for mental health services for spousal or partner abuse problems	2
T74.3	Psychological abuse, confirmed	0
Y07.0	Spouse or partner, perpetrator of maltreatment and neglect	0
Most commonly used ICD-10 codes for encounters not captured by UDS codes[‡]		
T74.91	Unspecified adult maltreatment, confirmed	65
Z91.41	Personal history of adult physical and sexual abuse	19
Z63.0	Problems in relationship with spouse or partner	14
T76.11	Adult physical abuse, suspected	6

Brooks MM, Salvatore AL, Khanal P, Curriero FC.
Mapping Cumulative Risk in Delaware: Approach and Implications for Health Equity.

J Public Health Manag Pract. 2024;30(3):E112-e23. PMID: [38320288](#)

“Cumulative risk assessment, which evaluates combined risks from environmental and social factors, is a useful approach for estimating potential drivers of health disparities. We developed a cumulative risk score of multiple indices of environmental and social conditions and assessed block group-level differences in New Castle County,

Delaware...Findings indicate that environmental risk rarely occurs without social risk and that environmental and social risks co-occur in distinct areas, resulting in large-scale clustering of cumulative risk. Areas of higher cumulative risk had more Black residents and people of lower socioeconomic status.”

Duncan AF, Montoya-Williams D.
Recommendations for Reporting Research About Racial Disparities in Medical and Scientific Journals.

JAMA Pediatr. 2024 Mar 1;178(3):221-224. doi: PMID: [38165691](#)

“Research investigating racial disparities in health care and health outcomes is critically important to designing effective interventions to improve health for all. Knowing the demographic characteristics of the study population of interest is a key step in ensuring generalizable research and appropriate interpretation of data. Despite good intentions, errors are often made in the presentation and interpretation of findings in racial disparity research. These errors have high stakes: research reports have directly contributed to systemic health inequities through the perpetuation or creation of mistruths and race-based assumptions and lack of presentation of rigorous research strategies aimed at dismantling inequities.” Authors provide guidelines for reporting research on racial and ethnic disparities, including a conceptual framework, precise race and ethnicity data collection, and a variety of factors in analysis and interpretation.

Other of Interest

Cunningham GB, Wicker P.
Sexual harassment and implicit gender-career biases negatively impact women's life expectancy in the US: a state-level analysis, 2011-2019.

BMC Public Health. 2024;24(1):1115. PMID: [38654268](#)

“The current study investigated the association between two work-related factors (i.e., sexual harassment at work and implicit bias against women at work), and women’s life expectancy using 9 years of state-level data in the US...after accounting for the controls, sexual harassment and gender-career biases among people in the state held significant, negative associations with women’s life expectancy.”