

## **MEDICAL RESEARCH SUMMARY ON ABUSE FOR SANTA CLARA COUNTY DOMESTIC VIOLENCE COUNCIL JULY 2012**

This summary includes selected research articles relating to abuse indexed by the National Library of Medicine May 2012. To obtain a copy of the abstracts, go to [pubmed.gov](http://pubmed.gov), and place the Pubmed ID numbers (PMID) in the search box, separated by commas. PTSD = Post Traumatic Stress Disorder IPV = Intimate Partner Violence

For questions or comments about this summary, or to be placed on an email list to receive this monthly summary, please contact Harise Stein, MD [harise@stanford.edu](mailto:harise@stanford.edu)

### **Child Abuse**

Yin S.

#### **Malicious use of nonpharmaceuticals in children.**

Child Abuse Negl. 2011 Nov;35(11):924-9. PMID: 22074758

From the US National Poison Data System 2000-2008, there were a mean number of 450 cases/year (no annual trend) in malicious use of non-pharmaceuticals in children under age 7. Malicious use includes "direct injury, punishment, psychological gain (Munchausen by proxy), and homicide." The most common substances identified were household cleaning substances, cosmetics/personal care products, and pesticides.

Bennett S, Ward M, Moreau K, Fortin G, King J, Mackay M, Plint A.

#### **Head injury secondary to suspected child maltreatment: results of a prospective Canadian national surveillance program.**

Child Abuse Negl. 2011 Nov;35(11):930-6. PMID: 22099143

In a Canadian prospective study, with 2545 pediatricians/pediatric sub-specialists surveyed each month over 3 years, 220 confirmed cases of abusive head trauma were described. 73% were infants less than 12 months of age, 12% resulted in death, and 45% had neurological impairment at hospital discharge. 30% of cases were previously known to child welfare authorities.

Díaz-Olavarrieta C, García-Piña CA, Loredó-Abdala A, Paz F, Garcia SG, Schilman A.

#### **Abusive head trauma at a tertiary care children's hospital in Mexico City. A preliminary study.**

Child Abuse Negl. 2011 Nov;35(11):915-23. PMID: 22104189

Data from a tertiary care hospital in Mexico City showed that 11% of head trauma cases in children under 5 were intentional. Intentional injury, compared to accidental injury, was associated with younger maternal age and paternal alcohol abuse.

Putnam-Hornstein E.

#### **Preventable injury deaths: a population-based proxy of child maltreatment risk in California.**

Public Health Rep. 2012 Mar-Apr;127(2):163-72. PMID: 22379216

Using a California data base from 1998-2007, Black and Native American children experienced significantly higher death rates due to child maltreatment, not due to increased cultural surveillance (no increased rate of investigations per death, by ethnicity).

Romens SE, Pollak SD.

#### **Emotion regulation predicts attention bias in maltreated children at-risk for depression.**

J Child Psychol Psychiatry. 2012 Feb;53(2):120-7. PMID: 22022989

Certain maltreated children in this study showed a heightened interest in and attention to sad faces, which may place them at increased risk for depression.

Stacks AM, Beeghly M, Partridge T, Dexter C.

#### **Effects of placement type on the language developmental trajectories of maltreated children from infancy to early childhood.**

Child Maltreat. 2011 Nov;16(4):287-99. PMID: 22146859

Average auditory and verbal communication scores for 963 abused infants followed for 5 years similarly remained below standard whether they stayed at home, were in kinship care or foster care.

Murphy N.

#### **Maltreatment of children with disabilities: the breaking point.**

J Child Neurol. 2011 Aug;26(8):1054-6. PMID: 21775619

Author reviews abuse in children with disabilities, who are 3-4 times more likely to be abused or neglected, and to be more seriously injured.

Simpson J, Robinson K, Creighton SM, Hodes D.

**Female genital mutilation: the role of health professionals in prevention, assessment, and management.**

BMJ. 2012 Mar 14;344:e1361. PMID: 22419787

Review article from Britain on female genital mutilation, including methods to detect, counsel and deter families from having this procedure performed on their child – either illegally in the UK, or on a return “holiday” to their home country.

**Adult Manifestations of Child Abuse**

Read J, Bentall RP.

**Negative childhood experiences and mental health: theoretical, clinical and primary prevention implications.**

Br J Psychiatry. 2012 Feb;200(2):89-91. PMID: 22297585

In an editorial, authors note that mental health professionals “have been slow, even resistant” to the idea of the role of childhood adversities in mental health disorders. They cite: Freud’s hypothesis of sexual abuse as a fantasy, requiring the women’s movement to challenge; interest in PTSD addressed initially only toward Vietnam veterans; and then focus on a biological cause of mental health by looking at adult brain scans. “It is argued that the theoretical, clinical and primary prevention implications of our belated focus on childhood are profound” and recommend that all patients be asked about childhood experiences as part of mental health treatment planning.

Cuijpers P, Smit F, Unger F, Stikkelbroek Y, Ten Have M, de Graaf R.

**The disease burden of childhood adversities in adults: a population-based study.**

Child Abuse Negl. 2011 Nov;35(11):937-45. PMID: 22099144

In a large representative Dutch study that weighed the burden of disease on life disability, childhood adversities of abuse and neglect were associated with the highest increase in life disability – more than all mental disorders combined. “Childhood adversities are more important from a public health point of view than all common mental disorders together, and should be a priority for public health interventions.”

Teicher MH, Anderson CM, Polcari A.

**Childhood maltreatment is associated with reduced volume in the hippocampal subfields CA3, dentate gyrus, and subiculum.**

Proc Natl Acad Sci U S A. 2012 Feb 28;109(9):E563-72. PMID: 22331913

Using newer brain imaging software, researchers were able to more closely pinpoint areas of the brain showing changes associated with a history of child abuse. Abuse in general is associated with suppression of neurogenesis (decreased number of brain cells made), leading to smaller volume/size of certain brain structures.

Keyes KM, Eaton NR, Krueger RF, McLaughlin KA, Wall MM, Grant BF, Hasin DS.

**Childhood maltreatment and the structure of common psychiatric disorders.**

Br J Psychiatry. 2012 Feb;200(2):107-15. PMID: 22157798

Analyzing data from a national US study with over 34,000 adult participants, the effects of childhood physical abuse showed gender differences, with men experienced more externalizing symptoms (such as anger) and women more internalizing symptoms (such as depression).

Sweet T, Welles SL.

**Associations of sexual identity or same-sex behaviors with history of childhood sexual abuse and HIV/STI risk in the United States.**

J Acquir Immune Defic Syndr. 2012 Apr 1;59(4):400-8. PMID: 22083072

Using data from a large US population survey, sexual minority men and women experienced “extraordinarily high” rates of childhood sexual abuse, and were significantly more likely to have an HIV/AIDS diagnosis.

Berzenski SR, Yates TM.

**Classes and consequences of multiple maltreatment: a person-centered analysis.**

Child Maltreat. 2011 Nov;16(4):250-61. PMID: 22146858

In considering patterns of multiple types of child abuse, this study of 2637 undergraduate students found that those who had suffered emotional abuse alone or in combination with other maltreatment types were more prone to emotional problems such as anxiety or depression, while physical abuse was most strongly associated with behavioral problems such as substance use and risky sexual behavior.

Jackson LJ, O'Brien K, Pecora PJ.

**Posttraumatic stress disorder among foster care alumni: the role of race, gender, and foster care context.**

Child Welfare. 2011;90(5):71-93. PMID: 22533055

In a survey of over 708 multi-state foster care “alumni”, 20% were presently experiencing PTSD, with higher rates in women. Risk factors for PTSD included emotional or sexual abuse prior to foster care placement, and re-victimization in foster care (31%). Kinship care was a protective factor.

Lang AJ, Gartstein MA, Rodgers CS, Lebeck MM.

**The impact of maternal childhood abuse on parenting and infant temperament.**

J Child Adolesc Psychiatr Nurs. 2010 May;23(2):100-10. PMID: 20500626

For 44 pregnant adult women followed for one year after delivery, a woman’s personal history of child abuse significantly contributed to differences in parenting interactions and infant temperament.

Riley EH, Wright RJ, Jun HJ, Hibert EN, Rich-Edwards JW.

**Hypertension in adult survivors of child abuse: observations from the Nurses' Health Study II.**

J Epidemiol Community Health. 2010 May;64(5):413-8. PMID: 20445210

Using data from the Nurses’ Health Study II, with over 68,000 participants, 64% reported physical and/or sexual abuse prior to age 18. Despite controlling for many variables, history of childhood maltreatment was associated with a significantly increased risk of adult high blood pressure.

**Adolescents**

Renner LM, Whitney SD.

**Risk factors for unidirectional and bidirectional intimate partner violence among young adults.**

Child Abuse Negl. 2012 Jan;36(1):40-52. PMID: 22269774

In a national study following over 10,000 adolescents over time, 47% experienced some form of IPV, and the majority reported bidirectional violence. A history of childhood maltreatment, suicide attempts and adolescent violence perpetration increased odds of young adult IPV.

Williams J, Nelson-Gardell D.

**Predicting resilience in sexually abused adolescents.**

Child Abuse Negl. 2012 Jan;36(1):53-63. PMID: 22265933

School engagement, caregiver social support, hope and expectancy, and caregiver education/socio-economic status predicted resiliency in adolescents who had experienced prior sexual abuse.

Ahrens KR, Katon W, McCarty C, Richardson LP, Courtney ME.

**Association between childhood sexual abuse and transactional sex in youth aging out of foster care.**

Child Abuse Negl. 2012 Jan;36(1):75-80. PMID: 22265906

Of 574 youth aging out of the foster care system, girls with a history of sexual abuse were 3-4 times more likely to engage in transactional sex – sex for drugs or money – and need focused counseling.

Martin CE, Houston AM, Mmari KN, Decker MR.

**Urban teens and young adults describe drama, disrespect, dating violence and help-seeking preferences.**

Matern Child Health J. 2012 Jul;16(5):957-66. PMID: 21611717

Focus groups with 32 African American adolescents on dating abuse revealed discussion around “drama”, “disrespect” and “crossing the line”, that they would turn to friends or family before formal services, and that certain methods were preferred for outreach such as peer word-of-mouth.

**Domestic Violence – Effects on Children**

Jaffe PG, Campbell M, Hamilton LH, Juodis M.

**Children in danger of domestic homicide.**

Child Abuse Negl. 2012 Jan;36(1):71-4. PMID: 22265904

This article discusses the effects of DV homicide on children – becoming a homicide victim, witnessing the event, experiencing traumatic memories by testifying in court, experiencing traumatic grief, loyalty conflicts with maternal/paternal family systems afterwards, and disruptions in home and school placement. Few receive counseling or counseling for the length of time needed. It is noted that cumulative official reports of DV violence do not note the impact on children witnesses, custody issues or agreements post-homicide, and/or potential interventions for the child. Also, DV danger and lethality assessments do not include research or guidance on risk of child homicide.

Audi CA, Segall-Corrêa AM, Santiago SM, Pérez-Escamilla R.

**Adverse health events associated with domestic violence during pregnancy among Brazilian women.**

Midwifery. 2012 Aug;28(4):356-61. PMID: 21775034

In an analysis of 1379 pregnant Brazilian women, 19.1% experienced psychological and 6.5% physical or sexual violence. This abuse during pregnancy was associated with increased risk of obstetric problems, premature rupture of membranes, headache, urinary tract infection, and vaginal bleeding.

**Domestic Violence – Physical Health**

Utech K.

**Every day we begin again.**

Northwest Dent. 2012 Jan-Feb;91(1):43-4. PMID: 22439533

In response to a pre-dental student letter, author reviews Minnesota and national low or no cost options for dental care for battered women, many of whom may have experienced dental trauma.

Watson-Johnson LC, Townsend JS, Basile KC, Richardson LC.

**Cancer screening and history of sexual violence victimization among U.S. adults.**

J Womens Health (Larchmt). 2012 Jan;21(1):17-25. PMID: 22011207

Using multi-state data from 58,665 adults, fewer women with a history of sexual violence victimization had healthcare insurance, a personal healthcare provider, received regular checkups, or had screening mammograms. Fewer men with a history of sexual victimization had healthcare coverage.

**Domestic Violence – Mental Health**

Pigeon WR, Cerulli C, Richards H, He H, Perlis M, Caine E.

**Sleep disturbances and their association with mental health among women exposed to intimate partner violence.**

J Womens Health (Larchmt). 2011 Dec;20(12):1923-9. PMID: 21988551

Of 121 women seen in Family Court with recent exposure to DV, 1/3 to 1/2 experienced insomnia and nightmares. Insomnia was highly associated with depression and PTSD.

Cerulli C, Talbot NL, Tang W, Chaudron LH.

**Co-occurring intimate partner violence and mental health diagnoses in perinatal women.**

J Womens Health (Larchmt). 2011 Dec;20(12):1797-803. PMID: 21923282

In the one year of well-baby visits following delivery, 188 new mothers with a recent history of DV were more often diagnosed with depression and panic disorder than those without DV history.

**Cultural Issues**

Walters KL, Beltran R, Evans-Campbell T, Simoni JM.

**Keeping our hearts from touching the ground: HIV/AIDS in American Indian and Alaska Native women.**

Womens Health Issues. 2011 Nov;21(6 Suppl):S261-5. PMID: 22055677

Authors discuss the historical background, risk and resilience factors of the co-occurring epidemics of HIV/AIDS, sexual violence and substance abuse among American Indian and Alaska Native women.

Usta J, Antoun J, Ambuel B, Khawaja M.

**Involving the health care system in domestic violence: what women want.**

Ann Fam Med. 2012 May;10(3):213-20. PMID: 22585885

Most of 72 Lebanese women in Beirut primary health care center focus groups felt that the involvement of the healthcare system in DV was “a socially acceptable way to break the silence”. Authors felt this method could be non-offensive even to women living in conservative societies.

Altschul I, Lee SJ.

**Direct and mediated effects of nativity and other indicators of acculturation on Hispanic mothers' use of physical aggression.**

Child Maltreat. 2011 Nov;16(4):262-74. PMID: 21926114

Of Hispanic mothers participating in a fragile families study, foreign birth was directly associated with lower maternal physical aggression directed toward young children. Strongest risk factor for maternal physical aggression included US birth, maternal alcohol use, parenting stress, and child aggressive behavior.

Kulkarni SJ, Racine EF, Ramos B.

**Examining the relationship between Latinas' perceptions about what constitutes domestic violence and domestic violence victimization.**

Violence Vict. 2012;27(2):182-93. PMID: 22594215

93 Latinas were interviewed about their perceptions of DV. One third of the sample was presently in abusive relationships. Non-abused Latinas were more likely to define stalking behaviors and verbal aggression as domestic violence than their abused counterparts.

Ard KL, Makadon HJ.

**Addressing intimate partner violence in lesbian, gay, bisexual, and transgender patients.**

J Gen Intern Med. 2011 Aug;26(8):930-3. PMID: 21448753

Authors discuss health care screening for IPV in the LGBT community, including differences such as “outing” being both a tool of abuse and a barrier to care.

**Elder/Dependent Adult Abuse**

Bern-Klug M, Sabri B.

**Nursing home social services directors and elder abuse staff training.**

J Gerontol Soc Work. 2012;55(1):5-20. PMID: 22220990

In a national representative survey of 1071 nursing home social services directors, 80% provided staff education on resident rights and 60-70% on abuse management training.

Schiemberg LB, Oehmke J, Zhang Z, Barboza GE, Griffiore RJ, Von Heydrich L, Post LA, Weatherill RP, Mastin T.

**Physical abuse of older adults in nursing homes: a random sample survey of adults with an elderly family member in a nursing home.**

J Elder Abuse Negl. 2012;24(1):65-83. PMID: 22206513

24.3% of a random sample of 452 relatives of Michigan nursing home residents reported at least one incident of physical abuse by staff. Limited physical abilities and behavioral difficulties were risk factors for abuse.

Olofsson N, Lindqvist K, Danielsson I.

**Fear of crime and psychological and physical abuse associated with ill health in a Swedish population aged 65-84 years.**

Public Health. 2012 Apr;126(4):358-64. PMID: 22386619

In a Swedish study of over 9,000 male and female elders, “strong correlation was found between psychological abuse and negative health outcomes in both men and women”. Men were highly likely to consider or even attempt suicide in connection with physical and psychological abuse.

**Perpetrators**

Reid Meloy J, Hoffmann J, Guldemann A, James D.

**The role of warning behaviors in threat assessment: an exploration and suggested typology.**

Behav Sci Law. 2012 May;30(3):256-79. PMID: 22556034

This article discusses in depth, with previous research and case examples, each of a series of 8 “warning behaviors” – “acts which constitute evidence of increasing or accelerating risk” of violence perpetration.

Fergusson DM, Boden JM, Horwood LJ, Miller A, Kennedy MA.

**Moderating role of the MAOA genotype in antisocial behaviour.**

Br J Psychiatry. 2012 Feb;200(2):116-23. PMID: 22297589

In a group of New Zealand men followed for 30 years, those with a certain type of genetic variation of a brain chemical were much more at risk of criminal activity if they also had experienced: maternal smoking during pregnancy, maternal deprivation, child abuse, and dropping out of school.

**Police and Court System**

Pence DM.

**Trauma-informed forensic child maltreatment investigations.**

Child Welfare. 2011;90(6):49-68. PMID: 22533042

This article discusses the importance of training child protection service workers on the system-induced traumatic impact of the investigative process on the child, family and caseworker.

Katz C, Hershkowitz I, Malloy LC, Lamb ME, Atabaki A, Spindler S.

**Non-verbal behavior of children who disclose or do not disclose child abuse in investigative interviews.**

Child Abuse Negl. 2012 Jan;36(1):12-20. PMID: 22265935

Article describes for interviewers non-verbal behaviors of highly-likely-abused children, and correlates certain patterns in those who do not verbally disclose abuse.

Conradi L, Wherry J, Kisiel C.

**Linking child welfare and mental health using trauma-informed screening and assessment practices.**

Child Welfare. 2011;90(6):129-47. PMID: 22533046

Authors discuss trauma-focused screening and assessment of children in the child welfare system.

Chemtob CM, Griffing S, Tullberg E, Roberts E, Ellis P.

**Screening for trauma exposure, and posttraumatic stress disorder and depression symptoms among mothers receiving child welfare preventive services.**

Child Welfare. 2011;90(6):109-27. PMID: 22533045

Of mothers involved in the child welfare system, over 90% had experienced at least one personally traumatic event, and over half met criteria for PTSD or depression or both.

Griffin G, McClelland G, Holzberg M, Stolbach B, Maj N, Kisiel C.

**Addressing the impact of trauma before diagnosing mental illness in child welfare.**

Child Welfare. 2011;90(6):69-89. PMID: 22533043

After analysis of over 14,000 assessments from child welfare in Illinois, authors recommend that clinicians not diagnose a youth in child welfare with a mental illness without first addressing the impact of trauma.

### **Providers**

Maunder RG, Halpern J, Schwartz B, Gurevich M.

**Symptoms and responses to critical incidents in paramedics who have experienced childhood abuse and neglect.**

Emerg Med J. 2012 Mar;29(3):222-7. PMID: 21422029

In a study of 635 paramedics (with only a 36.5% response rate), those with a history of childhood abuse or neglect more frequently experienced signs of acute stress immediately following a critical incident and for the following 2 weeks. Child maltreatment history was also significantly associated with depression and burnout.

Brotto LA, Seal BN, Rellini A.

**Pilot study of a brief cognitive behavioral versus mindfulness-based intervention for women with sexual distress and a history of childhood sexual abuse.**

J Sex Marital Ther. 2012;38(1):1-27. PMID: 22268979

This small study compared cognitive behavioral therapy vs. mindfulness therapy for women with sexual dysfunction and a history of childhood sexual abuse. While both groups experienced a decrease in sexual distress, the mindfulness group also experienced improved physiological sexual functioning.

Lane W, Bair-Merritt MH, Dubowitz H.

**Child abuse and neglect.**

Scand J Surg. 2011;100(4):264-72. PMID: 22182848

Review article for surgeons on the history, physical findings, and lab/radiology findings in child abuse.

Squires J.

**More than vigilance: protecting children from harm.**

Anesth Analg. 2012 Apr;114(4):708-9. PMID: 22434891

Discussion about the assessment and reporting of suspected child abuse for pediatric anesthesiologists.

Sugita JA, Garrett MD.

**Elder abuse and oral health care providers: an intervention to increase knowledge and self-perceived likelihood to report.**

J Elder Abuse Negl. 2012;24(1):50-64. PMID: 22206512

A 4 hour symposium for dentists and hygienists on elder abuse led to increased knowledge/awareness and comfort levels in recognizing signs and symptoms of elder abuse and neglect.

### **Researchers**

Lane C, Goldstein NE, Heilbrun K, Cruise KR, Pennacchia D.

**Obstacles to research in residential juvenile justice facilities: recommendations for researchers.**

Behav Sci Law. 2012 Jan;30(1):49-68. PMID: 22298128

“This paper reviews legal, ethical, and methodological challenges to successfully conducting research in detention and residential post-adjudication placements.”

DeGue S, Holt MK, Massetti GM, Matjasko JL, Tharp AT, Valle LA.

**Looking ahead toward community-level strategies to prevent sexual violence.**

J Womens Health (Larchmt). 2012 Jan;21(1):1-3. PMID: 22185587

The Division of Violence Prevention of the CDC undertook a systematic review of primary prevention strategies for sexual violence perpetration, and identified the lack of community-level strategies as a critical gap. They discuss challenges and means to develop and evaluate community-level approaches.

Tonmyr L, Ouimet C, Ugnat AM.

**A review of findings from the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS).**

Can J Public Health. 2012 Mar-Apr;103(2):103-12. PMID: 22530531

This article is an analysis of what use researchers have put Canadian child abuse databases.

Collins KS, Strieder FH, DePanfilis D, Tabor M, Freeman PA, Linde L, Greenberg P.

**Trauma adapted family connections: reducing developmental and complex trauma symptomatology to prevent child abuse and neglect.**

Child Welfare. 2011;90(6):29-47. PMID: 22533041

This article discusses the science-based phases and essential components of the development of TA-FC (Trauma Adapted Family Connections), a manualized trauma-focused family intervention.

Somji Z, Plint A, McGahern C, Al-Saleh A, Boutis K.

**Diagnostic coding of abuse related fractures at two children's emergency departments.**

Child Abuse Negl. 2011 Nov;35(11):905-14. PMID: 22104188

Analyzing data over a 10 year period from two large Canadian children's hospitals, only 11.5% of children presenting to the ED with fractures and who were subsequently found to have substantiated abuse by authorities had discharge ED ICD abuse coding, and thus were severely under-reported.

**Other of Interest**

Eaton LA, Kalichman SC, Sikkema KJ, Skinner D, Watt MH, Pieterse D, Pitpitan EV.

**Pregnancy, alcohol intake, and intimate partner violence among men and women attending drinking establishments in a Cape Town, South Africa township.**

J Community Health. 2012 Feb;37(1):208-16. PMID: 21744297

"The highest rates of fetal alcohol syndrome worldwide can be found in South Africa." This paper reports that particularly in lower socioeconomic areas alcohol intake during pregnancy has become "normalized", and that 25% of pregnant women in this study who drank during pregnancy were also experiencing current IPV.

Parkinson D, Lancaster C, Stewart A.

**A numbers game: lack of gendered data impedes prevention of disaster-related family violence.**

Health Promot J Austr. 2011 Dec;22 Spec No:S42-5. PMID: 22518919

Authors note that the common lack of data on DV perpetration after community disasters impedes interventions.

Krienert JL, Walsh JA, Matthews K, McConkey K.

**Examining the nexus between domestic violence and animal abuse in a national sample of service providers.**

Violence Vict. 2012;27(2):280-95. PMID: 22594221

In a survey of 767 DV shelters nationwide, fewer than half included intake questions about animals. "Continued awareness and an expansion of services is needed to create viable safety planning strategies and reliable alternatives for women with companion animals in order to improve the likelihood that abuse victims will seek escape and refuge for themselves, their children, and their pets."

Wagner K, Yates D, Walcott Q.

**Engaging men and women as allies: A workplace curriculum module to challenge gender norms about domestic violence, male bullying and workplace violence and encourage ally behavior.**

Work. 2012 Jan 1;42(1):107-13. PMID: 22635154

Description of a replicable workplace behavior change module called "Men and Women As Allies", created by a team of labor, management and community anti-violence educators to "challenge gender norms about domestic violence, male bullying and workplace violence and encourage ally behavior."

Peck MD.

**Epidemiology of burns throughout the World. Part II: intentional burns in adults.**

Burns. 2012 Aug;38(5):630-7. PMID: 22325849

Review of worldwide intentional burning, with particularly high rates for young women in India.