

ABUSE RESEARCH

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Questions: Harise Stein, MD harise@stanford.edu

Child Abuse

Österman K, Björkqvist K, Wahlbeck K.

Twenty-eight years after the complete ban on the physical punishment of children in Finland: trends and psychosocial concomitants.

Aggress Behav. 2014 Nov-Dec;40(6):568-81. PMID: [24810710](#)

“In 1983 Finland became the second country in the world, after Sweden, to adopt a law prohibiting all kinds of physical punishment towards children.” Using a sample of 4609 Finns aged 15 to 80 years, “The results showed a significant drop in reports of being slapped and beaten with an object among respondents who were born after the law was adopted. The decline in physical punishment was associated with a similar decline in the number of murdered children.” Respondents who had been exposed to more physical punishment scored significantly higher on alcohol abuse, depression, mental health problems, divorce, suicidality, and schizotypal personality.

Gonzalez MJ.

Mental health care of families affected by the child welfare system.

Child Welfare. 2014;93(1):7-57. PMID: [26030986](#)

“The paper draws attention to the most prevalent mental health conditions that affect foster care children and their families based on type of maltreatment.”

McLaughlin KA, Sheridan MA, Alves S, Mendes WB.

Child maltreatment and autonomic nervous system reactivity: identifying dysregulated stress reactivity patterns.

Psychosom Med. 2014 Sep;76(7):538-46. PMID: [25170753](#)

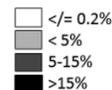
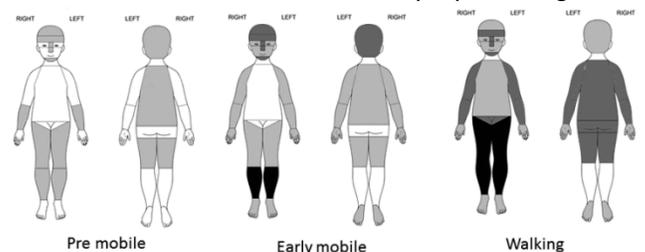
168 adolescents had sophisticated laboratory evaluation of their heart response to laboratory stress (giving a speech and doing math). Those with a history of childhood maltreatment showed a dysregulated pattern of heart function during stress, including decreased cardiac output reactivity (less blood being pumped from the heart to the body).

Kemp AM, Dunstan F, Nuttall D, et. al.

Patterns of bruising in preschool children--a longitudinal study.

Arch Dis Child. 2015 May;100(5):426-31. PMID: [25589561](#)

Multiple bruises in pre-mobile babies and bruises in locations other than the ‘facial T’, head, or below the knee would be an unusual finding as would bruises to the ear, neck, hands or genitalia. See below for distribution of “everyday” bruising.



Narang S, Clarke J.

Abusive head trauma: past, present, and future.

J Child Neurol. 2014 Dec;29(12):1747-56. PMID: [25316728](#)

Review of the history of childhood abusive head trauma and the current state of research.

Roach JP, Acker SN, Bensard DD, et. al.

Head injury pattern in children can help differentiate accidental from non-accidental trauma.

Pediatr Surg Int. 2014 Nov;30(11):1103-6. PMID: [25252922](#)

In a review of 2015 children from a trauma registry with traumatic brain injury, 71% were accidental and 29% abusive. Patients with abusive head trauma were more severely injured, had a higher mortality rate, more diffuse brain injury and subdural hemorrhage. Children with accidental injury had higher rates of skull fractures and epidural hemorrhages.

Bhardwaj G, Jacobs MB, Martin FJ, et. al.

Grading system for retinal hemorrhages in abusive head trauma: clinical description and reliability study.

J AAPOS. 2014 Dec;18(6):523-8. PMID: [25498461](#)

Proposal for standardized nomenclature in describing retinal hemorrhages for medical records and medicolegal reports.

Adult Manifestations of Child Abuse

Young JC, Widom CS.

Long-term effects of child abuse and neglect on emotion processing in adulthood.

Child Abuse Negl. 2014 Aug;38(8):1369-81. PMID: [24747007](#)

Comparing a group of children with documented abuse to a control group, and followed into middle age, and controlling for multiple factors including IQ, PTSD and mood disorders, adults who had experienced childhood abuse were less accurate in emotional processing (the accurate recognition of another's mood).

Cater AK, Andershed AK, Andershed H.

Youth victimization in Sweden: prevalence, characteristics and relation to mental health and behavioral problems in young adulthood.

Child Abuse Negl. 2014 Aug;38(8):1290-302. PMID: [24685360](#)

For 2500 Swedish young adults, "anxiety, post-traumatic stress, self-harm, and criminality were clearly overrepresented among both males and females who had experienced any type of victimization."

Harford TC, Yi HY, Grant BF.

Associations between childhood abuse and interpersonal aggression and suicide attempt among U.S. adults.

Child Abuse Negl. 2014 Aug;38(8):1389-98. PMID: [24656711](#)

From a large national survey, "Childhood physical, emotional, and sexual abuse is directly related to the risk for violent behaviors to self and others."

Birn RM, Patriat R, Phillips ML, Germain A, Herringa RJ.

Childhood maltreatment and combat posttraumatic stress differentially predict fear-related fronto-subcortical connectivity.

Depress Anxiety. 2014 Oct;31(10):880-92. PMID: [25132653](#)

From brain scans of 27 medication-free male veterans with a range of PTSD symptoms, childhood trauma changed brain circuitry connections in a way that made the development of PTSD more likely.

Anacker C, O'Donnell KJ, Meaney MJ.

Early life adversity and the epigenetic programming of hypothalamic-pituitary-adrenal function.

Dialogues Clin Neurosci. 2014 Sep;16(3):321-33. PMID: [25364283](#)

Review of how childhood maltreatment changes the genetic expression of the stress response.

Elliott JC, Stohl M, Wall MM, et. al.

The risk for persistent adult alcohol and nicotine dependence: the role of childhood maltreatment.

Addiction. 2014 May;109(5):842-50. PMID: [24401044](#)

From a large national study - "A history of childhood maltreatment predicts persistent adult alcohol and nicotine dependence. This association, robust to control for other childhood adversities, suggests that maltreatment (rather than a generally difficult childhood) affects the course of dependence."

Siegel K, Lekas HM, Ramjohn D, et. al.

Early life circumstances as contributors to HIV infection.

Soc Work Health Care. 2014 Oct;53(9):969-93. PMID: [25397349](#)

"We illustrated how early life and family circumstances including neglectful or dysfunctional parenting, sexual abuse, and unstable housing placed young women on a risk trajectory for HIV infection."

Schilling C, Weidner K, Schellong J, Joraschky P, Pöhlmann K.

Patterns of childhood abuse and neglect as predictors of treatment outcome in inpatient psychotherapy.

Psychopathology. 2015;48(2):91-100. PMID: [25501445](#)

For 742 German adult patients hospitalized for psychotherapy, patterns of childhood trauma experiences showed significant differences in symptom severity and treatment outcome.

BDI = Beck Depression Inventory

Cluster 1 = mild trauma

Cluster 2 = mixed trauma, mainly emotional abuse/neglect

Cluster 3 = mixed trauma plus sexual abuse

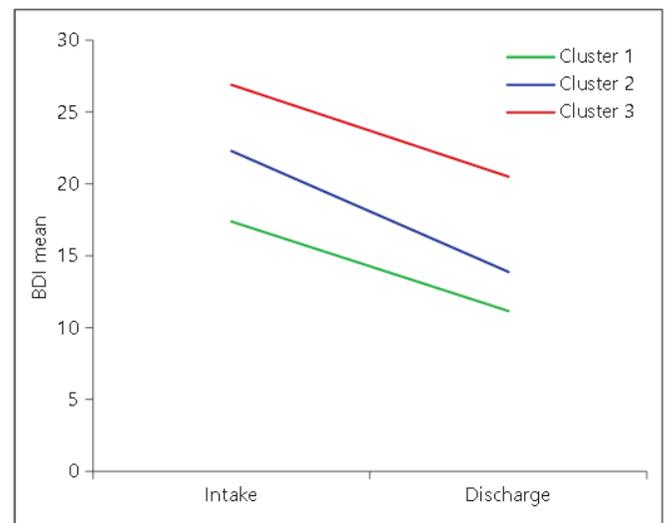


Fig. 1. Symptom change according to BDI.

Boschloo L, Schoevers RA, Beekman AT, et. al.
The four-year course of major depressive disorder: the role of staging and risk factor determination.

Psychother Psychosom. 2014;83(5):279-88. PMID: [25116639](#)
 For 767 German adults experiencing major depressive disorder (MDD) and followed for 4 years, 1 in 4 with non-chronic MDD progressed to a chronic disorder, while half of those with initial chronic MDD remained chronic. A history of childhood trauma was an important risk factor for poor prognosis.

Faravelli C, Castellini G, Fioravanti G, et. al.
Different childhood adversities are associated with different symptom patterns in adulthood.

Psychother Psychosom. 2014;83(5):320-1. PMID: [25116935](#)
 From interviews with 409 consecutive patients admitted during one week to an Italian psychiatric facility, below see the odds of certain symptoms in those patients with a history of childhood trauma compared to those non-traumatized, separated by type of trauma.

Jeter WK, Brannon LA.
Moving beyond "sticks and stones": chronic psychological trauma predicts posttraumatic stress symptoms.

J Trauma Dissociation. 2014;15(5):548-56. PMID: [24678893](#)
 For 232 female undergraduates, childhood, peer and intimate partner psychological trauma alone predicted current PTSD symptoms.

Devanarayana NM, Rajindrajith S, Perera MS, et. al.
Association between functional gastrointestinal diseases and exposure to abuse in teenagers.

J Trop Pediatr. 2014 Oct;60(5):386-92. PMID: [25059210](#)
 Of 1850 Sri Lankan teens, 16.5% were diagnosed with pain-predominant functional gastrointestinal disease (bowel symptoms without a known medical cause). This diagnosis was found in 34.0% of those exposed to sexual abuse, 25.0% emotional abuse, 20.2% physical abuse and in 13.0% of those not abused.

Table 1. Associations of early adversities and adult symptoms (adjusted for symptom co-occurrence)

	Loss			Neglect			Sexual abuse			Physical abuse		
	p	adj. OR	95% CI lower upper	p	adj. OR	95% CI lower upper	p	adj. OR	95% CI lower upper	p	adj. OR	95% CI lower upper
<i>Step 1</i>												
Weight loss	0.004	2.26	1.29 3.96									
Grandiose thoughts	0.003	2.84	1.44 5.58	0.02	2.46	1.12 5.38						
Early awakening				0.03	1.99	1.07 3.68						
Hyporexia				0.01	2.02	1.14 3.60						
Decreased sexual desire				0.03	1.97	1.04 3.72						
Suicidal ideation/attempts				0.04	1.79	1.12 3.22	0.01	2.32	1.17 4.59			
Aggressive impulses				0.004	0.34	0.16 0.72	0.02	2.12	1.10 4.11			
Binge eating							0.02	2.25	1.13 4.48			
Recurrent nightmares							0.02	2.28	1.15 4.52	0.03	1.76	1.03 3.02
Substance abuse (past)										0.03	2.16	1.07 4.36

Adj. OR = Adjusted odds ratio.

Adolescents

Wilson E, Casanueva C, Smith KR, et. al.
Risk of early sexual initiation and pregnancy among youth reported to the child welfare system.

Child Welfare. 2014;93(1):127-47. PMID: [26030990](#)
 Compared to national rates, 5872 female youth reported to the Child Welfare System were more likely to report forced sex (29% vs. 11%), unforced sex before the age of 13 (13.2% vs. 3.4%), pregnancy (29.5% vs. 14%), and to not use contraception at their last sexual encounter (29% vs. 16%).

Thompson R, Neilson EC.
Early parenting: the roles of maltreatment, trauma symptoms, and future expectations.

J Adolesc. 2014 Oct;37(7):1099-108. PMID: [25150891](#)
 Of 115 girls followed to age 18, birth of first child was significantly predicted by neglect, anxiety, and low expectations of going to college.

Lev-Wiesel R, Zohar G.
The role of dissociation in self-injurious behavior among female adolescents who were sexually abused.

J Child Sex Abus. 2014;23(7):824-39. PMID: [25101954](#)
 For 93 female Israeli adolescents, childhood sexual abuse increased the risk for self-injurious behavior more than threefold.

Domestic Violence – Effects on Children

Hagan MJ, Hulette AC, Lieberman AF.

Symptoms of Dissociation in a High-Risk Sample of Young Children Exposed to Interpersonal Trauma.

J Trauma Stress. 2015 Jun;28(3):258-61. PMID: [26062136](#)

For 140 trauma-exposed children with mean age 4+ years, one fourth exhibited clinical or subclinical levels of dissociation (loss of touch with reality). There was a strong association between maternal and child dissociation, regardless of child exposure to trauma or maternal depression/anxiety.

Domestic Violence – Physical Health

Silverman JG, Raj A.

Intimate partner violence and reproductive coercion: global barriers to women's reproductive control.

PLoS Med. 2014 Sep16;11(9):e1001723. PMID: [25226396](#)

Review of the global problem of reproductive coercion, a major contributor to poor reproductive outcomes. "To improve reproductive health, it is necessary that service provision goes beyond identification of women and girls affected by IPV to include identification of specific behaviors that reduce women and girls' control over their reproductive health, e.g., reproductive coercion, and assistance to reduce harm caused by these behaviors."

Domestic Violence – Mental Health

González Cases J, Polo Usaola C, González Aguado F, et. al.
Prevalence and characteristics of intimate partner violence against women with severe mental illness.

Community Ment Health J. 2014 Oct;50(7):841-7. PMID: [24474531](#)

For 142 adult women with severe mental illness from 3 districts in Madrid, the prevalence of IPV in the preceding year was 30.3% and over the lifespan 79.6%.

Elder/Dependent Adult Abuse

Ziminski Pickering CE, Rempusheski VF.

Examining barriers to self-reporting of elder physical abuse in community-dwelling older adults.

Geriatr Nurs. 2014 Mar-Apr;35(2):120-5. PMID: [24341952](#)

In a survey of 76 older adults assessing various vignettes of elder abuse, there were different levels of likelihood of self-reporting depending on different living situation and different barriers, such as limited financial resources. Participants were most likely to tell a family member or police about the abuse rather than a healthcare provider or APS.

Band-Winterstein T, Smeloy Y, Avieli H.

Shared reality of the abusive and the vulnerable: the experience of aging for parents living with abusive adult children coping with mental disorder.

Int Psychogeriatr. 2014 Nov;26(11):1917-27. PMID: [25075607](#)

Themes developed from interviews with 16 aging abused Israeli parents caring for mentally ill adult children included: "(a) old age as a platform for parent's vulnerability facing ongoing abuse; (b) "whose needs come first?" in a shared reality of abusive and vulnerable protagonists; (c) changes in relationship dynamics."

Raposo SM, Mackenzie CS, Henriksen CA, Afifi TO.

Time does not heal all wounds: older adults who experienced childhood adversities have higher odds of mood, anxiety, and personality disorders.

Am J Geriatr Psychiatry. 2014 Nov;22(11):1241-50. PMID: [24012227](#)

From a large multi-age national survey, the increased odds of mood, anxiety and personality disorders associated with childhood adversities did not decrease with advancing age.

Symonds A, Oldham J.

Sexual assault can happen in your institution: are you prepared?

Nurs Manage. 2014 May;45(5):30-7; quiz 37-8. PMID: [24717730](#)

Very practical and comprehensive advice on what to do if a sexual assault occurs in a long term care facility.

Sexual Assault

Banyard VL.

Improving college campus-based prevention of violence against women: a strategic plan for research.

Trauma Violence Abuse. 2014 Oct;15(4):339-51. PMID: [24499963](#)

“This review briefly summarizes what we have learned about preventing VAW on campus from evaluation research and then describes a roadmap for where research needs to go.”

Gidycz CA, Dardis CM.

Feminist self-defense and resistance training for college students: a critical review and recommendations.

Trauma Violence Abuse. 2014 Oct;15(4):322-33. PMID: [24496167](#)

Review of research, rationale and key components of self-defense and resistance training for college women, barriers to implementation and recommendations.

Senn CY, Eliasziw M, Barata PC, et. al.

Efficacy of a sexual assault resistance program for university women.

N Engl J Med. 2015 Jun 11;372(24):2326-35. PMID: [26061837](#)

In a study from the Canadian Institute of Health Research, almost 1000 first-year female students at three universities were randomly assigned to a rigorously designed and executed sexual assault resistance program vs. access to brochures. One year later the intervention showed decreased risk of attempted rape (3.4% vs. 9.3%) and completed rape (5.2% vs. 9.8%) for a risk reduction of almost 50%.

Nöthling J, Lammers K, Martin L, Seedat S.

Traumatic dissociation as a predictor of posttraumatic stress disorder in South African female rape survivors.

Medicine (Baltimore). 2015 Apr;94(16):e744. PMID: [25906104](#)

“Dissociation has been described as a defense mechanism that allows individuals to separate themselves from physical or psychological pain...and includes feelings of depersonalization, de-realization, detachment from others, and reduced responsiveness to surroundings. Dissociation interferes with the processing of the trauma that leads to poor mental representation of the trauma in memory.” In this study of South African rape survivors, traumatic dissociation 2 weeks after rape was significantly associated with PTSD and depression at two months.

Rahill GJ, Joshi M, Lescano C, Holbert D.

Symptoms of PTSD in a sample of female victims of sexual violence in post-earthquake Haiti.

J Affect Disord. 2015 Mar 1;173:232-8. PMID: [25462422](#)

After the Haiti earthquake, there was a “sexual violence epidemic” in Cite Soleil, where over 50% of females were reportedly victims of sexual violence via non-intimate partners/strangers. Focus groups with 16 women from Cite Soleil who survived the earthquake, ensuing hurricanes and cholera relate their experiences. “Participants reported rapes by strangers who intentionally ‘crush the uterus’. All endorsed criteria for PTSD.”

Schäfer I, Gromus L, Atabaki A, et. al.

Are experiences of sexual violence related to special needs in patients with substance use disorders?

Addict Behav. 2014 Dec;39(12):1691-4. PMID: [25117843](#)

Of 3531 German adults being treated for substance use disorders, 65.6% of females and 10.9% of males reported experiences of sexual violence. Sexual violence victims experienced more psychiatric symptoms, suicide attempts, legal problems, financial and family problems, and higher use of services.”

O'Connor M.

Cruise control: prevention and management of sexual violence at sea.

J Law Med. 2015 Mar;22(3):512-25. PMID: [25980185](#)

Review of sexual assault on board cruise ships operating in the Australian market, including the problem of jurisdiction re: flag of registry, and description of US and Canadian models of cruise ship regulations for passenger safety.

Human Trafficking

Rahman N, Sinha I, Husain F, Shah A, Patel A.

The incidence of burns among sex-trafficking victims in India.

Yale J Biol Med. 2014 Sep 3;87(3):263-7. PMID: [25191142](#)

Sex trafficked victims in India suffer intentional burns via open cooking flames, cigarettes and acid. Red light districts commonly also contain defective feeder electric cables that can snap and cause electrical burns in children playing. This underserved population has virtually no access to surgical care or knowledge about burn safety and prevention. In this article volunteer physicians describe NGO activities to aid with burn treatment and community education.

Beck ME, Lineer MM, Melzer-Lange M, et. al.

Medical providers' understanding of sex trafficking and their experience with at-risk patients.

Pediatrics. 2015 Apr;135(4):e895-902. PMID: [25780076](#)

From a survey that included Wisconsin physicians, nurses, physician assistants, social workers, and patient and family advocates at multiple hospitals and medical clinics in urban, suburban, and rural locations, 63% of respondents said that they had never received training on how to identify a sex trafficking victim.

Cultural Issues

Park HJ.

Living with 'Hwa-byung': the psycho-social impact of elder mistreatment on the health and well-being of older people.

Aging Ment Health. 2014;18(1):125-8. PMID: [23815590](#)

From interviews with mistreated Korean elders, "The older persons who were mistreated in family settings experienced a range of emotional, psychological distress and physical symptoms. Many of them identified 'Hwa-byung' (literally anger disease) as a health issue associated with suppressed emotions of anger and demoralization..."

Grossman AH, Frank JA, Graziano MJ, et. al.

Domestic harm and neglect among lesbian, gay, and bisexual older adults.

J Homosex. 2014;61(12):1649-66. PMID: [25255273](#)

Of 113 lesbian, gay and bisexual older adults, 63.4% lived alone, 25.9% with a lover or partner, and 10.7% with relatives, friends or others. 30.1% identified specific individuals as caregivers. 91% said their caregiver knew of their sexual orientation, and 81% of the caregivers were themselves members of a sexual minority group. 22.1% reported at least one type of abuse or neglect from a caregiver; 25.7% knew an LGB older adult who had been harmed by their caregiver.

Shanthakumari RS, Chandra PS, Riazantseva E, Stewart DE.

'Difficulties come to humans and not trees and they need to be faced': a study on resilience among Indian women experiencing intimate partner violence.

Int J Soc Psychiatry. 2014 Nov;60(7):703-10. PMID: [24351964](#)

Women in India experiencing IPV were interviewed about factors that enabled them to feel resilient. "They were as follows: the support of women, men and family; personal attributes; dignity and work; being strong for the children; and faith in God."

Perpetrators

Wurtele SK, Simons DA, Moreno T.

Sexual interest in children among an online sample of men and women: prevalence and correlates.

Sex Abuse. 2014 Dec;26(6):546-68. PMID: [24215791](#)

From an anonymous online survey recruiting adults from general internet sites, 9.2% of males and 4.2% of females endorsed at least one item of sexual interest in children. For males there was a significant correlation between child sexual interest and their own history of emotional, physical and sexual abuse, witnessing DV, and perpetrating animal abuse.

Ray JV, Kimonis ER, Seto MC.

Correlates and moderators of child pornography consumption in a community sample.

Sex Abuse. 2014 Dec;26(6):523-45. PMID: [24088812](#)

From an anonymous internet survey recruiting adults with "problematic pornography use", 21% of male pornography users reported looking at child pornography.

Police and Court Systems

Annan SL.

'We desperately need some help here'--The experience of legal experts with sexual assault and evidence collection in rural communities.

Rural Remote Health. 2014;14(4):2659. PMID: [25347043](#)

Expert participants (attorneys, police and advocates) in rural Virginia discuss prosecution difficulties related to evidence collection, unrealistic jury expectations and frustrations with limitations in local services.

Providers

American Academy of Pediatrics

Trauma Guide: "Trauma Toolkit for Primary Care" and "Helping Foster and Adopting Parents Cope with Trauma: a Guide for Pediatricians"

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/healthy-foster-care-america/Pages/Trauma-Guide.aspx>

Bourke ML, Craun SW.

Secondary traumatic stress among Internet Crimes Against Children task force personnel: impact, risk factors, and coping strategies.

Sex Abuse. 2014 Dec;26(6):586-609. PMID: [24259539](#)

From an internet survey of a high-stress child sexual abuse task force with 600 respondents, about one half reported low or mild secondary traumatic stress (STS) and one quarter severe STS. Strong supervisory support had the strongest effect on decreasing STS score, followed by general social support. Denial was the only coping mechanism related to higher STS scores. Tobacco, alcohol and exercise had neutral effects on scores. Those with the highest STS scores were more distrustful of the world in general, more overprotective of family members, and more likely to report lower job satisfaction and intent to leave.

Craun SW, Bourke ML.

The use of humor to cope with secondary traumatic stress.

J Child Sex Abus. 2014;23(7):840-52. PMID: [25085244](#)

From the same study above, light-hearted humor (non-hostile jokes and friendly teasing among colleagues) had a positive effect on group cohesion and in reducing stress. However, increasing use of darker gallows-type humor was associated with increasing secondary traumatic stress, and may also be harmful. Authors suggest thinking of it as a “yellow flag”.

Gallegos AM, Cross W, Pigeon WR.

Mindfulness-based stress reduction for veterans exposed to military sexual trauma.

Mil Med. 2015 Jun;180(6):684-9. PMID: [26032384](#)

Discussion of the rationale for providing mindfulness training to veterans who have experienced military sexual trauma, potential barriers and “ways to facilitate implementation at the patient, provider, organization/local, and policy levels.”

Brewer-Smyth K, Koenig HG.

Could spirituality and religion promote stress resilience in survivors of childhood trauma?

Issues Ment Health Nurs. 2014 Apr;35(4):251-6. PMID: [24702209](#)

“While spirituality and religion can be related to guilt, neurotic, and psychotic disorders, they also can be powerful sources of hope, meaning, peace, comfort, and forgiveness for the self and others. This article provides an overview of religion and spirituality as they relate to the neurobiology of resilience in victims of childhood trauma.”

Gibney DR, Jones A.

A crisis worker's observations on the psychosocial support for victims and families following child sexual abuse.

J Forensic Leg Med. 2014 Oct;27:25-8. PMID: [25287795](#)

Observations on the needs of children and parents for psychological, educational, medical and practical support after child sexual assault, which may be hindered by strict referral criteria, lack of funding, and lack of appropriate specialist expertise.

Sprang G, Choi M, Eslinger JG, Whitt-Woosley AL.

The pathway to grandparenting stress: trauma, relational conflict, and emotional well-being.

Aging Ment Health. 2015;19(4):315-24. PMID: [25056651](#)

Child's trauma exposure indirectly increases stress in custodial grandparents. Authors make recommendations to tailoring a trauma-informed approach to the needs of custodial grandparents.

Prevention

Long T, Murphy M, Fallon D, et. al.

Four-year longitudinal impact evaluation of the Action for Children UK Neglect Project.

Child Abuse Negl. 2014 Aug;38(8):1358-68. PMID: [24238659](#)

Use by parents of a UK structured child neglect assessment and intervention tool fostered engagement and led to substantially decreased neglect. Children of parents who showed a lack of interest in the tool were over 17 times more likely to be placed into care.

Maguire-Jack K, Klein S.

Parenting and proximity to social services: Lessons from Los Angeles County in the community context of child neglect.

Child Abuse Negl. 2015 Jul;45:35-45. PMID: [26026359](#)

“Results suggest that the proximity of mental health and substance abuse services plays a protective role in child maltreatment. Thus, embedding these types of services in communities with high rates of child protective services involvement may be a strategic way to reduce rates of child neglect.”

Researchers

CDC, Division of Violence Prevention, 2015

Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements

<http://www.cdc.gov/violenceprevention/pdf/intimatepartneviolence.pdf>

Shanahan M, Fleming P, Nocera M, et. al.

Process evaluation of a statewide abusive head trauma prevention program.

Eval ProgramPlann. 2014 Dec;47:18-25. PMID: [25084513](#)
Description of use of a structured evaluation tool for assessment of a multifaceted, multi-system, universal public health intervention.

Ridout SJ, Ridout KK, Kao HT, et. al.

Telomeres, early-life stress and mental illness.

Adv Psychosom Med. 2015;34:92-108. PMID: [25832516](#)
Review of telomere shortening as a result of both psychosocial stress (including early-life stress) and psychiatric disorders. The possible clinical uses of this biomarker for evaluation of response to stressors as well as slowing or reversal by interventions are discussed.

Other of Interest

Jacques-Tiura AJ, Abbey A, Wegner R, et. al.

Friends matter: protective and harmful aspects of male friendships associated with past-year sexual aggression in a community sample of young men.

Am J Public Health. 2015 May;105(5):1001-7. PMID: [25790425](#)

423 single young men in a community were asked about how their friends talked about women, with follow-up one year later. "Approximately one quarter of participants reported that they made a woman engage in some type of sexual activity during the past year when they knew she was unwilling or unable to consent. Past-year perpetrators perceived more pressure from their friends to have sex by any means...and used more objectifying statements when describing how their friends talked about women compared with non-perpetrators...Men's discussions with each other about women could foster an environment that encourages or discourages sexual violence."

LeBlanc MM, Barling J, Turner N.

Intimate partner aggression and women's work outcomes.

J Occup Health Psychol. 2014 Oct;19(4):399-412. PMID: [25068818](#)

From a combination of 3 studies, women experiencing IPV physical aggression predicted higher levels of withdrawal both at and from work, with psychological aggression predicting even more absenteeism. For female college students, psychological aggression in a dating relationship predicted lower academic performance.

Kanwal Aslam S, Zaheer S, Shafique K.

Is Spousal Violence Being "Vertically Transmitted" through Victims?

PLoS One. 2015 Jun 17;10(6):e0129790. PMID: [26083619](#)
In a survey of almost 3687 ever-married Pakistani women, 37.9% reported IPV. After controlling for multiple socioeconomic variables, the odds of experiencing IPV were 5.71 times higher if the woman's mother had experienced IPV.

Hartley A, Foster R, Brook MG, et. al.

Assessment of the impact of the 2012 London Olympics on selected non-genitourinary medicine clinic sexual health services.

Int J STD AIDS. 2015 Apr;26(5):329-35. [24894726](#)
As a guide to other cities when anticipating changes in service activity and planning staffing for mass-gathering events, selected findings during the London 2012 Olympics: a health telephone advice line reported a 16% fall in sexual health-related calls during the main Olympics, but a 33% increase subsequently; London sexual assault referral centres reported that 1.8% of sexual assaults were Olympics-linked; a service for sex workers reported that 16% started working in the sex industry and 7% moved to London to work during the Olympics.

Spröber N, Schneider T, Rassenhofer M, et. al.

Child sexual abuse in religiously affiliated and secular institutions: a retrospective descriptive analysis of data provided by victims in a government-sponsored reappraisal program in Germany.

BMC Public Health. 2014 Mar 27;14:282. PMID: [24669770](#)
From a hotline established by the German government in 2010 for victims of institutional child abuse, of a sample of 1050 adults, 404 had been in Roman Catholic, 130 Protestant, and 516 non-religious institutions. Mean age of reporting was 52.2 years, with 59.8% males. Almost 50% reported physical as well as sexual abuse, and most occurred repeatedly. In all three settings, offenders used the strategies of gaining the victims' trust, creating situations where they were alone with the victim, and disguising sexual abuse as something educational. Similar percentages of victims in all groups reported current psychiatric diagnoses of depression (34-45%), anxiety disorders (14-19%) and PTSD (16-19%).

Trauma informed care in medicine: current knowledge and future research directions.

Fam Community Health. 2015 Jul-Sep;38(3):216-26. PMID: [26017000](#) [See next page]

Table 1. Specific Suggestions for Implementing TIC in Patient Care

Principle of Trauma-Informed Care (TIC)	Specific Suggestions for Practice
Patient-centered communication and care	<p>Ask every patient what can be done to make them more comfortable during the appointment.</p> <p>Prior to physical examination, present a brief summary of what parts of the body will be involved, allow the patient to ask questions, and let the patient know there will also be time available to ask questions afterward.</p> <p>Give the option of shifting an item of clothing out of the way rather than putting on a gown when an entire area does not need to be visualized.</p> <p>Patients who are anxious in the supine position may feel more comfortable if offered a pillow for their back.</p> <p>Offer the option of a mirror to see procedures or examinations that are out of the patient's visual field.</p> <p>If patient nonverbal behavior indicates a moderate to high level of anxiety, conduct further anxiety assessment and offer patient ways to "signal" distress either verbally or via by raising their hand (eg, signaling anxiety during a Papanicolaou smear).</p>
Understanding the health effects of trauma	<p>Understand that maladaptive coping (eg, smoking, substance abuse, overeating, and high-risk sexual behavior) may be related to trauma history.</p> <p>Understand that the maladaptive coping behaviors have adverse health effects.</p> <p>Engage with patients in a collaborative, non-judgmental fashion when discussing health behavior change.</p>
Interprofessional collaboration	<p>Maintain a list of referral sources across disciplines for patients who disclose a trauma history.</p> <p>Keep referral and educational material on trauma readily available to all patients in the waiting room.</p> <p>Engage in interprofessional collaboration to ensure continuity of care.</p>
Understanding your own history and reactions	<p>Reflect on your own trauma history (if applicable) and how it may influence patient interactions.</p> <p>Learn the signs of professional burnout and vicarious traumatization and prioritize good self-care.</p>
Screening	<p>Examine your specialty, setting, and level of long-term interaction with patients.</p> <p>Decide if you will screen for current trauma (eg, current domestic violence) or a history of traumatic events.</p> <p>Consider if screenings will be face-to-face or self-report.</p> <p>Use a framing statement prior to the trauma screen.</p> <p>Provide all staff with communication skills training about how to discuss a positive trauma screening with a patient.</p>