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Child Abuse

Fortin K, Wood JN, Udell SM, Christian CW.

Emergency Department Triage Chief Complaints Among Children Evaluated for Physical Abuse Concerns.

Pediatr Emerg Care. 2024 Jul 1;40(7):527-531. PMID: [38713852](#)

Among children under age 2 seen at one urban children's hospital over a 5-year period with an assessment by a hospital child protection team, the median age of the 422 children included was 4.9 months. "When the abuse most likely and accident most likely groups were compared, medical chief complaints were more common in the former (47% vs 19%), whereas trauma incident chief complaints were more common in the latter (19% vs 64%). Most common medical complaints in the abuse most likely group were altered mental status, abnormal limb use, swelling, pain, apnea [stopped breathing], and vomiting...Many children found to have injuries concerning for abuse (47%) present without mention of trauma, injury, or abuse concern as part of the chief complaint. Our findings suggest important topics to include in training physicians about recognition of abuse."

Singh NV, Lichtsinn K, Ray M, et al.

Urinalysis in Suspected Child Abuse Evaluation in the Emergency Department.

Pediatr Emerg Care. 2024 Jul 1;40(7):547-550. PMID: [38718752](#)

Of 613 infants evaluated for possible child abuse, only 2 had an abnormal urinalysis, with one having a bladder infection and one having blood from trauma from being catheterized. Urinalysis also took 93 minutes longer for results than imaging and other labs. "No subjects were diagnosed with abdominal trauma based on urinalysis during evaluation in the emergency department who would not have been identified by other standard testing. In addition, patients' disposition was delayed while waiting for urinalysis."

Krienert JL, Walsh JA, Ingold KA.

An empirical analysis of sibling sexual abuse: Examining offender, victim, and event characteristics in National Incident-Based Reporting System (NIBRS) data, 2018-2022.

Child Abuse Negl. 2024;106871. PMID: [38816301](#)

Using national data on SSA (sibling sexual abuse) incidents reported to law enforcement, "Female victims were more likely to experience abuse from older siblings and were nearly 2.5 times more likely to be victimized as an adult than their male counterparts. Female victims were also more likely to report injury, yet less likely than male victims to experience forcible penetration during an SSA incident. Findings substantiate the ongoing need for continued refinement of SSA definitional criteria, which, in turn, will lead to greater identification and reporting of incidents. Moreover, findings here underscore the importance of considering age and gender dynamics to guide risk assessment, intervention, and prevention strategies."

Raz M, Gupta-Kagan J, Asnes AG.

Disclosure Is an Essential Component of Ethical Practice: "I Am the Child Abuse Pediatrician".

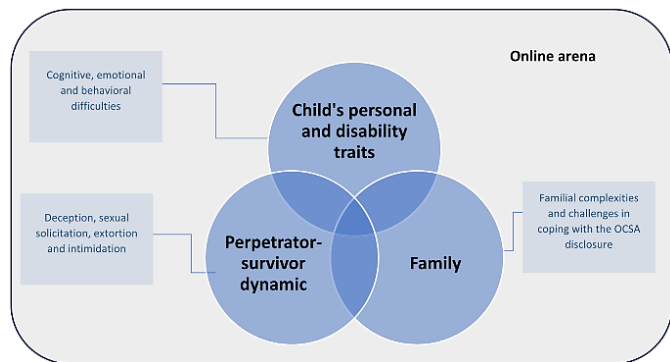
JAMA Pediatr. 2024 Jul 1;178(7):641-642. PMID: [38739410](#)

"We argue that CAPs [child abuse pediatricians] have an ethical and professional duty to disclose their role within and outside the medical center and to inform families how their opinion might be used outside of the direct patient care team...Potential barriers include a concern that families might perceive the term child abuse pediatrician as an accusation, which might lead to a difficult interaction. Another potential concern is that families' willingness to disclose information might be negatively affected if they know that this information will be shared with CPS...CAPs can prevent unnecessary reports to CPS agencies or police or assuage concerns that might have been raised before their involvement...We urge hospitals and professional societies to adopt policies that require all physicians and members of the care team to disclose their specific role and, particularly, to ensure that CAPs disclose that their medical assessments may be shared with CPS and law enforcement agencies."

Lusky-Weisrose E, Klebanov B, Friedman-Hauser G, et al.
Online sexual abuse of children with disabilities: Analyzing reports of social workers' case files in Israel.

Child Abuse Negl. 2024;154:106869. PMID: [38850752](#)

“There is an urgent need for governmental and community efforts to develop measures, policies, and support systems to reduce online child sexual abuse risks for CWDs [children with disabilities]. Moreover, knowledge and interventions should be developed for professionals and parents of CWDs to improve the identification and response to this overlooked phenomenon.”



Adult Manifestations of Child Abuse

Graham BA, Sinclair RR.

The chains of the past: A life course perspective on childhood adversity and organizational attitudes and behaviors.

Journal of occupational health psychology. 2024;29(3):155-73. PMID: [38913703](#)

“Disadvantaged individuals who have undergone significant childhood adversity may have smaller resource pools and be at a resource deficit upon entering the workforce. The losses that they have already experienced make them more vulnerable to subsequent losses and heightened levels of stress. As a result, they are more likely to experience poor job attitudes and behavior. While some work has noted that adversity creates opportunities for resilience, other works emphasized the chronic biological effects that lead to lifelong impairment...that limit one’s ability to lead an optimal work life.”

Gálber M, Anett Nagy S, Orsi G, Perlaki G, Simon M, Czéh B.

Depressed patients with childhood maltreatment display altered intra- and inter-network resting state functional connectivity.

NeuroImage Clinical. 2024;43:103632. PMID: [38889524](#)

Authors note the many changes in how parts of the brain are connected in depressed patients with severe childhood maltreatment, vs. depressed patients without maltreatment, vs. controls without maltreatment or depression. These changes affect aspects of how a person perceives reality and relationships and responds to them.

Herpertz J, Goltermann J, Gruber M, et al.

The impact of depression and childhood maltreatment experiences on psychological adaptation from lockdown to reopening period during the COVID-19 pandemic.

European neuropsychopharmacology. 2024;83:59-60. PMID: [38677192](#)

Using data from a small German study during the pandemic, “In contrast to control groups, individuals with major depressive disorder and those with a history of childhood maltreatment exhibited sustained levels of COVID-19-related fear even after lockdown measures were lifted, indicating a potential enduring psychological impact in these vulnerable groups...underscore the importance of public health initiatives, psychosocial support, and preventive measures aimed at addressing the mental health needs of these groups.”

Witting AB, Anderson SR, Johnson LN, Barrow BH, Peery A.

The trajectory of anxiety in therapy: The role of ACEs.

J Marital Fam Ther. 2024 Jul;50(3):744-758. PMID: [38602712](#)

Of 472 adults with anxiety disorder who received 12 therapy sessions, those with 4+ ACEs had significantly higher anxiety starting symptoms, but had the same rate of improvement as those with less than 4 ACEs.

Diallo A, Minier N, Bonnet JB, et al.

Traumatic Life Events, Violence, and Obesity: A Cross-Sectional Study from 408 Patients Enrolled in a Bariatric Surgery Program.

Obesity facts. 2024;17(3):237-42. PMID: [38569475](#)

Of 408 patients interviewed from one surgery department, “87.1% reported at least one traumatic life event and 33.1% reported having experienced SV [sexual violence] in the past. Female gender (adjusted odds ratio = 7.44)...was associated with an increased risk of SV. Male gender was associated with a higher risk of difficulties including sports cessation, depression, and work-related distress. In the context of obesity, psychosocial trauma is characterized by a high frequency and several gender specificities that must be taken into account in the management of these patients.”

Chen Y, Xue H, Zhou J, Shu X, He Z, Ai S, et al.
Childhood maltreatment, genetic risk, and subsequent risk of arrhythmias: a prospective cohort study.
European journal of psychotraumatology. 2024;15(1):2366055. PMID: [38912597](#)

Using UK biobank data during a median follow-up of 12.21 years, “compared with the absence of childhood maltreatment, having 3-5 types of childhood maltreatment was associated with an increased risk of incident AF (= atrial fibrillation, hazard ratio 1.23), VA (= ventricular arrhythmia HR 1.39), and BA (= bradyarrhythmia = very low heart rate, HR 1.32) after adjusting demographic, socioeconomic and lifestyle factors... There was a gradient association between childhood maltreatment and AF risks across the intermediate and high genetic risk groups but not within the low genetic risk group.”

Hu W, Zhang WB, Liu BP, Jia CX.
Associations and Mediating Pathways Between Childhood Adversity and Risk of Dementia: A Cohort Study in the UK Biobank.

J Gerontol A Biol Sci Med Sci. 2024;79(8). PMID: [38721896](#)
Using data from 150,152 adults at the UK Biobank, “Compared to individuals who did not experience CA [childhood adversity], those exposed to any CA exhibited a 30.0% higher risk of dementia. Each additional CA was associated with a 15.5% increased dementia risk. Depression, smoking, and low grip strength explained 8.7%, 2.4%, and 0.9% of the associations, respectively.”

Adolescents

Emmerich OLM, Wagner B, Heinrichs N, van Noort BM.
Lifetime victimization experiences, depressiveness, suicidality, and feelings of loneliness in youth in care.
Child Abuse Negl. 2024;154:106870. PMID: [38823332](#)

Of 164 participants aged 14-21 years living in family-based or residential care, “Participants reported on average 12.66 victimization experiences. The female and diverse gender groups reported higher rates of victimization, loneliness, depressiveness, and suicidality than the males. Participants in residential care reported more victimizations and stronger feelings of loneliness than those in family-based care... peer victimization was significantly associated with depressiveness and loneliness, and sexual victimization with depressiveness... Interventions should address multiple forms of victimization, with a special focus on sexual and peer victimization.”

Etami Y, Lildharrie C, Manza P, Wang GJ, Volkow ND.
Neuroimaging in Adolescents: Post-Traumatic Stress Disorder and Risk for Substance Use Disorders.
Genes (Basel). 2023 Nov 23;14(12):2113. PMID: [38136935](#)

“In this review, we will examine the link between PTSD and SUDs [substance use disorders], along with the resulting effects on memory, focusing on the connection between the development of an SUD in individuals who struggled with PTSD in adolescence. Neuroimaging has emerged as a powerful tool to provide insight into the brain mechanisms underlying the connection of PTSD in adolescence and the development of SUDs.”

Baetz CL, Surko M, Bart A, et al.
The Risk for Readmission to Juvenile Detention: The Role of Trauma Exposure and Trauma-related Mental Health Disorders.

Journal of child & adolescent trauma. 2024;17(2):527-39. PMID: [38938971](#)

Of 1282 youth in a large metropolitan area admitted to juvenile detention, “More than half of the sample was readmitted during the three-year study period, with readmissions most likely to occur within one year of release. Returning to detention within one year was also associated with increased risk for multiple readmissions. Youth readmitted to detention were more likely to have a history of sexual abuse and problematic substance use.”

Boumpa V, Papatoukaki A, Kourti A, et al.
Sexual abuse and post-traumatic stress disorder in childhood, adolescence and young adulthood: a systematic review and meta-analysis.

Eur Child Adolesc Psychiatry. 2024;33(6):1653-73. PMID: [35716220](#)

From a research review, “CSA [childhood sexual abuse] was strongly associated with PTSD, at a similar extent in boys (pooled odds ratio = 2.86) and girls (pooled OR = 2.38). The association was present in all examined geographic regions.”

Dunn N, Esplin JA, Fitzgerald M.
Moving out of your mind and into your body: Yoga buffers the effects of childhood maltreatment on PTSD symptoms.
J Am Coll Health. 2024;72(4):1050-6. PMID: [35549992](#)

From an online survey of 177 students at a southern university, “more frequent yoga practice buffered the relationship between maltreatment and PTSD symptoms. Clinicians working with college students with a history of maltreatment are encouraged to make referrals to yoga classes. Universities are encouraged to adopt trauma-sensitive yoga.”

Lahti H, Kokkonen M, Hietajärvi L, Lyyra N, Paakkari L.
Social media threats and health among adolescents: evidence from the health behaviour in school-aged children study.

Child and adolescent psychiatry and mental health. 2024;18(1):62. PMID: [38812043](#)

This study investigated the prevalence of nine social media threats: (1) cyberbullying, (2) sexual harassment, (3) racism, (4) unauthorized distribution of sensitive material, (5) phishing attempts, (6) misinformation, (7) the sale or distribution of drugs, (8) harmful or dangerous social media challenges, and (9) content causing appearance pressures, in 2288 Finish students aged 11-15 years. "The most common threat, encountered daily...was misinformation...certain factors (e.g., emotional intelligence, family support) were associated with encountering social media threats less frequently, whereas other factors (e.g., problematic social media use, online communication with strangers) were associated with more frequent encounters. Daily and weekly exposure to social media threats was systematically associated with poor self-rated health, frequent depressive feelings, and anxiety symptoms. Our study highlights the need for intervention and health promotion efforts to mitigate adolescent exposure to social media threats and ensuing negative health consequences."

Domestic Violence – Effects on Children

Finnbogadóttir HR, Henriksen L, Hegaard HK, et al.
The Consequences of A History of Violence on Women's Pregnancy and Childbirth in the Nordic Countries: A Scoping Review.

Trauma Violence Abuse. 2024:15248380241253044. PMID: [38805432](#)

From a research review on Nordic women's experience of violence during pregnancy and childbirth, "childbearing women with a history of violence are at greater risk of common complaints and hospitalization during pregnancy, fear of childbirth, Cesarean section, breastfeeding difficulties, and physical and mental health problems. While extensive research was found on the associations between a history of and current violence and outcomes related to pregnancy, there was a lack of intervention studies."

Goldstein BL, McCarthy KJ, Greene CA, et al.
The Moderating and Mediating Role of Responsive Parenting Behavior in Explaining the Link between Intimate Partner Violence and Posttraumatic Stress Symptoms in Young Children.

Journal of child & adolescent trauma. 2024;17(2):437-45. PMID: [38938972](#)

From a study of 391 children ages 3-5 years, responsive parenting significantly reduced the association between the degree of child exposure to physical IPV, and child post-traumatic stress symptoms over time. (Responsive parenting is the "use of warm and accepting behaviors to respond to children's needs and signals".)

Anyango J, Renbarger KM.
Thematic Synthesis of the Experiences of Intimate Partner Violence Among Mothers Who Use Substances.
Nurs Womens Health. 2024 May 29:S1751-4851(24)00084-9. PMID: [38823784](#)

From a research review, "Four descriptive subthemes emerged to delineate the experiences of IPV in mothers who use substances: Experience of Various Types of IPV, Lack of Structures to Identify and Address IPV, Coping with Violence by Taking Substances, and Substance Use Influences Behaviors of IPV. Nurses who work with mothers who use substances should be knowledgeable about local resources for IPV, complete ongoing educational training for IPV screening, and be familiar with recommended guidelines for the routine assessment of IPV."

Harris RJ, Channon AA, Morgan SA.
Childhood exposure to domestic violence: can global estimates on the scale of exposure be obtained using existing measures?

Frontiers in public health. 2024;12:1181837. PMID: [38841674](#)

After a research assessment, authors discuss in detail four validated measures of childhood exposure to DVA (domestic violence and abuse): The Child Exposure to Domestic Violence Scale, Children's Perception of Interparental Conflict Scale, Juvenile Victimization Questionnaire, and The Violence Exposure Scale for Children. "Strengths and limitations of each are discussed...Despite childhood exposure to DVA being an urgent research priority worldwide, the current measures to explore the extent of the issue are not validated cross-culturally, leading to concerns about comparisons across different population groups."

Domestic Violence – Physical Health

Penrose K, Abraham A, Robertson M, et al.

The association between emotional and physical intimate partner violence and COVID-19 vaccine uptake in a community-based U.S. Cohort.

Preventive medicine reports. 2024;43:102784. PMID: [38938628](#)

From a national survey of 3,343 partnered individuals, those who reported emotional and/or physical IPV were at significantly higher risk of being unvaccinated for Covid-19 (28% to 70% increased risk). “Results highlight the need to incorporate IPV prevention and support into public health responses.”

Armañanzas R, Liang B, Kanakia S, Bazarian JJ, Pritchep LS. Identification of Concussion Subtypes Based on Intrinsic Brain Activity.

JAMA Netw Open. 2024 Feb 5;7(2):e2355910. PMID: [38349652](#)

Of 600 participants aged 13-70 (mean age 20.16 years), and 56.03% male, without known neurologic disease or prior head trauma within the past year, and who received an EEG (map of brain electrical activity) within 120 hours of new, mild concussion conducted from multiple sites at universities, high schools, and clinics, 5 distinct traumatic brain injury subtypes were identified. “Subtype membership showed a statistically significant association with time to return to activity...The existence of such physiological subtypes supports different underlying pathophysiology and could aid in personalized prognosis and optimization of care path.”

Stewart IJ, Howard JT, Poltavskiy E, et al.

Traumatic Brain Injury and Subsequent Risk of Brain Cancer in US Veterans of the Iraq and Afghanistan Wars.

JAMA Netw Open. 2024 Feb 5;7(2):e2354588. PMID: [38358743](#)

Of 1,919,740 veterans of the Iraq and Afghanistan wars, 80.25% male, 63.11% Non-Hispanic White, median age at injury date 31 years, and followed for a median of 7.2 years, moderate/severe traumatic brain injury (TBI) (adjusted hazard ratio 1.90) and penetrating brain injury (aHR 3.33), but not mild TBI, was associated with increased risk of brain cancer. (While military circumstances may contain other variables, such as environmental exposures, and thus this association cannot be assumed for civilian TBI, note the need for civilian research.)

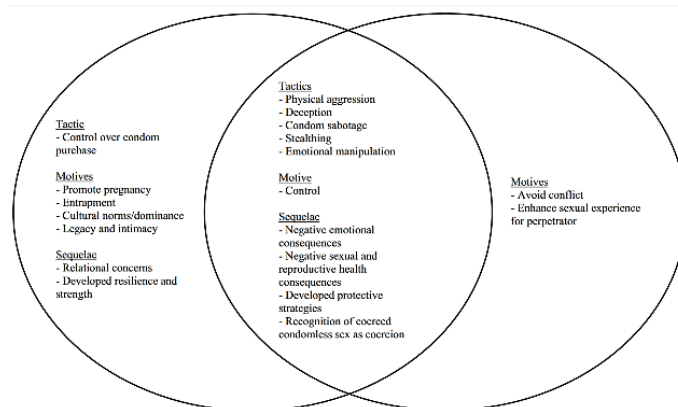
Domestic Violence – Mental Health

Chen W, Kirwan M, Hammett JF, Stewart R, Davis KC.

Coerced Condomless Sex: A Scoping Review of Qualitative Studies.

J Sex Res. 2024:1-16. PMID: [38913125](#)

From a research review, “Coerced condomless sex perpetration tactics ranged from verbal pressure to physical assault. Besides pregnancy promotion, perpetration motives included control, dominance, entrapment, enhancing sexual experiences, and avoiding conflict. Following coerced condomless sex, victims reported developing protective strategies. They also reported experiencing various negative emotional, relational, and physical health effects.”



Morishita J, Kato R, Yasuda M, Suda S.

Male intimate partner violence (IPV) victims in Japan: Associations of types of harm, sociodemographic characteristics, and depression trait.

PCN Rep. 2023;2(3):e127. PMID: [38867840](#)

In an online survey of 1466 adult Japanese males who had experienced IPV, participants were more frequently subject to psychological abuse than to physical violence, and 10.7% of respondents exhibited moderate to severe depression. “The lowest level of academic attainment (junior high school), positive psychiatric history, foregoing divorce to avoid adverse childhood experiences of their offspring, childhood exposure to domestic violence, younger age, having no children, and experience of school bullying were shown to be significantly associated with depression trait.”

Elder/Dependent Adult Abuse

Bloemen EM, Gottesman E, Furfari K, et al.

Examining ethical issues that arise in providing ED/hospital care for patients experiencing elder mistreatment and approaches to address them.

J Elder Abuse Negl. 2024 Jun 12:1-18. PMID: [38867518](#)

“This article describes the role of a hospital clinical ethics consultation service and best practices for collaboration between ethics and EM [elder mistreatment] consultation services. Illuminated via four case studies, the article presents several core ethical frameworks, including allowing patients the dignity of risk, considerations around a harm-reduced discharge, involving abusers in surrogate decision making, and providers' experience of moral distress when dealing with patients experiencing EM. Increasing collaboration with ethics and elder mistreatment services can help teams more effectively respond to EM.”

Alonso-Moreno FJ, Llisterra Caro JL, et al.

Prevalence of suspected abuse of non-institutionalized older people treated in primary care. PRESENCIA study.

Semergen. 2024;50(6):102263. PMID: [38838584](#)

In a study of 804 Spanish non-institutionalized elders, mean age 78.9 years and 58.3% women, screened for elder abuse in primary care clinics, the prevalence of suspected abuse was 11.3%--14.4% for women vs. 7.1% for men. The lower the elder's dependency, the lower the prevalence of suspected abuse (30.0% in highly dependent vs. 8.7% in non-dependent); and the better the perceived health status, the lower the prevalence of suspected abuse (29.6% in poor health status vs. 6.9% in optimal health status).”

Baumann A, Crea-Arsenio M, Smith V, et al.

Abuse in Canadian long-term care homes: a mixed methods study.

BMJ Open Qual. 2024;13(2). PMID: [38834369](#)

From a review of Canadian legislation, long-term care home inspection reports, and newspaper articles, “According to legislation, LTC [long-term care] homes are required to protect residents from physical, sexual, emotional, verbal or financial abuse...An analysis of inspection reports identified that 9% (781) of overall inspections included findings of abuse. Physical abuse was the most common type (37%). Differences between the frequency of abuse across type of ownership, location, and size of the home were

found...Strategies such as establishing a climate of trust, investing in staff and leadership, providing standardised education and training, and implementing a quality and safety framework could improve the care and well-being of LTC residents.”

Hu B, Bai X, Wang P.

Childhood Adversities and Caregiving for Older Parents: Building Capacity for a Caring Society.

J Gerontol B Psychol Sci Soc Sci. 2024;79(7). PMID: [38742591](#)

From a large retirement study of Chinese elders, “We estimated that 58.3 million middle-aged adults in China were providing care for parents in 2020...Experiencing 1 additional childhood adversity was associated with a decrease of 8% in the odds of providing informal care...Had people experienced 1 fewer adversity in their childhood, there would have been 2.2 million more caregivers in 2020. Had they experienced 2 fewer adversities, there would have been 3.4 million more caregivers.”

Sexual Assault

Bailey C, Shaw J, Harris A.

Adolescents and sexual assault: A critical integrative review.

Am J Community Psychol. 2024 Jun;73(3-4):337-359. PMID: [38303610](#)

“Adolescents are sexually assaulted at some of the highest rates and face nuanced complexities related to their developmental, experiential, and legal positioning as they attempt to navigate their lives post-assault. They oftentimes encounter systems that were not designed for them...resulting in responder systems and practices that do not serve or help them, and a dearth of research dedicated to engaging and centering their needs and experiences...this integrative review sought to bring together a disjointed knowledge base to provide a more comprehensive understanding of what adolescents are experiencing, and what they might need after a sexual assault.”

TABLE 2 Questions to guide the scholar activist's next steps.

Examining and understanding adulthood	Assessing current program of research	Planning for future research
1. How does adulthood manifest in the settings I occupy (e.g., at work, at home)?	1. Do I focus on adolescent SA or include adolescent cases or individuals in my SV research? Which adolescents?	1. What would it mean to (more intentionally) center adolescent SA and adolescents in my research and response systems? Which adolescents?
2. How are adolescents systematically excluded from decision-making or denied agency in the settings I occupy?	2. What is my rationale for (not) studying adolescent SA or for (not) including adolescents or adolescent SA cases in my research?	2. How should I prioritize and select specific adolescent groups or SA topics for further investigation?
3. What arguments are used to justify adulthood and the systematic marginalization of adolescents in the settings I occupy?	3. How would/does my team attend to and attempt to reduce the power hierarchy among adult researchers of varying ages and adolescent collaborators or participants?	3. What relationships do I need to develop (further) or prioritize to allow me to pursue this research in an authentic way?
4. How do these manifestations vary for different groups of adolescents and what other systems of oppression are invoked?	4. Does/could my team routinely consider the implications of our research on adolescents and adolescent SA, even if they are not the focus of or included in the research?	4. What community-based and -directed approaches do I want to explore further to inform my work and development as a scholar activist?
	5. What challenges have emerged in considering/trying out research on adolescent SA, and how have other SV and trauma researchers overcome them?	5. How do I invite imaginative thinking into my research?

Bendixen M, Kennair LEO.

Risk factors of sexual violence perpetration and victimization among adolescents: A study of Norwegian high school students.

Scand J Psychol. 2024 Aug;65(4):792-802. PMID: [38632709](#)

From an online survey of 1311 Norwegian young adults, aged 16-21 years, last year's prevalence rate of physical sexual perpetration reported by adolescent men was 7%, while physical sexual victimization reported by adolescent women was 30%. "Adolescent men's sexual perpetration was associated indirectly through sexual risk taking, alcohol intoxication, porn exposure, sexual underperception and rape stereotypes. For adolescent women, being sexually victimized was primarily associated through sexual risk behavior, alcohol intoxication, and sexual overperception... Future work aimed at reducing sexual violence in adolescence within the educational context might find it more effective to specifically target non-physical forms of sexual harassment."

Caputo M, Fineman M, Khan S.

Sexual assault and the matrix of harm: Sexual assault survivors narrate their whole lives in more negative ways.

PLoS One. 2024;19(6):e0297650. PMID: [38865311](#)

In the American Voices Project, "we find that survivors of assault express significantly greater negative sentiment when asked to tell their life stories. These negative sentiments are observable throughout the entire interview, including before questions of assault are asked. Survivors of assault narrate their experiences with more anger, disgust, fear, and sadness, and less anticipation, joy, and trust than those who do not report assault experiences." Authors denote this "a 'matrix of harm' that structures people's lives."

Human Trafficking

Aljadeff G, Titchen K.

HOOKED: How Human Traffickers Leverage Substance Use for Control.

Pediatr Rev. 2024;45(6):366-8. PMID: [38821895](#)

"Traffickers identify and leverage vulnerabilities to create dependency...SUD [substance use disorder] is both a risk factor and a negative health outcome of trafficking, with as many as 84% of individuals using substances during trafficking....Traffickers, often involved in the drug trade, capitalize on substance dependencies, manipulating and controlling victims using 1 or more of the following tactics: reward a victim, feed a habit, induce compliance, punish a

victim, criminalize a victim, deny substances...The well-established link between trauma exposure (physical, psychological, and emotional) and substance misuse renders concurrent treatment integral to breaking the cycle of control by traffickers."

Benavente B, Bully P, Ballester L.

Instruments for the Identification of Child Sexual Exploitation: A Systematic Review.

Trauma Violence Abuse. 2024;25(3):2204-18. PMID: [37997288](#)

Of screening instruments for child sexual exploitation, "The instruments varied with regard to number of questions, ease of administration, sources of information, rating methods, and the training information provided. What they had in common is that most were designed and used in the English-speaking world, basically the US, with few instruments providing solid proof of their validity and reliability...differences in multiple characteristics made it difficult to draw clear conclusions regarding suitability."

LGBTQ Concerns

Closson K, Boyce SC, Johns N, et al.

Physical, Sexual, and Intimate Partner Violence Among Transgender and Gender-Diverse Individuals.

JAMA network open. 2024;7(6):e2419137. PMID: [38916887](#)

From a survey of 3560 California individuals, "past-year physical violence was reported by 43% of transgender men, 24% of transgender women, and 14% of nonbinary respondents. Past-year sexual violence was reported by 42% of transgender men, 14% of transgender women, and 56% of nonbinary respondents. Compared with cisgender women, transgender women and transgender men had greater risk of past-year physical violence (any form) (transgender women adjusted incidence rate ratio [AIRR], 6.7; transgender men AIRR, 9.7), as well as past-year IPV (any form) (transgender women AIRR, 3.2; transgender men AIRR, 6.7)...Results highlight the need for gender-affirming violence prevention and intervention services as well as policies that protect TGD individuals from discriminatory violence."

Bränström R, Hatzenbuehler ML, Lattanner MR, et al.
Threats to social safety and neuro-inflammatory mechanisms underlying sexual orientation disparities in depression symptom severity: A prospective cohort study of young adults.

Brain Behav Immun. 2024;119:211-9. PMID: [38548185](#)
From a national study of 595 sexual minority and heterosexual young adults followed for 4 years, “sexual minorities experienced more adverse childhood interpersonal events, were more likely to display chronically elevated inflammation, and reported more severe depression symptoms than heterosexuals. Adverse childhood interpersonal events and chronically elevated inflammation explained approximately 23 % of the total effect of the association between sexual orientation and depression symptom severity...These results provide novel longitudinal, population-based evidence for the role of chronically elevated inflammation in linking threats to social safety during childhood with depression symptom severity in young adulthood.”

Wallace ER, O'Neill S, Lagdon S.
Risk and protective factors for suicidality among lesbian, gay, bisexual, transgender, and queer (LGBTQ+) young people, from countries with a high global acceptance index (GAI), within the context of the socio-ecological model: A scoping review.

J Adolesc. 2024 Jul;96(5):897-924. PMID: [38372179](#)
From a research review on youth LGBTQ+ suicidality, which has higher prevalence rates than heterosexual and/or cisgender peers, “Key risk factors include past suicidality, adverse childhood experiences, internalized queerphobia, minority stress, interpersonal violence, bullying, familial conflict, and anti-LGBTQ+ policies/legislation. Key protective factors include self-affirming strategies, adult/peer support, at-school safety, access to inclusive healthcare, family connectedness, positive coming out experiences, gender-affirming services, and LGBTQ+ inclusive policies and legislation.”

Turner HA, Finkelhor D, Mitchell K, Colburn D.
Prevalence of Technology-Facilitated Abuse Among Sexual and Gender Minority Youths.

JAMA Netw Open. 2024 Feb 5;7(2):e2354485. PMID: [38306097](#)
From a 2021 US national online survey of 2639 young adults, “The prevalence of TFA [technology-facilitated abuse] occurring before the age of 18 years was highest among sexual minority females (55.3%) and gender minority individuals (53.4%). Rates of sexting were highest among cisgender sexual minority females (38.8%) and gender minority individuals (36.7%) and represented the

strongest risk factor for TFA exposure (odds ratio, 5.7)...demonstrates the risk of TFA among sexual and gender minority youths and the need to target prevention efforts toward these vulnerable groups.”

Race/Cultural Concerns

Lee A, Hastie M.
Recognising and managing bias and prejudice in healthcare.
BJA Educ. 2024;24(7):245-53. PMID: [38899317](#)

Learning objectives for this very thorough article include: “recognise the manifestations and impact of bias, prejudice and racism in healthcare; explain the neuropsychology of stereotypes, prejudice and bias; implement best practices for designing skills-based training curricula to address bias and microaggressions; and respond to organisational mandates and apply recommended practices, whilst being prepared for potential pitfalls and challenges of such initiatives.”

Hayes K, Szymusiak J, McCormick A.
A clinical antiracism curriculum for third-year medical students to bring antiracist principles to the bedside.

J Hosp Med. 2024 Jul;19(7):610-615. PMID: [38528658](#)
“We designed and implemented a curriculum, Social Justice Rounds (SJR), that incorporates teaching on DEI topics directly into inpatient clinical work. SJR are brief team-based discussions facilitated by Pediatric Hospital Medicine faculty that focus on racism in medicine and other forms of discrimination experienced by patients and the effect it has on their interaction with the healthcare system.”

Ferryman K, Cesare N, Creary M, Nsoesie EO.
Racism is an ethical issue for healthcare artificial intelligence.

Cell Rep Med. 2024;5(6):101617. PMID: [38897175](#)
“We recommend that future AI health ethics frameworks should (1) explicitly discuss how systemic and individual racism creates biased data and algorithms, (2) discuss solutions to address racial bias that are grounded in approaches that have proven to be effective, (3) discuss how proposed ethical frameworks can benefit communities or individuals impacted by racial inequities, and (4) make ethical recommendations that are intentionally antiracist.”

Campbell JA, Egede LE.

Contextualizing risk, pathways, and solutions for the relationship between adverse childhood experiences (ACEs) and type 2 diabetes among inner-city African Americans: A qualitative analysis and development of a theoretical framework.

J Affect Disord. 2024;361:522-7. PMID: [38917888](#)

From focus groups of 23 African American adults, average age 49, and average of 13 years of living with diabetes, three major themes were identified: family instability and financial hardship as risks for ACEs, maladaptive coping leading to diabetes, and social structure as a potential solution.

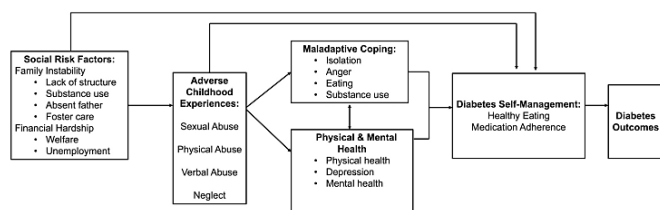


Fig. 2. Theoretical framework for the relationship between ACEs and diabetes.

Kenny KS, Wall-Wieler E, Frank K, et al.

Infant rates of child protective services contact and termination of parental rights by first nations status from 1998 to 2019: An example of intergenerational transmission of colonial harm.

Child Abuse Negl. 2024;106760. PMID: [38866661](#)

Of 217,261 infants born between 1998 and 2014 in Manitoba, Canada and residing in the province until at least age 5, “Overall 35.8 % of First Nations infants had an open file, 8.5 % experienced out-of-home placement, and 5.4 % experienced TPR [termination of parental rights]. Among other infants, 8.5 % had an open file, 1.3 % experienced out-of-home placement and 0.7 % experienced TPR...Findings support calls to greatly reduce the disruption of system contact in the lives of First Nations families.”

Perpetrators

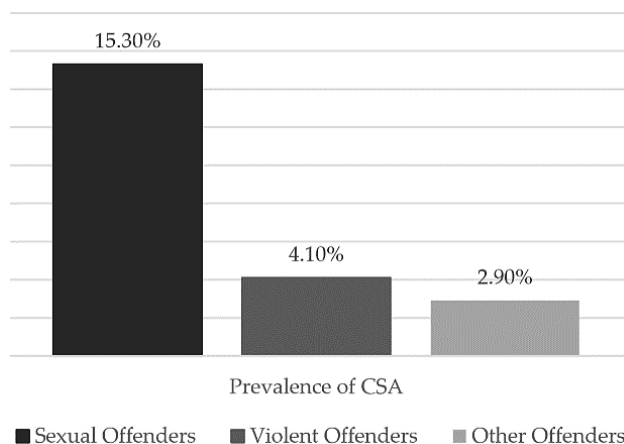
Silva C, Moreira P, Moreira DS, et al.

Impact of Adverse Childhood Experiences in Young Adults and Adults: A Systematic Literature Review.

Pediatr Rep. 2024;16(2):461-81. PMID: [38921705](#)

“ACEs have been associated with a span of negative outcomes in adulthood such as poor decision making, externalising behaviour problems, and aggressive behaviour. They can also be linked to violent crime, and they are also connected to an increased risk of developing psychopathic traits, as well as engaging in sexual offending, IPV, future incarceration, violent behaviour, and poor physical

and mental health outcomes. Furthermore, ACEs are also predictive of future incarceration, recidivism, violent behaviour, substance abuse, poor physical and mental health, chronic diseases, premature mortality, and functional limitations.” (Figure CSA – childhood sexual abuse)



■ Sexual Offenders ■ Violent Offenders ■ Other Offenders

Forsman H, Brännström L.

Criminal outcomes among infants placed in out-of-home care: A longitudinal nationwide cohort study.

Child Abuse Negl. 2024;154:106857. PMID: [38815491](#)

“The study includes 622,940 individuals born in Sweden between 1975 and 1981, among whom around 0.2 % (n = 1524) were taken into care during infancy (<12 months)...Infants placed in care exhibited higher risks of any criminal offence compared to the general population (men: Relative Risk = 1.32, women RR = 1.47), but lower risks compared to children placed at later ages...Infant placement in care is associated with an increased risk of criminal activity over the life course.”

Babcock JC, Gallagher MW, et al.

Which battering interventions work? An updated Meta-analytic review of intimate partner violence treatment outcome research.

Clin Psychol Rev. 2024;111:102437. PMID: [38810357](#)

From a research review of battering interventions, “Novel interventions, including Acceptance and Commitment Therapy and Circles of Peace had the largest effect sizes when put head-to-head with Duluth control groups. Future research directions include testing moderators and mechanisms of change of the battering interventions that work.”

Police and Court Systems

Nittis M, Bassed R.

Bite marks: To opine or not to opine?

J Forensic Leg Med. 2024 May;104:102689. PMID: [38759480](#)

Thorough forensic discussion of bite marks, how they are formed, their appearance, and the difficulty of stating definitively an injury is a bite in most circumstances which are “gray areas”. “It is possible that time and further research may help elucidate the minimum number of characteristics required to reliably identify a human bite mark on skin. It would seem, however, that we are still a significant way from being able to reliably do so.”



Image. 3Kick with toe of leather shoe.

Akutsu T, Minegishi S, Watanabe K, et al.

Quantitative evaluation of endometrium-expressed mRNAs for the purpose of discriminating between menstruation and traumatic vaginal injury in sexual assault cases.

Int J Legal Med. 2024;138(4):1245-54. PMID: [38409607](#)

“Menstrual blood markers evaluated in this study were highly specific for menstrual blood. The proposed procedure could be useful for discriminating between menstruation and traumatic bleeding in the female genital tract. In particular, PAEP [a marker from the uterine lining] is expected to be applicable to forensic casework samples because of its high specificity and robustness.”

Providers

Schonfeld DJ, Demaria T, Nasir A, et al.

Supporting the Grieving Child and Family: Clinical Report.

Pediatrics. 2024 Jul 1;154(1):e2024067212. PMID: [38881360](#)

“The death of someone close to a child often has a profound and lifelong effect on the child and results in a range of both short- and long-term reactions...This clinical report offers practical suggestions on how to talk with grieving children to help them better understand what has happened and its implications. An understanding of guilt, shame, and other common reactions as well as an appreciation of the role of secondary losses and the unique challenges facing children in communities characterized by chronic trauma and cumulative loss

will help the pediatrician to address factors that may impair children’s adjustment and to identify complicated mourning and situations when professional counseling is indicated. Advice on how to support children’s participation in funerals and other memorial services and to anticipate and address grief triggers and anniversary reactions is provided so that pediatricians are in a better position to advise caregivers and to offer consultation to and collaborate with professionals in schools, early education and child care facilities, and other child congregate care sites.”

Binnie V, Johnston ANB.

Exploring clinicians' knowledge and attitudes toward the care needs of complex adult users of an Emergency Department: A descriptive mixed methods study.

Int Emerg Nurs. 2024;75:101481. PMID: [38936276](#)

From surveys of 43 Australian ED clinicians on complex adult frequent users of the ED (FPA = frequently presenting adults), “Most perceived that ACEs were common among FPAs and influenced their ED presentations. Clinicians were more aware of the psychosocial impacts of ACEs than the risks to physical health. While most clinicians agreed that FPAs should be asked about ACEs for management planning, most never asked, describing multiple barriers to doing so. Consumer’s healthcare needs were often described as unmet by clinicians who desired additional support to provide care for this group.”

Donagh B, Taylor J, Bradbury-Jones C.

Service evaluation of an independent domestic violence advocate post in a children's hospital.

Nurs Child Young People. 2024 Jul 4;36(4):30-35. PMID: [37982145](#)

“In 2020-2021 an independent domestic violence advocate post was piloted at a children’s hospital for one year, the advocate’s role being to train hospital staff and support women who had experienced DVA. A service evaluation showed that the training and support provided by the independent domestic violence advocate had benefits for women, children and staff. It also confirmed that the commissioning of services for children exposed to DVA is often underfunded and overshadowed by the provision of support to adults.”

Bass GA, Chang CWJ, Winkle JM, et al.
In-Hospital Violence and Its Impact on Critical Care Practitioners.

Crit Care Med. 2024 Jul 1;52(7):1113-1126. PMID: [38236075](#)
 Hospital violence (HV) is globally prevalent, especially in complex care environments, and correlates with a variety of factors including ICU stay duration, conflict, and has recently expanded to out-of-hospital occurrences; online violence as well as stalking is increasingly prevalent. An overlap with violent extremism and terrorism that impacts healthcare facilities and clinicians is similarly relevant. A number of approaches can reduce HV occurrence including, most notably, conflict management training, communication initiatives, and visitor flow and access management practices.

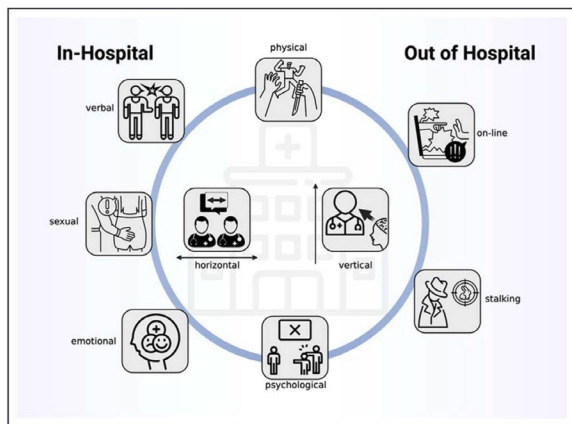


Figure 1. This graphic presents the different types of violence related to clinical care that may occur in or outside of the hospital.

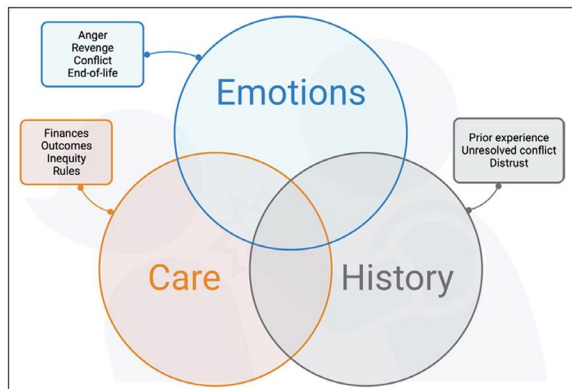


Figure 3. The overlap of major triggers for hospital violence within the domains of emotional content, delivered care, and prior experiences is depicted.

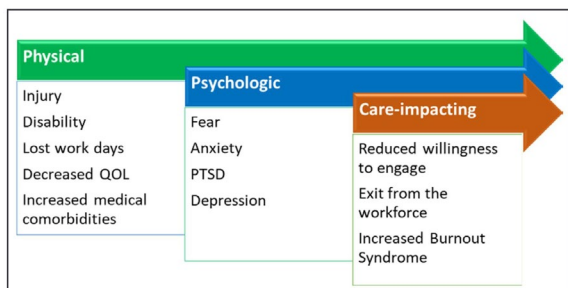


Figure 2. Key physical, psychological, and care-impacting consequences of hospital violence are detailed as interlinked events. PTSD = posttraumatic stress disorder, QOL = quality of life.

Prevention

Crouch E, Radcliff E, Bennett K, Brown MJ, Hung P.
Child and Adolescent Health in the United States: The Role of Adverse and Positive Childhood Experiences.
 Journal of child & adolescent trauma. 2024;17(2):517-25.
 PMID: [38938966](#)

“The present study examines the association between PCES and child health, controlling for ACE counts, using a nationally representative sample...In adjusted analyses, children who experienced any of the following PCEs had higher odds of good health: after school activities (adjusted odds ratio 1.85), resilient family (aOR 2.22), supportive neighborhood (aOR 1.56), and connected caregiver (aOR 1.84).”

Mitani H, Kondo N, Amemiya A, Tabuchi T.
Promotive and protective effects of community-related positive childhood experiences on adult health outcomes in the context of adverse childhood experiences: a nationwide cross-sectional survey in Japan.
 BMJ Open. 2024;14(6):e082134. PMID: [38925696](#)

From a large national study of Japanese adults, mean age 48.1 years, “community positive childhood experiences (CPCE = trusted adults other than parents, supportive friends, belongingness to school, or community traditions), were associated with lower odds of adult diseases (such as stroke, chronic obstructive pulmonary disease, chronic pain, depression, suicidal ideation and severe psychological distress) after adjusting for ACEs... Early-life interventions that enhance PCEs in schools and/or neighbourhoods are recommended.”

Haczkevicz KM, Shahid S, Finnegan HA, et al.
Adverse childhood experiences (ACEs), resilience, and outcomes in older adulthood: A scoping review.
 Child Abuse Negl. 2024;106864. PMID: [38926006](#)

“ACEs place older adults at risk of experiencing depressive symptoms, cognitive impairment, anxiety, and multimorbidity in older adulthood. As the population continues to grow older and experience such adversities, we will need to find solutions at a population level to address the needs of older adults and promote well-being...individuals demonstrating resilience may be able to do so, at least in part, because of acquired educational and socioeconomic resources. However...developing a deeper understanding of the pathways to resilience is a valuable public health objective.”

Larsen JM, Kothe R, Helm PJ, et al.

Childhood trauma exposure, age and self-compassion as predictors of later-life symptoms of depression and anxiety in American Indian adults.

Child Abuse Negl. 2024;153:106860. PMID: [38820955](#)

From an online survey of 729 American Indian adults, “self-compassion may be a particularly promising protective factor for symptoms of depression for those who have experienced high levels of childhood trauma, and for symptoms of anxiety regardless of childhood trauma exposure.”

Researchers

Aoki S, Nozawa E.

Pilot Study on Classification of Sensory Symptoms in PTSD.

Journal of child & adolescent trauma. 2024;17(2):283-93.

PMID: [38938954](#)

Using questionnaires and interviews, in this pilot study authors grouped types of traumas with PTSD sensory symptoms. “Cluster 1 is a group formed by child abuse and violence together with audition [hearing], tactile [touch], and hyperarousal. Cluster 2 is made up of natural disaster, accident, and sexual assault together with vision, olfaction [smell] and intrusion. Cluster 3 is made up of multiple traumas together with gustation [taste] and dissociation. It is speculated that the survivors of Child abuse and violence are hypersensitive to sounds, the presence of others, and physical contact because they try to quickly sense when a perpetrator is approaching. Natural disasters, accidents, and sexual assault are events with strong smell and severe visual impact, it is possible that they may easily cause reliving of the event in the form of shocking visual images and smells in flashbacks. Dissociation symptoms were related with complex trauma and taste.”

Kerns SEU, Maddox SJ, Berhanu RE, et al.

An Equity-Focused Assessment of Evidence-Based Parenting Intervention Research.

Clin Child Fam Psychol Rev. 2024 Jun;27(2):279-299. PMID: [38753099](#)

“This review highlights ways in which rigorous research can incorporate racial equity into the planning, design, execution, and interpretation and dissemination of programs of study. We posit that doing so improves the external validity of studies while maintaining high-quality research that can contribute to an evidence base.”

Coffin A, Elder B, Luercio M, et al.

Creating Culturally Adapted Multilingual Materials for Research.

Pediatrics. 2024 Jul 1;154(1):e2023063988. PMID: [38860305](#)

“We outline a resource-efficient, practical approach to advance language justice by translating and culturally-adapting study materials into multiple target languages simultaneously. Our method highlights the importance of doing prework, establishing project scope, designing English source materials thoughtfully, applying project guiding principles through a functionalist approach, and focusing on linguistic nuances.”

Wolf LE, Ram N, Letourneau EJ.

Certificates of Confidentiality and Mandatory Reporting.

JAMA Pediatr. 2024 Jul 1;178(7):639-640. PMID: [38709514](#)

Authors discuss recent changes from the NIH on Congressionally-authorized federal certificates of confidentiality that states “researchers may, but are not required to, report child sexual abuse to state authorities based on data obtained in a research study protected by a certificate...Nevertheless, citing mandatory reporting laws, some institutions have required researchers with certificates to report all instances of child sexual abuse identified through research data collection...research on child sexual abuse is essential to developing effective interventions that can prevent future abuse and minimize risks to other children. To conduct the research necessary...researchers must protect the identities of participants from disclosure with limited, exceptional exceptions.”

Other of Interest

Leung CW, Odoms-Young A, Essel K.

Food Insecurity Is a Source of Toxic Stress.

JAMA Pediatr. 2024 Apr 1;178(4):327-328. PMID: [38315497](#)

“Food insecurity meets all the criteria of a toxic stressor. Food insecurity is strong; despite caregivers’ efforts to shield them, children not only demonstrate awareness of food insecurity but also can attribute multiple negative psychological states (e.g. anxiety, shame, sadness) directly to their experience...Food insecurity also disrupts caregivers’ abilities to create a positive and supportive environment by increasing their anxiety and depression and negatively affecting their interactions with children...advocate for research, clinical, and policy approaches to better address the root causes of food insecurity and promote lifelong health.”