

Safeguarding Children and Adults

4th January 2017

Dear Colleagues

Below are details of some recently published articles and other items of interest on Safeguarding and Protection of Adults and Children.

If you wish to see the full text you should be able to access it by clicking on the title or on other links below the item. Depending on the source of the item, you may need to enter your Athens password in order to see it. If there is no link or you do not have an Athens password or you have any other problem with accessing these items, please email library.tatchbury@southernhealth.nhs.uk and I will obtain the full text for you.

Regards
Stella Scott
Senior Library Assistant

News items, books, reports

Including items from NSPCC's CASPAR bulletin

Mental health support for young people in care: call for evidence

The Social Care Institute for Evidence (SCIE) is looking for examples of effective practice relating to models of care and care pathways to support the mental health and wellbeing of children in care.

Deadline is 20 January 2017.

Source: [SCIE](#) Date: 22 December 2016

Transition from children's to adults' services

The National Institute for Health and Care Excellence (NICE) has published guidance on working with under 25-year-olds making the transition from children's to adults' health and social care services in England. Recommendations include: start to plan the transition when children are 13 to 14 years old; have a named worker to coordinate the transfer and the young person to meet a practitioner from each adults' service before they transfer.

Source: [NICE](#) Date: 21 December 2016

Further information: [Transition from children's to adults' services \(PDF\)](#)

Child protection supervision skills course

This course, organised by the NSPCC takes place on 17-19 January and 1-2 March 2017 in London.

Source: [NSPCC](#)

Children's rights training resource

Coram International has launched a free training resource for professionals working with children in residential care, detention facilities or in justice settings. This resource helps professionals to strengthen their skills and knowledge of children's rights and communicate with children and young people, and helps children and young people to express their views and participate in decisions.

Source: [Coram](#) Date: 16 December 2016

Further information: [Unlocking Children's Rights](#)

Violence against women and girls newsletter

The Home Office has published the winter 2016 edition of the violence against women and girls newsletter. This includes up to date information on: the updated domestic violence disclosure scheme guidance; the stalking protection order; the forced marriage unit; the National FGM Centre.

Source: [Home Office](#) Date: 12 December 2016

Further information: [Violence against women and girls newsletter: winter 2016 \(PDF\)](#)

Psychiatry Advisor

December 13, 2016

Connection Found Between Emotional Abuse and Migraine

Laura Stiles, Assistant Editor

http://www.psychiatryadvisor.com/childadolescent-psychiatry/instances-of-migraine-increase-with-instances-of-emotional-abuse/article/578795/?DCMP=EMC-PA_Update&cpn=&hmSubId=&hmEmail=bIFquHepDBbNg-viasv5WTkFvKaKU_N65tP_ZDUzz3KQUxy8keCZKA2&NID=&dl=0&spMailingID=16124719&spUserID=MTg2MjY5ODgwNjgyS0&spJobID=921313765&spReportId=OTIxMzEzNzY1S0

Journal articles

The complexity of child protection recurrence: The case for a systems approach.

Citation: Child abuse & neglect, Dec 2016, vol. 63, p. 162-171, 1873-7757 (December 3, 2016)

Author(s): Jenkins, Brian Q; Tilbury, Clare; Mazerolle, Paul; Hayes, Hennessey

Abstract: Research on child protection recurrence has found consistent child, family, and case characteristics associated with repeated involvement with the child protection system. Despite the considerable body of empirical research, knowledge about why recurrence occurs, and what can be done to reduce it, is limited. This paper reviews the empirical literature and analyses the approaches of prior recurrence research. Four related conceptual challenges are identified: (1) a tendency to conflate child protection recurrence with repeated child maltreatment; (2) uncertainty about how best to operationalize and measure child protection recurrence in research; (3) inconsistency between prevailing explanations for the most frequently observed patterns of recurrence; and (4) difficulty in developing coherent strategies to address child protection recurrence based on research. Addressing these challenges requires a greater consideration of the effects of decision-making in the child protection system on recurrence. This paper proposes a methodology based in systems theory and drawing on existing administrative data to examine the characteristics of the child protection system that may also produce recurrence. Copyright © 2016 Elsevier Ltd. All rights reserved.

Child protection: A universal concern and a permanent challenge in the field of child and adolescent mental health

Citation: Child and Adolescent Psychiatry and Mental Health, Dec 2016, vol. 10, 1753-2000 (Dec 2016)

Author(s): Fegert, Joerg M.; Stötzel, Manuela

Abstract: This editorial highlights on universal concern and a permanent challenge in the field of child and adolescent mental health. For much of history, cruelty to children was viewed as a private rather than a societal concern. It would take many more years before child protection would come to be seen as the responsibility of society overall. While individual tragedies have served to attract attention to child maltreatment, focusing on single cases can be a hindrance with respect to acknowledging the magnitude and ubiquity of the problem. The World Health Organization (WHO) has also taken steps to address violence against children, issuing regional reports on the prevention of child maltreatment. While there is increased knowledge today about the prevalence of abuse, sexual abuse, and neglect of children in different settings, more research is needed on prevention and intervention. Professionals in the fields of child and adolescent psychiatry as well as in other mental health areas can play an important role in establishing a continuous monitoring system within the healthcare system, in cooperation with other professions. In recognition of the significance of child abuse, both standard sets of diagnostic criteria have added information specific to the problem. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

Violence by Parents Against Their Children: Reporting of Maltreatment Suspicions, Child Protection, and Risk in Mental Illness.

Citation: The Psychiatric clinics of North America, Dec 2016, vol. 39, no. 4, p. 691-700, 1558-3147 (December 2016)

Author(s): McEwan, Miranda; Friedman, Susan Hatters

Abstract: Psychiatrists are mandated to report suspicions of child abuse in America. Potential for harm to children should be considered when one is treating parents who are at risk. Although it is the commonly held wisdom that mental illness itself is a major risk factor for child abuse, there are methodologic issues with studies purporting to demonstrate this. Rather, the risk from an individual parent must be considered. Substance abuse and personality disorder pose a separate risk than serious mental illness. Violence risk from mental illness is dynamic, rather than static. When severe mental illness is well-treated, the risk is decreased. However, these families are in need of social support. Copyright © 2016 Elsevier Inc. All rights reserved.

A German e-learning-training in the context of early preventive intervention and child protection: Preliminary findings of a pre-post evaluation

Citation: Child and Adolescent Psychiatry and Mental Health, Dec 2016, vol. 10, 1753-2000 (Dec 2016)

Author(s): Bressemer, Kristina; Ziegenhain, Ute; Doelitzsch, Claudia; Hofer, Alexandra; Besier, Tanja; Fegert, Joerg M.; Kuenster, Anne K.

Abstract: Background: In recent years, a number of government-sponsored initiatives have been implemented in Germany that are focused on early preventive intervention in child protection. In response to the need for interdisciplinary training in this area, the internet-based e-learning program "Early Preventive Intervention and Child Protection" was developed for professionals in the child welfare and health care systems working with families with infants and toddlers. The program is currently undergoing evaluation for effectiveness and user satisfaction. Methods: In a pre-post design, users are requested to complete questionnaires that assess three measures of expertise: theoretical knowledge of relevant fields, the ability to correctly identify subtle signals of infant communication, and the ability to assess maternal sensitivity. This article presents the contents of the program and the pre-training results (N = 1.294 participants). Descriptive analyses as well as Pearson correlations and Bonferroni corrections of error were conducted using the statistical program SPSS v. 21.0. Results: The findings show that a wide range of professionals are making use of the program, and that their existing theoretical knowledge about early preventive intervention, as well as their ability to identify subtle signals of infant communication, is relatively good. However, their ability to assess maternal sensitivity, which is considered a crucial indicator for the risk of child abuse, was low. Conclusions: The outcome of the pre-training results indicates that professionals working in the area of child protection need to develop more capability in recognizing maternal sensitivity, in order to ensure early detection of families who are at risk and thus in need of support. Finally, the number of years of professional experience did not correlate with the scores on any of the three measures, which emphasizes the importance of providing interdisciplinary training in this area for all those working in child and family services, regardless of background. (PsycINFO Database Record (c) 2016 APA, all rights reserved)

The Role of Gender in Violence Experienced by Adults With Developmental Disabilities **Journal of Interpersonal Violence - Volume: 32, Number: 1 (January 2017)**

Laura Platt,

Abstract

Violence against people with developmental disabilities is a highly prevalent yet understudied phenomenon. In particular, there is a paucity of literature surrounding the role of gender and the experiences of men. Using a cross-sectional study design, we surveyed 350 people with diverse developmental disabilities about experiences of abuse, perpetrators of abuse, and their physical and mental health status. These data were analyzed to determine whether gender influenced these domains. Statistical methods included chi-square, independent *t* tests, logistic regression, and hierarchical multiple regressions. Male and female participants reported abuse at high rates, with 61.9% of men and 58.2% of women reporting abuse as children and 63.7% of men and 68.2% of women reporting abuse as adults. More women than men reported adult sexual abuse, but there was no gender difference in the prevalence of any other form of abuse. Women were more likely than men to identify an intimate partner as their abuser, although intimate partners represented the minority of abusers for both men and women. Violence was associated with worse health status regardless of participant gender. These findings confirm that violence is an important issue for both men and women with developmental disabilities. Although some expected gender differences arose, such as higher rates of adult sexual abuse and intimate partner violence against women, these differences were less pronounced than they are in the general population, and the overall picture of abuse was one of gender similarities rather than differences.

Altered Eating Behaviors in Female Victims of Intimate Partner Violence **Journal of Interpersonal Violence - Volume: 31, Number: 20 (December 2016)**

Susan P. Y. Wong, MD, Judy C. Chang, MD, MPH

Abstract

Little is known about altered eating behaviors that are associated with the experience of intimate partner violence (IPV) victimization. Our aim was to explore the experiences and perspectives of IPV victims regarding their eating behaviors and their attitudes toward and use of food. We conducted focus groups and individual interviews with 25 IPV victims identified at a domestic violence agency and asked them about their eating behaviors and how, if at all, these behaviors related to their experience of IPV. Qualitative analysis of the transcribed encounters identified themes explicating the relationship between their eating behaviors and experiences of IPV. All women described altered eating behaviors related to IPV that were categorized into several major themes: (a) somatization (victims experience significant somatic symptoms as a result of abuse); (b) avoiding abuse (victims modify their eating behaviors to avoid abuse); (c) coping (victims use food to handle the psychological effects of abuse); (d) self-harm (victims use food to hurt themselves as a reaction to the abuse); and (e) challenging abusive partners (victims use their eating behaviors to retaliate against their abusers). IPV can provoke altered eating behaviors in victims that may be harmful, comforting, or a source of strength in their abusive relationships. Understanding the complex relationship between IPV and victims' altered eating behaviors is important in promoting healthy eating among victims.

Support Schemas Influence Reactivity for Adult Survivors of Childhood Maltreatment Journal of Interpersonal Violence - Volume: 31, Number: 20 (December 2016)

Anthony O. Wells, Angela Scarpa, Jonathan C. Waldron

Abstract

Adult survivors of childhood maltreatment can be resilient when they have adequate psychosocial resources to cope with maltreatment-related sequelae; however, interpersonal problems may influence the effectiveness of such resources. This study used a schema activation experimental paradigm to test the benefit of social support cognitions on emotional reactivity in adult survivors, while also testing for the moderating role of interpersonal problems and the mediating role of stress appraisal. Young women ($N = 126$, ages = 18-23) with histories of childhood maltreatment were administered an anger provocation stressor task while their cardiac activity, state anger, and stress appraisals were assessed. Prior to the stressor, women were randomly assigned to either a support schema condition or an acquaintance schema (control) condition, in which they were asked to think and write about either a supportive person or casual acquaintance. The support schema condition demonstrated the least emotional reactivity as evidenced by subjective anger and heart-rate variability, and this outcome was strongest for those with high interpersonal problems. Also, stress appraisals, particularly feeling intimidated, partially mediated the support schema and emotional reactivity relationship. These findings suggest that maltreated women can regulate anger by activating their social support schema. Moreover, support schema may be an important focus of intervention for adult survivors with high interpersonal problems.

Child Maltreatment and Adult Living Standards at 50 Years

Pediatrics

December 2016

Snehal M. Pinto Pereira, Leah Li, Chris Power

Abstract

BACKGROUND AND OBJECTIVE: Child maltreatment (abuse and neglect) has established effects on mental health. Less is known about its influence on adult economic circumstances. We aimed to establish associations of child maltreatment with such outcomes and explore potential pathways.

METHODS: We used 1958 British birth cohort data ($N = 8076$) to examine associations of child neglect and abuse with adult (50 years) long-term sickness absence, not in employment, education or training (NEET), lacking assets, income-related support, poor qualifications, financial insecurity, manual social class, and social mobility. We assessed mediation of associations by 16-year cognition and mental health.

RESULTS: Abuse prevalence varied from 1% (sexual) to 10% (psychological); 16% were neglected. A total of 21% experienced 1 maltreatment type, 10% experienced ≥ 2 types. Sexual and nonsexual abuse were associated with several outcomes; eg, for sexual abuse, adjusted odds ratio (aOR) of income-related support was 1.75 (95% confidence interval [CI], 1.12–2.72). Associations were little affected by potential mediating factors. Neglect was associated with several adult outcomes (eg, aOR of NEET was 1.43 [95% CI, 1.10–1.85]) and associations were mediated by cognition and mental health (primarily by cognition): percent explained varied between 4% (NEET) to 70% (poor qualifications). In general, the risk of poor outcome increased by number of maltreatment types (eg, aOR for long-term sickness absence increased from 1.0 [reference] to 1.76 [95% CI, 1.32–2.35] to 2.69 [95% CI, 1.96–3.68], respectively, for 0, 1, and ≥ 2 types of maltreatment).

CONCLUSIONS: Childhood maltreatment is associated with poor midadulthood socioeconomic outcomes, with accumulating risk for those experiencing multiple types of maltreatment. Cognitive ability and mental health are implicated in the pathway to outcome for neglect but not abuse.