

Safeguarding

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April 2025

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1. Ophthalmology Examinations in Children With Skull Fractures and Underlying Focal Hemorrhage

Authors: Breeden, Karli;Christian, Cindy W.;Wood, Joanne N.;Binenbaum, Gil;Lindberg, Daniel M.;Bachim, Angela;Bressler, Colleen J.;Frasier, Lori;Frazier, Terra;Johnson, Nicole R.;Laub, Natalie;Letson, Megan M.;Ruiz-Maldonado, Tagrid;Valente, Matthew;Kiely, Jenna;Leonard, Jan and Henry, M. K.

Publication Date: 2025

Journal: Pediatric Emergency Care

Abstract: Competing Interests: Disclosure: K.B., C.J.B., C.W.C., M.K.H., M.M.L., T.R.-M., M.V., and J.N.W.'s employers have received payment for expert testimony when subpoenaed to testify in cases of suspected child maltreatment. C.W.C., D.M.L., L.F., and T.F. provide medical legal expert testimony in child abuse cases. M.K.H.'s time was supported under grant number K08HS028847 from the Agency for Healthcare Research and Quality (AHRQ), US Department of Health and Human Services (HHS). The authors are solely responsible for this document's contents, findings, and conclusions, which do not necessarily represent the views of AHRQ. Readers should not interpret any statement in this report as an official position of AHRQ or of HHS. K.B.'s time was supported under grant number T32HP46118 from the Health Resources and Services Administration (HRSA), US Department of Health and Human Services (HHS). The authors are solely responsible for this document's contents, findings, and conclusions, which do not necessarily represent the views of HRSA. Readers should not interpret any statement in this report as an official position of HRSA or of HHS. The remaining authors declare no conflict of interest.; Objectives: To assess the frequency and yield of retinal

examination in children below 2 years old undergoing abuse evaluations in the setting of skull fracture(s) and small underlying intracranial hemorrhage.; Methods: This cross-sectional study used CAPNET, a multicenter child physical abuse network, to identify children below 2 years with a skull fracture(s) and intracranial injury limited to an underlying small focal intracranial hemorrhage undergoing subspecialty child abuse evaluations. Our outcomes of interest were (1) the performance of a retinal examination, (2) the identification of retinal hemorrhages, and (3) associations of clinical factors and CAPNET site with the performance of retinal examinations. We hypothesized that retinal hemorrhages would be identified in <5% of patients.; Results: Of 242 children who met inclusion criteria, the majority (189, 78.1%) presented with a reported history of accidental trauma, and most (211, 87.2%) lacked additional injuries. Only 9 (3.7%) had loss of consciousness and/or seizures/seizure-like activity. The majority (201, 83.1%) had low concern for abuse. Overall, 104 (43.0%) children underwent retinal examinations, of which 0 had retinal hemorrhages (one-sided 95% CI: 0-2.8%). Children without a reported accidental mechanism of injury ($P=0.004$), those with intermediate/high concern for abuse ($P<0.001$), and children with occipital fractures ($P=0.008$) were more likely than their counterparts to undergo retinal examination. The proportion of children undergoing retinal examination varied by CAPNET site ($P<0.001$).; Conclusions: Our findings suggest that it may be reasonable to forgo retinal examinations in children below 2 years of age with skull fracture(s) and intracranial injury limited to an underlying small focal hemorrhage who are overall neurologically well-appearing. (Copyright © 2025 Wolters Kluwer Health, Inc. All rights reserved.)

2. The effects of workplace violence on nursing students from the perspectives of clinical facilitators or preceptors

Authors: Dafny, Hila Ariela;Snaith, Nicole;Cooper, Paul;Waheed, Nasreena;McCloud, Christine and Champion, Stephanie

Publication Date: 2025

Journal: Journal of Professional Nursing 56, pp. 104–112

Abstract: Violence is well documented in the nursing profession and is compounded by an increasing incidence of workplace violence towards nursing students. Poor clinical experiences where violence is witnessed or experienced have long-term consequences for both the student and the profession. This study aimed to ascertain clinical facilitators' perceptions about the impact of workplace violence on nursing students during their clinical placements. Phenomenology guided qualitative research methods were used in this study. Eleven clinical facilitators employed in various South Australian healthcare settings were interviewed, and the qualitative data was transcribed and thematically analysed manually assisted by NVivo 12 software. Three major themes emerged from the data: Academic and future career impacts, Impact on personal life, and mental and physical health. Clinical facilitators described how baccalaureate nursing students feared for their emotional, mental and physical safety, questioned their career choices and described the impact of violent experiences on their personal lives. Clinical facilitators were often unable to prevent such experiences from happening to nursing students and, at times, felt unprepared or inadequately supported by universities. A combined University and healthcare facility approach that prepares, manages, supports and reduces the incidence of workplace violence for nursing students and clinical

facilitators is urgently required to safeguard the mental, physical and emotional health of student nurses and clinical facilitators. • Workplace violence has profound consequences for baccalaureate students and clinical facilitators. • Violence from perpetrators' staff impacted students' grades and learning opportunities. • Clinical facilitators were often unable to prevent workplace violence and felt unprepared/unsupported. • Universities and healthcare providers approach is needed to reduce the incidence of workplace violence.

3. 25-OH Vitamin D Deficiency Does Not Significantly Predispose Young Children to Multiple Fractures from Minimal Trauma

Authors: Dyba, Gregory;Capoot, Camryn;Becher, Nicole;Finnegan, Kelly;Wallace, Carmelle;Mong, David;Chiesa, Antonia;Ma, Nina S.;Stevens, Jennifer;Kaizer, Alexander M.;Olson, Kaitlin E.;Moulton, Steven L. and Lindberg, Daniel M.

Publication Date: 2025

Journal: Journal of Pediatric Surgery , pp. 162281

Abstract: Competing Interests: Declaration of Competing Interest Drs. Lindberg, Finnegan, Wallace, and Chiesa, have provided paid expert witness testimony and record review in cases when there is concern for child physical abuse. The contributors to this paper have no other relevant conflicts of interest.; Background: In the absence of significant accidental trauma, the identification of multiple fractures in a young child raises concern for abuse. One group has suggested that there is an unrecognized "epidemic" of 25-OH vitamin D deficiency that produces findings frequently mistaken for child abuse.; Objective: Test whether 25-OH vitamin D deficiency predisposes young children to fractures.; Participants and Setting: Children <5 years old with blood obtained during acute trauma care at a large, regional pediatric center.; Methods: This cross-sectional study compared the number of fractures in children with 25-OH Vitamin D deficiency to those with sufficient levels.; Results: Among 656 eligible participants, 25-OH vitamin D levels were obtained in 203 (31%). Using a threshold of 20 ng/mL, 35 (17%) participants were found to have 25-OH vitamin D deficiency. Among children with deficiency, 19/35 (54%) had at least one fracture, compared to 97/168 (58%) of those with sufficiency ($p=0.712$). Among those with fractures, the mean number of fractures was 2.9 for sufficient children and 3.2 for deficient children ($p=0.70$). Fourteen children had five or more fractures, including 11 with physical abuse, and 3 with severe accidental trauma. Among 35 children with deficiency, 17 (49%) were reported to Child Protective Services, compared to 62/168 (37%) with sufficiency (OR 1.62, 95%CI 0.78-3.36) **CONCLUSION:** 25-OH vitamin D deficiency in the absence of significant trauma is not a plausible explanation for multiple fractures.; Type of Study: Prospective, Cross-sectional Study **LEVEL OF EVIDENCE:** III. (Copyright © 2025 Elsevier Inc. All rights reserved.)

4. Evaluating Young Children With Fractures for Child Abuse: Clinical Report

Authors: Haney, Suzanne;Scherl, Susan;DiMeglio, Linda;Perez-Rossello, Jeannette;Servaes, Sabah and Merchant, Nadia

Publication Date: 2025

Journal: Pediatrics 155(2), pp. 1–19

Abstract: Fractures are common injuries in childhood and can be caused by unintentional injury, medical conditions, and child abuse. Although the consequences of failing to diagnose an abusive injury in a child can be grave, the consequences of incorrectly diagnosing child abuse in a child whose fractures have another etiology are also significant. This report aims to review recent advances in the understanding of fracture specificity, fracture mechanisms, and other medical conditions that predispose infants and children to fracture. This clinical report will aid pediatricians and pediatric care providers in developing an evidence-based differential diagnosis and performing appropriate evaluations when assessing a child with fractures.

5. Exploring the Use of an Augmented Reality Device Learning Tool for Multidisciplinary Staff Training on Domestic Abuse and Sexual Violence: Postintervention Qualitative Evaluation

Authors: Karunaratne, Dilroshini;Whitlock, Jessica;Moore, Amber;Dasigan, Krishna;Chevolleau, Jasmine;Bartholomew, Brent;Kelly, Nikki and Cohen, Charlotte E.

Publication Date: 2025

Journal: JMIR Formative Research 9, pp. e60075

Abstract: Background: Legislative policies published by National Health Service, England and the UK Government focus on prioritizing the creation of a stronger system. These frameworks emphasize on the improvement of health care staff's ability to identify and refer domestic abuse (DA) survivors as key areas for supporting workforce development. Health care staff are often the first professional contact of survivors of DA, and insufficient staff training is a key barrier to survivors being identified and directed to support. The Microsoft HoloLens2 is a mixed-reality headset that allows virtual objects (holograms) to be integrated into the real world. Mixed-reality headsets are being increasingly used within medical education and have the advantage of independent operation, reducing the staffing requirements for teaching. The HoloLens2 can be used to project HoloPatients (HPs), which resemble clinically unwell patients, into the classroom. Two of these HPs have been specifically designed to portray survivors of DA and sexual violence (SV).; Objective: This study explored potential uses of the HP in DA and SV training as a potential survivor-centered educational initiative that could be used as an adjunct to existing training for health care professionals and community sector workers.; Methods: Frontline staff and community stakeholders from the national health service, DA, and law enforcement sectors were invited on 3 separate occasions (n=14, 12, 22) to a HoloLens2 demonstration that displayed 9 HPs. The patient voice was to be outlined by personalized scripts, co-created alongside sector charities, ensuring survivor engagement and participation. Participants were given the opportunity to wear the headset and familiarize themselves with the technology during the sessions. A post-intervention evaluation research model was used to explore the feasibility and functionality of the HP as an educational tool.; Results: Thematic analysis described the HP as a "realistic," "adjustable" tool that "creates a safe learning environment." Participants suggested it could be useful in "pre-exposure preparation" by "improving communication" and allowing different approaches to be trialed in a safe environment. The use of survivor scripts was described as a useful tool to "bring the survivor into the learning space" in a safe way. Participants identified the HP as a suitable tool

for workers inside and outside health care, including social sectors such as law enforcement (32%).; Conclusions: The HP acts as a low-risk, adaptable tool for trainees to develop skills in a safe environment. This study demonstrates that professionals perceived the HoloLens as an innovative means to amplify the lived experience voice. Further research will evaluate this additional impact on trainees' confidence and responses to survivors disclosing DA and SV within different disciplines to drive improved outcomes. (© Dilroshini Karunaratne, Jessica Whittock, Amber Moore, Krishna Dasigan, Jasmine Chevolleau, Brent Bartholomew, Nikki Kelly, Charlotte E Cohen. Originally published in JMIR Formative Research (<https://formative.jmir.org>).)

6. Distal femoral metaphyseal fractures in children: A systematic review and meta-analysis of their significance in the context of child abuse

Authors: Khare, Shrayash

Publication Date: 2025

Journal: The Medico-Legal Journal , pp. 258172241293885

Abstract: BackgroundDistal femoral metaphyseal fractures in children pose diagnostic challenges due to potential accidental and non-accidental aetiologies. This review aims to critically analyse the evidence on the association between distal femoral metaphyseal fractures and child abuse, as well as fracture patterns aiding in distinguishing inflicted injuries from accidental injuries.MethodsA systematic review of studies involving children with distal femoral metaphyseal fractures was conducted, examining the reported associations with child abuse, fracture patterns and proposed mechanisms.ResultsThe review revealed a significant association between distal femoral metaphyseal fractures and child abuse, particularly in non-ambulatory infants. However, some fractures may occur accidentally, often from short falls with direct impact on the knee. Certain fracture patterns, such as transverse or oblique configurations, suggest abuse, while spiral or buckle patterns are more likely accidental. Case series and retrospective studies reported varying findings, with some studies supporting a strong association with abuse and others highlighting the potential for accidental mechanisms.ConclusionsA comprehensive evaluation, including history, physical examination, skeletal survey and multidisciplinary collaboration, is crucial for accurate diagnosis and management. Healthcare professionals should maintain a high index of suspicion for child abuse while recognising accidental mechanisms. Specific recommendations for healthcare professionals and future research directions are provided.

7. Countering Arguments Against Parental Alienation as A Form of Family Violence and Child Abuse

Authors: Kruk, Edward and Harman, Jennifer J.

Publication Date: Mar ,2025

Journal: American Journal of Family Therapy 53(2), pp. 117–146

Abstract: Despite scientific recognition of parental alienation as a form of child maltreatment

and family violence, numerous critiques been advanced challenging the concept. A recent UN report concluded that parental alienation is a "pseudo-concept" lacking empirical validity, posing significant dangers to women and children at risk of family violence and abuse. In this article, we present and refute the most common arguments that have been advanced against the proposition that parental alienation and alienating behaviors are a form of family violence and child abuse. We examine each in relation to empirical evidence published in over one hundred peer-reviewed research studies.

8. A longitudinal examination into childhood abuse and substance use to PTSD symptoms and deviant peer association: Impact of developmental timing of abuse

Authors: Lawrence, Timothy I.;Fitzgerald, Michael and Wojciechowski, Thomas

Publication Date: 2025

Journal: Child Abuse & Neglect 163, pp. 107362

Abstract: Competing Interests: Declaration of competing interest This paper is not under review in any other journal, was not supported by any funding, and has no conflict of interest.; Background: Following child abuse, adolescents often endorse PTSD symptoms and use substances. However, few studies have addressed the longitudinal underlying effects of deviant peer association and revictimization and the developmental impact of PTSD symptoms and substance use.; Objective: To address these limitations, the current study utilized the susceptibility and self-medication hypothesis to examine abuse in childhood ages 0-12 and adolescence ages 12-16 as predictors of substance use in mid-adolescence at age 16 and symptoms of (PTSD) in late adolescence at age 18 mediated by associating with deviant peers and revictimization using a sample of 596 (73.8 % racial minority; 50.7 % male) adolescents from Longitudinal Study of Child Abuse and Neglect.; Methods: This study utilized structural equation modeling (SEM) to examine the direct and indirect effects of child abuse, substance use, deviant peer affiliation, and PTSD symptoms across different developmental periods using bootstrapping procedures.; Results: Results indicated that substance use in mid-adolescence mediated the relationship between abuse in adolescence and PTSD symptoms in middle adolescence, while the abuse in childhood was not indirectly related. Furthermore, the indirect effect between abuse in childhood and PTSD symptoms at age 16 was mediated by PTSD at age 12 and deviant peer affiliation at age 14. Substance use in adolescence, PTSD symptoms, and adolescent peer social networks may be a point of intervention to reduce future adverse outcomes.; Conclusion: The findings of this study provided evidence of the long-term consequences of experiencing child abuse and subsequent adverse outcomes, including PTSD symptoms, substance use, and adolescent deviant peer affiliation. This study also highlighted preventive and intervention mechanisms to attenuate these adverse outcomes. (Copyright © 2025 Elsevier Ltd. All rights reserved.)

9. Neglect of Children with Disabilities: A Scoping Review

Authors: Makhoul Khoury, Siwar;Cohen, Ayala;Fabris, Matteo Angelo and Gur, Ayelet

Publication Date: 2025

Abstract: Background: Children with disabilities face an increased risk of neglect and maltreatment due to their dependence on caregivers, social isolation, and challenges in seeking help. While extensive research has examined child abuse, neglect remains an underexplored yet pervasive issue affecting this vulnerable population. Objective: This scoping review synthesizes literature from the past decade to assess the prevalence, characteristics, and risk factors of neglect among children with disabilities, aiming to identify gaps in research and inform policy and intervention efforts. Methods: Following the PRISMA-ScR guidelines, a systematic search was conducted across multiple electronic databases, including PsycNET, Social Services Abstracts, ERIC, PubMed, and EBSCO. Studies were included if they focused on neglect among children with disabilities and were published in English within the last ten years. Thematic analysis was employed to extract and categorize findings. Results: Sixteen studies met the inclusion criteria, revealing a significantly higher prevalence of neglect among children with disabilities compared to their typically developing peers. The type and severity of disability influenced the likelihood and nature of neglect, with children with intellectual disabilities (ID), autism spectrum disorder (ASD), and sensory impairments facing particularly high risks. Key risk factors included parental stress, economic hardship, limited access to resources, and systemic failures in early identification and intervention. Despite the severity of neglect, evidence-based preventive strategies remain scarce, and existing child protection frameworks often fail to account for the unique needs of children with disabilities. Conclusions: The findings underscore the urgent need for targeted interventions, specialized training for professionals, and policy reforms to address the neglect of children with disabilities. Future research should focus on developing and evaluating culturally sensitive and disability-specific support systems to mitigate the long-term consequences of neglect.

10. Adverse childhood experiences (ACEs) and repeated wheezing from 6 to 30 months of age: exploring the role of race and ethnicity

Authors: Merced-Nieves, Francheska;Schechter, Marina;Colicino, Elena;Frost, Allison and Wright, Rosalind J.

Publication Date: 2025

Journal: Stress (Amsterdam, Netherlands) 28(1), pp. 2477530

Abstract: Identifying children at risk for respiratory disorders involves understanding early risk factors. This study prospectively examines how specific types of early adversity influence childhood wheeze and how these vary by race and ethnicity. Analyses included N = 746 mother-infant dyads from an urban pregnancy cohort. Mothers completed the Lifetime Stressor Checklist-Revised (LSC-R), Edinburgh Postnatal Depression Scale (EPDS), Spielberger State-Trait Anxiety Inventory (STAI), Posttraumatic stress disorder Checklist-Civilian version (PCL-C), and Traumatic Events Screening Inventory (TESI) when infants were 6 months old to assess adverse childhood experiences (ACEs). Mothers reported child wheeze at 4-month intervals to index wheezing episodes from age 6-30 months. We first assessed independent associations between ACE measures and wheeze frequency using Poisson regression. We then used weighted quantile sum (WQS) regression to derive an ACEs mixture index to estimate joint associations with wheeze frequency in the overall sample and stratified by

maternal race and ethnicity adjusting for child sex, maternal asthma and education. There was a 2.05 increase (95% CI = 1.21, 3.49) in wheeze frequency with each quintile increase of the ACEs index in Black/Black Hispanics; the TESI (72%) contributed most strongly to the mixture. In non-Black Hispanics, there was a 1.33 (95% CI = 1.05, 1.67) increase in wheeze frequency with each ACEs quintile increase with EPDS (76%) contributing most strongly. Findings support the need to move the ACEs paradigm beyond a simple cumulative score when examining effects on early respiratory disease risk. Results also highlight how the impact of early life ACEs varies by ethnoracial identity.

11. Hypothesis: Young infant bone strength is a multifactorial trait

Authors: Miller, Marvin

Publication Date: 2025

Journal: Medicine 104(10), pp. e41701

Abstract: Competing Interests: The authors have no funding and conflicts of interest to disclose.; Bone strength has been assumed to be relatively similar in young infants born at term. While prematurity has long been known as a risk factor for temporary bone fragility, few other factors have been appreciated that might predispose to young infant bone fragility. Moreover, young infants who present with unexplained fractures are often diagnosed as victims of child abuse based on alleged pathognomonic X-ray findings. However, review of cases of young infants with unexplained fractures often suggests child abuse is unlikely as there is often no bruising or other injuries that would be expected in these infants. The Utah Paradigm is the contemporary model of bone physiology that allows for evaluation of factors that may affect bone strength. Application of the Utah Paradigm to these cases reveals multiple, previously unappreciated, and plausible risk factors to explain the temporary bone fragility in these cases. These risk factors include decreased fetal bone loading from decreased fetal movement, maternal vitamin D deficiency, fetal exposure to drugs that can decrease bone strength, prematurity, hypermobile Ehlers Danlos Syndrome, and gestational diabetes mellitus. It is thus concluded that young infant bone strength is a multifactorial trait. Infants with unexplained fractures and bone fragility from these risk factors in which child abuse is unlikely have a recently described condition called metabolic bone disease of infancy. (Copyright © 2025 the Author(s). Published by Wolters Kluwer Health, Inc.)

12. Knowledge and management of Münchausen's Syndrome by proxy: a survey conducted through the compilation of a questionnaire by pediatricians belonging to the Italian Society of Pediatrics

Authors: Nardello, Rosaria;Cordova, Giada;Spina, Corinne La;Piro, Ettore;Serra, Gregorio;Corsello, Giovanni and Argo, Antonina

Publication Date: 2025

Journal: Italian Journal of Pediatrics 51(1), pp. 1–10

Abstract: Background: Munchausen syndrome by proxy represent forms of abuse with long-

term psychiatric outcomes. Since the prevalence of Munchausen Syndrome by proxy is uncertain and underestimated, this study aimed to investigate and analyze the phenomenon through the compilation of an anonymous questionnaire that explores the knowledge of the phenomenon and above all its management. Methods: the study was conducted by sending an anonymous questionnaire to pediatricians who are part of the Italian Society of Pediatrics. The questionnaire consists of 18 multiple choice questions and was completed by 511 professionals. Results: The main results highlighted that the majority of doctors knows Münchausen Syndrome by proxy. However, when there is a strong suspicion of the syndrome, they mostly seek discussion with the parent or with another specialist instead of referring to the competent authorities. Conclusions: starting from the consideration that timely diagnosis is fundamental for the protection of the child, we emphasize the urgency of enhancing the recognition and management of Munchausen Syndrome by Proxy. Early diagnosis, appropriate reporting, and collaboration with child protection authorities are essential in safeguarding the well-being of vulnerable individuals.

13. Fostering Informed Consent and Shared Decision-Making in Maternity Nursing With the Advancement of Artificial Intelligence

Authors: Penner, Sara Bickweat;Mercado, Nicholas R.;Bernstein, Samantha;Erickson, Elise;DuBois, Melissa Anne and Dreisbach, Caitlin

Publication Date: Mar ,2025

Journal: MCN: The American Journal of Maternal Child Nursing 50(2), pp. 78–85

Abstract: Artificial intelligence (AI), defined as algorithms built to reproduce human behavior, has various applications in health care such as risk prediction, medical image classification, text analysis, and complex disease diagnosis. Due to the increasing availability and volume of data, especially from electronic health records, AI technology is expanding into all fields of nursing and medicine. As the health care system moves toward automation and computationally driven clinical decision-making, nurses play a vital role in bridging the gap between the technological output, the patient, and the health care team. We explore the nurses' role in translating AI-generated output to patients and identify considerations for ensuring informed consent and shared decision-making throughout the process. A brief review of AI technology and informed consent, an identification of power dynamics that underly informed consent, and descriptions of the role of the nurse in various relationships such as nurse–AI, nurse–patient, and patient–AI are covered. Ultimately, nurses and physicians bear the responsibility of upholding and safeguarding the right to informed choice, as it is a fundamental aspect of safe and ethical patient-centered health care. Artificial intelligence has various applications in health care such as risk prediction, medical image classification, text analysis, and complex disease diagnosis. Due to the increasing availability and volume of data, especially from electronic health records, artificial intelligence technology is expanding into all fields of nursing and medicine. As the health care system moves towards automation and computationally driven clinical decision-making, nurses play a vital role in bridging the gap between the technological output, the patient, and the health care team. The nurses' role in translating AI-generated output to patients and identify considerations for ensuring informed consent and shared decision-making throughout the process is explored.

14. Changes in Psychological and Relationship Dimensions of Sexuality After Trauma Focused Therapy in Women with Interpersonal Child Abuse Related PTSD

Authors: Weiss, Judith;Bornefeld-Ettmann, Pia;Kleindienst, Nikolaus;Müller-Engelmann, Meike;Priebe, Kathlen and Steil, Regina

Publication Date: 2025

Journal: Journal of Trauma & Dissociation : The Official Journal of the International Society for the Study of Dissociation (ISSD) , pp. 1–20

Abstract: Women with posttraumatic stress disorder (PTSD) often report problems with sexuality. Relationship dimensions and psychological dimensions of sexuality seem to be impaired. We examined whether trauma focused therapies improve relationship and psychological dimensions of sexuality. In a randomized controlled trial that took part between 2014 and 2016 in Germany, N = 193 cisgender women with PTSD after child abuse (mean age = 36.3 years) completed the Multidimensional Sexuality Questionnaire, assessing psychological dimensions of sexuality and the Resources in Sexuality and Partnership, assessing relationship dimensions of sexuality. PTSD was assessed via Clinician Administered PTSD Scale for DSM-5. Assessments took part in the beginning and after Dialectical Behavior Therapy for PTSD or Cognitive Processing Therapy. Using hierarchical linear modeling, changes in psychological and relationship dimensions of sexuality from beginning to post treatment were assessed, also the association between PTSD symptom reduction and reduction in psychological and relationship dimensions. From beginning to post treatment, relationship dimensions of sexuality improved ($p < .01$; Cohen's $d = .36$). PTSD symptom reduction moderated this effect. The psychological dimension sexual satisfaction increased ($p < .05$; Cohen's $d = .32$), sexual anxiety ($p < .001$; Cohen's $d = -.51$) and sexual depression ($p < .001$; Cohen's $d = -.44$) decreased. PTSD symptom reduction moderated these effects. Sexual esteem and sexual motivation did not change after therapy. Our results suggest that relationship dimensions and some psychological dimensions of sexuality can improve after trauma focused therapy. Other psychological dimensions like sexual esteem might need specific therapeutic interventions to improve.

15. Lifeguard Pharmacy: the co-development of a new community pharmacy response service for people in danger from domestic abuse or suicidal ideation

Authors: Barcelos, Ana Maria;Latham-Green, Tracey;Barnes, Rebecca;Gorton, Hayley;Gussy, Mark;Henderson, Claire;Khatri, Mahomed;Knapp, Peter and Solomon, Josie

Publication Date: 2024

Journal: International Journal of Pharmacy Practice 32(6), pp. 452–460

Abstract: Background: Domestic abuse (DA) and suicidal ideation (SI) are prevalent and often co-occur. Numerous practical and psychosocial barriers inhibit help-seeking, including accessibility and confidentiality concerns. Pharmacies are accessible and may be perceived as a discreet venue for a DA and SI response service. Objective: To co-develop a community pharmacy response service for people experiencing domestic abuse or suicidal ideation.

Methods: Overall, 36 unique individuals contributed at least once to a series of focus groups, interviews or workshops to co-develop the service components. Participants had lived experience of DA/SI or were professionals from DA/SI support services or pharmacies. Audio recordings and field notes from events were thematically analysed. Specific themes were identified and informed the development of the service components. **Key findings:** Participants supported the development of this new service and considered community pharmacies to be an ideal setting. They thought of the service as a lifeline, that would offer hope. Under this main concept of hope, five main themes were identified: Safety, Empathy, Empowerment, Equity, and Discretion. Participants' practical considerations were incorporated into the service design, including the name choice of "Lifeguard Pharmacy", the strapline "Bringing Hope to Life", and the development of a "Client Flowchart" outlining how to welcome a client, arrange for a consultation, and then guide clients out of the pharmacy afterwards. **Conclusions:** Overall, the findings supported the development and introduction of this pharmacy-based intervention, which may help overcome barriers to help-seeking for DA or SI due to its sense of hope, accessibility, and discretion.

16. Mommy, am I good? Case report of a 12-year-old boy with abused child syndrome

Authors: Froń, Oliwia;Szmajda, Rafał and Lewandowska, Aleksandra

Publication Date: 2024

Journal: Postepy Psychiatrii Neurologii 33(4), pp. 267–271

Abstract: Competing Interests: Absent.; Purpose: Abused child syndrome remains a significant public health concern with profound physical and psychological implications.; Case Description: We present a case report of a 12-year-old child who was admitted to the child inpatient psychiatric unit of a paediatric hospital with signs and symptoms of abuse. The child was malnourished but did not exhibit physical injuries. A detailed medical history revealed inconsistent explanations regarding the diets used by the mother, allegedly recommended by a neurologist. Diagnostic evaluation, including medical examination, laboratory tests, and imaging studies supported the suspicion of child maltreatment. The case was reported to the police and the court. Appropriate interventions were initiated, including treatment, social work involvement, and psychosocial support.; Comment: This case highlights the importance of early recognition, comprehensive assessment, and multidisciplinary cooperation in addressing child abuse. Medical professionals play a critical role in child safety and should be vigilant in identifying and reporting suspected cases of child abuse and neglect. How they respond and whether they notify the justice authorities may determine the child's future fate and even his or her life. (© 2024 Institute of Psychiatry and Neurology. Production and hosting by Termedia sp. z o.o.)

17. Vulnerability to Incest - Findings From a Comparative Single-Case Study of the Onset of Intrafamilial Child Sexual Abuse

Authors: Iffland, Judith A. and Thomas, Jana

Publication Date: 2024

Abstract: Competing Interests: The authors have declared that no competing interests exist.; Previous research about intrafamilial child sexual abuse was not able to identify specific risk factors that distinguish this unique subgroup from other sexual offending subgroups. In comparison to other groups of sexual offenders, men convicted of intrafamilial sexual child abuse (ICSA) are found to exhibit more similarities to non-offending fathers than extrafamilial sexual offenders. Consequently, the risk assessment of sexual recidivism among "incest offenders" lacks evidence-based evaluation criteria. Given the suggestion that family system factors should be included in research on the onset of ICSA, we employed the Vulnerability to Incest Model proposed by Trepper and Barrett (1989, <https://doi.org/10.4324/9780203776605>) in a qualitative single-case analysis. A comparative analysis of ten court evaluations of ICSA offenders revealed that all families in which ICSA has occurred demonstrated at least two vulnerability factors. The analyzed offenders exhibited comparable patterns of masculine sexual entitlement. The utility of this recently developed construct for sexual violence research is discussed and implications for further research proposed.

18. Psychodynamic therapy for adverse childhood experience in a hospitalized girl with attention deficit hyperactivity disorder

Authors: Sugimoto, Kaori;Kurokouchi, Toshinari;Shinohara, Rena;Sakoh, Yuuki;Odaka, Maiko;Sunakawa, Hikaru;Tanese, Shuichi;Seto, Manao;Ishida, Masahiro;Yoshimura, Yuta;Itagaki, Kotoe;Harada, Ikuhiro;Inoue, Saori;Hakoshima, Yuki;Inazaki, Kumi;Mizumoto, Yuki and Usami, Masahide

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Abstract: Competing Interests: The authors have no conflicts of interest to disclose.; Child abuse and neurodevelopmental disorders are serious social issues in Japan. Abused children may present with symptoms similar to attention deficit/hyperactivity disorder (ADHD), such as increased impulsivity and difficulty concentrating. It is also known that children with ADHD are more likely to suffer from maltreatment, which can lead to psychiatric symptoms such as low self-esteem, depression, and defiant, challenging attitudes. Child psychiatric treatment needs to take both perspectives, childhood adversity and neurodevelopmental disorders, into account. In this case (A), there was a history of impulsive challenging behavior; in addition to the ADHD symptoms, the abusive upbringing from an early age had resulted in increased aggression, psychological damage, and low self-esteem. The abusive mother was also a competitor to her and was vulnerable and unable to present a healthy femininity to her. She entered adolescence without sufficient support from her mother before puberty. The ambivalence of dependence and rebellion extremely increased, and the problem manifested as withdrawal. In the treatment, while setting limits, positive evaluations of the positive aspects were actively communicated. Her therapist was particularly aware of becoming a part of her ego function different from her mother. A's challenging behavior was gradually reduced, and she was able to develop the right self-image. This is a case in which the structure of the hospitalization enabled the work of limiting the patient while protecting and accepting her.

Clinical serious issues such as withdrawal, defiant challenging behavior, and symptoms of hyperactive impulsive inattention in adolescents require consideration and response to background adversity experiences and child abuse factors. (2023, National Center for Global Health and Medicine.)

Sources Used:

The following databases are used in the creation of this bulletin: CINAHL and Medline.

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