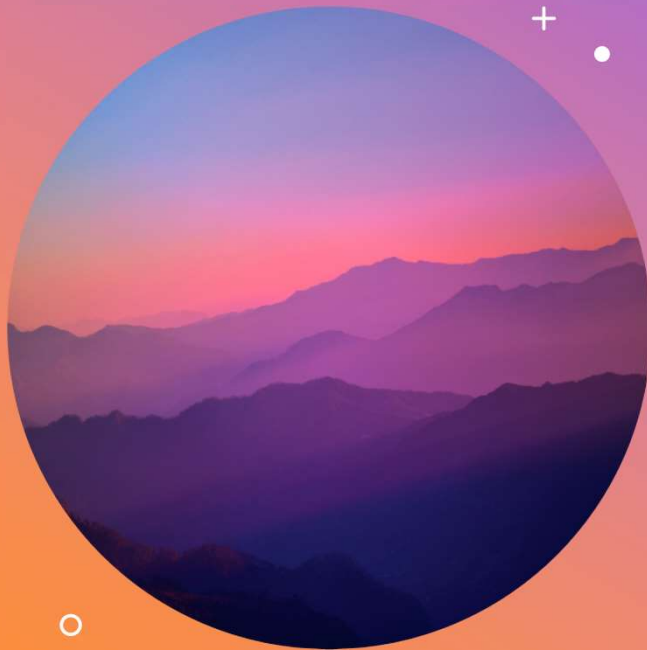


THE OTHER KIDS: EVALUATING HOUSEHOLD CONTACTS OF ABUSED AND NEGLECTED CHILDREN

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OBJECTIVES

1. Siblings of maltreated children
 - How many are there?
 - Are they injured, too?
2. Physical, Emotional, developmental effects from witnessing abuse
 - Psychological symptoms
 - Scapegoating
 - Long-term effects
3. Identifying those siblings who are also maltreated
4. How to help siblings recover

Disclosures

1. I occasionally serve as an expert witness in child maltreatment hearings and trials
2. No other financial disclosures

Note: 'siblings' and 'other child household contacts' will be considered together.



Andy (Twin A)



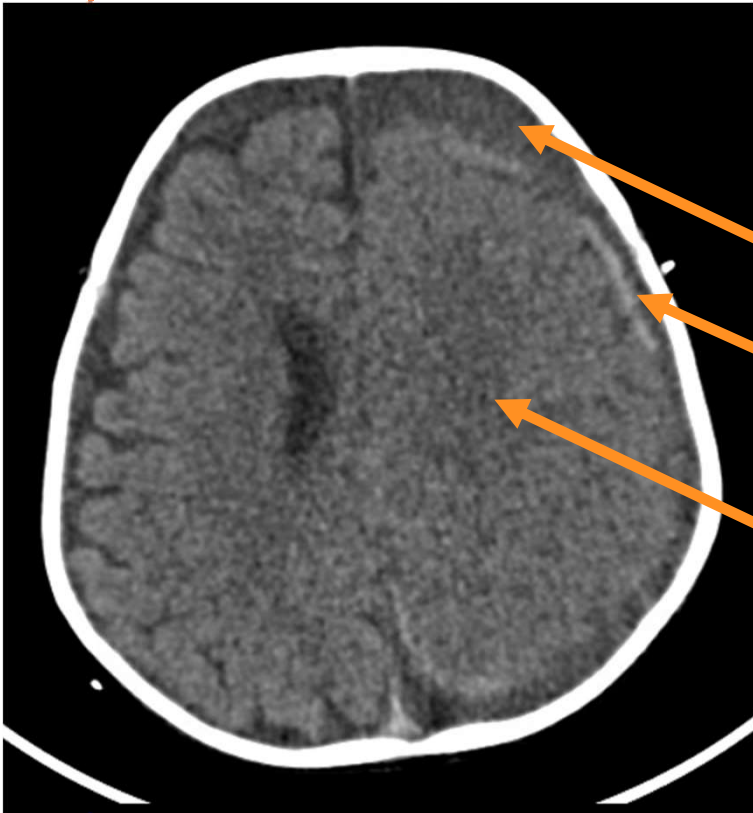
- 8 Months Old Brought in by Father
- Admitted to the hospital for vomiting and seizures
- Mother said Andy 'kicked himself out of the car seat' and has been crying and screaming ever since.
- Father said he always seems to have bruises
- Father called 911 when Andy started choking

Andy (Twin A)



- In the ER Andy was pale and irritable and his gaze was fixed to the left.
- Bruises on his face, neck, and back.
- Lab tests: he was anemic with a very high white blood count.
- Skeletal survey showed a corner fracture of his right femur.

Andy (Twin A)



- CT scan showed old and new subdural hemorrhages (indicating both recent and past head trauma). No retinal hemorrhages on eye exam.

Old blood

Fresh blood

Left side of brain dangerously swollen
Required emergency surgery to relieve pressure on
brain, drain blood

*Do you think Andy's twin brother
needs to be examined?*

Davey (Twin B)



- Davey was brought to the ER a few hours later by the mother and CPS.
- Mother said she hadn't seen the twins in a week.
- CPS worker had gone to the home to check on Davey after Andy was admitted. She noted bruises on his face and thigh.

Davey (Twin B)



- On exam, bruises to both jaws, left hip, left thigh, right chest.
- Poor muscle tone, severe developmental delay, severe diaper rash.
- No fractures on his skeletal survey.
- No acute brain injury seen on his CT scan.
- *BUT...*

Davey (Twin B)



- CT scan showed old right subdural hemorrhage

WHAT DO WE KNOW ABOUT ABUSE AND NEGLECT OF MULTIPLE CHILDREN IN THE SAME FAMILY?

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How many children are affected?
How often does this happen?

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How many children are affected?

- *Child Maltreatment 2021* (<https://www.acf.hhs.gov/>):
 - 588,299 children confirmed to be abused or neglected in the US in FY 2021.
 - 90.6% were maltreated by a parent or parental figure.
 - Number of sibling sets not identified (same for most data sets, including DFPS)
- Lindberg, Shapiro, et al (2012: Prevalence of abusive injuries in siblings and household contacts of physically abused children. *Pediatrics*)
 - 440 household contacts of 1975 physically abused children under age 2:
 - 40.9% of contact children under 6 months old had unsuspected fractures on skeletal survey;
 - 25% of contacts aged 6-12 months and 4.8% aged 12 to 24 months had fractures.
 - Twin contacts had a 20x higher risk of having a fracture than non-twins.

How many children are affected?

- Kisely, Strathearn, Najman (2021: Risk factors for maltreatment in siblings of abused children, *Pediatrics*):
 - 8.5% of siblings of abuse/neglect victims were also victims.
 - A first sibling reported led to a 60-fold increase in risk to the second sibling.
 - Neglect had strongest association (85%), followed by sexual abuse(70%).
- Corlis, Damashek, et al (2020: Sibling Child Protective Services involvement following a child maltreatment fatality, *Child Maltreatment*):
 - 416 children who died from child maltreatment (neglect or abuse) had 1,840 surviving siblings who subsequently were reported to CPS.
 - 83% reported for neglect, 21% for physical abuse, 6% for sexual abuse.

Are siblings always maltreated in the same way?

- Kellogg, Lukefahr, Koek (pending): 588 contacts of 381 victims:
 - 15% of contacts were found to be abused or neglected.
 - Half of contacts of physically abused children had a different form of maltreatment.
 - Most neglected and sexually abused contacts had same form of maltreatment.

HOW ARE CHILDREN AFFECTED BY THE ABUSE OF A SIBLING?

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Vicky (17 years old)



(STOCK PHOTO)

- Disclosed sexual abuse by stepfather starting at age 8.
- Started off as digital penetration, moved on to penile penetration.
- Photos taken.
- Choked, hit, or held down if she resisted.
- Her sister Meli (1 year younger) was often asleep in the same room when abuse happened.
- Vicky didn't think Meli had ever been abused.

Meli (16 years old)



(STOCK PHOTO)

- When Meli found out Vicky had disclosed sexual abuse, Meli said when she was 9 or 10, the stepfather would come into the girls' bedroom when Vicky was asleep.
- He would pull down Meli's panties, put his mouth on her private area, and lick it.
- He would pull her hair hard if she resisted.
- Meli said she had no idea Vicky had been sexually abused, too.
- Who's telling the truth?
- Is this mirror-image experience even possible?
- If not—why did the sisters say it?

How many siblings witness abuse?

- Hamilton-Giachritsis et al (2005: A retrospective study of risk to siblings of abused children, *Journal of Family Psychology*):
 - 795 siblings of 400 'index' maltreated children:
 - 44% of families: index child was scapegoated
 - 37%: all children were maltreated
 - 20%: some but not all siblings were abused/neglected
- Tucker, Finkelhor, & Turner (2021: Exposure to parent assault on a sibling as a childhood adversity, *Child Abuse and Neglect*):
 - 3.7% of children have seen or heard a parent assault a sibling.
 - Most assaults (70%) are carried out by male parent figures.
 - Exposure was greatest for boys and adolescents, highest for those whose parents had no college education, and for those living with non-parental adults, single parents, and stepfamilies.
 - Exposed children reported current mental distress (anger, depression, anxiety).

How are siblings affected?

- Martin & Beezly, Halperin, and others (1976, 1977):
 - Children exposed to the maltreatment of a sibling displayed negative mental health outcomes that were similar to the child who was directly maltreated
- Button and Gealt (2010: High risk behaviors among victims of sibling violence, *Journal of Family Violence*):
 - Sibling-on-sibling violence is highest in homes with IPV and child maltreatment.
 - Experiencing child maltreatment and witnessing abuse of others are both associated with emotional and mood disorders, relationship difficulties, and aggression.

How are siblings affected?

- Schreier, Pogue, and Hansen (2017, Impact of child sexual abuse on non-abused siblings: A review with implications for research and practice. *Aggression and Violent Behavior*):
 - Siblings of child sexual abuse victims display a variety of responses including: anger, anxiety, fear, distress in keeping with the victim's distress level, negative behaviors towards the victim, offender, or caregiver—even when the siblings did not witness the abuse.
 - The period right after the victim's disclosure may pose serious safety concerns in all the children in the home. Promptly implementing a safety plan is very important.
 - If the safety plan involves the children moving to a different school or neighborhood, or loss of the income of a parent, children experience major stress.
 - Siblings often know more than the caregiver realizes.
 - Some siblings show signs of PTSD including depression or anxiety.

How are siblings affected?

- Schreier, Pogue, and Hansen (continued):
 - Older siblings may feel guilty that they somehow did not prevent the abuse or failed to let an adult know after the sibling outcried to them.
 - Siblings may struggle to believe the victim or that the perpetrator hurt the victim, or resent the extra attention given to the victim.
 - Family stresses and divisions after a disclosure affect all the children, not just the victim. Many experience future relationship difficulties due to the violation of trust and security by the offender.
 - Having to participate in repeated legal processes (or worrying about what the court outcome will be) may further stress siblings.
 - Families affected by child abuse are often chaotic and disorganized to begin with, so have fewer capacity to help victims and siblings.
 - Good news: supportive families can be protective against anxiety and depression in all the children. Even if only older siblings are protective, victims fare better.

What about scapegoating?

Definition: siblings participate (at least passively) in the index child's abuse/neglect but are not themselves maltreated.

- Hamilton-Giachritsis et al (2005):
 - 795 siblings of 400 'index' maltreated children:
 - 44% of families: index child was scapegoated
 - 37%: all children were maltreated
 - 20%: some but not all siblings were abused/neglected
- Hollingsworth, Glass, & Heisler (2007, Empathy defects in siblings of severely scapegoated children: a conceptual model, *Journal of Emotional Abuse*)
 - Parent blames one child's behavior or needs for all the family's ills. The other children are brought into 'the conspiracy to isolate, humiliate, and terrorize the scapegoat.'
 - Siblings first observe and then participate in the process as more and more problems can be blamed on the singled-out child.
 - They become emotionally numb to the scapegoat's suffering and thus become emotionally stunted themselves.

What about scapegoating?

- Wiehe (1997, *Sibling Abuse: Hidden Physical, Emotional, and Sexual Trauma*):
 - Research on 150 adult survivors of abuse *by siblings* documented a “shroud of secrecy” surrounding the childhood abuse, which often lasted for years.
 - Most victims reported that they did not fight back and were disbelieved or blamed if they told parents.
 - Some abuse was dismissed as mere sibling rivalry, although it ‘strains credulity’ that slapping, beating, choking, and rape could be construed as anything other than egregious abuse.
 - Victims of sibling maltreatment were left with feelings of worthlessness, self-blame, and profound difficulties in relating to other people.

Does being a witness to sibling abuse make you a victim of emotional abuse?

Texas Family Code:

Sec. 261.001. DEFINITIONS. In this chapter:

(1) "Abuse" includes the following acts or omissions by a person:

(A) mental or emotional injury to a child that results in an observable and material impairment in the child's growth, development, or psychological functioning;...

Report emotional abuse when indicated. It's important and we're mandated to do so!

May assist in safety planning and in obtaining additional therapy services.

HOW SHOULD WE EVALUATE SIBLINGS OF ABUSE VICTIMS?

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How should we evaluate siblings of abused/neglected children?

Current recommendations mostly focus on physical abuse:

- Interview (if verbal)
- Physical Examination
- Imaging studies (if under 2 or nonverbal)

Sexual abuse recommendations in the literature are very limited:

- CPS, LE procedures usually include interviewing any verbal siblings.
- If index child is prepubertal and has a STI, other prepubertal children in same home should be examined and tested.

Few published guidelines for siblings of neglect victims.

- Common sense: assess for the same type of neglect (physical, medical, safety)

How should we evaluate siblings/contacts of physically abused/neglected children?

Recommended Procedure for Evaluation of Siblings of Abuse/Neglect Victims:

- Interview (if verbal).
- Physical examination.
- *Regardless of type of abuse in the index child:*
 - If injuries are seen on sibling's exam and sibling is under 24 months old:
 - Full skeletal X-ray survey is indicated.
 - Head imaging (CT or MRI) if under 6 months.
 - Spine imaging (MRI) if brain injuries are found on head imaging.
- Reasoning:
 - Abuse is found in up to 37% of household contacts of index abused children.
 - Fractures are found in up to 12% of contacts under 24 months.
 - Children under 2 years old are most likely to have abusive head injuries *and* are most likely to die from their abuse.
 - Spine injuries are common in head-injured infants (up to 12 months).

How should we evaluate siblings/contacts of abused/neglected children who may be sexually abused?

- *Regardless of type of abuse in the index child:*
- If sibling outcries sexual abuse, proceed with sexual abuse evaluation including forensic interview, exam, STI testing as indicated
- Test sibling for STI if index child has a STI and contact child is prepubertal (\pm 12 yr old)
- If contact's exam supports neglect, treat condition as appropriate

How should we evaluate the mental health of siblings of abused/neglected children?

- Urgent mental health assessment (in verbal children)
 - Has anyone hurt you? Are you being taken care of (food, shelter, etc)?
 - Signs of stress (secondary trauma, PTSD)
 - Anxiety, anger, depression
 - Suicidal or homicidal ideation
 - Do you feel safe at home?
 - How are family members (parents, siblings) reacting?
 - Anyone threatening or bullying you?
 - What are you most worried about (police, CPS, siblings, loss of a parent, losing your home, school, etc)?
 - Who's on your side? Who helps you with your fears, feelings?

Mental health treatment models

- *Witnessing* family violence causes at least as much injury as *experiencing* family violence.
- Trauma-informed approach is critical.
- Individual and family therapy are important but may need to happen at different times, as different siblings may experience different exposures, and perpetrators may still have access to the children.
- Two treatment models with support in MH literature:
 - Project SAFE
 - Family Learning Program

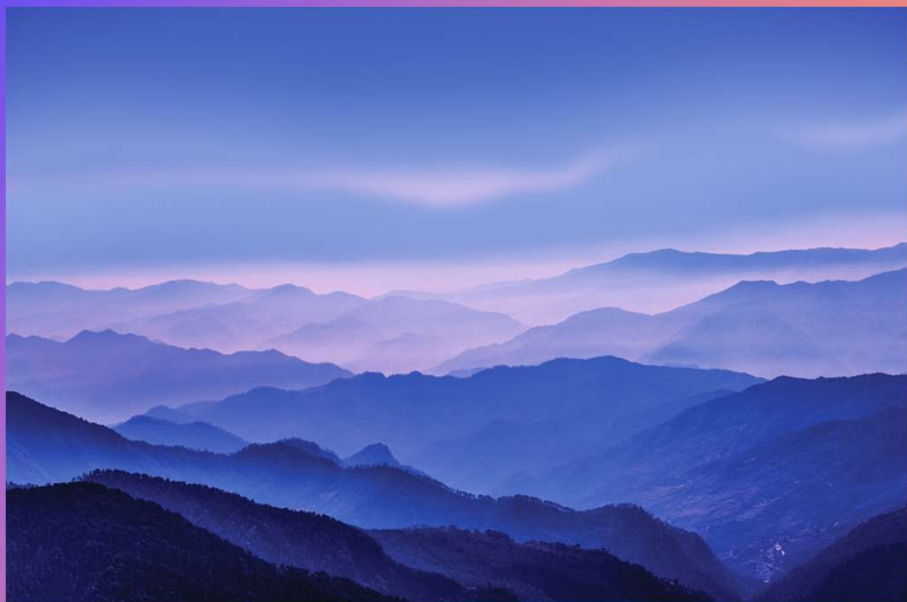
EVALUATING SIBLINGS OF ABUSE VICTIMS

Take-home messages



Summary

1. Household contacts of abuse/neglect victims are at high risk for being victims themselves...
2. AND FOR being traumatized by witnessing the abuse/neglect of others.
3. Different siblings may experience different forms of maltreatment...
4. AND different siblings are affected differently by the trauma of being witnesses.



Summary

1. Interview and exam should dictate further evaluation.
2. If child is under 24 months and has injuries, a skeletal survey should be obtained.
3. CT scan of head if under 6 months with injuries.
4. STI testing if prepubertal sibling and index child has STI.
5. Suspect neglect if index child was neglected.



Summary

1. Mental health assessment as soon as possible.
2. *Report emotional abuse.*
3. Trauma-informed approach to therapy is essential.

THANK YOU

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