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OJJDP

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JUVENILE JUSTICE BULLETIN

Choosing and Using Child Victimization Questionnaires



Sherry L. Hamby and David Finkelhor

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) is committed to improving the justice system's response to crimes against children. OJJDP recognizes that children are at increased risk for crime victimization. Not only are children the victims of many of the same crimes that victimize adults, they are subject to other crimes, like child abuse and neglect, that are specific to childhood. The impact of these crimes on young victims can be devastating, and the violent or sexual victimization of children can often lead to an intergenerational cycle of violence and abuse. The purpose of OJJDP's Crimes Against Children Series is to improve and expand the Nation's efforts to better serve child victims by presenting the latest information about child victimization, including analyses of crime victimization statistics, studies of child victims and their special needs, and descriptions of programs and approaches that address these needs.

Scope of Problem and Need for Standardized Questionnaires

Youth are the sector of the population most vulnerable to criminal victimization. Adolescents are victimized at two to three times the rate of adults and experience assaults that are as equally injurious as those perpetrated against adults (Wells and Rankin, 1995). Available data on children under age 12 suggest that they also experience high levels of victimization (Finkelhor and Hashima, 2001; Selner-O'Hagan et al., 1998; Straus et al., 1998).

Statistics like these and such events as the Columbine school shootings have greatly increased interest in the characteristics of crimes against children.

Professionals who work with children are the natural leaders to spearhead efforts to document the rates of child victimization and to implement interventions aimed at reducing it. These professionals include (but are not limited to) child abuse evaluation team members, juvenile court intake workers, child and family therapists, trauma counselors, forensic interviewers, violence prevention specialists, police officers (especially those who work with juveniles, such as school resource officers), and researchers.

Increasingly, professionals who work with children are expected not only to design intervention and prevention programs but also to monitor victimization patterns among their clients and evaluate the effectiveness of programs ranging from school-based violence

A Message From OJJDP

Youth service professionals are increasingly expected to monitor local child victimization trends and evaluate the effectiveness of prevention and treatment programs. The use of questionnaires to measure victimization can elicit considerable data, but which questionnaires are best suited to address which needs?

This Bulletin notes several benefits deriving from the use of standardized questionnaires. Specific guidelines are provided to help the reader determine the type of victimization to be measured, how the questionnaire should be administered, whether the results need to correspond to crime and child protection categories, what period of time is being measured, what the children's ages are, and whether the results will be compared with national norms. Specific questionnaires are reviewed, and recommendations for further reading are offered.

In the wake of increased public attention to the victimization of children and adolescents, the need for solid information has never been greater. Standardized questionnaires are important tools to accurately measure child victimization. Fortunately, many types of questionnaires are available, and the information that this Bulletin provides should assist you in determining which questionnaire will best meet your needs.

prevention to therapy for traumatized children. The growing interest in monitoring patterns and evaluating outcomes has generated an increasing number of questionnaire measures of juvenile victimization, developed for a variety of specific research, clinical, and public policy needs. These questionnaires elicit considerable information about how many victims there are and how best to identify them. For example, questionnaires have established that the majority of ordinary school children see or experience violence, that caretakers will often tell interviewers about violent acts they have inflicted on their own children, and that juveniles will disclose experiences of sexual assault. Not all questionnaires are appropriate for all purposes, however, and identifying and choosing from among the wide array of options can be time-consuming and difficult. This Bulletin is intended to ease the process of identifying and locating the questionnaire that is best suited for varying situations. It notes the benefits of questionnaires, presents guidelines for selecting questionnaires, and reviews selected questionnaires related to the major forms of victimization (see tables 1-6).

Why Use Victimization Questionnaires?

The main reason to use standardized self-report questionnaires is that they yield the most accurate reports of victimization. The following are some important benefits of questionnaires:

- ◆ Self-report questionnaires are preferable to official records because they capture many victimizations that are never reported to child protection agencies or the police. (Underreporting is a particularly serious problem in crime victimizations of juveniles (Finkelhor and Ormrod, 1999).)
- ◆ Self-report questionnaires are also preferable to relying on spontaneous disclosures by victims because victimization is a sensitive topic and victims are often reluctant to bring up the issue on their own.
- ◆ Standardized self-report questionnaires are preferable to informal questioning because they cover a wide range of victimizations that are often not addressed in informal questioning.

- ◆ Standardized self-report questionnaires use tested terminology and definitions of categories that are clear and specific.
- ◆ Self-report questionnaires frequently have normative data available to allow for comparisons with the general population of youth or other groups.

Guidelines for Selecting Victimization Questionnaires

Anyone wanting to measure children's victimization should consider a number of basic questions.

Do I want to find out about a particular form of victimization or about many forms?

Several questionnaires focus on a single form of victimization. An example of a focused questionnaire would be the Parent-Child version of the Conflict Tactics Scales (Straus et al., 1998), which exclusively measures child maltreatment. Other questionnaires ask about more than one form of violence. For example, the Survey of Children's Exposure to Violence (Richters and Martinez, 1993) includes items on community (as opposed to family) assault, property crimes, and witnessing violence. The advantage of focused scales is that they cover a topic in depth and often identify more cases of that particular form of victimization than would a more wide-ranging scale. The advantage of multivictimization scales is that they provide data on the incidence and co-occurrence of several forms of victimization. Since many kinds of victimization co-occur (for example, family violence and community violence), unless one gets information on both, one can mistakenly conclude that a child's distress or problem behavior stems from one kind of victimization, when another or both are behind the problem.

Do I need results that correspond to official crime or child maltreatment categories?

Some studies need only general measures of victimization. For example, a study correlating level of victimization with level of posttraumatic stress symptoms or depression could probably use many sound

questionnaires. A study that is trying to show pretest to posttest improvement after participation in a therapy, social services, or prevention program may find useful any questionnaire that asks about the type(s) of victimization targeted by the program. Other projects, however, may require questionnaires that define certain victimizations, such as aggravated assault or physical abuse, in the same way police or child protective services (CPS) would. For example, a study that is trying to identify the number of abused and neglected children in a community and compare that number with the number who have been reported to CPS may need the community measure to match child maltreatment categories of abuse and neglect quite closely. Similarly, a study of crime underreporting would probably require a measure that would easily allow the researchers to label unreported crimes according to conventional categories of theft, robbery, assault, and so on. Researchers who must present their results to legislators or other policymakers may find it helpful if questionnaires can be described using official categories that are more likely to be familiar to professionals in fields other than children's services.

Few existing measures provide results that closely correspond to crime or CPS categories. The National Crime Victimization Survey (NCVS) is one measure that corresponds to crime categories, but it has not been used with children younger than 12 and does not measure CPS categories of abuse and neglect. NCVS also has more complicated followup questions than most questionnaires. The Parent-Child version of the Conflict Tactics Scales (Straus et al., 1998) has sections for each of the major forms of abuse and neglect, but the threshold for abuse is not clear on many scales. For example, the physical violence scale of the Parent-Child version of the Conflict Tactics Scales includes spanking and other forms of legal physical discipline. Some new questionnaires are in development that will provide closer mapping onto CPS categories (Runyan, personal communication, 1999; Walsh and MacMillan, 1999). One new questionnaire, the Juvenile Victimization Questionnaire (JVQ), categorizes victimization by both conventional crime and CPS categories (Hamby and Finkelhor, 1999).

How often the terms “crime” or “abuse” are mentioned also affects what respondents will report, because questionnaire wording suggests or implies the interviewer’s apparent interests. In other words, the language used in a questionnaire helps to create a context that may influence the respondent’s answers. Questionnaires about “crime” tend to elicit reports that fit stereotypical perceptions of what constitutes criminal activity. Thus, disclosures are more likely to involve nonsexual assaults, stranger perpetrators, and incidents that were reported to the police (Hamby and Finkelhor, 2000). Questionnaires that do not focus exclusively on crime obtain generally higher rates of victimization, including many kinds of serious episodes that victims do not consider as crime. Very broad contexts, however, may result in the reporting of trivial events as crimes.

Context is created by a number of questionnaire features, including not only the wording of the victimization questions but also the preamble to the victimization survey, the sequence of questions within

the victimization questionnaire, the other questions that are asked (for example, whether the questions are about family or home security), and the placement of the victimization questions in relation to other items and questionnaires. Although there is no standard prescription for the best context for victimization research, all of these issues should be considered in the design of any study.

Am I interested in obtaining rates on recent violence (e.g., last year), or do I want rates on lifetime exposure?

An incident rate provides an estimate of the amount of victimization youth have experienced in a given period, such as within the last year or since the introduction of an intervention program. A lifetime prevalence rate provides an estimate of the youth who have ever experienced the type of victimization under study. There are advantages and disadvantages to each approach.

Incident rates. One advantage to incident rates is that there is less reliance on the respondent’s long-term memory. Studies have shown that people tend to underreport victimizations that happened longer ago (U.S. Department of Justice, 1974). Although they may recall the incident if reminded of it, most people do not go around with a tally of all the victimizations they have experienced and thus may not have a precise count available when they come upon a question in a questionnaire. The longer the time period asked about, the more inaccurate the reporting of the total frequency of incidents and the details about specific incidents is likely to be. Another advantage of incident rates is that the same time period can be used for all respondents. For children, even a seemingly small age difference can lead to large differences in the chances of being exposed to victimization. For example, an 8-year-old has a 33 percent greater period of exposure than a 6-year-old. Thus, it would be impractical to compare first graders and third graders using lifetime exposure to violence, because one would assume the lifetime rate for third graders is higher anyway.

The Crimes against Children Research Center

The Crimes against Children Research Center (CCRC) helps young victims of crime by providing high-quality research, statistics, and education to the public, policy-makers, law enforcement personnel, and various other child welfare practitioners. The crimes of concern to CCRC include physical and sexual abuse, abduction, homicide, rape, assault, property offenses, and the victimization of children on the Internet. CCRC activities include

- ◆ Preparing policy reports on key current issues.
- ◆ Analyzing national and local statistics on crimes against children.
- ◆ Developing assessment tools for practitioners and researchers.
- ◆ Promoting crime reporting and help-seeking by and increased services for crime victims.
- ◆ Evaluating state-of-the-art prevention and intervention programs.
- ◆ Sponsoring conferences, workshops, institutes, and courses for practitioners and researchers.
- ◆ Monitoring and interpreting trends.

The Crimes against Children Research Center was created in 1998 at the University of New Hampshire. It grew out of and expands upon the work of the Family Research Laboratory, which has been devoted to the study of family

violence, child victimization, and related topics since 1975. Initial funding for CCRC was provided by the U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention. CCRC also draws on funding from grants, individual gifts, revenues from publications and programs, and State and Federal sources. CCRC staff include internationally recognized experts who have published numerous books and articles concerning the incidence and impact of violence against children.

The Center’s current projects include the first national study of youth victimization experiences on the Internet; a national evaluation of children’s advocacy centers, multidisciplinary agencies that are designed to reduce trauma to children whose crime victimization is being investigated and prosecuted; and the development of a screening tool to help researchers and practitioners better identify child crime victims.

A list of CCRC publications is available online at www.unh.edu/ccrc/Publications.html. For further information contact:

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Table 1: Community Exposure to Violence Questionnaires

Measure	Type of Victimization Assessed						Number of Questions [‡]	Age of Respondents [§] (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes [†]				
Alberta Youth Victimization, Crime and Delinquency Survey (Gomes et al., 2000)	Yes	Generic	No	Yes	Yes	Yes	12	12–18	Yearly	Yes
Children's Interview on Community Violence (Hill et al., 1996)	Yes	Generic	Yes	Yes	No	No	27	9–12	Lifetime	No
Children's Report of Exposure to Violence (Cooley, Turner, and Beidel, 1995)	Yes	No	Yes	No	Yes	No	32	7–18	Both	No
Determining Our Viewpoints for Violent Events (DOVVE) (Sheehan et al., 1997)	Yes	Generic	Yes	No	No	No	5 victimization (plus 27 attitudes, perpetration)	7–13	Lifetime	No
Exposure to Violence Screening Measure (Weist et al., n.d.)	Yes	Generic	Yes	Yes	No	No	27 (9 per subscale)	10–19	Lifetime	No
Exposure to Violence Subscale of Chicago Stress and Coping Interview (Gorman-Smith and Tolan, 1998)	Yes	Generic	Yes	Followup question	No	Yes	8 victimization (plus 35 other stressors)	11–15	Both	Yes
Monitoring the Future—victimization questions (Bachman, O'Malley, and Johnston, 1978; Wells and Rankin, 1995); also at www.isr.umich.edu/src/mtfrac/	Injury only	Generic	No	No	Of injury only	Yes	7	16–19	Yearly	No
My Exposure to Violence (My ETV) (Selner-O'Hagan et al., 1998)	Yes	Generic	Yes	Yes	Yes	Home during burglary	36 (8–10 per subscale)	9–24	Both	Yes
Recent Exposure to Physical Violence (Singer et al., 1995)	Yes	Home setting	Yes	No	Yes	No	24	14–19	Yearly	No

Table 1—Continued

Measure	Type of Victimization Assessed						Number of Questions [‡]	Age of Respondents [§] (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes [†]				
Screen for Adolescent Violence Exposure (SAVE) (Hastings and Kelley, 1997)	Yes	Home setting	Yes	No	Yes	No	96 (6–14 per subscale)	11–19	Lifetime	No
Survey of Children’s Exposure to Violence (SCEV) (Richters and Martinez, 1993)	Yes	Generic	Yes	Yes	Yes	No	26 (10–16 per subscale)	8–19	Lifetime	Yes
Things I Have Seen and Heard (Richters, Martinez, and Valla, 1990)	No	No	Yes	No	No	Yes	15	6–7 (1st–2d)	Lifetime	No
Violence Exposure Scale for Children (VEX) (Fox and Leavitt, 1995)	Yes	Home setting	Yes	No	With weapon only	No	71 (22 short form)	3½–12	Lifetime	Yes
Violence Screening Survey (Bell and Jenkins, 1993)	Yes	Generic	Yes	Yes	With weapon only	No	19 victimization (7 perpetration)	10–19	Lifetime	No
Youth Risk Behavior Surveillance System (YRBSS)—violence questions (Kann et al., 1998); also at www.cdc.gov/nccdphp/dash/yrbs/	Yes	No	No	Yes	With weapon only	No	4 victimization (6 other violence)	15–18 (9th–12th)	Yearly (except sexual item is lifetime)	No

Note: Questionnaires are listed alphabetically.

* “Generic” indicates that only general questions are asked about assaults and that family perpetrators are included only if the respondent thinks to do so. “Home setting” indicates that separate questions are asked about violence in the home, but it is not specified whether the violence is committed by stranger, nonstranger, or family perpetrator. “No” indicates that family violence is either specifically excluded or would be an inappropriate response to the question (as in studies of peer violence).

† Theft, vandalism, household burglary, or similar crimes that do not involve a personal assault on the victim. Robbery, which also involves threat or assault, is not included in this category.

‡ Number of screening questions for victimization that would be asked of all respondents. As the number of administered followup questions will vary depending on a child’s responses, these are not included in the total for those questionnaires that collect incident data. If a question about a form of violence is repeated for different settings (e.g., home, neighborhood, school) or level of exposure (e.g., witnessing, experiencing), then the resulting total number of questions is given. Subscales of many questionnaires can be used individually, depending on the goals of the study. Subscales do not necessarily correspond to categories used in the table.

§ To facilitate comparison across scales, grade has been converted to age when age is not available. When a scale has been used more than once, all available age and grade information is presented.

Table 2: Child Maltreatment Questionnaires

Measure	Type of Victimization Assessed						Number of Questions‡	Age of Respondents§ (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes†				
Child and Adolescent Psychiatric Assessment (CAPA)—Traumatic Life Events section (Amaya-Jackson et al., 2000; Angold et al., 1995; Costello et al., 1996)	No	Specific perp	No	Yes	No	No	4 victimization	9-16	Lifetime	Yes
Conflict Tactics Scales (CTS)—Parent-Child version (Straus et al., 1998)	No	Specific perp	No	Yes	By parent only	No	33 (5-13 per scale)	6-20	Both	No
Service Utilization and Risk Factors (SURF) Survey (Amaya-Jackson et al., 2000; Flisher et al., 1997)	No	Specific perp	No	Yes	No	No	8 victimization	9-17	Lifetime	No

Note: Questionnaires are listed alphabetically.

* "Specific perp" indicates that separate questions are asked about family perpetrators.

† Theft, vandalism, household burglary, or similar crimes that do not involve a personal assault on the victim. Robbery, which also involves threat or assault, is not included in this category.

‡ Number of screening questions for victimization that would be asked of all respondents. As the number of administered followup questions will vary depending on a child's responses, these are not included in the total for those questionnaires that collect incident data. If a question about a form of violence is repeated for different settings (e.g., home, neighborhood, school) or level of exposure (e.g., witnessing, experiencing), then the resulting total number of questions is given. Subscales of many questionnaires can be used individually, depending on the goals of the study. Subscales do not necessarily correspond to categories used in the table.

§ To facilitate comparison across scales, grade has been converted to age when age is not available. When a scale has been used more than once, all available age and grade information is presented.

Lifetime exposure rates. The main advantage of a lifetime exposure rate is that more victimization experiences will be identified. This can be important if your sample of respondents is small or the type of victimization under study is rare. The rarity of victimization changes with context. For example, in the United States, exposure to war or terrorist violence is rare, but in other parts of the world it is common. Many inner-city communities experience more violence than most rural communities. Researchers studying a school program or interviewing children in a community setting will probably find much lower victimization rates than those evaluating a group of children from a mental health clinic or a juvenile detention center. Ideally, if the sample of respondents is at least of moderate size (200 or more), at least 10 percent of the sample should report the type of

victimization being evaluated in order to compare victimized and nonvictimized groups statistically. If the rate of victimization falls below 10 percent, then more respondents will be needed so that at least 20 or 30 respondents are in the victimized group. Otherwise, any findings would be generalizations from the experiences of a very small number of individuals.

Do I want to use the questionnaire as an interview or in a self-administered format?

Interviews. Interviews, including those conducted over the telephone, pose fewer problems with comprehension, as long as complex or technical vocabulary is not used (for example, terms like "aggravated assault"). They also have the advantage of allowing more specific followup to a respondent's answers, because an

interviewer can be trained to ask some questions only if others have been answered in a certain way. Interviewers are also able to attend to children while they respond to the questions and can address issues of misunderstanding or discomfort. The disadvantages of interviews are that they can be extremely labor intensive and some children may feel less comfortable disclosing a victimization to an actual person rather than doing so privately on a questionnaire. A recently developed interview-administered questionnaire with good attention to reliability and validity is My Exposure to Violence (Selner-O'Hagan et al., 1998).

Self-administered questionnaires. Self-administered questionnaires (SAQ's) have the advantage of requiring less labor from researchers and clinicians and can even be administered in group settings (e.g., school). Because respondents are expected to complete them on their own, however,

Table 3: Sexual Assault Questionnaires

Measure	Type of Victimization Assessed						Number of Questions‡	Age of Respondents§ (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes†				
National Survey of Family Growth (NSFG) (Abma, Driscoll, and Moore, 1998)	No	Generic	No	Yes	No	No	3	15+	First and lifetime	No¶
Sexual Experiences Survey (Gidycz and Koss, 1989; Koss and Oros, 1982)	No	Generic	No	Yes	No	No	10 (5 as modified for adolescents)	14+	Lifetime	No

Note: Questionnaires are listed alphabetically.

* "Generic" indicates that only general questions are asked about assaults and that family perpetrators are included only if the respondent thinks to do so.

† Theft, vandalism, household burglary, or similar crimes that do not involve a personal assault on the victim. Robbery, which also involves threat or assault, is not included in this category.

‡ Number of screening questions for victimization that would be asked of all respondents. As the number of administered followup questions will vary depending on a child's responses, these are not included in the total for those questionnaires that collect incident data. If a question about a form of violence is repeated for different settings (e.g., home, neighborhood, school) or level of exposure (e.g., witnessing, experiencing), then the resulting total number of questions is given. Subscales of many questionnaires can be used individually, depending on the goals of the study. Subscales do not necessarily correspond to categories used in the table.

§ To facilitate comparison across scales, grade has been converted to age when age is not available. When a scale has been used more than once, all available age and grade information is presented.

¶ The 1995 version of the National Survey of Family Growth had three questions without incident data on sexual assault for which national norms are currently available. The 2000 version has modified these questions and also collects some incident data.

SAQ's must follow the simplest format possible in order to be easy to understand. Ideally, the reading level required for SAQ's will be low. At a minimum, questionnaires should require less than an eighth-grade reading level for adolescents and parents and less than a fifth-grade reading level for middle school students. The ability of elementary school students to complete SAQ's on victimization has not been adequately tested, although sometimes questionnaires are read aloud to groups of younger students, who then fill in their own answers. Self-administered questionnaires are also limited in the amount of information they can obtain on specific incidents because followup questions, which often need to be tailored to an individual's responses, can easily lead to a dizzyingly complex pattern of skipping among questions. For example, the seriousness of a property victimization needs to be measured by a followup question about the value of the loss, whereas the seriousness of an assault needs to be followed up with a question about the extent of any injuries suffered. One example of an SAQ measure of victimization is the Children's Report of Exposure to Violence,

which has been shown to have good reliability and validity in samples of 9- to 18-year-olds (Cooley, Turner, and Beidel, 1995; Cooley-Quille, 1998).

Audio computer-assisted self-interviews. The newest technology used to administer questionnaires is called audio computer-assisted self-interview (audio CASI). With audio CASI, a child hears the question and the possible answers through a headset and touches a computer screen to respond. Studies have shown that, at least for adolescents and adults, many respondents disclose more sensitive information using an audio-CASI format (O'Reilly et al., 1994; Percy and Mayhew, 1997). This appears to be due to the increased privacy of the audio-CASI setting. Turner and colleagues (1998) conducted one of the most thorough tests of the new methodology with adolescents to date. They compared audio-CASI responses to those obtained using a pencil-and-paper self-administered questionnaire. They found increased reporting for a variety of sensitive behaviors, including male-male sexual behavior, substance use, violent perpetration, and violent victimization. Although the results for

this method are extremely promising, audio-CASI equipment is very expensive and is typically used only when face-to-face contact with individual respondents is possible (because an interviewer must set up the equipment and show the child how it works). Nonetheless, it is likely that this method will be increasingly popular in the future.

What ages of children do I want to survey?

Adolescents. Adolescents, especially those in high school, will have language and comprehension abilities that are similar to those of adults. They are also much more likely than younger children to have encountered classes in sex education and to have been exposed to media that address sensitive victimization issues. Thus, questionnaires for high school students are often similar to (or even the same as) those used with adults. Self-administered questionnaires for adolescents should not require a reading level any higher than eighth grade (lower is preferable), but this is less of a concern for orally administered questionnaires.

Table 4: Peer Victimization Questionnaires

Measure	Type of Victimization Assessed						Number of Questions‡	Age of Respondents§ (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes†				
Perceptions of Peer Support Scale (Kochenderfer and Ladd, 1996)	Peer only	No	No	No	No	No	4 victimization (plus 12 social support)	5-6	Lifetime	No
Social Experience Questionnaire—Self Report (Crick and Grotpeter, 1996)	Peer only	No	No	No	By peer only	No	10 (plus 5 prosocial behaviors)	8-12 (3d-6th)	Lifetime	No

Note: Questionnaires are listed alphabetically.

* "No" indicates that family violence is either specifically excluded or would be an inappropriate response to the question (as in studies of peer violence).

† Theft, vandalism, household burglary, or similar crimes that do not involve a personal assault on the victim. Robbery, which also involves threat or assault, is not included in this category.

‡ Number of screening questions for victimization that would be asked of all respondents. As the number of administered followup questions will vary depending on a child's responses, these are not included in the total for those questionnaires that collect incident data. If a question about a form of violence is repeated for different settings (e.g., home, neighborhood, school) or level of exposure (e.g., witnessing, experiencing), then the resulting total number of questions is given. Subscales of many questionnaires can be used individually, depending on the goals of the study. Subscales do not necessarily correspond to categories used in the table.

§ To facilitate comparison across scales, grade has been converted to age when age is not available. When a scale has been used more than once, all available age and grade information is presented.

Younger children. Younger children require much more developmentally sensitive questions. The vocabulary needs to be simpler, and many more terms need to be reviewed for their age-appropriateness. For example, many experts suggest using "private parts" for questions about sexual assault rather than more medical or legal terms (Everson and Boat, 1994). The Things I Have Seen and Heard questionnaire is one that has been used with children in first grade (Richters and Martinez, 1993). The Violence Exposure Scale for Children (VEX), which circumvents language issues by presenting cartoon images of various victimizations, has been used with preschoolers (Fox and Leavitt, 1995). Both have simplified language, omit some forms of victimization that may not be understood by young children, and use pictorial response categories to make responding easier.

Do I want to be able to compare my results with national norms or other studies?

Questionnaires that supply national or community norms or have been used in other studies have several advantages. National or community norms allow researchers to compare the results from the group of respondents under study with those of a more general sample of youth. Thus, researchers can determine if the respondents in the sample have experienced more or less victimization than others. This can be helpful in terms of presenting your results to policymakers and funding agencies. Some scales also offer normative data for specific populations, such as CPS clients, therapy clients, or juvenile offenders. Some examples of questionnaires with national norms are the National Crime Victimization Survey (Kindermann, Lynch, and

Cantor, 1997), the Monitoring the Future victimization questions (Wells and Rankin, 1995; Elliott, Huizinga, and Ageton, 1985), and the Parent-Child version of the Conflict Tactics Scales (Straus et al., 1998). Obtaining national norms is very expensive, however, and many well-constructed scales exist that do not offer normative data. Furthermore, because of the expense, many questionnaires with national or community norms are briefer and more general screening instruments than questionnaires that do not provide norms. Previously developed questionnaires, especially those in wide usage, offer the advantage of being able to compare new findings with earlier results. This is often true even if national norms are not available. In any situation in which longitudinal data are being collected, it is important to use the same questionnaire (or, at a minimum, very similar questionnaires) during each assessment.

A Review of Selected Questionnaires

There has been a tremendous increase in the development of new questionnaires. Compared with 10 years ago, there are now numerous questionnaires that measure various forms of child victimization, ranging from general questionnaires that measure exposure to community violence to specialized questionnaires that focus on specific types of victimization, such as child maltreatment or bullying. Tables 1–6 present representative questionnaires for the major forms of victimization. Researchers interested in using a questionnaire should contact the author or publisher and request permission to do so. Some questionnaires are copyrighted. Contact information for the authors of the questionnaires reviewed here is available in the articles cited in the tables. Web site addresses for two questionnaires are also provided in the tables.

Community Exposure to Violence Questionnaires

The most general questionnaires are those that ask about exposure to violence in a child's community. These questionnaires were developed in part because of increased concern about and awareness of children's exposure to street crime. Thus, often the questions concentrate on different forms of physical assault and, typically, at least half of the questions ask whether a child has witnessed violence as opposed to directly experiencing violence. Because of their focus on street crime, many of these measures also contain questions about whether a child has been exposed to drug deals or witnessed arrests, both of which, strictly speaking, fall outside most definitions of violence. Many of these questionnaires have been used primarily with samples of high-risk children who live in areas that are known to have above-average crime rates.

These questionnaires have established that a very large percentage of children have, in fact, experienced and/or witnessed violence. Witnessing assault, in particular, is typically reported by a clear majority of children, with exposure rates often in the 85-percent range (e.g., Hill and Jones, 1997). Most community violence questionnaires have shown good internal consistency and correlate with measures of depression, posttraumatic stress symptoms, and behavioral problems. Their primary disadvantages are the inadequate

attention to violence by family and intimate perpetrators, lack of national norms, and overestimation of children's ability to understand terms such as "robbery."

The most widely used community violence questionnaires are those developed by Richters, Martinez, and Valla (1990), *Things I Have Seen and Heard* (designed for first and second graders), and Richters and Martinez (1993), *Survey of Children's Exposure to Violence* (SCEV; designed for older children). The *My Exposure to Violence* (My ETV) questionnaire (Selner-O'Hagan et al., 1998) is a fairly new instrument that has been developed with careful attention to reliability and validity. For very young children, the *Violence Exposure Scale for Children* (VEX) (Fox and Leavitt, 1995) has translated the questions typical of this class of questionnaires into cartoon-like drawings. For information on these and other community violence questionnaires, see table 1.

Child Maltreatment Questionnaires

Child maltreatment questionnaires focus on the types of victimization that are investigated and treated by CPS agencies. These include physical abuse, sexual abuse, and neglect, although not all scales cover all three forms of maltreatment. Assaults by caregivers are usually the focus of these questionnaires, but sexual assaults by noncaregivers may be included because these are also sometimes investigated by institutions investigating child maltreatment.

Initially, there was some skepticism about whether caregivers would report their own use of violence against their children, but a number of national studies (e.g., Straus and Gelles, 1990; Straus et al., 1998) have established that caregiver self-reports produce higher estimates of child maltreatment than official data from CPS agencies, physicians, or police. There is some evidence, in fact, that parents will report more incidents of parent-to-child violence than children will (e.g., Grych, 1998; Jouriles and Norwood, 1995; Kruttschnitt and Dornfeld, 1992). As with community exposure measures, the reliability and validity of many child maltreatment scales are well-established. The primary problem with most child maltreatment scales is one of interpretation. Because spanking and other forms of physical discipline are legal, it can be difficult to determine which

questions clearly indicate physical maltreatment. Neglect, which often is characterized by a pattern rather than by a single episode of inattention, has also proven to be hard to identify through self-reports. Sexual abuse is generally easier to identify because virtually any sexual contact between an adult and a child is considered abusive, but even that can be harder to distinguish with older adolescents who may be engaging in what they consider to be consensual acts.

The most commonly used measure of physical assault by parents is the *Conflict Tactics Scales*, which has recently been revised to include questions on neglect and sexual abuse (Straus et al., 1998). This measure was originally designed as a research tool, however, and its physical and psychological aggression questions do not map readily onto CPS categories. The *Child Abuse Potential Inventory* (Milner, 1986) is another very commonly used tool, but it focuses on stress and other correlates of abuse, rather than measuring maltreatment directly. Most other measures of child maltreatment are designed to gather information from adults about their own childhood histories, although some of these have been used with teens (see table 2).

Sexual Assault Questionnaires

Sexual assault questionnaires focus in depth on the many forms of sexual victimization, which include not only rape but also fondling, sexual harassment, and exposure to or involvement in pornography. Furthermore, most sexual assault questionnaires ask about a broad spectrum of coercive sexual behaviors, which can include the use of alcohol or drugs, threats to end a relationship, and physical assault and weapons to force a juvenile into sexual activity. These measures have shown that rates of sexual assault are much higher than previously thought and that it is important to avoid the use of emotionally laden and stigmatized terms like "rape" when seeking self-reports. The main difficulties with measuring sexual assault among children are the sensitive nature of the questions and the difficulty of asking about sexual experiences in a way that young children will understand.

There are few questionnaires that are designed to elicit information about children's

Table 5: Witnessing Domestic Violence Questionnaires

Measure	Type of Victimization Assessed						Number of Questions‡	Age of Respondents§ (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes†				
Children's Perception of Interparental Conflict Scale (Grych, Seid, and Fincham, 1992)	No	No	Parent-to-parent	No	No	No	48 (4–7 per subscale)	7–21	Lifetime	No
Conflict Tactics Scales (CTS)—modified for witnessing (Straus et al., 1996)	No	No (not as modified)	Parent-to-parent	No	No	No	33 victimization (6–12 per subscale)	6–20	Both	No
Family Environment Scale (Moos and Moos, 1986)	No	Home setting	Most family members¶	No	No	No	9 relationship conflict (plus 81 other family attributes)	11–17	Not Applicable (respondents were asked about typical level of conflict)	No

Note: Questionnaires are listed alphabetically.

* "Home setting" indicates that separate questions are asked about violence in the home, but it is not specified whether this is committed by stranger, nonstranger, or family perpetrator; "No" indicates that family violence is either specifically excluded or would be an inappropriate response to the question (as in studies of peer violence).

† Theft, vandalism, household burglary, or similar crimes that do not involve a personal assault on the victim. Robbery, which also involves threat or assault, is not included in this category.

‡ Number of screening questions for victimization that would be asked of all respondents. As the number of administered followup questions will vary depending on a child's responses, these are not included in the total for those questionnaires that collect incident data. If a question about a form of violence is repeated for different settings (e.g., home, neighborhood, school) or level of exposure (e.g., witnessing, experiencing), then the resulting total number of questions is given. Subscales of many questionnaires can be used individually, depending on the goals of the study. Subscales do not necessarily correspond to categories used in the table.

§ To facilitate comparison across scales, grade has been converted to age when age is not available. When a scale has been used more than once, all available age and grade information is presented.

¶ The Family Environment Scale questions ask the respondent to state whether or not a pattern of conflict is true of most family members on most days and so presents a description of the average amount of conflict that has been experienced—not a description of all the incidents to which the respondent has been exposed.

current experiences of sexual assault (see table 3). The questionnaire that is most commonly used with college-age youth and adults is the Sexual Experiences Survey (SES) (Koss and Oros, 1982). It has also been adapted for use with girls of high school age (Gidycz and Koss, 1989). Finkelhor's (1979) series of questions have been used in many studies but primarily to obtain reports from adults about past experiences of sexual assault. Many studies have used one or two questions to obtain sexual assault histories, but it is known that such brief measures will produce lower reported rates (Bolen and Scannapieco, 1999) and therefore should be avoided

when possible. Nonetheless, many studies of sexual assault among juveniles have used such brief measures. Examples of such studies include the Washington State Survey of Adolescent Health Behaviors (Stock et al., 1997), which surveyed girls as young as those in eighth grade, and the National Survey of Family Growth (NSFG) (Abma, Driscoll, and Moore, 1998), which surveyed girls as young as age 15.

Peer Victimization Questionnaires

Assaults by peers or siblings are one of the most common forms of violence against children. Peer victimization is increasingly

recognized as another important form of victimization and includes bullying, physical assaults, emotional abuse, and sexual offenses. Gang-related assaults are another form of peer assault, but very little information is available about the victims of gang assaults. There is no widely accepted standard questionnaire in the relatively new peer victimization field. The Social Experience Questionnaire—Self Report (Crick and Bigbee, 1998; Crick and Grotpeter, 1996) includes questions not only about physical victimization (for example, "How often do you get hit by another kid at school?") but also about relational victimization (for example, "How often does another kid say they won't like you unless you do

Table 6: Multidimensional Questionnaires

Measure	Type of Victimization Assessed						Number of Questions‡	Age of Respondents§ (Grade)	Lifetime or Yearly Timeframe	Incident Data
	Community/School Assault	Family Perpetrator of Abuse*	Witnessing/Indirect Violence	Sexual Violence	Threats	Property Crimes†				
Childhood Experiences of Violence Questionnaire (Walsh and MacMillan, 1999)	Yes	Generic	Parent-to-parent	Yes	Of sexual assault only	No	12	Designed for 12–18	Lifetime	Yes
Juvenile Victimization Questionnaire (JVQ) (Hamby and Finkelhor, 1999); also at www.unh.edu/ccrc/	Yes	Specific perp	Yes	Yes	Yes	Yes	37 (5–8 per module)	Designed for 8–17	Yearly (lifetime for rare victimizations)	Yes
Longitudinal Studies on Child Abuse and Neglect (LONGSCAN) Questionnaire (Amaya-Jackson et al., 2000; Runyan et al., 1998)	Yes	Specific perp	Yes	Yes	By parent only	No	66 (2–26 per domain)	12–16	Yearly (and pre- and post-elementary school)	Yes
National Crime Victimization Survey (NCVS) (U.S. Department of Justice, 1994)	Yes	Ex of specific perp	No	Yes	Yes	Yes	7	12–17	Yearly	Yes
National Survey of Adolescents—victimization questions (Kilpatrick et al., 2000)	Yes	Specific perp	Yes	Yes	With weapon only	No	20	12–17	Lifetime	Yes
National Youth Survey—victimization questions (Elliott, Huizinga, and Ageton, 1985; Wells and Rankin, 1995)	Yes	Specific perp	No	Yes	No	Yes	10	12–17	Yearly	No
National Youth Victimization Prevention Instrument (Finkelhor and Dzuiba-Leatherman, 1994)	Peer only	Specific perp	No	Yes	No	No	13	10–16	Lifetime¶	Yes (up to 2)

Note: Questionnaires are listed alphabetically.

* “Generic” indicates that only general questions are asked about assaults and that family perpetrators are included only if the respondent thinks to do so. “Specific perp” indicates that separate questions are asked about family perpetrators. “Ex of specific perp” indicates that family perpetrators are included as a list of possible perpetrators in a broader question.

† Theft, vandalism, household burglary, or similar crimes that do not involve a personal assault on the victim. Robbery, which also involves threat or assault, is not included in this category.

‡ Number of screening questions for victimization that would be asked of all respondents. As the number of administered followup questions will vary depending on a child’s responses, these are not included in the total for those questionnaires that collect incident data. If a question about a form of violence is repeated for different settings (e.g., home, neighborhood, school) or level of exposure (e.g., witnessing, experiencing), then the resulting total number of questions is given. Subscales of many questionnaires can be used individually, depending on the goals of the study. Subscales do not necessarily correspond to categories used in the table.

§ To facilitate comparison across scales, grade has been converted to age when age is not available. When a scale has been used more than once, all available age and grade information is presented.

¶ Date of occurrence obtained in followup questions and yearly rates also computed.

what they want you to do?”). The Perceptions of Peer Support Scale includes four questions on physical and emotional victimization and has been used with children as young as age 5 (Kochenderfer and Ladd, 1996; Ladd, Kochenderfer, and Coleman, 1997) (see table 4).

Witnessing Violence Questionnaires

As mentioned above, most questionnaires on community exposure to violence include questions on witnessing, in addition to experiencing, violence. Some of these questionnaires also contain questions about what is usually called “indirect exposure” to violence, which includes such things as having a close family member assaulted, but not when the child was physically present.

One form of witnessing violence that is currently receiving a lot of attention is the witnessing of domestic violence. The questionnaires concerning these issues focus on assaults between parents (or between a parent and a stepparent, boyfriend, or girlfriend) that occur when children are either physically present or can see or hear the violence. The partner violence version of the Conflict Tactics Scales (Straus et al., 1996) has been adapted to measure children’s witnessing of violence and is the most commonly used measure in this field. It has been used with children as young as age 8 (Margolin and John, 1997) and more commonly with children in sixth grade and above (e.g., DuRant et al., 1995; Kruttschnitt and Dornfeld, 1992; Rogers and Holmbeck, 1997) to collect data on witnessing violence between parents. Other measures of family conflict include the Family Environment Scale (Moos and Moos, 1986) and the Children’s Perception of Interparental Conflict Scale (Grych, Seid, and Fincham, 1992) (see table 5).

Multidimensional Questionnaires

The newest trend in the development of juvenile victimization questionnaires is the creation of interviews and surveys that ask about a number of different forms of victimization. These multidimensional questionnaires have some important

advantages. One advantage is the ability to learn about the overlap among forms of victimization. Another advantage is that multidimensional questionnaires can do a better job than unidimensional questionnaires of identifying all of the victims in a group. For example, a questionnaire that asks only about sexual abuse will classify as nonvictims those youth who have experienced physical abuse or any other non-sexual victimization. The main disadvantage of this approach is that it requires more questions.

The National Crime Victimization Survey (NCVS) is a well-known example of a multidimensional survey. It has questions on both conventional crime victimization and sexual assault, and the newest version has improved the effort to identify family and acquaintance perpetrators. NCVS has some of the best nationally representative data available. It is a very complicated survey to administer, however, and still tends to obtain reports primarily about stereotypical criminal assaults. It also uses vocabulary and concepts that may be difficult for children to fully understand. The new Childhood Experiences of Violence Questionnaire (Walsh and MacMillan, 1999), in a series of 12 questions (with some followup), includes items on peer victimization, witnessing domestic violence, caregiver physical assault, and sexual assault. It is currently being tested in Canada.

The comprehensive Juvenile Victimization Questionnaire (JVQ) (Hamby and Finkelhor, 1999) covers the broadest range of victimizations. This questionnaire includes sections on conventional crime, child maltreatment, peer victimization, sexual assault, and witnessing and indirect violence. It also includes a section on extraordinary or catastrophic violence, including public shootings, hate crimes, terrorism, and other rare but very serious forms of violence. The sections can be used individually or together to provide a comprehensive overview of victimization. The questionnaire is designed to correspond to conventional categories of crime and child maltreatment. It also is currently being tested in a number of studies. Table 6 provides further information on multidimensional questionnaires.

Conclusion

Public awareness about the high rates of victimization among children and adolescents has never been greater. Consequently, the demand is also high for good information about the extent and forms of juvenile victimization. Professionals from a wide variety of fields (including social services, criminal justice, psychology, and health) are now expected to participate in identifying victimization and developing effective intervention programs.

Both the identification of incidents of victimization and the development of effective interventions are greatly enhanced through the use of self-report questionnaires. Many studies have shown that the use of a standard questionnaire will elicit more reports of victimization than informal assessment and will clarify the meanings of these reports. Questionnaires also identify many more instances of victimization than official police or CPS statistics.

To choose an appropriate victimization instrument, you need to consider several issues. These include what type of victimization you want to measure, whether you plan to conduct interviews or want a self-administered questionnaire, whether you need results to correspond to official crime and child protection categories, what period of time you want to know about, what ages of children you want to survey, and whether you would like to compare your results with national norms. There are many questionnaires currently available from which to choose that should be suitable for many needs.

For Further Information

Many excellent books are available for those who are interested in learning more about issues of questionnaire design, development, and methodology. Many universities also offer courses in survey methods, including summer workshops designed for professionals. The University of Michigan’s Institute for Social Research is one source for such workshops (www.isr.umich.edu). Below is a list of suggested readings:

Anastasi, A., and Urbina, S. 1997. *Psychological Testing*. 7th ed. Upper Saddle River, NJ: Prentice Hall.

Dillman, D.A. 1978. *Mail and Telephone Surveys: The Total Design Method*. New York, NY: Wiley.

Salant, P., and Dillman, D.A. 1994. *How To Conduct Your Own Survey*. New York, NY: Wiley.

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References

- Abma, J., Driscoll, A., and Moore, K. 1998. Young women's degree of control over first intercourse: An exploratory analysis. *Family Planning Perspectives* 30(1):12-18.
- Amaya-Jackson, L., Socolar, R.R.S., Hunter, W., Runyan, D.K., and Colindres, R. 2000. Directly questioning children and adolescents about maltreatment. *Journal of Interpersonal Violence* 15(7):725-759.
- Angold, A., Prendergast, M., Cox, A., Harrington, R., Simonoff, E., and Rutter, M. 1995. The Child and Adolescent Psychiatric Assessment (CAPA). *Psychological Medicine* 25:739-753.
- Bachman, J., O'Malley, P.M., and Johnston, L. 1978. *Monitoring the Future: A Continuing Study of the Lifestyles and Values of Youth*. Ann Arbor, MI: University of Michigan, Institute for Social Research.
- Bell, C.C., and Jenkins, E.J. 1993. Community violence and children on Chicago's southside. *Psychiatry* 56:46-54.
- Bolen, R.M., and Scannapieco, M. 1999. Estimating the prevalence of child sexual abuse in North America. Paper presented at the 6th International Family Violence Research Conference, Durham, NH, July 1999.
- Cooley, M.R., Turner, S.M., and Beidel, D.C. 1995. Assessing community violence: The Children's Report of Exposure to Violence. *Journal of the American Academy of Child and Adolescent Psychiatry* 34(2):201-208.
- Cooley-Quille, M. 1998. Assessing exposure to community violence. Paper presented at the American Psychological Association Conference, San Francisco, CA, August 1998.
- Costello, E.J., Angold, A., Burns, B.J., Stangl, D.K., Tweed, D.L., Erkanli, A., and Worthman, C.M. 1996. The Great Smoky Mountains Study of Youth: Goals, design, methods, and the prevalence of DSM-III-R disorders. *Archives of General Psychiatry* 53:1129-1136.
- Crick, N.R., and Bigbee, M.A. 1998. Relational and overt forms of peer victimization: A multiinformant approach. *Journal of Consulting and Clinical Psychology* 66(2):337-347.
- Crick, N.R., and Grotpeter, J.K. 1996. Children's treatment by peers: Victims of relational and overt aggression. *Development and Psychopathology* 8:367-380.
- DuRant, R.H., Getts, A., Cadenhead, C., Emans, S.J., and Woods, E.R. 1995. Exposure to violence and victimization and depression, hopelessness, and purpose in life among adolescents living in and around public housing. *Journal of Developmental and Behavioral Pediatrics* 16(4):233-237.
- Elliott, D.S., Huizinga, D., and Ageton, S.S. 1985. *Explaining Delinquency and Drug Use*. Beverly Hills, CA: Sage Publications.
- Everson, M.D., and Boat, B.W. 1994. Putting the anatomical doll controversy in perspective: An examination of the major uses and criticisms of the dolls in child sexual abuse evaluations. *Child Abuse and Neglect* 18(2):113-129.
- Finkelhor, D. 1979. *Sexually Victimized Children*. New York, NY: Free Press.
- Finkelhor, D., and Dzuiba-Leatherman, J. 1994. Children as victims of violence: A national survey. *Pediatrics* 94(4):413-420.
- Finkelhor, D., and Hashima, P.Y. 2001. The victimization of children and youth: A comprehensive overview. In *Law and Social Science Perspectives on Youth and Justice*, edited by S.O. White. New York, NY: Plenum Publishing, pp. 49-78.
- Finkelhor, D., and Ormrod, R. 1999. *Reporting Crimes Against Juveniles*. Bulletin. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.
- Flisher, A.J., Kramer, R.A., Hoven, C.W., Greenwald, S., Alegria, M., Bird, H.R., Canino, G.M., Connell, R., and Moore, R.E. 1997. Psychosocial characteristics of physically abused children and adolescents. *Journal of the American Academy of Child and Adolescent Psychiatry* 36(1):123-131.
- Fox, N.A., and Leavitt, L.A. 1995. *The Violence Exposure Scale for Children—Revised (VEX-R)*. College Park, MD: University of Maryland.
- Gidycz, C.A., and Koss, M.P. 1989. The impact of adolescent sexual victimization: Standardized measures of anxiety, depression, and behavioral deviancy. *Violence and Victims* 4(2):139-149.
- Gomes, J.T., Bertrand, L.D., Paetsch, J.J., and Hornick, J.P. 2000. *The Extent of Youth Victimization, Crime, and Delinquency in Alberta, 1999*. Calgary, Alberta: Canadian Research Institute for Law and the Family.
- Gorman-Smith, D., and Tolan, P. 1998. The role of exposure to community violence and developmental problems among inner-city youth. *Development and Psychopathology* 10(1):101-116.
- Grych, J.H. 1998. Children's appraisals of interparental conflict: Situational and contextual influences. *Journal of Family Psychology* 12(3):437-453.
- Grych, J.H., Seid, M., and Fincham, F.D. 1992. Assessing marital conflict from the child's perspective: The Children's Perception of Interparental Conflict Scale. *Child Development* 63:558-572.
- Hamby, S.L., and Finkelhor, D. 1999. The comprehensive Juvenile Victimization Questionnaire. Paper presented at the 6th International Family Violence Research Conference, Durham, NH, July 1999.
- Hamby, S.L., and Finkelhor, D. 2000. The victimization of children: Recommendations for assessment and instrument development. *Journal of the American Academy of Child and Adolescent Psychiatry* 39(7):829-840.
- Hastings, T.L., and Kelley, M.L. 1997. Development and validation of the Screen for Adolescent Violence Exposure (SAVE). *Journal of Abnormal Child Psychology* 25(6):511-520.
- Hill, H.M., and Jones, L.P. 1997. Children's and parents' perceptions of children's exposure to violence in urban neighborhoods. *Journal of the National Medical Association* 89(4):270-276.

- Hill, H.M., Levermore, M., Twaite, J., and Jones, L.P. 1996. Exposure to community violence and social support as predictors of anxiety and social and emotional behavior among African-American children. *Journal of Child and Family Studies* 5(4):399-414.
- Jouriles, E.J., and Norwood, W.D. 1995. Physical aggression toward boys and girls in families characterized by the battering of women. *Journal of Family Psychology* 9(1):69-78.
- Kann, L., Kinchen, S.A., Williams, B.I., Ross, J.G., Lowry, R., Hill, C.V., Grunbaum, J., Blumson, P.S., Collins, J.L., and Kolbe, L.J. 1998. Youth risk behavior surveillance—United States, 1997. *Morbidity and Mortality Weekly Reports* 47(SS-3):1-89.
- Kilpatrick, D.G., Acierno, R., Saunders, B., Resnick, H.S., Best, C.L., and Schnurr, P.P. 2000. Risk factors for adolescent substance abuse and dependence: Data from a national sample. *Journal of Consulting and Clinical Psychology* 68(1):19-30.
- Kindermann, C., Lynch, J., and Cantor, D. 1997. *National Crime Victimization Survey: Effects of the Redesign on Victimization Estimates*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.
- Kochenderfer, B.J., and Ladd, G.W. 1996. Peer victimization: Cause or consequence of school maladjustment? *Child Development* 67:1305-1317.
- Koss, M.P., and Oros, C.J. 1982. Sexual Experiences Survey: A research instrument investigating sexual aggression and victimization. *Journal of Consulting and Clinical Psychology* 50(3):455-457.
- Kruttschnitt, C., and Dornfeld, M. 1992. Will they tell?: Assessing preadolescents' reports of family violence. *Journal of Research in Crime and Delinquency* 29(2):136-147.
- Ladd, G.W., Kochenderfer, B.J., and Coleman, C.C. 1997. Classroom peer acceptance, friendship, and victimization: Distinct relational systems that contribute uniquely to children's school adjustment? *Child Development* 68(6):1181-1197.
- Margolin, G., and John, R.S. 1997. Children's exposure to marital aggression: Direct and mediated effects. In *Out of the Darkness: Contemporary Perspectives on Family Violence*, edited by G.K. Kantor and J.L. Jasinski. Thousand Oaks, CA: Sage Publications, pp. 90-104.
- Milner, J.S. 1986. *The Child Abuse Potential Inventory Manual*. 2d ed. Webster, NC: Psytec.
- Moos, R.H., and Moos, B.S. 1986. *Family Environment Scale*. 2d ed. Palo Alto, CA: Consulting Psychologists Press, Inc.
- O'Reilly, J.M., Hubbard, M.L., Lessler, J.T., Biemer, P.P., and Turner, C.F. 1994. Audio and video computer assisted self-interviewing: Preliminary new technologies for data collection. *Journal of Official Statistics* 10(2):197-214.
- Percy, A., and Mayhew, P. 1997. Estimating sexual victimization in a national survey: A new approach. *Studies on Crime and Prevention* 6(2):125-150.
- Richters, J.E., and Martinez, P. 1993. The NIMH Community Violence Project: I. Children as victims of and witnesses to violence. *Psychiatry* 56:7-21.
- Richters, J.E., Martinez, P., and Valla, J.P. 1990. *Levonn: A Cartoon-Based Structured Interview for Assessing Young Children's Distress Symptoms*. Bethesda, MD: National Institute of Mental Health.
- Rogers, M.J., and Holmbeck, G.N. 1997. Effects of interparental aggression on children's adjustment: The moderating role of cognitive appraisal and coping. *Journal of Family Psychology* 11(1):125-130.
- Runyan, D.K., Curtis, P., Hunter, W.M., Black, M., Kotch, J.B., Bangdiwala, S., Dubowitz, H., English, D., Everson, M.D., and Landsverk, J. 1998. LONGSCAN: A consortium for longitudinal studies of maltreatment and the life course of children. *Aggression and Violent Behavior: A Review Journal* 3:275-285.
- Selner-O'Hagan, M.B., Kindlon, D.J., Buka, S.L., Raudenbush, S.W., and Earls, F.J. 1998. Assessing exposure to violence in urban youth. *Journal of Child Psychology and Psychiatry and Allied Professions* 39(2):215-224.
- Sheehan, K., DiCara, J.A., LeBailly, S., and Christoffel, K.K. 1997. Children's exposure to violence in an urban setting. *Archives of Pediatrics and Adolescent Medicine* 151:502-504.
- Singer, M.I., Anglin, T.M., Song, L., and Lunghofer, L. 1995. Adolescents' exposure to violence and associated symptoms of psychological trauma. *Journal of the American Medical Association* 273(6):477-482.
- Stock, J.L., Bell, M.A., Boyer, D.K., and Connell, F.A. 1997. Adolescent pregnancy and sexual risk-taking among sexually abused girls. *Family Planning Perspectives* 29(5):200-203, 227.
- Straus, M.A., and Gelles, R.J. 1990. *Physical Violence in American Families: Risk Factors and Adaptations to Violence in 8,145 Families*. New Brunswick, NJ: Transaction.
- Straus, M.A., Hamby, S.L., Boney-McCoy, S., and Sugarman, D.B. 1996. The Revised Conflict Tactics Scales (CTS2): Development and preliminary psychometric data. *Journal of Family Issues* 17(3):283-316.
- Straus, M.A., Hamby, S.L., Finkelhor, D., Moore, D.W., and Runyan, D. 1998. Identification of child maltreatment with the Parent-Child Conflict Tactics Scales: Development and psychometric data for a national sample of American parents. *Child Abuse and Neglect* 22(4):249-270.
- Turner, C.F., Ku, L., Rogers, S.M., Lindberg, L.D., Pleck, J.H., and Sonenstein, F.L. 1998. Adolescent sexual behavior, drug use, and violence: Increased reporting with computer survey technology. *Science* 280:867-873.
- U.S. Department of Justice. 1974. *Crimes and Victims: A Report on the Dayton-San Jose Pilot Survey of Victimization*. Washington, DC: Law Enforcement Assistance Administration.
- U.S. Department of Justice. 1994. *Technical Background on the Redesigned National Crime Victimization Survey*. Bulletin. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.
- Walsh, C., and MacMillan, H. 1999. The development of a population-based instrument measuring maltreatment of youth in Canada. Paper presented at the 6th International Family Violence Research Conference, Durham, NH, July 1999.
- Weist, M.D., Myers, P., Warner, B.S., Varghese, S., and Dorsey, N. n.d. A clinically useful screening interview to assess violence exposure in youth. *Child Psychology and Human Development*, in press.
- Wells, L.E., and Rankin, J.H. 1995. Juvenile victimization: Convergent validation of alternative measurements. *Journal of Research in Crime and Delinquency* 32(3):287-307.

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