

THE JUVENILE VICTIMIZATION QUESTIONNAIRE (JVQ):

ADMINISTRATION AND SCORING MANUAL

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INTRODUCTION

The Juvenile Victimization Questionnaire (JVQ) is a comprehensive questionnaire designed to gather information on a broad range of victimizations. It can enhance the assessment of any child or adolescent by providing a quantified description of all of the major forms of offenses against youth. Either youth or parents can complete the questionnaire. It covers victimizations that are unique to childhood, such as neglect and statutory rape, as well as crimes that can occur to youth as well as to adults, such as assault and theft. The JVQ includes state-of-the-art techniques for assessing very sensitive victimization. These techniques include specific questions to target victimizations by parents, peers, and other perpetrators that are less likely to be identified through generic questioning, and behaviorally-specific wording that clearly defines the types of incidents children should report.

The JVQ has undergone one of the most exhaustive conceptual and wording screenings of any victimization questionnaire. Extensive attention has been paid to translating clinical and legal concepts such as “psychological abuse” and “aggravated assault” into language that children can understand. The scale has been reviewed by victimization specialists, focus groups of parents and teens, and administered in an in-depth cognitive version to young children in order to determine the appropriateness of its language and content. As a result of this process, the JVQ can also be administered to children as young as age 8, which is substantially lower than most other victimization questionnaires.

Increasingly, professionals who work with children are expected to perform a variety of tasks that require standardized assessment of victimization, including documenting clients’

experience of child maltreatment and other harms and evaluating intervention and prevention programs ranging from school-based violence prevention programs to therapy for traumatized children. These professionals include (but are not limited to) child and family therapists, trauma counselors, child abuse evaluation team members, juvenile court intake workers, forensic interviewers, violence prevention specialists, police officers (especially those who work in units with a focus on juveniles, such as gang units), and researchers. The JVQ can assist any professional wanting a thorough record of victimization assessment for their client population.

General Description

The JVQ obtains reports on 35 forms of offenses against youth that cover six general areas of concern: Conventional Crime, Child Maltreatment, Peer and Sibling Victimization, Sexual Assault, Witnessing and Indirect Victimization, and Extraordinary or Catastrophic Victimization. Each of these six areas is a module of the JVQ. Although comprehensiveness is an important goal of the JVQ, these modules have been developed to take into account important conceptual categories that characterize current work with children. They are designed to be usable individually in stand-alone form for situations that call for a more focused assessment. All modules should be administered if a comprehensive picture is desired of all forms of victimization that an individual has experienced.

The questionnaire begins with Conventional Crime for several reasons. This module is more general than the other modules and includes many questions which are less sensitive than those in some other modules. This is followed by Child Maltreatment, next because it is a conceptually distinct but very important domain of child victimization. Peer and Sibling Victimization follows because it continues the theme of known perpetrators. Sexual Assault,

while more stereotypically considered criminal than peer and sibling violence, is placed fairly late in the questionnaire due to the sensitive nature of the questions. Witnessing and Indirect Victimization is next to last because it moves away from direct experiencing. Extraordinary or Catastrophic Victimization is at the very end of the questionnaire because the rarity of these events require using a lifetime, rather than last year, referent period. (Note that there is intentional overlap of some offenses among modules, because they fall in multiple categories. Such items would not be repeated when the whole questionnaire is used.)

A few brief, closed-ended follow-up items can be administered whenever a child or caregiver reports that a victimization occurred. Follow-ups include the number of times a child has been victimized, who victimized the child, whether the child was hurt, and questions specific to the victimization reported (for example, value of stolen items).

The questionnaire is usable in interview format with children as young as age 8 and as old as age 17. It can be used in a self-administered format for juveniles 12 and older. There is also a “Caregiver version,” by which a caregiver could be interviewed as a proxy for a child, especially a child under age 8. Additionally, it can be adapted for retrospective reporting of childhood events by adult respondents.

Purpose and Use

There is currently enormous interest in determining rates and correlates of juvenile victimization for children receiving therapy, being evaluated for maltreatment, and attending school- and community-based prevention programs. Self-report questionnaires are the major source of data for a variety of important forms of victimization, including community violence and other conventional crime, bullying and other peer and sibling violence, and witnessing all

types of violence, including domestic violence. Self-report questionnaires are also important sources of information (along with official reports) on family violence and sexual assault.

Questionnaires such as the JVQ are important because numerous studies have shown that children, especially those school-age or older, have the most information to offer about their own experiences. The JVQ, because it can be administered in self-report form down to age 8, also offers enhanced opportunities to obtain accurate epidemiological data across the span of childhood.

Some scholars have questioned the ability of children to provide self-reports about victimizations, but the reliability and validity of juvenile victimization measures have been demonstrated in a number of ways. Forensic research has shown that children are more than 90% accurate in details of self-report down to age 4 (e.g., Carter et al., 1996). Construct validity has been shown in numerous studies comparing juvenile victimization with psychological and sociological constructs such as depression and neighborhood crime rates. Self-report also follows logical patterns—for example, rates of witnessing violence are generally higher than rates of sustaining violence. Preliminary data on the reliability and validity of the JVQ are encouraging. Please see the sections on reliability and validity for details.

In addition, the JVQ addresses a number of challenges about interviewing children about victimization, which is a sensitive and complex area. Vocabulary comprehension has been extensively tested in qualitative studies. Time bounding, or making sure that reports all fit the one-year reference period of the questionnaire, receives much more attention than it does on many questionnaires. Practice items are offered to ensure that children understand how to respond. Also, extensive conceptual work has been done to more clearly relate JVQ items and

modules to official crime and child protection categories.

The goals of the JVQ are:

- 1) To measure multiple forms of JV to obtain a better estimate of the true total rate of juvenile victimization.
- 2) Enhance the correspondence of juvenile victimization measurement with important social constructs such as crime and child protection categories.
- 3) To provide a means of studying the overlap among forms of juvenile victimization.

Module Descriptions

Module A: CONVENTIONAL CRIME

These are victimizations that parallel the offenses defined and measured by the U.S. Federal Government in the National Crime Victimization Survey. They are the most important crime categories in virtually every police district in the United States. By organizing questionnaire items around these crime categories, questionnaire results can be compared much more easily to crime statistics and presented in a way more clearly understandable to police, politicians, and other policy makers. The results from these items can also give guidance as to when to recommend reporting a victimization to the police.

This module also includes property crimes, which is the most frequent form of victimization in the U.S. but which is omitted from almost all other victimization questionnaires. The module begins with the property crime items (#1-3) in order to begin the questionnaire with victimizations that are usually less traumatizing than interpersonal victimizations.

CC1)Personal Theft

CC2)Robbery

CC3) Vandalism

CC4) Nonspecific Assault

CC5) Aggravated Assault

CC6) Attempted Assault

CC7) Nonspecific Sexual Assault (*note: not asked here when Sexual Offenses module is given*)

Module B: CHILD MALTREATMENT

These 5 items are intended to parallel offenses of concern to child protection agencies. They specifically include mention of victimization by caregivers because extensive research has shown that people are unlikely to mention family perpetrators to general crime items such as those in Module A (Hamby & Finkelhor, 2000). It is worth noting that, contrary to some expectations, research has shown that parents and other caregivers will report maltreatment committed against their own children in surveys (e.g, Straus, Hamby, Finkelhor, Runyan, & Moore, 1998).

CM1) Physical Abuse by Caregiver

CM2) Psychological/Emotional Abuse

CM3) Neglect

CM4) Family Abduction

CM5) Sexual Assault by Known Adult (*note: not asked here when Sexual Offenses module is given*)

Module C: PEER AND SIBLING VICTIMIZATION

This module covers the common offenses of childhood. Many of these are not typically considered to be crimes, which is one reason questions about peer perpetrators need to be asked separately from the more general assault questions. These are also the forms of victimization of most interest to professionals in schools and similar settings.

PS1) Peer or Sibling Assault

PS2) Gang or Group Assault

PS3) Dating Violence (*Note: Only ask this question of children aged 12 and older.*)

PS4) Nonsexual Genital Assault

PS5) Bullying

PS6) Emotional Bullying

Module D: SEXUAL OFFENSES

This module was developed because of evidence that general sexual assault questions may not elicit reports of intimate, statutory and other kinds of sexual offenses. Research has also shown that asking multiple screener questions about sexual assault increases the number and accuracy of reports on this very sensitive topic (Bolen & Scannapieco, 1999; Williams, Siegel, & Pomeroy, 2000). The JVQ also assesses more types of sexual victimization than most other questionnaires by including items that do not necessarily involve forced physical attacks.

SO1) Nonspecific Sexual Assault

SO2) Sexual Assault by Known Adult

SO3) Sexual Assault by Peer

SO4) Rape: Attempted or Completed

SO5) Involvement in Pornography

SO6) Exposure/ Exhibition

SO7) Verbal Sexual Harassment

SO8) Statutory Rape & Sexual Misconduct (*Note: Only ask this question of children aged 12 and older.*)

Module E: WITNESSING AND INDIRECT VICTIMIZATION

These items are included because offenses against others can have psychological impact on children as well as direct victimizations.

WI1) Witness to Assault

WI2) Witness to Aggravated Assault

WI3) Witness to Domestic Violence

WI4) Witness to Parent Assault of Sibling

WI5) Burglary of Family Household

Module F: EXTRAORDINARY AND CATASTROPHIC VICTIMIZATION

A partial list of very serious but rare victimizations that might not be picked up by other modules and that are asked about with a lifetime referent period. These are also victimizations that are important for many policy issues.

EC1) Forcible Abduction

EC2) Murder of Family Member or Friend

EC3) Witness to Murder

EC4) Hate Crimes

EC5) Exposure to Random Shootings, Terrorism, or Riots

EC6) Exposure to War or Ethnic Conflict

Limitations

Juvenile victimization is a sensitive and complex area. Assessment of harm done to a child or adolescent requires clinical sensitivity and knowledge of research on juvenile victimization. Perhaps to an even greater degree than assessment of other factors, assessment of victimization

requires attention to context. This includes both the immediate context of the incident and also the broader social and cultural context in which any incident takes place. The JVQ is designed for use by individuals with training in psychological or epidemiological assessment, whether it is used as an assessment tool in an individual or group setting. While the JVQ can help standardize and organize information obtained about victimization experiences, it should never be used as the sole basis for clinical diagnoses, treatment decisions, child protection determinations, or judgments of criminal liability.

ADMINISTRATION AND SCORING

The JVQ can be administered as a child interview, caregiver interview, child self-administered questionnaire (SAQ), or caregiver self-administered questionnaire, depending on the age and availability of the child. The first section of this chapter covers directions and considerations in the administration of the JVQ, and the second section covers scoring instructions for both individuals and groups.

Administration

Context, Rapport, and Setting

For any use of the JVQ, be it in clinical, school, or research settings, it is important that respondents are comfortable and motivated to answer accurately. It is important the setting be private enough so that the child or caregiver can be assured that no one besides the test examiner can hear or see the answers to JVQ questions. A private office is ideal. If the JVQ is to be administered in a group setting in a school or similar location, it is recommended that children be seated in every other chair or some other arrangement that affords the maximum amount of privacy.

As with any assessment, it should be introduced initially by briefly explaining the reason the JVQ is being administered, how the results will be used, and what feedback, if any, will be available to the child and/or caregiver. If children are the source of information, both children and caregivers should understand in advance what access, if any, caregivers will have to information provided by the respondent. Given the focus of the JVQ on juvenile victimization, some arrangements should be made in advance to ensure that children have access to helping

resources and that some mechanism is in place for assisting children in danger. Because of the wide variety of applications of the JVQ, there is no one mechanism that would apply in every situation. As the JVQ is most likely to be used in a setting that is already addressing issues of juvenile victimization in some form, whether it be through intervention, prevention, or research, it is likely that the mechanisms already in place will also apply to the JVQ.

Many of the items on the JVQ have been experienced by a majority of the U.S. population. These include peer and sibling assaults and witnessing physical assaults of others. Victimitizations such as property crimes are also quite common. Thus, it is fine to communicate in some way that many children have had the types of experiences that will be asked about in order to make youth more comfortable disclosing their own experiences. Confidentiality should also be clearly addressed in an effort to increase the likelihood of accurate disclosure. While there will often be some limits to confidentiality, children should still be made aware that their answers will only be known to a small group and will not be disclosed, for instance, to peers, siblings, or others. If parents are to be told the results of the questionnaire, they should also be encouraged to protect the child's privacy.

Examiner Characteristics

The actual administration of the JVQ is fairly straightforward and can be conducted by any experienced test examiner. Paraprofessionals or research assistants should only administer the JVQ under supervision. Anyone administering the JVQ should acquaint themselves with the questions. Those who plan to administer the JVQ as an interview with the follow-up items should be especially familiar with the general flow of questions and how to describe time bounding to children and go over practice items. The JVQ includes a number of sensitive

questions and any examiner should be capable of discussing these concepts without personal anxiety and know how to gain assistance for any child in need. Interpretation of the scores requires a qualified professional who is familiar with the psychometric properties of the test and current knowledge on juvenile victimization.

Respondent Characteristics

Most children aged 8 to 17 and adults should be able to complete the JVQ without difficulty. It has been extensively tested to maximize comprehension. Children aged 8 to 12 who have any cognitive difficulties, including low IQ and receptive or expressive aphasia, are likely to have trouble completing the JVQ. Adolescents and adults with mild cognitive difficulties may be able to complete the JVQ, but it is recommended that the narrative interview (see below) be administered so that their results can be adjusted for any misunderstanding of items. Children or adults who may have poor reading abilities should be administered an interview version of the JVQ.

Materials and Forms

The JVQ has 35 screen questions about different forms of victimization that the identified child has experienced in the last year. There are several forms of the JVQ, which vary by reporter, administration mode, and . On the long forms, if a child or caregiver indicates that the victimization occurred in the last year, then a few brief follow-up items are administered. To administer the JVQ you need the correct form and a writing instrument.

The child interview is designed for children aged 8 to 17 and is appropriate for one-on-one administration by an examiner with a background in assessment. Highly verbal 6- and 7-year-old children may also be able to complete the child interview. The interview can be completed either

face-to-face or over the telephone.

The caregiver interview is designed for any caregiver who has had regular contact with the target child for at least the one-year period prior to the interview. It is not appropriate for use by noncustodial or foster parents who have not been a primary caregiver of the child for the duration of the previous year. The caregiver interview can be used for children of any age, 0 to 17. As with the child interview, it can be completed face-to-face or over the telephone.

The child self-administered questionnaire (SAQ) is designed for children aged 12 to 17 and can be administered individually or in group settings. The JVQ has a Flesch-Kincaid reading level of grade 5.5. In group settings, the test can also be administered by having the items read orally to the group while each child fills out the SAQ form.

The caregiver SAQ can be used for children aged 0 to 17 and as with the interview form requires a caregiver who has had regular contact with the child over the year prior to the assessment. It can also be used either as a screening instrument only, or with the follow-up questions.

A narrative interview is available for those who wish to obtain detailed descriptions of victimization incidents. This interview has been used in qualitative pretesting with children as young as age 6. This version is appropriate for professionals seeking an in-depth description of a child's victimization incidents, or who have questions about a child's comprehension of the items. This is the most appropriate form to use with 6- and 7-year-old children, because the test interpreter can screen out any inappropriate reports (for example, reports of accidents instead of intentional harm), which are more common among very young reporters.

Retrospective form with a full childhood (0-17 or 0-current age) referent period. While the JVQ is intended primarily for assessing recent victimization of children, it can also be used to try to obtain reports from children or adults about ALL their childhood experiences. This can be done either as an interview or SAQ. In the retrospective form, the phrase “In the last year” is omitted and “ever” is inserted.

Although the advantage of the retrospective form appears to be in getting a complete lifetime inventory and, particularly for researchers, in having more “cases,” we urge great caution in using this form for a number of reasons. First, accurate memory for many of the JVQ events like having items stolen, being assaulted by peers is not likely to be good after the passage of considerable time. One year referent periods have been shown to have much greater accuracy. In addition, the increase in number of cases produced by an “ever” as opposed to “in the last year” referent period is typically much smaller than researchers expect. Moreover, lifetime referent periods also make it impossible to compare rates for children of different ages directly. With lifetime referent periods, one cannot know if higher rates reported by 12-year-olds than 8-year-olds, for example, are due to greater vulnerability or a 50% longer time of exposure (cf. Hamby & Finkelhor, 2000). Thus, although one can only use the full childhood format for adults, the one-year referent periods are preferable for juveniles. We also caution about administering both one-year and lifetime referent periods in a single administration (i.e., by asking two questions for each form of victimization). Doubling the length of the JVQ is likely to be tiring for participants and could easily promote a less thoughtful response set. This is less of a problem in cases where only one module or a few JVQ items are being used.

Directions

As already discussed in the section on **Context, Rapport, and Setting**, the purpose behind the administration of the JVQ should be explained to the child and any needed consents obtained. The directions to the JVQ itself are simple and brief to minimize the creation of any response set. For the interview administration, begin by saying the following:

“Now we are going to ask you about some things that might have happened in the last year.”

The self-report form starts with the same statement, followed by instructions on circling responses. For caregivers, “your child” is substituted for “you.” A few basic demographics on child’s gender, age, grade, and birthday are next obtained and the date of administration is recorded.

Time bounding for pre-adolescents who will be interviewed. Next, make sure that “time bounding” is covered. Time bounding is the process of helping to make sure that events that are reported on the JVQ happened in the last year, and not more than one year ago. For pre-adolescents who will be interviewed (either face-to-face or via telephone), the JVQ instructs examiners to personalize the description of the last year so that the child’s birthday and other events are described in detail. It has been our experience that it is especially important to point out what school years, or portions of school years, are included in the last 12 months. Many young children think of years in terms of the school calendar and will forget to include items from the previous school year, even though that could easily fall into the last 12 months of the standard (Roman) calendar.

Time Bounding for Adolescents, Adults, and Self-Report Forms. For adolescents, adult caregivers, and anyone who receives a self-administered of the JVQ, the following time bounding instructions are included:

“Please take a minute to think carefully about what happened in the last year. The last year started exactly 12 months ago. Remember your last birthday, Christmas, and summer vacation? What grade have you been in during the last 12 months? The last 12 months could include parts of more than one school year, because most people do not stay in the same grade for 12 whole months. Try to remember other important events from the last year, they can help you remember the answers to our questions. When you have a good idea of what happened in the last year, move on to the next questions.”

Practice items. There are two practice items, one on going swimming and one on getting a shot from a doctor, that should be used with all pre-adolescents receiving an interview administration and any others who may need extra help learning the format.

Completion of All Questionnaire Items

Every respondent should be encouraged to respond to all of the JVQ items in order to obtain the most accurate victimization rates. Of course, respondents should be made aware of their right to decline to answer any questions or discontinue. Examiners should be especially sensitive to children’s expressions of desires to omit a question or stop the questionnaire. Module or Composite scores (see below) should not be calculated if more than one item is missing from those used to determine the score, but individual items can still be interpreted if the examiner feels the respondent was giving valid responses to completed items. Examiners should repeat the question or otherwise help clarify the item if it appears the respondent did not

understand the item.

Scoring

Overview

The JVQ can be scored in a variety of ways to produce variables that are of interest for a number of different contexts. The most basic scores are item-level scores and module scores. Composite scores have also been created to capture forms of victimization that are surveyed in more than one module, such as physical assault. In addition, follow-up responses can be used to create even more specialized categories of victimization, such as aggravated assault. The various scoring methods are described in both text and visual forms. The text is below—see Appendix B for figures depicting various scoring options.

Screen Only Form

Item-level scores

Many users of the JVQ use the results at the item level, because each item measures a specific form of youth victimization, and many of these, such as rape or witnessing domestic violence, have clinical or research findings that are unique to that form. At the item level, scores can be calculated either as a one-year incidence rate or as a frequency of number of incidents in the last year.

Module scores

Each module can be scored to produce a one-year incidence rate for that module. Because of the potential overlap among items (for instance, peer assault and bullying could occur in the same incident), it is not recommended that the frequencies be used at the module level. Rather, module scores should be used as dichotomous scores. Thus, a “yes” or 1 for a module indicates

that at least one form of victimization on that module was reported, whereas a “no” or zero indicates that no forms of victimization on that module were reported.

Composite scores

Some forms of victimization are represented on more than one module. For example, while there is a Nonspecific Assault question on the Conventional Crime module, a total rate for all assaults might want to include, caregiver and peer assaults, as well, from the Child Maltreatment and Peer & Sibling Victimization modules. For this reason, we have developed several Composite Scores. As with Module Scores, these are scored dichotomously as “yes” if any victimization in that composite is reported and “no” if no form of victimization included in that composite was identified.

1) Property Crime Composite = YES if any “yes” to: Personal Theft or Robbery or Vandalism

2) Physical Assault Composite = YES if any “yes” to: Nonspecific Physical Assault or Aggravated Assault or Physical Abuse by Caregiver or Peer or Sibling Assault or Gang or Group Assault or Dating Violence or Nonsexual Genital Assault

3) Sexual Assault Composite = YES if any “yes” to: Nonspecific Sexual Assault or Sexual Assault by Known Adult or Sexual Assault by Peer or Rape (Attempted or Completed). *Note: This composite differs from the Sexual Offenses module in that only those questions that clearly involve both nonconsensual and physical contact are included.*

4) Peer & Sibling Assault Composite = YES if any “yes” to: Peer & Sibling Assault or Gang or Group Assault or Dating Violence or Nonsexual Genital Assault or Sexual Assault by Peer

Follow-up Form

Each of the screener questions has associated follow-up questions with details on perpetrator and other victimization characteristics. The **Item-level scores, Module scores, and Composite scores** that are calculated for the screen-only version can also be calculated when the Follow-up Form is used.

One of the limitations of most existing uses of juvenile victimization questionnaires is the lack of precision and the lack of correspondence with official crime and child protection categories. Important improvements in both of these areas can be obtained by incorporating data from the follow-up items into JVQ scores. The following forms of victimization can be scored with more precision by incorporating follow-up data.

Using Perpetrator Identity to Obtain the Most Complete Item-Level Scores

Some assault items are general items that do not specify a class or perpetrators, while others are perpetrator-specific. This is because past research shows that generic questions about assault are important for identifying stranger and unknown assailants but often miss assaults by intimates and peers. It is of course possible, however, that a general item will produce a report by an intimate or peer perpetrator. To obtain the most complete rates for perpetrator-specific items, assaults reported to general items that name perpetrators later asked about specifically should be re-scored as indicated in the following tables. Because some of these changes cut across modules, these item-level scores should be calculated before any Module or Composite Scores are computed.

Nonspecific Assault

If this perpetrator is identified in Nonspecific Assault:

Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend
Someone such as a friend, cousin, or
 someone from school (< 18 years old)
Brother or sister
Father, step-father, or foster father
Mother, step-mother, or foster mother
Your parent's boyfriend or girlfriend who lives with your parent
Uncle, aunt, grandparent, or other adult relative
 who lives in your home

Also score this assault as:

Dating Violence

Peer & Sibling Assault
Peer & Sibling Assault
Physical Abuse by Caregiver
Physical Abuse by Caregiver
Physical Abuse by Caregiver

Physical Abuse by Caregiver

Peer & Sibling Victimization Items

Four of the items in the PS module ask about some form of assault and consequently there is the potential for some overlap, depending in part upon the identity of the perpetrator(s). The Peer and Sibling Assault Composite (see section on Composite scores) includes all items that specify some form of physical attack. To obtain the most complete results for the two perpetrator-specific assault constructs (Gang or Group Assault and Dating Violence) do the following:

If this perpetrator is identified in Peer & Sibling Assault:

Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend
More than one perpetrator (in any category)

Also score this assault as:

Dating Violence
Gang or Group Assault

If this perpetrator is identified in Nonsexual Genital Assault:

Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend
More than one perpetrator (in any category)

Also score this assault as:

Dating Violence
Gang or Group Assault

Sexual Offenses Items

The following perpetrators identified on Nonspecific Sexual Assault should result in the indicated scoring additions:

<u>If this perpetrator identified in Nonspecific Sexual Assault:</u>	<u>Also score this assault as:</u>
Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend	Sexual Assault by Peer
Someone such as a friend, cousin, or someone from school (< 18 years old)	Sexual Assault by Peer
Brother or sister	Sexual Assault by Peer
Father, step-father, or foster father	Sexual Assault by Known Adult
Mother, step-mother, or foster mother	Sexual Assault by Known Adult
Your parent's boyfriend or girlfriend who lives with your parent	Sexual Assault by Known Adult
Your parent's boyfriend or girlfriend who does not live with your parent or you	Sexual Assault by Known Adult
Uncle, aunt, grandparent, or other adult relative who lives in your home	Sexual Assault by Known Adult
Grown-up you know but who does not live with you, such as a teacher, coach, neighbor, or babysitter	Sexual Assault by Known Adult

Note: In an informal survey of child protection professionals, it became apparent that different jurisdictions have multiple definitions of which perpetrators would be investigated by child protection agencies versus police departments. For example, in some jurisdictions, the perpetrator would have to live in the home or have some other clear caregiving role in order to be investigated through child protection, whereas other agencies would investigate any assault by a known adult. The JVQ is designed to be able to accommodate these various policy differences and examiners are encouraged to develop scores that are most relevant to the local context.

<u>If this perpetrator identified in Rape (attempted/completed):</u>	<u>Also score this assault as:</u>
Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend	Sexual Assault by Peer
Someone such as a friend, cousin, or someone from school (< 18 years old)	Sexual Assault by Peer
Brother or sister	Sexual Assault by Peer
Father, step-father, or foster father	Sexual Assault by Known Adult
Mother, step-mother, or foster mother	Sexual Assault by Known Adult
Your parent's boyfriend or girlfriend who lives with your parent	Sexual Assault by Known Adult
Your parent's boyfriend or girlfriend who does not live with your parent or you	Sexual Assault by Known Adult
Uncle, aunt, grandparent, or other adult relative who lives in your home	Sexual Assault by Known Adult
Grown-up you know but who does not live with you, such as a teacher, coach, neighbor, or babysitter	Sexual Assault by Known Adult

Using Severity Data to Create New Composites

Responses from follow-up questions about weapon use, injury, and sexual penetration can be used to create composites for Aggravated Assault and Rape that are more complete than can be obtained with the screen-only version of the JVQ.

Aggravated Assault Composite

Assaults that involve the use of a weapon or that produce injury are generally classified as aggravated assault. Thus, in addition to positive responses to the CC module item that asks specifically about assaults with weapons, any forms of assault that include “yes” responses to the injury or weapons follow-up should also be included to obtain the most complete rate.

Aggravated Assault Composite = YES if any “yes” to: Aggravated Assault or any of the following reported to involve weapons or injury:

- Nonspecific Assault
- Physical Abuse by Caregiver
- Peer or Sibling Assault
- Gang or Group Assault
- Dating Violence
- Nonsexual Genital Assault

Completed Rape Composite

Sexual assaults that involve penetration also should be classified as rape, which is a more serious legal offense. Any forms of sexual assault that include “yes” responses to the penetration follow-up question should be included in this composite.

Completed Rape Composite = YES if any of the following reported to involve penetration:

- Rape (Attempted or Completed)
- Nonspecific Sexual Assault
- Sexual Assault by Known Adult
- Sexual Assault by Peer

Other Composites and Scores

The above scores are not an exhaustive list of all appropriate grouping of JVQ responses. While we have tried to anticipate the most likely scoring needs with the Composites presented

here, the creation of additional scores may be appropriate. For example, Witness to Domestic Violence and Witness to Parental Assault of Sibling could be combined to create a Witness to Family Violence Composite. Composites for victimizations by intimate, nonintimate, and/or stranger perpetrators could also be computed. The creation and use of new composites or other scores will depend on the purposes of the administration and the expertise of the professionals interpreting the results.

INTERPRETATION

Principles of Interpretation

This section provides JVQ users with an overall strategy for the interpretation and use of JVQ responses. It is also appropriate for individual users to develop their own strategies for interpretation, just as it is appropriate to select the most relevant modules or items for administration. Users should carefully study the sections on scale development and the results of studies using the JVQ that are available to date. While we make every effort to keep the manual up-to-date, recent findings may not be represented here and users should attempt to keep abreast of current research in their area of interest. Accurate interpretation of the JVQ requires an understanding of how the questionnaire was developed, and a familiarity with the item content and scoring procedures.

Clinical Implications of Item, Module and Composite Scores

One of the most frequent questions that comes up in the assessment of juvenile victimization is whether abuse can be diagnosed from self-report questionnaires, particularly abuse that requires mandatory reporting to child protection agencies. One of the goals of the JVQ is in fact to tailor items, especially in the Child Maltreatment and Sexual Offenses Modules, to the types of victimizations that are usually investigated by child protection agencies. Nonetheless, positive responses to these and other items that may represent reportable offenses are **not diagnostic in and of themselves**. Children may misunderstand the question or otherwise mistakenly give an incorrect positive response to a screener question. Additional one-to-one interviewing or other investigation would be required in order to determine whether a report to the JVQ constitutes a reportable offense.

SCALE DEVELOPMENT

Review by Victimization Professionals

The completed draft instrument has undergone extensive review by more than a dozen academicians with experience studying juvenile victimization. Review was made to ensure that each item has conceptual integrity and is phrased in ways that are developmentally appropriate for children.

The first phase of peer review involved comments from researchers at the Family Research Laboratory and Crimes Against Children Research Center, including critiques by Murray Straus, Ph.D., professor and Co-Director of the Family Research Laboratory, Glenda Kaufman Kantor, Ph.D., a member of the Family Research Laboratory faculty, as well as post-doctoral fellows of the FRL.

The second phase of peer review sought feedback from additional experts in the fields of victimization and measurement. These included critiques by: Victoria Banyard, Ph.D., University of New Hampshire; Lucy Berliner, Ph.D., University of Washington; Kathy Kendall-Tackett, Ph.D., University of New Hampshire; Mary Koss, Ph.D., University of Arizona; James Lynch, Ph.D., American University; Harriet MacMillan, M.D., M.Sc., F.R.C.P. (C), McMaster University; and Joy Osofsky, Ph.D., University of New Orleans.

Each phase of the peer review process produced numerous revisions, with many comments focusing on construct clarification and methodological issues.

Focus Groups with Parents and Teens

Review of the draft instrument by parents and youths was considered an essential step in developing an instrument that produces the most accurate data on victimization rates. It was one

in a series of steps that assessed comprehension of items by people outside of the criminal justice and victimization fields. To this end, a series of focus groups were conducted, six with parents and three with teens.

The first stage of focus group review was parent meetings. Due to the length of the questionnaire, there were six groups, each focusing on one of the six modules. The groups were recruited by: the staff of the University of New Hampshire Cooperative Extension office, an advertisement in the Concord (NH) Monitor newspaper seeking the participation of organizations, and personal contacts. The following groups participated: College of Lifelong Learning Behavioral Science students; the Association for American Mothers; three groups affiliated with the UNH Cooperative Extension in rural areas of New Hampshire; and a group of teachers.

The second stage of focus group review was adolescent meetings. These were conducted after the instrument draft was revised in response to the parent focus group suggestions. The draft seen by the adolescents included these revisions. The groups were composed of adolescents recruited from: Good Beginnings, a program for teen parents in a rural area in New Hampshire; and Serenity House, a non-profit organization that provides support services to parents and teens.

The focus groups produced feedback about ways to make the language of the questionnaire simpler, ways to make the items relevant for youth living in both rural and urban settings, and word choices that are more likely to be understood and/or used in children in their everyday lives. For example, we received considerable feedback that “private parts” was the word for genitalia that was taught in most school and family settings, including in many child abuse prevention programs. Also, whereas some professionals during our peer review questioned whether today’s youth referred to each other as “boyfriend” or “girlfriend,” parents and teens made it clear that

those are still the most familiar terms and that other alternatives such as “date” or “intimate partner” would be less well understood. More detail on the results of the focus groups is available in Hamby, Finkelhor, & Kopiec, 2000.

Cognitive Interviews with Youth

A semi-structured interview version of the survey was developed in order to assess young children’s comprehension of survey items on victimization. This is a key reliability and validity question that has been seriously under-studied to date. The cognitive interview obtains detailed narrative descriptions of all victimization reports as well as probes to assess comprehension, over-reporting, spontaneous organization of categories such as frequency, and possible under-reporting due to literal interpretations of items or discomfort related to disclosure. Many of these probes were developed from focus group comments as well as the measurement and clinical experiences of the research team.

Larry Ricci, M.D., and Kerry Drach, Psy.D., of the Spurwink Child Abuse Program (Portland, ME), collaborated with the authors on collecting cognitive interview data. The Spurwink Child Abuse Program was chosen as a site for initial cognitive interviews due to the need to locate a high-risk sample so that a sufficient number of narratives could be obtained with a relatively small sample size.

Twenty-four children aged 6 to 15 participated. The results of the cognitive interviews led to additional simplification and shortening of items to maximize comprehension by the youngest children. More on these results is available in Hamby et al., 2000.

Readability

The wording of the scale was also reviewed carefully for readability after other edits were completed. The JVQ has one of the lowest Flesch-Kincaid readability scores of any

victimization instrument. The Flesch-Kincaid score provides an estimate of the grade level needed to read the scale in a self-administered format. The scores are as follows:

Complete questionnaire (all 6 modules)	5.5 (grade level)
Conventional Crime	4.8
Child Maltreatment	5.4
Peer and Sibling Victimization	5.5
Sexual Offenses	5.5
Witnessing & Indirect Victimization	5.9
Extraordinary & Catastrophic Victimization	5.4

PSYCHOMETRIC PROPERTIES AND VALIDATION

The Juvenile Victimization Questionnaire is a new measure and its psychometric properties are still being established. In addition to the cognitive interviews mentioned in scale development, portions of the JVQ have been used in two studies: the Youth Internet Safety Survey (Finkelhor, Mitchell, & Wolak, 2000), and Parents of Children with Asperger's-Spectrum Disorders Survey (Little, in press). More information on these surveys is in Appendix A. These preliminary results provide some evidence of construct validity and give some preliminary indication about rates in two samples. Others are using the JVQ in ongoing projects and additional information on its psychometric properties will be released when it becomes available.

REFERENCES

Bolen, R. M., & Scannapieco, M. (1999, July). Estimating the prevalence of child sexual abuse in North America. 6th International Family Violence Research Conference, Durham, NH.

Carter, C. A., Bottoms, B. L., & Levine, M. (1996). Linguistic and socioemotional influences on the accuracy of childrens' reports. Law and Human Behavior, *20*(3), 335-358.

Finkelhor, D., Mitchell, K, & Wolak, J. (2000). On-line victimization: A report on the nation's youth. Washington, D.C.: National Center for Missing and Exploited Children, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice.

Hamby, S. L., & 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.

Hamby, S. L., Finkelhor, D., & Kopiec, K. M. (2000, July). Asking children about victimization: A qualitative study of the language of victimization surveys. Presented at Victimization of Children & Youth: An International Research Conference, Durham, NH.

Little, L. (in press). Middle-class mothers' perceptions of peer and sibling victimization among children with Asperger's Syndrome and Nonverbal Learning Disorder. Issues in Comprehensive Pediatric Nursing.

Mitchell, K.J., Finkelhor, D., & Wolak, . (2001). Risk factors and impact of online solicitation of youth. JAMA, *285*(23): 3011-3014.

Straus, M. A., Hamby, S. L., Finkelhor, D., Moore, D. W., & 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*, 249-270.

Williams, L. M., Siegel, J. A., & Pomeroy, J. J. (2000). Validity of women's self-reports of documented child sexual abuse. In A.S. Stone et al. (Eds), The science of self-report: Implications for research and practice (pp 211-226). Mahwah, NJ: Lawrence Erlbaum.

APPENDIX A

RATES IN SAMPLES AVAILABLE TO DATE

Youth Internet Safety Survey

A short form of the JVQ was included in the recent Youth Internet Safety Survey (Finkelhor, Mitchell & Wolak, 2000; Mitchell, Finkelhor & Wolak, 2001). The Youth Internet Safety Survey is a national sample of 1501 juveniles, aged 10 to 17, who were regular Internet users. Regular Internet users, defined as those who used the Internet at least once a month for the past six months, were identified from a nationally representative survey of more than 16,000 households, the Second National Incidence Study of Missing, Abducted, Runaway, and Thrownaway Children (NISMA2). Children were interviewed by telephone.

As would be expected, the final sample is not representative of the entire U.S. youth population because Internet users tend to have higher incomes, more education, and are more likely to be White. Boys are also somewhat more likely than girls to use the Internet, and based on these data older teens were more likely to use the Internet than pre-adolescents. It would be most useful for comparison with other samples who shared at least some of these demographic characteristics.

Table 1 gives the rates of the 8 forms of victimization that were asked about in the Internet survey. These are: Personal Theft, Nonspecific Physical Assault, Physical Abuse by Grown-up, Peer or Sibling Assault, Gang or Group Assault, Bullying, Nonspecific Sexual Assault, and Witness to Assault. Table 1 also gives the rates of two composites created from these 8 items, one for Any Victimization that gives a rate for all 8 victimizations combined, and one for Any Physical or Sexual Victimization which gives a rate for the 5 items that refer to some form of interpersonal assault (omitting Personal Theft, Bullying, and Witness to Assault).

Table 1: Youth Internet Safety Survey Short Form Version of the JVQ

A preliminary short form of the JVQ was used in the Internet survey. The items and the obtained yearly incidence rates are as follows:

Personal Theft			
Yes	29.2%	Don't know	0.3
No	70.5	Missing	0.1
Nonspecific Physical Assault			
Yes	6.3	Don't know	0
No	93.6	Missing	0.1
Physical Abuse by Grown-up			
Yes	1.4	Don't know	0.2
No	98.2	Missing	0.2
Peer or Sibling Assault			
Yes	29.2	Don't know	0.1
No	70.5	Missing	0.1
Gang or Group Assault			
Yes	2.1	Don't know	0
No	97.9	Missing	0.1
Bullying			
Yes	12.9	Don't know	0.2
No	86.7	Missing	0.2
Nonspecific Sexual Assault			
Yes	0.8	Don't know	0.1
No	99.1	Missing	0.1
Witness to Assault			
Yes	26.6	Don't know	0.2
No	73.2	Missing	0.1
Any Physical or Sexual Victimization (not Personal Theft, Bullying, or Witness to Assault)			
Yes	32.8		
No	67.2		
Any Victimization			
Yes	57.2		
No	42.8		

Parents of Children with Asperger's-Spectrum Disorders Survey

The Peer and Sibling Module of the JVQ was included in a recent survey of Parents of Children with Asperger's-Spectrum Disorders (Little, in press). The Asperger's-spectrum survey is a national sample of parents of children with either Asperger's Syndrome or Nonverbal Learning Disorder, both of which are considered mild forms of autism. To identify parents, the project used the web pages of national support groups for these disorders. Parents who expressed an interest in participating were then mailed (via U.S. mail) a questionnaire. The response rate was 70%.

The final sample is not representative of the entire U.S. population of parents of children with these disorders because parents had to have Internet access and volunteer to participate. This is the largest sample of parents to date of parents of children with these rare disorders, however, and hence is a noteworthy sample of parents of children with psychiatric disabilities.

As would be expected, the income and educational backgrounds of this Internet-savvy, volunteer sample are fairly high. It would be most useful for comparison with other samples who shared at least some of these demographic characteristics. For analytic purposes, only mothers describing children aged 4 to 17 were included ($n = 411$).

The table below gives the rates of the 5 forms of Peer and Sibling victimization that were asked about in the Asperger's Spectrum survey. These are: Peer or Sibling Assault, Gang or Group Assault, Nonsexual Genital Assault, Bullying, and Emotional Bullying.

Table 2 also gives the rates of Any Peer & Sibling Victimization that gives a rate for all 5 victimizations combined.

Table 2
Peer & Sibling Victimization Rates from the Parents of Children with Asperger's-Spectrum Disorders Survey

Peer or Sibling Assault	72.9%
Gang or Group Assault	10.3
Nonsexual Genital Assault	15.0
Bullying	55.2
Emotional Bullying	75.5
Any Peer Victimization	90.0

Appendix B

Scoring Figures

Figure 1. Elements of Module Scores. Figure 1 shows the item-level composition of each module score. An affirmative response to any item making up the module should result in an affirmative module score. Note that Modules A-E are based on a one year period while Module F is based on the respondent's entire life.

Figure 2. Creating Composite Scores. Figure 2 shows the item-level composition of four composite scores. An affirmative answer to any item making up the Composite should result in an affirmative Composite Score. For instance, if a respondent responds in the affirmative to EITHER CC1, CC2, or CC3, then the Property Crime Composite would receive an affirmative score.

Figure 3. - Severity Composites. Figure 3 shows items that contribute to either the Aggravated Assault Composite or the Completed Rape Composite subject to the respondent's response to follow-up questions. If the respondent indicates that a weapon or injury was involved in follow-ups to any of CC4, PS1, PS2, PS3, PS4, OR responds in the affirmative to CC5, then the Aggravated Assault Composite should receive an affirmative score. Similarly, if the respondent indicates that penetration occurred in follow-ups to any of SO1, SO2, SO3, or SO4, then the Completed Rape Composite should receive an affirmative score.

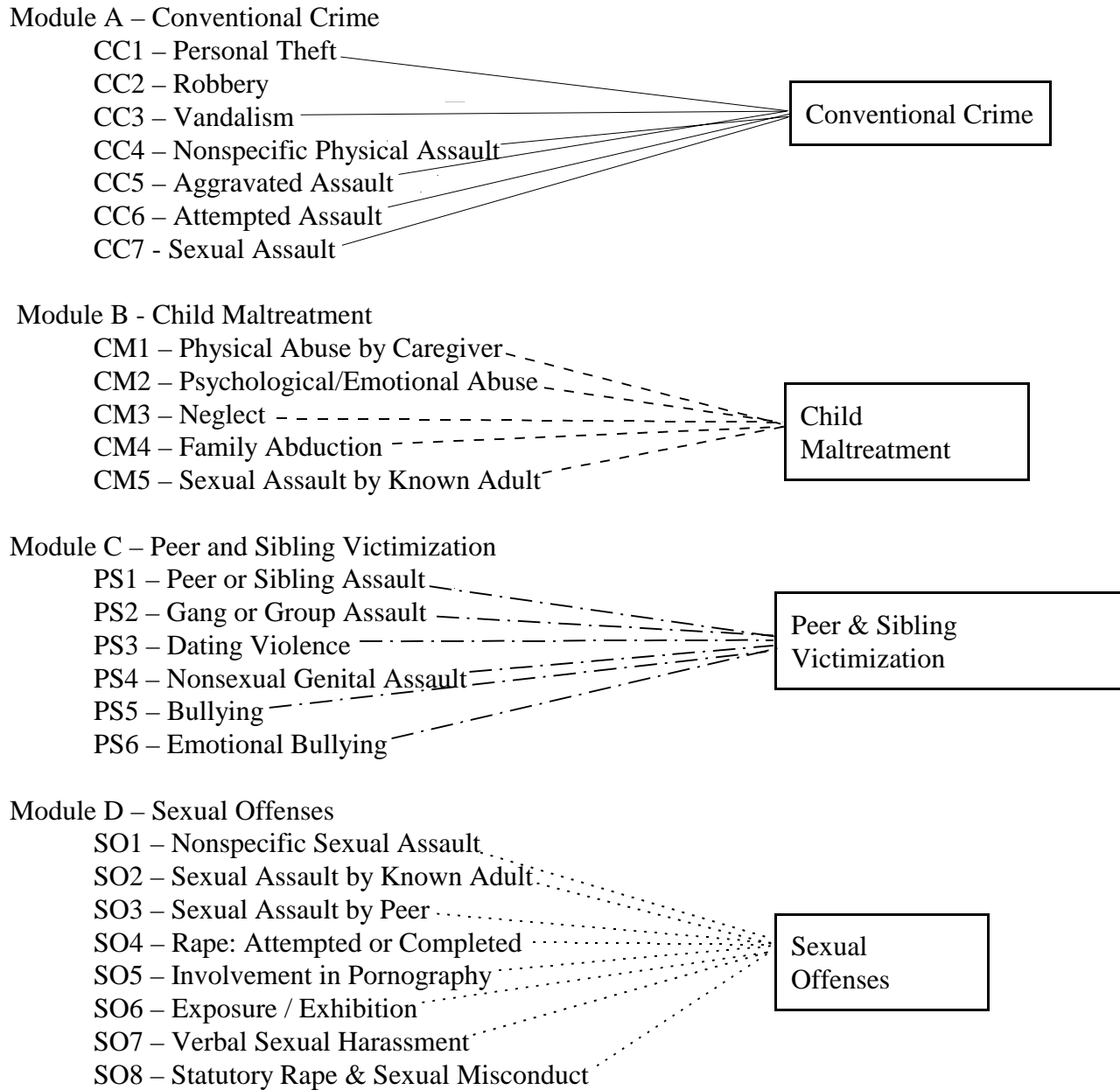
Figure 4. Rescoring Items as Aggravated Assault and Rape. Figure 4 shows items that should be rescored as either CC5 - Aggravated Assault or SO4 - Rape: Attempted or Completed, conditional on the response to follow-up questions. If any of items CC4, PS1, PS2, PS3, or PS4, are determined to involve either a weapon or injury, then CC5 - Aggravated Assault should be scored as affirmative. If any of items SO1, SO2, or SO3, are determined to involve sexual

penetration, then SO4 - Rape: Attempted or Completed should be scored as affirmative.

Figure 5. Rescoring for Nonspecific Assault and Peer & Sibling Victimization Items. Figure 5 shows items that should be rescored based on the identity of the perpetrator or perpetrators. For example, if either PS1 - Peer or Sibling Assault or PS4 - Nonsexual Genital Assault is determined to involve *more than one perpetrator (in any category)*, then PS2 - Gang or Group Assault should also be scored as affirmative.

Figure 6. Rescoring for Sexual Offense Items. Figure 6 shows sexual offense items that should be rescored based on the identity of the perpetrator. For example, if SO1 - Sexual Assault is determined to have as a perpetrator in any of the following categories: *Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend; Someone such as a friend, cousin, or someone from school (<18); Brother or sister*; then SO3 - Sexual Assault by Peer should be scored as affirmative.

Figure 1. Elements of Module Scores



Module E - Witnessing and Indirect Victimization

- WI1 - Witness to Assault
- WI2 - Witness to Aggravated Assault
- WI3 - Witness to Domestic Violence
- WI4 - Witness to Parent Assault of Sibling
- WI5 - Burglary of Family Household

Witnessing and Indirect
Victimization

Module F - Extraordinary or Catastrophic Victimization

- EC1 - Forcible Abduction
- EC2 - Murder of Family Member or Friend
- EC3 - Witness to Murder
- EC4 - Hate Crimes
- EC5 - Exposure to Random Shootings, Terrorism
or Riots
- EC6 - Exposure to War or Ethnic Conflict

Extraordinary or Catastrophic
Victimization

Figure 2. Creating Composite Scores

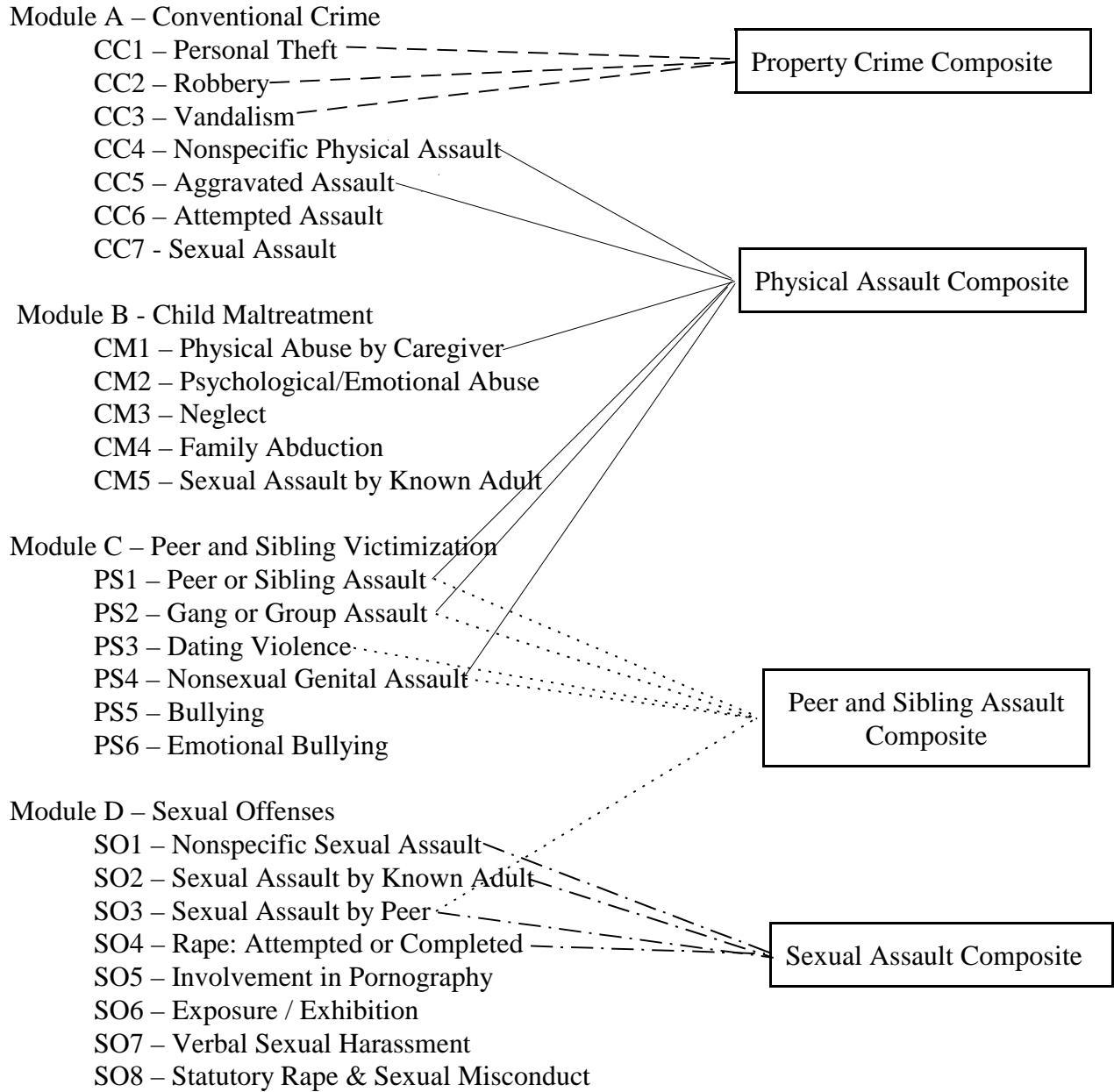
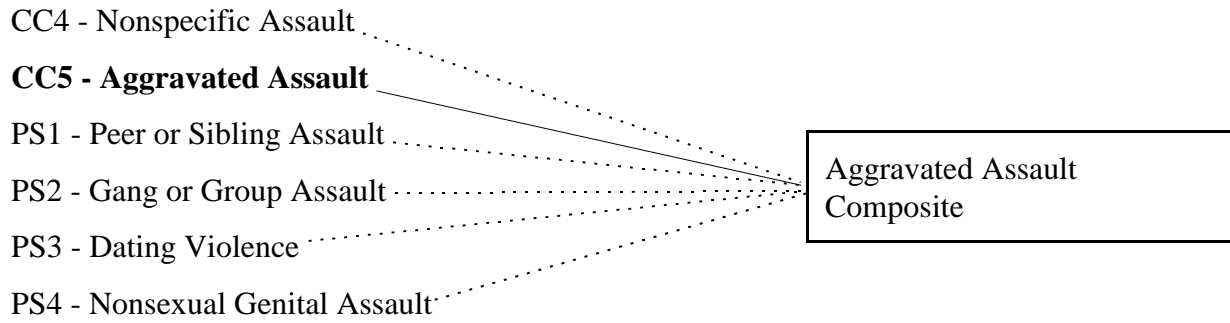
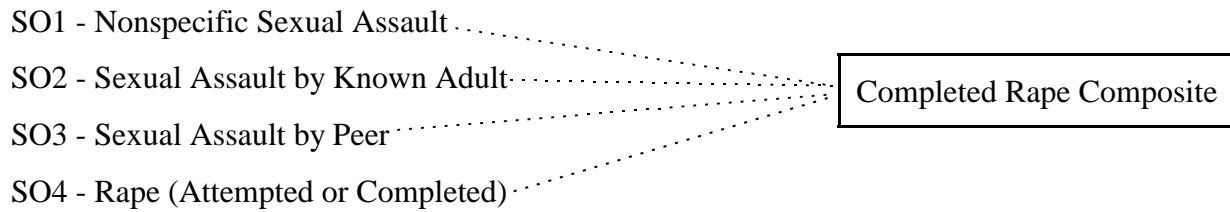


Figure 3. Severity Composites



Dotted line indicates should only be included if responses indicate a weapon or injury was involved.



Dotted line indicates should only be included if a “yes” response is provided for the penetration follow-up question.

Figure 4. Rescoring Items as Aggravated Assault and Rape

Rescoring for Aggravated Assault

If offense is determined to involve a weapon or injury:

Also score as:

CC4 - Nonspecific Assault

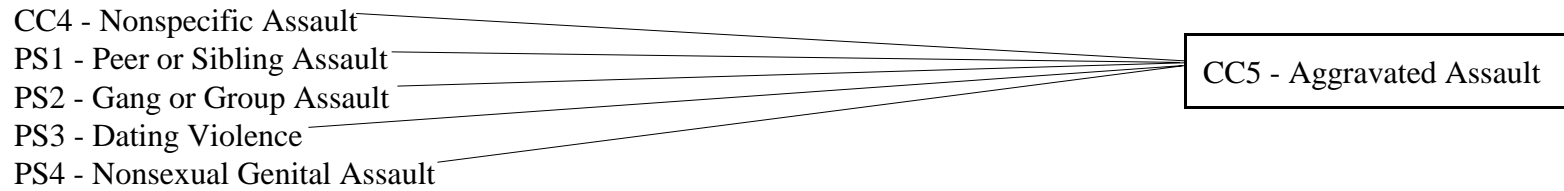
PS1 - Peer or Sibling Assault

PS2 - Gang or Group Assault

PS3 - Dating Violence

PS4 - Nonsexual Genital Assault

CC5 - Aggravated Assault



Rescoring for Rape

If offense is determined to involve penetration:

Also score as:

SO1 - Nonspecific Sexual Assault

SO2 - Sexual Assault by Known Adult

SO3 - Sexual Assault by Peer

SO4 - Rape: Attempted or Completed



Figure 5. Rescoring for Nonspecific Assault and Peer & Sibling Victimization Items

If perpetrator is identified as:

Then also score as:

Conventional Crime

CC5 -Nonspecific Physical Assault

Boyfriend, girlfriend, date, or ex-boyfriend, or ex-girlfriend

Someone such as a friend, cousin, or someone from school (<18)

Brother or sister

Father, step-father, or foster father

Mother, step-mother, or foster mother

Your parent’s boyfriend or girlfriend who lives with your parent

Your parent’s boyfriend or girlfriend who does not live with your parent or you

Uncle, aunt, grandparent, or other adult relative

PS1 - Peer or Sibling Assault

CM1 - Physical Abuse by Caregiver

PS3 - Dating Violence

Peer & Sibling Victimization

PS1 - Peer or Sibling Assault

Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend

More than one perpetrator (in any category)

PS2 - Gang or Group Assault

PS4 - Nonsexual Genital Assault

Boyfriend, girlfriend, date, or ex-boyfriend or ex-girlfriend

More than one perpetrator (in any category)

Figure 6. Rescoring for Sexual Offense Items

Sexual Offense Items

SO1 - Sexual Assault

Boyfriend, girlfriend, date, or ex-boyfriend
or ex-girlfriend

Someone such as a friend, cousin, or
someone from school (<18)

Brother or sister

Father, step-father, or foster father

Mother, step-mother, or foster mother

Your parent's boyfriend or girlfriend who lives with your parent

Your parent's boyfriend or girlfriend who
does not live with your parent or you

Uncle, aunt, grandparent, or other adult relative
who lives in your home

Grown-up you know but who does not live with you, such
as teacher, coach, neighbor, or babysitter

SO3 - Sexual Assault by Peer

SO2 - Sexual Assault by
Known Adult

SO4 - Rape: Attempted or Completed

Boyfriend, girlfriend, date, or ex-boyfriend
or ex-girlfriend

Someone such as a friend, cousin, or
someone from school (<18)

Brother or sister

Father, step-father, or foster father

Mother, step-mother, or foster mother

Your parent's boyfriend or girlfriend who lives
with your parent

Your parent's boyfriend or girlfriend who does not
live with your parent or you

Uncle, aunt, grandparent, or other adult relative
who lives in your home

Grown-up you know who does not live with you, such
as a teacher, coach, neighbor, or babysitter

SO3 - Sexual Assault by Peer

SO2 - Sexual Assault by
Known Adult