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I A Developmental Perspective on the Childhood Impact of Crime, Abuse, and Violent Victimization

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Despite substantial scientific and clinical interest in physical abuse, sexual abuse, bullying, kidnapping, and community violence against children, there has been little integration of the knowledge base in these fields. Even though they are all forms of child victimization, most of these problems have been studied and discussed in relative isolation from one another. Moreover, few of them have been consistently charted along the dimension of child development, a field that could provide a good integrating matrix. The results of this fragmentation have included the failure of professionals to fully identify children affected by the whole spectrum of victimization, the stunted development of comprehensive theories that could guide research and practice, and misleading research that mistakenly attributes effects to a single form of victimization when multiple forms are present and responsible.

To promote more integration, we have proposed the concept of *developmental victimology*, the study of the diverse victimizations of children, including crime, child abuse, and other violence, across the various stages of development (Finkelhor, 1995; Finkelhor & Dziuba-Leatherman, 1994). The field has two major branches: one that analyzes how risks for various victimizations change developmentally, and the second how the impact of victimization changes over the course of childhood. This paper is primarily devoted to this second issue. After briefly summarizing the field, we will distinguish the approach of developmental victimology from other approaches to studying the impact of victimization, and delineate four dimensions along which developmental differences in impact might be tracked.

Why Developmental Victimology

The developmental impact of victimization is a topic that to some extent overlaps other already well defined fields-of-inquiry such as developmental psychopathology (Cicchetti, 1993; Sroufe & Rutter, 1984), development and stress (Arnold, 1990), and development and traumatology (Pynoos, Steinberg, & Wraith, 1995). How-

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ever a good case can be made for studying the impact of victimization independently.

Victimization is a special kind of negative life experience that stands apart from other stressors or traumas. Victimization is defined as harms that occur to individuals because of other *human actors* behaving in ways that *violate social norms*. The human agency and norm violation components give victimizations a special potential for traumatic impact that is different from other stresses and traumas such as accidents, illnesses, bereavements, and natural disasters. Issues of malevolence, betrayal, injustice and morality are much more present. To a large extent, moreover, victimizations engage a whole special set of institutions and social responses that are missing in other stresses and traumas: police, courts, agencies of social control, and other efforts to reestablish justice and mete out punishments. Thus it makes sense to study the impact of victimizations separate from other childhood stresses.

The inventory of what we consider child victimizations in this article starts with criminal acts against children as defined by law, such as sexual assault, abduction, theft, robbery, and aggravated assault. It also includes acts judged to be harmful to children's well-being by child welfare legislation, such as child abuse and neglect. We would argue that it should also include other violence against children that may not be considered statutorily as crimes in childhood, but that would be if similar acts occurred to adults. Thus peer assaults and sibling assaults, because they involve the use of physical force and would be crimes if they occurred between adults, should be considered victimizations for children. The witnessing of violence and crime, where children are "secondary" victims, will also be included, because it has a high risk of causing psychological harm (Martinez & Richters, 1993; Osofsky & Scheeringa, 1997; Osofsky, Wewers, Hann & Fick, 1993) and has been covered extensively in the child trauma literature (Pyne & Nader, 1988). More at the boundary of this definition of victimization is the issue of corporal punishment, which, although it involves violence and would be a criminal assault between adults, is not yet seen in many environments as a violation of social norms. We have included it among our inventory of victimizations elsewhere (Finkelhor & Dzuiba-Leatherman, 1994). However, despite evidence of its possible negative effects (Strassberg, Dodge, Pettit, & Bates, 1994; Straus, 1994), it will not be a major topic in this review. Thus although child victimization is a concept still being defined, many of its specific forms are clear and have a strong conceptual clustering.

Just as it is useful to distinguish victimization from the general domain of stresses and traumas, so it is useful to distinguish the study of child victimization from the study of victimization in general. The study of victimization—the field called victimology (Fatah, 1991), a subfield of criminology—has not paid sufficient attention to childhood, even though it includes some of the periods of highest victimization risk (Finkelhor & Dzuiba-Leatherman, 1994). There is little theory about why the risks are so high for children, what special risks exist, or how these risks change (Finkelhor & Asdigian, 1996). Moreover, the developmental immaturity of children adds a dimension that dramatically changes the nature of harm that victimization can cause in childhood compared to adulthood.

It is interesting to realize that the fields of developmental psychology and criminology have combined forces in a very successful collaboration around juvenile delinquency, in an effort to understand the sources of antisocial *offending* behavior, generalizing across such different forms of delinquency as property crimes, violence, drug usage, truancy, and sexual offending (Dishion, French, & Patterson, 1995; Pepler & Rubin, 1991). Yet, in spite of the fact that most delinquency is committed against other children, no similar collaboration has yet occurred to understand the causes and consequences of the generalized childhood *victimization* experience, the other side of the delinquency equation. The priority given to the childhood offender over the childhood victim may reflect the bias of the adult world for which the personal threat from the childhood offender takes precedence over empathy for the childhood victim. A collaborative field of developmental victimology would go far to rectify this imbalance.

As mentioned previously, developmental victimology is conceived as having two branches. The first branch is based on the proposition that the nature of victimization risk changes in predictable ways over the course of childhood, and some general principles can be derived to describe these changes. So, for example, age is associated with perpetrator identity: more of the victimization of younger children occurs at the hands of family members, and as children age, the amount of victimization at the hands of acquaintances and strangers increases (Finkelhor, 1997; Finkelhor & Dzuiba-Leatherman, 1994). Age is also associated with gender in an interesting way: victimization becomes more gender differentiated over the course of childhood. Young boys and girls suffer similar kinds and rates of victimizations, but among teens, homicides increase disproportionately for boys and sexual assaults for girls. Age is also associated with the lethality of childhood victimization, but interestingly, in a curvilinear relationship: homicide rates are particularly elevated for children under age 4 and youth older than age 15. This first group seems to be vulnerable because of their physical fragility and dependence, the second due to their involvement in risky and criminal activities, their willingness to resist attackers, and the increasing availability of firearms in the context of disputes.

A more detailed analysis of these and other developmental patterns (Finkelhor, 1995) suggests that they can be related to developmental changes in several domains: the personal characteristics that make children suitable as targets for various kinds of victimization, their capacities to protect and defend themselves, the activities they engage in, and the environments in which they live and operate including the proximity to potentially threatening or potentially protective individuals. So, to give a few examples, children do not tend to become victims of property crimes until they begin to acquire money and valuable possessions that would make them suitable targets. They tend to suffer less physical violence from parents, as they are able to get away from them and spend time outside the family. As they tend to acquire and associate with people who possess firearms, more of children's victimizations tend to occur from such weapons. These examples give a flavor of the utility of developmental victimology as a framework for analyzing the risk and nature of victimization over the course of child development.

The Impact of Victimization

The second branch of developmental victimology, which is the primary focus of this paper, concerns how children react to victimization at different stages of childhood. Previous work on this issue has taken place in two major areas. One has been in the research on the impact of specific kinds of victimization like sexual abuse; the other has been in the study of post-traumatic stress disorder (PTSD). Although much has been written about the impact of specific victimizations, a concerted developmental approach has been taken really only in the area of early onset child abuse and neglect (Cicchetti, 1989; Cicchetti & Lynch, 1993; Egeland, 1991; Egeland, Sroufe, & Erickson, 1983; Herrenkohl, Herrenkohl, Egolf & Wu, 1991). On topics such as sexual abuse, which has been heavily studied, relatively little has been written about specific developmental patterns. Trickert and colleagues have tried in recent literature reviews to move some of the separate fields of child abuse and neglect in an integrated developmental direction (Trickett & McBride-Chang, 1995).

The Field of Childhood Trauma

The other area where the impact of victimization has been studied is in the field of post-traumatic stress disorder (PTSD) (Eth & Pynoos, 1985). The identification and official recognition of PTSD as a psychiatric disorder has led to efforts to note how it may manifest differently in childhood and even at different stages of child development (March & Amaya-Jackson, 1993). This has led investigators to study the impact of a large number of different kinds of child victimizations, such as kidnappings (Terr, 1979; Terr, 1983), and the witnessing of murder and rape (Pynoos & Eth, 1985). This field has drawn a great deal of clinical attention to the problem of child victimization and its potential to create very serious disturbance, including neurological and endocrinological changes (Aston-Jones, Valentino, Van Bockstaele, & Meyerson, 1994), personality problems, and long-lasting mental health symptoms like depression, anxiety, and phobias.

Although a great deal of the literature which we review in the course of this paper comes out of the PTSD field, it is a field that has to some degree limited the scope and biased the orientation in the study of child victimization. For one thing, the central issue in the PTSD field has been trauma and not victimization, so there has been little attention to kinds of victimizations, like neglect or family abduction, that do not generally result in PTSD type trauma. Indeed, victimizations can have harmful effects, including developmental effects, that would not be categorized as trauma in the clinical sense—for example, the formation of racist or reactionary political attitudes as the result of victimization (Adorno, 1950). These are important effects, and have been the subject of some developmental analysis in the study of political and social attitude formation (Aboud, 1993; Oskamp, 1991), but they fall outside the realm of mental health.

Secondly, as part of its interest in trauma, particularly clinically significant trauma, the PTSD field has also tended to focus on the most extreme forms of victimization, such as violent sexual assaults, kidnappings, or playground shootings (McLeer, Deblinger, Atkins, Foa, & Ralphe, 1988; Pynoos, Nader, Frederick, Gonda, & Stuber, 1987; Terr, 1979). The vast majority of childhood victimizations, however, are of a much less serious nature, like being bullied or beaten up by peers or being touched inappropriately by a frotteur in a public place (Finkelhor & Dzuiba-Leatherman, 1994). It may take very different concepts to understand the full effects of these kinds of victimizations. It is possible that the PTSD framework distorts the understanding of these other experiences.

Thirdly, in the PTSD literature, the way in which trauma, and thus the impact of victimization, has been defined is very much in terms of its affective dimensions. Thus the major diagnostic criteria for PTSD include emotional and physiologic hyperarousal, the unbidden intrusion of frightening thoughts, feelings and images, and the numbing of emotional response (March & Amaya-Jackson, 1993). Thus a lot of the inquiry has concentrated on documenting and explaining these affective injuries. Less attention has gone to other domains, particularly cognitive and attitudinal dimensions, like what happens to a child's views about justice, morality, fairness, personal safety, and trust in human interactions (Finkelhor, 1987).

Finally, because PTSD is thought of as a psychiatric category, relatively little attention has gone to the effects of victimization on the social or group context. Collective victimizations, such as war and ethnic violence, have an obvious group context (Swenson & Klingman, 1993) and the intractability and cyclical nature of these conflicts may be related to how groups and individuals process victimizations (Pynoos, 1992). But even individual victimizations have group effects when they become known to a larger group. Groups need to assimilate and make sense of serious norm violations, and reactions can include alienation, the breakdown of social ties, religious responses, and political and social mobilizations. Child victimizations seem to have particularly strong group effects, as evidenced by public, media, and community responses to events like the murder of Megan Kanka (after whom the offender notification laws were named) or Polly Klass (Beck, 1993; Bernstein, 1995; Oxenhandler, 1993; Steinbock, 1995; Toobin, 1994). Children themselves may respond collectively to victimizations in ways that are distinctive, through the formation of protective cliques or gangs (Thorne, 1993), the exclusion of the victimized individual, the elaboration of fantasy, or the adoption of collective superstitions. The study of these processes is an appropriate domain for victimology that has not been well highlighted in the PTSD model.

Toward a More General Model of Victimization Impact

We are proposing that the study of the developmental effects of victimization broaden out quite substantially from the approach defined by the PTSD literature. First it

should encompass a broad range of victimizations. In an earlier paper (Finkelhor & Dziuba-Leatherman, 1994), we categorized child victimizations into three groups based on their relatively frequency: the extraordinary—such as homicides and stranger abductions; the acute, occurring to a minority of all children—like child physical abuse, sexual abuse; and the pandemic, occurring to a majority of all children at some time—including peer assault, sibling assault, and theft. We think pandemic victimizations in particular need to be included in the purview of the field.

Second, a model of victimization impact should be interested in a broad range of effects. This would include those that do not fall into the realm of psychopathology, such as effects on personality (e.g., shyness), social skills, political and social attitudes. It might even include effects that would be regarded as normative, such as acquiring personal safety skills like locking up possessions or the purchasing of firearms (Finkelhor, Asdigian, & Dziuba-Leatherman, 1995). It should include effects that have a group or a social, as well as an individual dimension. For example, something that would fall in this category is the observation that, starting in the preschool years, girls begin to express fear of and distaste for boys, in part as a result of girls getting hurt and threatened by boys' aggressive play (Best, 1983; Maccoby & Jacklin, 1974).

Third, developmental victimology should focus most particularly on effects in developmental context, that is, on how effects differ at different developmental stages. This has not generally been done in the existing literature. For example, among the most widely cited effects of sexual abuse is what has been termed "sexualized behavior," which is often listed without any developmental context. The term is sometimes rendered slightly more precise by talking about frequent masturbation, play that is focussed around sexual themes, and drawing attention to the sexual organs of the self or others. It was not until much more recent studies by Friedrich, using the Childhood Sexual Behavior Inventory, that this issue was given clearer developmental dimensions. Friedrich (1992) found that the overt sexualized behavior among girls was primarily confined to girls between ages 2 and 6, and that among older girls a more common response pattern to sexual abuse was in the form of the inhibition of sexual behavior. This examination of how symptoms and reactions differ at different stages of development is just one aspect of a developmental approach. In addition to this cross-sectional perspective, there is also the developmental trajectory perspective that looks at the reactions to victimization as they transform over the course of development within an individual. A developmental perspective also should encompass an interest in the existence of critical periods, phases of development when reactions to victimization may have some special potential for impact. Finally, a developmental approach should ultimately be part of a full life-course approach that includes the tracking of effects into the adult and later life stages. This latter concern will not, however, receive a great deal of attention in the present paper.

As part of the goal for this field, developmental victimology needs to integrate a

variety of developmental observations that have been made in the separate literatures on victimization. For example, in the literature on sexual abuse, there has been debate and speculation about whether earlier or later sexual abuse has more serious impact (Finkelhor & Baron, 1986). This has often been framed as a discussion of whether younger children might be protected by their lack of understanding of the implications of the sexual activities in which they were involved or made more vulnerable by their lack of alternative sources of information or experience.

Another developmentally oriented set of observations have been made about what particular effects victimization might have at certain specific phases of development. Thus several of those who have studied dissociative disorders have noted that a common factor seems to have been serious sexual and physical victimization that occurred prior to age 8 (Putnam, 1991). One specific suggestion is that abuse occurring at the time when children are developing capacities for normal dissociation may lead to the formation of chronic dissociation as a way of coping with stress.

Still, another common point of developmental attention in the literature is on the different family and social responses that seem to be encountered by victims of different ages. Thus, teenagers seem to be much more likely to be doubted or disbelieved by mothers or criminal justice officials when they make allegations about sexual abuse than is the case for elementary school aged children (Isquith, Levine & Scheiner, 1993).

Developmental Dimensions Model

These kinds of observations have led us to formulate a general conceptual framework for thinking about the differential impact of victimization, which we call the Developmental Dimensions Model of Victimization Impact (Figure 1). We would suggest that developmental differences can affect four relatively distinct dimensions that have bearing on how victimizations impact on children. These four dimensions are:

- 1) Appraisals of the victimization and its implications. Children at different stages appraise victimizations differently and tend to form different expectations based on those appraisals.
- 2) Task application. Children at different stages are facing different developmental tasks, upon which these appraisals will be applied.
- 3) Coping strategies. Children at different stages of development have available to them different repertoires of coping strategies with which to respond to stress and conflict produced by victimizations.
- 4) Environmental buffers. Children at different stages of development operate in different social and family contexts which can alter how the victimization affects them.

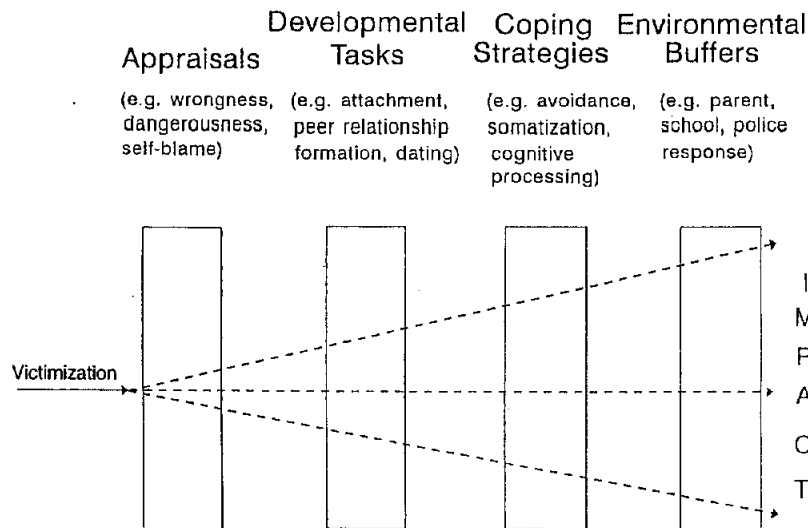


Figure 1. Four Developmental Dimensions Model of Victimization Impact.

This conceptual framework supposes a certain sequence in a child's response to victimization. When a victimization occurs, children must appraise what is happening to them during the course of victimization and then in its aftermath. These appraisals apply to a wide range of aspects: the nature of the event ("I am being robbed"), the cause of the event ("I led him on"), the motives of the perpetrator, the nature of the harm ("I could have been killed"), or the nature of their own response ("I can't handle this").

These appraisals get applied to the developmental tasks facing the child: for a child trying to learn cooperative play with peers, "I can't trust them"; for a child adjusting to dating, "it's dangerous to look attractive"; for a child trying out independence from a parent, "I can't survive without mother's presence."

Children also express the conflict in a vocabulary of behaviors or coping strategies available to them in that developmental context. If the child is at the stage of fantasy play, then the conflict gets expressed through fantasy play; if the child is at the stage of testing independence from parents, then the conflict can get expressed through radical break (for example, running away) or through regression (for example, a retreat back into family dependence).

Other people in the child's environment respond to the victimization and the child's coping strategies in ways that also depend on the developmental stage: for

example, whether they blame the child, whether they believe the child, whether they are alarmed, whether they take steps to protect the child, whether they involve social authorities, and whether they seek help.

Thus we can analyze victimization developmentally for any child by asking 1) how does this child's stage of development affect his or her appraisal, 2) what developmental tasks are at the forefront that may be most prominently impacted, 3) what developmental vocabulary is the stress most likely to be expressed in, and 4) what environmental reactions are likely for this developmental context. This framework posits the existence of some general differences according to age in the answers to these questions, but it also answers them in relation to a particular child and that child's specific developmental history.

To illustrate how this conceptual framework can be generalized across a variety of different kinds of victimizations and developmental contexts, let us use some highly schematic examples that illustrate developmental observations that have been made in the literature.

Cicchetti and a variety of others have found that early child abuse appears to be associated with the patterns of insecure attachment to caregivers (Cicchetti, 1989; Crittenden, 1988; Egeland & Sroufe, 1981). We might represent one instance of this as follows. Victimization: Mother hits, shakes, and roughly handles a young child in response to crying. Appraisal: Mother hurts me when I cry or have needs. Task application: Attachment formation; I do not feel safe with my caregiver. Coping strategy: I avoid my caregiver or am reluctant to express needs. Environmental buffer: no other significant relationships buffer the insecure adaptation.

Another example is the observation from the sexual abuse literature that sexually abused young children manifest sexualized behavior (Friedrich, et al., 1992). Victimization: A father repeatedly puts his six year old girl on his lap and bounces her against his naked penis until he ejaculates. Appraisal: I make Daddy happy and he treats me as special when I touch Daddy's penis. Task application: Getting affectional needs met from adults. Coping strategy: I offer to touch Daddy's penis and the sexual parts of others when I want them to be nice to me. Environmental context: variable, others may reinforce or be alarmed by this behavior.

What follows are two other examples. Victimization: A 4 year old watches mother being killed by father. Appraisal: It was my fault for making my father angry. Task application: Apportioning causality to bad events. Coping strategy: I use extreme passivity to avoid possibility of angering anyone else. Environmental buffer: Passivity in a 5-year old may not be noted as a problem and little rehabilitative efforts may be directed toward child.

Victimization: A 16 year old boy suffers repeated attacks and threats by peers. Appraisal: I must look like a pushover; threatening others creates protection. Task application: Formation of a consistent personal identity. Coping strategy: I must use toughness, pre-emptory aggression toward others. Environmental buffer: Gangs of other aggressive youth may reinforce toughness and help bolster an ideology to support it.

This four dimensional framework is not the only way in which the impact of victimization can be analyzed. Nor does it encompass all the components of the process that determines how a victimization will be processed. For example, the nature and severity of the victimization itself plays a big role. What the framework is intended to highlight are the *elements of the victimization response process that are most affected by developmental changes*. These four dimensions—appraisal, developmental task, coping strategy and environmental buffers are those domains which best encompass the developmental differences that have been noted in the literature on victimization. We will use them as a framework for talking about some of the findings from this literature.

Developmental Factors in Appraisal

Appraisals concern the cognitions, however primitive, about what is happening in a victimization and why. They can be as simple as the appraisal that a certain person or event causes pain. Clearly these are affected by developmental considerations, even in regard to such a basic issue as the perception that a victimization is occurring. While many forms of victimization, such as violent assault, can be appraised as unpleasant and painful even by a very young child with an almost entirely undeveloped cognitive system, there are other forms of victimization that cannot be recognized as such without some knowledge of social norms and interpersonal expectations (Maccoby, 1983). The notion of theft, for example, requires the concept of ownership, which is not yet present in a very young child. This suggests a useful developmental distinction between what might be called pain-mediated victimization and meaning-mediated victimization. Pain-mediated victimization (like assault) can presumably be appraised as noxious at an earlier developmental stage than the meaning-mediated variety (like theft). But it is also important to note that pain-mediated victimizations generally are not pure but acquire negative meanings that children come to appreciate quite quickly as they develop, which can change the impact of the victimization. Thus, even very young children experience the physical pain of being spanked by a parent, but the intense humiliation a teenager may experience at being spanked is something that comes into play only after the child acquires some awareness of social norms. So pure pain-mediated victimizations hardly exist, but there are victimizations, like theft, that are purely meaning-mediated and have no physical pain element.

Smetana (1993) has drawn a related distinction between moral vs. social-conventional rules: moral rules ("don't hit others") have some intrinsic basis for our acceptance, whereas social-conventional rules ("boys don't wear pink") are arbitrary and very culturally specific. Most victimizations—pain- or meaning-mediated—involve violations of moral rules, but meaning-mediated victimizations may have more normative or social-conventional rule components. Thus the wrongness of theft has a strong intrinsic component—the pain of being deprived of a valued possession—but there are also social conventions that to some extent control the

distinction between theft and socially tolerated use of others property: for example, norms about borrowing, sharing, and the transitivity of property among members of a family or a classroom. Little work has been done on the how the acquisition of such norms affects appraisals of victimization.

The research shows that children as young as 3½ can distinguish between familiar moral and conventional transgressions, but that appreciating moral violations is to some degree affected by a child's familiarity with the class of events (Smetana, 1993). In regard to victimizations, this might be extrapolated to mean children would be better able to identify the theft of an object as a victimization, an event with which they had familiarity, compared to the theft of money. The research also shows a transformation with age in the ability to judge transgressions as wrong because they are unfair, not simply because they cause harm (Smetana, 1993). Presumably this would relate to the ability of children to identify as victimizations classes of events where the harms are less immediately evident, for example, thefts of money, or sexual violations.

The issue of how development can alter the appraisal of victimizations has not been widely explored, but perhaps more so in regard to sexual abuse than anywhere else. The sexual implication of behaviors, including forms of body contact, is something that is acquired in later stages of development, so questions have from time to time been raised in the sexual abuse literature about whether children can be harmed by behaviors that they do not understand (Kinsey, Pomeroy, Martin, & Gebhard, 1953). Thus, one would expect vastly different subjective reactions from a 10-year-old who was touched on the genitals by an older sibling, than from a 2-year-old, based in large part on their ability to understand the inappropriateness of the contact.

Yet, in spite of this theoretical idea that children cannot be harmed by what they do not understand, there are thousands of clinical reports of sexually abused preschool children manifesting marked behavior disturbances (Hewitt & Friedrich, 1991), and the many studies comparing the impact of early and later sexual abuse have failed to conclude that children are protected from harm by their young age (Browne & Finkelhor, 1986; Kendall-Tackett, Williams, & Finkelhor, 1993).

Unfortunately, there has been relatively little careful analysis of the traumatic components of early sexual abuse. However, it is important to bear in mind that such abuse, at least the cases that come to professional attention, frequently entail some components of pain-mediated victimization—for example, the forced penetration of a penis into an anus or vagina—that may explain some of the impact. Moreover, the conduct of the perpetrators in these cases frequently includes other readily appraised noxious activities, like threatening or restraining the children. There is also some suggestion in the literature that the sexual stimulation itself, even when the young children do not understand its full adult meanings, has a negative effect. This may be because powerful physical sensations are being evoked in a context (e.g., the mother child relationship) or with associations (e.g., as a condition to meeting child's other needs) that distort development. This is obviously a complex area worthy of much more attention than it has received, not just

in regard to sexual abuse but other meaning-mediated victimizations like thefts and abductions, as well. In spite of the complexity, especially in the case of sexual abuse, it is probably safe to say that there are some victimizations that have little or no impact, or at least a different impact, because of the child's inability to recognize the occurrence of the victimization. But as the examples show, we must be careful not to assume that the child is ignorant of all elements of the victimization.

There are many cognitive capacities that need to be investigated in terms of how they affect the appraisal of victimization in general or certain kinds of victimization in particular. For example, the development of concern for one's social reputation in middle childhood (Eder, 1985) can have a big influence on a child's susceptibility to peer aggression, and how it relates to his or her image in the group. Knowledge about social rules governing use of property could affect reactions to theft. Understanding of finality of death will affect how a child would appraise a potentially lethal assault on another family member (Schowalter, 1975). Acquiring conceptions about how to attribute causality in complex social interactions may determine how much one child would blame himself for a crime committed against himself or a relative.

Issues related to perceptions of justice, fairness and morality would also presumably affect a child's appraisal of victimization and these perceptions would have a developmental trajectory. For example, Kohlberg, in his model of moral development, posits that very young children assess wrongness primarily by the magnitude of the negative consequences of an act and that only later does an assessment of the actor's intent come into play (Kohlberg, 1976). Empirical research shows that there are indeed developmental changes in the ability to assess not just the intentionality of harmful acts (was the perpetrator trying to produce the harm?), but also in children's ability to judge an act's causality (was the perpetrator the true cause of the harm?), avoidability (could the perpetrator have avoided the harm?), and motive acceptability (were the perpetrator's motives benign or malicious) (Ferguson & Gail Rule, 1988; Olthof, Ferguson, & Luiten, 1989; Smetana, 1993). These studies suggest that older children, because they are more discriminating, make fewer categorical negative moral judgements based just on harm. They appreciate that sometimes the harm was unintentional or justified and thus a real victimization did not occur. Does this mean that there are many conflict situations in which older children would be less likely to feel victimized because they were better able to interpret information about the causality and intentionality of the harm done? Unfortunately, because most of the studies in this literature use vignettes involving thefts and aggressions against third persons, it is unclear exactly how they might apply to perceptions about personal victimizations.

Interestingly, this literature on moral development has not intersected extensively with the literature on victimization and trauma where issues of blame, particularly self-blame, have been discussed widely but in different terms. In this latter literature, victims are believed to cope better if they do not engage in what has been called "characterological self-blame"—seeing uncontrollable aspects of oneself ("I'm too trusting") as the cause of the victimization (Janoff-Bulman & Lang-Gunn, 1988).

But there has been substantial debate about whether some forms of self-blame may actually be salutary. An article of faith among therapists who treat sexual abuse, for example, is that in order for children to recover they need to be taught categorically that they were not to blame in *any respect* for the abuse (Bass & Davis, 1988). But some (Dalenberg & Jacobs, 1994; Lamb, 1986) have argued that attributing all responsibility to the perpetrator diminishes a child's sense of efficacy, and that some self-blame (what has been termed "behavioral self-blame"—"I should have yelled") may be adaptive, because it gives a child a sense that she may be able to do something different to avoid victimization in the future.

Although some child victimization research has found that younger children blame themselves more, perhaps because of their developmental egocentricity (Hazard, Celano, Gould, Lawry, & Webb, 1995), little in the way of a developmental perspective has been offered in this discussion about how attributional capacities or tendencies may change the reactions to victimization among children. Celano (1992) does point out that some children do not have the cognitive capacity to distinguish between characterological and behavioral self-blame. For these young children the most important issue may not be whether they think *they* have the power to prevent future victimization (the result of behavioral self-blame) but rather whether they think their *parents* do. Also more crucial than whether they blame themselves or others for the victimization (internal or external attribution) may be whether they think the cause of the victimization is constantly present across time and across situations (termed "stable" and "global" attributions respectively). Celano also identifies specific attributional issues that may come into play selectively for children of different ages. For example, a latency-age child might feel a responsibility for failure to protect a sibling that a pre-school age child would not. Clearly a developmental analysis of blame attributions may help greatly in understanding children's reactions to victimizations.

Another appraisal issue that has been actively discussed in the victimization and trauma literature is appraisal of dangerousness. Studies from the PTSD field have suggested that certain kinds of appraisals about a negative event, for example the belief that one could have been seriously injured or killed, are associated with more harm and more symptoms (Blanchard, Hickling, Mitnick, & Taylor, 1995). One of the developmental principles suggested by the PTSD research is that the danger appraisals of young children are more socially referenced (Pynoos, et al., 1995). Thus a young child who had been party to a kidnapping may take many of his or her cues about how dangerous the situation is (or was) by appraising fear or distress in their parents, rather than from facts about the actual event. Research around the Buffalo Creek (West Virginia) Dam disaster found that young children were one group whose symptomatology was not predicted by their own direct proximity to the devastation, but rather by the proximity of their parents (Green, et al., 1991).

Children's ability to form discriminations about classes of events obviously has some relevance to victimization appraisals as well. One of the prominent theories of trauma impact suggests that in the wake of traumatic events "fear structures" get elaborated that link together cues, associations, and information related to the

experience (Foa & Kozak, 1986; Pitman, 1988). Fear structures are easily triggered and hard to extinguish (Foa, Steketee, & Rothbaum, 1989; Foa & Kozak, 1986). So if a child is victimized in a playground, at night, with a red T-shirt on, and it happened while having fun, all these stimuli, the playground, the night, the shirt, the feeling of having fun, can be tied together in a fear structure. Research has found that people victimized in familiar and previously safe environments tend to have more symptoms and greater difficulty in recovering (Foa, et al., 1989). One reason may be because they have fear structures that encompass more cues from their normal and ordinarily safe environments, so that previously safe cues have come to trigger the fear structures and signal danger. For children, an important factor in the generation of fear structures is how well they can discriminate among different classes of events and individuals. If a child cannot readily distinguish the perpetrator from other classes of people (e.g., a stranger from acquaintances) or the context (e.g., this particular park) from other contexts, then their fear structures may be larger, more general and more impervious to extinction. This process may be part of what is so globally disabling about early parental maltreatment, because its highly generalized aspects—insecure attachment or lack of basic trust—gets so readily transposed onto all other or future relationships.

A clear example from research illustrating the operation of such discriminations in developmental context was Pynoos and Nader's (1988) finding concerning children who witnessed the rape of their mother. Among school age witnesses to these rapes, there were no gender differences in resulting symptoms, but among adolescents, girls were found to be more affected than boys. The authors theorize that since by the time of adolescence children had learned that rapes primarily happen to women and girls, the older boys were protected from much of the impact, who did not see themselves as vulnerable to rape, whereas the younger boys were not. The ability to make discriminations about classes of events resulted in a different appraisal that, in turn, resulted in a different impact. Another study, not related to victimization, but on reactions to parental divorce, showed that 10 to 12-year-olds could distinguish among different kinds of threats in the divorce situation (threats to themselves, threats to others, and loss of desired objects and activities) that 8 and 9-year-olds could not distinguish (Kliewer, Sandler, & Wolchik, 1994). Here again, the ability to make distinctions could possibly mitigate impact.

An important theme in the literature on victimization is how the appraisal process not only affects victimization impact, but also how victimization impact can affect appraisals. Thus once a child has been victimized in a certain way, his or her appraisal process may be altered (Smetana, Kelly, & Twentyman, 1984). Thus Dodge and colleagues (Dodge, Bates, & Pettit, 1990; Weiss, Dodge, Bates, & Pettit, 1992) point out that harshly punished children develop a bias to attribute hostile intentions to others, a tendency to interpret accidents and normal social conflicts as motivated personal attacks (Slaby & Guerra, 1988), which in turn contribute to the development of aggressive social interactions. This suggests that experiencing certain victimizations can create a proclivity to appraise many other events as additionally victimizing. But victimization may also potentially desensitize a child to

the potential for future victimization as well, by inculcating a sense of helplessness or making victimization appear normative. Thus some previously sexually victimized girls seem less able to discriminate future sexually dangerous situations, explaining in part why they seem to suffer greater risks for subsequent sexual victimization and rape (Russell, 1984). All these findings and speculations suggest the kinds of questions investigators with a developmental orientation might systematically ask about the victimization appraisal process.

Developmental Tasks and Victimization

While the appraisal process concerns how victims "interpret" the victimization experience, a very important additional dimension in understanding impact is the developmental task that a child may confront at the time of (or after) victimization, and to which the appraisal gets applied. Thus the appraisal process involves, for example, whether a child "understands" the sexual implications of a sexual abuse experience, but there is a separate dimension that concerns how this understanding will affect a child who is approaching the developmental task of starting to date vs. one who is not yet facing this task. Clearly, the sexual abuse may be very much more disruptive for the child who is actively testing her sexual desirability in the dating world.

Developmental tasks come in a wide variety of forms, and we use the term here in a broad sense. They can include the slow and steady accretion of competencies in a certain area, like independent decision making. They can also include tasks that children face in a more confined developmental period, like adjusting to school. While no task is ever fully completed, there appear to be stages when the task is more at the forefront.

Obviously appraisals and developmental tasks are related. Certain cognitive capacities and appraisals are the product of having entered into or progressed through a developmental task. But developmental task is a valuable organizing concept and some of the most developmentally oriented literature on victimization has utilized such tasks to formulate differential hypotheses about the impact of victimization and trauma.

For example, we have already mentioned the literature on early maltreatment and the attachment to a primary caretaker, considered one of the early developmental tasks of childhood. Thus, young children victimized at an early age by their primary caretakers seem to suffer a big developmental impact in the form of insecure attachments to these figures, according to child abuse research (Crittenden, 1988; Egeland & Sroufe, 1981). This mode of relating seems to be carried into subsequent phases of development and other relationships (Cicchetti & Lynch, 1993).

Another developmental task that has been discussed in the literature in relation to victimization is the process of emotional regulation. An early developmental task of childhood is to learn to modulate emotional arousal using cognitive skills, shifting with some voluntary control among various emotional states, and maintaining a certain equilibrium (Cicchetti, Ganiban, & Barnett, 1991; van der Kolk & Fisler, 1994). In normal development, disturbances to this equilibrium are met

with internal working models of the world and other internal resources that allow a child to reorganize existing frameworks at a higher level that includes new information or a resolution to the challenge (Maccoby, 1983). Among children traumatized at an early stage by victimization, however, their ability to modulate emotional arousal and maintain equilibrium may be overwhelmed by the intense fear or other physiological reactions and compromised by immature cognitive skills (Rieder & Cicchetti, 1989). Such children may operate at permanent levels of high emotional arousal and have a relatively difficult time managing disturbances to their system that require self-regulation.

A question raised by these analyses is whether there are sensitive periods in regard to various developmental tasks, and whether victimization during these periods has a special capacity to cause permanent developmental distortions. There are suggestions about sensitive periods, for example, in the literature on dissociative disorders. Research has found that of those suffering from multiple personality, and other extreme problems of dissociation, almost all seem to have suffered victimization prior to age 8 or 9 (Putnam, 1991). Even less severe forms of early victimization may leave dissociative scars, too, as indicated by the observation that children who were physically punished are easier to hypnotize (a benign form of dissociation) (Hilgard, 1970). There may be a sensitive period when children have the opportunity to learn to use dissociation as a coping method to deal with pain and stress.

Another of the basic developmental tasks that are affected by victimization is the formation of peer relationships. This is a process that goes on over an extended period of time and includes, in fact, a variety of developmental tasks. Parker and associates (1995) in their general review on peer relationships mention some of the milestones. Although these have not been systematically studied in connection to victimization, there are many suggestions in the victimization literature about how they can be distorted. For example, in the preschool period, children first begin to form stable friendships and also learn to engage in cooperative play. Victimization can delay the formation of friendships or make it even more difficult for otherwise shy children to initiate this process. It can also aggravate and extend the early patterns of antagonistic play. Pynoos and colleagues (1995) have pointed out that in this preschool period when fantasy play predominates, the victimization experiences can lead to play dominated by post-traumatic fantasy and trauma processing—for example, re-enactments of the victimization or rescue fantasies preoccupied with mastering the victimization-related fears. This can sometimes make it hard for victimized children to play cooperatively or be readily accepted by peers. On the other hand, sometimes the traumatic themes of victims get incorporated into the play of even non-victimized peers.

In middle childhood, there are other peer relationship tasks that can also be disrupted by victimization. For example, in middle childhood children normally learn to take the role of others and accommodate to others' desires and feelings (Parker, et al., 1995). Victimization can delay or block this process. Friendship groups during this period tend to develop more around common interests. Victimized children, who may be preoccupied with self-protection, may find themselves bonding

primarily with other victimized children or having a hard time relating to the interests of non-victimized peers.

While some research has pointed out how parental maltreatment can lead to peer-relationship difficulties, mediated especially by attachment problems (Cicchetti, Lynch, Shonk, & Manly, 1992), it is important to note that a variety of other forms of victimization can presumably have this disruptive effect, too. Thus witnessing of parental violence, or being the victim of a kidnapping, or being subjected to serious sibling violence or harassment by older children may all have ramifications in the domain of peer adjustment.

The literature around developmental tasks suggests that victimization may impact on tasks in three conceptually distinct ways. First, the victimization can interrupt or substantially delay the accomplishment of the task. Thus, as a result of bullying, a child can be intimidated from trying to form peer relationships. Second, the victimization can distort or condition the way in which the developmental task is resolved. Thus an abused child, instead of forming a secure attachment, will form an anxious attachment. Thirdly, the victimization can result in a regression, so that the achievements of a previously resolved developmental task are disrupted. Newly acquired achievements are those most vulnerable to disruption (Rutter, 1988). Thus a child who has been able to tolerate separations from his parents is thrown back into a need for close dependency on them. An important implication of this discussion is that victimization can result in departures from normal development in both directions from what is typical—for example, hypersexualization or inhibited sexuality—so that simply looking at the average characteristic of a victimized group can sometimes obscure the effect.

With a better understanding of how victimization can affect developmental tasks, developmental victimology should strive to look their progression. One of the few general attempts to do this is McCann and associates (1988), who organize the developmental tasks on which victimization has its impact into five categories: the formation of a sense of safety, of trust, of power, of self-esteem, and of a capacity for intimacy. They argue that there is a developmental sequence to these tasks, but they do not associate them with particular ages. Although this seems a somewhat limited inventory of developmental tasks (for example, where does emotional regulation fit in?) and may be at too high a level of generality (for example, peer relationships may be a subcategory of intimacy, but it is an important independent domain), it does suggest how a framework of developmental tasks may help researchers and clinicians orient themselves to the potential impacts of a victimization experience.

Coping Strategies and Victimization

While some of the developmental impact of a victimization is governed by how it is appraised and the developmental tasks at hand, another relevant factor is the repertoire of coping strategies available to the child. A child who is capable of talking

introspectively about how an experience felt may be able to process it and recover better than one who cannot. Similarly, children who are able to control their environment enough that they can avoid contact with the perpetrator will react differently from those who have little such control. Coping strategies might be thought of as generalized modes of responding to stress or challenge. Thus the reliance of preschool children on fantasy or the reliance of older children on rationalization and intellectualization are responses specific to certain stages of development. The literature on victimization suggests that there are some coping strategies that are relatively confined to certain developmental stages, and others that cut across stages. Actions like running away, attempting suicide, substance abuse, deliberate self-harm, and promiscuous sexual activity are noted as behavioral responses to victimization that tend to be limited to adolescents (Kendall-Tackett, et al., 1993; Mowbray, 1988). Generalized anxiety and nightmares are more apparent among younger children. Other coping strategies like depression, withdrawal, and belligerence seem to be utilized at many stages.

On the whole, children's repertoires of coping strategies tend to become more diverse, complex, and situationally specific as they get older (Maccoby, 1983), presumably allowing a more adaptive response to victimization. For instance, an older child might respond to parental violence by talking about it with another trusted adult, an option that might not be available to a younger child. A variety of other advantageous developmental changes may help older children to cope. For example, older children may have more effective cognitive techniques for dealing with anxiety, fear, and anger (Pynoos, et al., 1995). They may have more experience managing stressful situations.

At the same time, older children, for a variety of developmental reasons, may also forfeit certain effective coping strategies, and thus be at a disadvantage compared to younger children. For example, older children tend to learn to inhibit their emotions (Saarni, 1993), and so, for example, may lose the positive effects of crying and abreaction that may be helpful in the wake of an upsetting victimization. Older children, particularly adolescents, are more likely to mistrust or feel alienated from parents, and thus have to forfeit the comforting and empathy that younger children can receive. Older children may also have more entrenched world assumptions that are harder to modify or exchange in the wake of an assumption-shattering victimization, while younger children may be better able to cope by changing world views (Pynoos, et al., 1995). All this suggests that easy developmental generalities may not hold and that the interaction of coping resources and victimization is a complex interplay.

One plausible complex hypothesis about coping is that development interacts in some ways with gender, class, and other personal characteristics. So, for example, since gender (and other) differences become more pronounced as children develop, presumably one might see more gender differences in coping among older children than among younger children. Thus, while all victimized children as they get older engage in less help-seeking from adults, boys, in reaction to cultural norms about self-reliance, appear to cut back on help-seeking even more. As they get older boys

also manifest fewer fear-related and other "internalizing" symptoms than girls in response to victimization (Green, et al., 1991; Lonigan, Shannon, Taylor, Finch, & Sallee, 1994; Pynoos, et al., 1993; Pynoos, Sorenson, & Steinberg, 1993). This may be due to cultural prohibitions on older boys expressing fear, but it may also be due to cultural training in overcoming feelings of fear as well.

Because coping strategies and resources change with development, some observers have posited that child victims' responses may differ from stage to stage, not in reaction to any external events, but as a result of what might be called "symptom substitution" (Shirk, 1988). Thus, the victimization related depression which may manifest as withdrawal in middle childhood may metamorphose into drug usage in the teenage years, as drugs become available as a resource and coping strategy of that period.

Environmental Buffers and Victimization

The literature on victimization impact has come to a clear recognition about the importance of the child's social environment. One of the most consistent empirical findings in the sexual abuse literature, for example, is that the response of the child's social support system, and particularly the child's mother, is the most important factor in determining outcome, more important than objective elements of the victimization itself (Conte & Schuerman, 1987; Everson, Hunter, Runyan, Edelsohn, & Coulter, 1989; Gomes-Schwartz, Horowitz, Cardarelli, & Sauzier, 1990; Toth & Cicchetti, 1993). Children have more negative outcomes when mothers, for example, do not believe them, blame them, are allied with perpetrators, do not listen to them, or have strong personal reactions of their own that override those of the child. Studies tend to show that this positive support is more forthcoming for younger than for older children (Gomes-Schwartz, et al., 1990; Runyan, et al., 1992). While these findings pertain primarily to sexual abuse, other research has found family environment mediating child response to community violence in general (Osofsky, et al., 1993), and it is easy to imagine extrapolating this conclusion to other victimizations like experiences with bullies, assaults by siblings, thefts, and gang victimizations. The dynamics are more complicated when the victimizations involve parents as perpetrators or as covictims, as in parental abductions or the witnessing of spousal assault, because these may compromise the ability of parents to be supportive, but these principles would still generally hold true.

Although parental response is obviously crucial, the notion of environmental buffers, as defined here, includes a much broader set of reactions. For example, peers have an important and potentially damaging response to victimization. Research with 6- and 8-year-old children suggests that when these school-age children suffer from peer victimization, it lowers their popularity in the eyes of other children (Schwartz, Dodge, & Coie, 1993) in ways that may be hard to reverse. Our notion of environmental buffers also include the reactions of social institutions like schools, police and courts, the media, and generalized reactions of the cultural context

as a whole. It is clear that the environment responds very differently to victimized children of different ages. But curiously, there has been little specific developmental analysis of these environmental responses to victimization and their impact on children. Nonetheless, some obvious principles can be discerned.

For example, it would appear that parental responses have more direct impact on younger than older children. This is illustrated by previously cited findings about the degree to which younger children's symptoms are associated with parents' appraisal of danger and seriousness (Green, et al., 1991). Parents comprise more of the totality of the social environment for young children. They are more influential in younger children's lives. By contrast, older children will be additionally affected by peer reactions, community reactions, and by their awareness of general social norms. A possible hypothesis is that social factors, like discrimination, and cultural factors, like norms regarding honor and shame, have more impact on the victimization experiences of older children.

Another general principle seems to relate to the degree to which parents and others will hold children responsible for victimization episodes. Older children, teenagers in particular, are more likely to be blamed for their own victimizations than younger children (Isquith, et al., 1993; Nightingale, 1993). This may stem from a variety of factors: 1) a belief that teens have more skills to avoid and resist victimization; 2) the perception that teens voluntarily engage in risky behavior; and 3) the fact that adults actually are expected to take less responsibility for teens. Interestingly, this principle of holding teens responsible even describes the scholarly analysis of adolescent victimization, in that the predominant theoretical explanation is the greatly oversimplified notion that teens' victimization is primarily the result of their own delinquent behavior (Finkelhor & Asdigian, 1996; Lauritsen, Sampson, & Laub, 1991). Being held responsible for one's own victimization certainly should affect the degree to which one blames oneself as well.

Another related developmental principle concerns not just the blameworthiness, but also the credibility of victimized children. Here the relationship appears to be more complex. In the case of sexual abuse, at least, there is evidence that adults tend to be more likely to disbelieve reports made by older children, especially teens (Bottoms, 1993; Nightingale, 1993). Teens are seen as having the motivation and capacity to willfully deceive (for example, to cover up voluntary sexual activity, to get someone into trouble, or to gain feelings of power). Younger children are seen as naive and having less reason to fabricate. When they display knowledge about sexual behavior they are presumed not to have gotten it from any other source beside the abuse experience (Kendall-Tackett, 1992). But there is also a form of skepticism about abuse allegations that applies to very young children (Isquith, et al., 1993; Nightingale, 1993). These children are seen as being prone to exaggeration, misinterpretation, and suggestion (Ceci & Bruck, 1993). In one mock juror study, 9-year-olds (in contrast to 6- or 12-year-olds) were judged to be the ideal witnesses (Nightingale, 1993). It is not clear that this credibility pattern necessarily pertains to other kinds of victimization beside sexual abuse, but it suggests the possibility that there are major developmental issues in terms of the degree to which child victims are believed by those whom they tell.

Because these social responses to victimization are to a great extent governed by common attitudes and stereotypes, we can examine the attitudes and stereotypes toward victimizations of children at different ages to infer something about the environmental buffers. The fact that some victimizations are seen as normative for particularly younger children is an important developmental difference in the environmental context for these victims. For example, a 3-year-old who describes being spanked by a parent will not elicit much sympathetic attention from other adults, but a 14-year-old might. Similarly, young children who complain about sibling assaults often receive little more than frustrated and perfunctory responses, because these are seen as just a normal part of family life and growing up. The view that these are not true victimizations certainly reverberates into how the victims feel about the episode and the extent to which they are likely to blame themselves.

There are also some clear developmental patterns about the degree to which social authorities are invoked in response to child victimizations. Parents tend to be the prime social arbiters of much child victimization in the preschool years, but once children get to be school aged, school authorities with their more formal sanctions become involved. For school-aged children, police and the criminal justice system only tend to respond to child victimizations that involve adult perpetrations or, in rare cases, to child perpetrations that exceed a certain threshold of severity, like a child-on-child rape or homicide. As children become teenagers, police do tend to respond even to peer violence; thus, for example, a brawl between two teens might precipitate police intervention, whereas among two elementary school children it would not.

The literature on court involvement suggests that prosecutors are also less likely to prosecute in the victimizations (in this case sexual abuse) of preschool children, even holding constant other features of the victimization (Cross, De Vos, & Whitcomb, 1994). This may reflect some concern about the credibility of such children before juries as well as the possible impact of prosecution on their well-being. Interestingly the same study shows that testifying in court is actually less stressful for preschool children than those of other ages, perhaps because they have less awareness and self-consciousness about the import of the procedure (Whitcomb, et al., 1991).

The involvement of social authorities certainly has the potential to affect the impact of victimization. It tends to increase the degree to which knowledge about the victimization is disseminated through a larger community. It can increase the number of reminders about the victimization, as children are interviewed about the episode and investigations, court cases, or disciplinary actions drag out. It can also affect the sense that child victims have that justice is being carried out. In spite of some of these obvious concerns, it is interesting that a number of studies that looked for adverse impact on children from criminal prosecutions of sexual abuse cases have been unable to find many systematic effects. In general, more extreme forms of court involvement, such as drawn-out cases or having to testify on multiple occasions, do seem to delay recovery (Goodman, et al., 1992; Runyan, Everson, Edelson, Hunter, & Coulter, 1988), but children do not seem to be worse off overall simply from having their victimization proceed to a criminal prosecution (Oates, Lynch, Stern, O'Toole, & Cooney, 1995).

Types of Victimization Impact

Thus far in this paper, we have outlined four dimensions that we think should be probed for generalized developmental principles related to the impact of victimization. However, in undertaking this generalized approach, there are some important conceptual issues in how to classify the various types of victimization impact.

One problem is that relatively little comparative analysis has been done among different kinds of victimization. Since much of the literature on the impact of victimization has occurred within specific types of victimization, there are some uneven patterns in the kinds of victimization that have and have not been compared and contrasted. Thus within the field of sexual abuse, it has been common to compare the impact of intrafamilial with extrafamilial victimization, but there has been little comparable analysis of intrafamilial vs. extrafamilial physical assault, since studies of physical abuse involve samples made up almost entirely of children assaulted by their parents.

Another problem is that the typical research paradigm used in impact research is not necessarily conducive to highlighting important differences. Typical research studies tend to choose one or two linear psychological scales, like PTSD or depression, on which to evaluate victims. While such studies have sometimes found the intrafamily abuse was more serious than extrafamily victimization, that chronic victimizations were more serious than single events, and that experiences involving injury were more serious than ones without injury, these findings have been less consistent than one might expect (Browne & Finkelhor, 1986; Kendall-Tackett, et al., 1993). One problem is that not enough effort has gone into trying to ascertain how different aspects of victimization are related to different kinds of problems or symptoms. For example, *violent sexual abuse* may be related to specific PTSD symptoms like hyperarousal because of the fear and life-treat perceptions. Repetitive sexual abuse may be related to sexualized behavior as the result of the conditioning of sexual responses. Elsewhere we have tried to suggest some of these correspondencies in the response to sexual abuse (Finkelhor & Browne, 1985).

Generic vs. Specific Effects

This suggests several analytic distinctions that might be useful to make in discussing the impact of victimization. One such distinction is between generic and specific victimization effects. There are probably certain kinds of effects that are common to a great many different kinds of victimizations. These may include symptoms that are generalized stress-response symptoms such as depression. They may also include reactions that relate to the inherent properties of a victimization—the sense of trust betrayed, or of powerlessness, or the violation of expectations of justice or fairness. So reactions like anger, re-evaluation of reciprocity, increased wariness or

willingness to trust, and fear of the recurrence of an event, might all be considered as more generic victimization effects.

In addition to generic effects, one can also conceptualize certain effects that seem quite specific to certain kinds of victimizations, and might be unlikely to occur in other victimizations. The sexualization seen in sexually abused children seems to be an effect related to some of the specific conditions of that abuse. (Interestingly, however, sexualization has been reported in some other, not sexually, maltreated children [Deblinger, McLeer, Atkins, Ralphe, & Foa, 1989], although the mechanism for this effect has not been well analysed.) Insecure attachment is an effect that seems to be specific to parental maltreatment. It is not thought to occur as a result of other victimizations unless these victimizations affected the nature of the parent-child relationship.

Localized vs. Developmental Effects

In addition to the generic vs. specific distinction, another distinction that should be particularly important for those interested in a developmental analysis is that between effects that are truly *developmental* in character and other effects that might be termed *localized*. Localized effects refer to common reactions that tend to be rather short-lived and readily dissipated. These can include fear, disorientation, re-experiencing the event, feeling numb, and feeling guilt. These symptoms can be called localized both in the sense that they are usually short-term and also in the sense that they primarily affect behavior associated with the victimization experience and similar classes of experience. Among children they would include the fear of returning to the place where victimization occurred, anxiety around adults who resemble the offender, nightmares, being upset by television depictions of violence, and so forth.

By contrast, developmental effects should refer to deeper and more generalized impacts. They are the kinds of impacts, more specific to children than adults, that result when a victimization experience and its related trauma interfere with developmental tasks we have discussed. They include, for example, impairment of self-esteem, the development of general styles of behavior that are very aggressive or very withdrawn, the inhibition of a whole realm of activity like sexual functioning or academic achievement, the use of drugs or other dysfunctional ways of dealing with anxiety. These broad changes can result from victimization, too, but they are of a different nature and course than the localized effects. In a way, they are the kind of effects that distinguish childhood victimization from adult victimization.

Most victimization results in some localized effects—at the very least, increased level of fear and increased vigilance. These localized effects can actually be very pervasive and persistent and yet not interfere to a very great extent with development. For example, as a result of victimization by a person of a different race or ethnicity, a child can be afraid of people of that ethnicity for the rest of his life, but have relatively normal functioning otherwise. By contrast, developmental effects have broad ramifications.

Direct vs. Indirect effects

Another conceptually important distinction, related to localized vs. developmental, is that between direct and indirect effects. Most of the immediate or proximal impact of a victimization experience can be classified as direct effects of the victimization and the context surrounding it. Once a victimization has developmental effects, however, the delayed or distorted resolution to a task may result in other negative outcomes that could be called indirect effects of the victimization. Thus if victimization trauma results in an inability to form peer relationships, and the lack of peer relationships leads to isolation and depression, then the depression is conceptually speaking an indirect effect of the victimization.

There are plenty of difficulties in distinguishing indirect from direct effects. They would not be recognizable necessarily in the form a symptom or problem takes. When, as in the case of sexual abuse, disclosures of the victimization come years after the event, groups of victimized children will by then be suffering both direct and indirect effects. Moreover, when chronic victimization is occurring, it may also be hard to disentangle the two: the indirect effects of the early victimization and the direct effects of what is happening currently. Moreover, since revictimization can be one of the effects of victimization, it may get very difficult to know which victimization may be resulting in which effect. The ideal approach, of course, is to be able to follow victims longitudinally, but relatively few studies have had the luxury of this trajectory model design.

Browning and Laumann (1995) illustrate empirically the process of indirect effects with a cross-sectional survey that gathered detailed life events data. They find that the common association between childhood sexual abuse and adult relationship dissatisfaction is actually mediated by other intervening negative events, such as teenage pregnancy and childbirth and the acquisition of sexually transmitted infections. In other words, the association disappears statistically when these other events are accounted for. Thus sexually victimized girls are more likely to get pregnant as teens, and it appears to be this event that disorders their subsequent lives and relationships more than the sexual abuse itself, so the distal effects may be indirect rather than direct ones of the sexual abuse.

Future Directions

The current social and political concern about crime and violence has resulted in a large mobilization within the social scientific community to understand the childhood roots of the problem (Eron, Gentry, & Schlegel, 1994; Reiss & Roth, 1993). However, this mobilization has focused too exclusively on why children become offenders, and too often neglected why they become victims and with what result. Not only are children the most frequent victims of violence, but the problems of victimization and offending are clearly intertwined. Moreover, it is a mistaken empha-

sis to focus, as has often been done, on victimization primarily as a part of trying to understand the sources of delinquency. Violence, crime, and abuse cause suffering to children that is worthy of study and remedy whatever their additional consequences. There are a variety of aspects of this suffering, besides its contribution to delinquency, that need additional attention by those with a developmental orientation.

Policy makers and researchers have recognized that fear of crime, in addition to crime itself, has major social and psychological consequences. Studies have illustrated the operation of this fear on certain vulnerable populations like the elderly (Lindesay, 1991; Mawbry, 1986). But fear of victimization certainly can have major consequences in the lives of children, as well. The extent of these fears and their consequences for child development have hardly been charted.

The problem of child victimization has spawned a wide variety of preventive educational programs (Finkelhor & Strapko, 1992). It has yet to be demonstrated that such programs are actually capable of reducing the number of victimization episodes (Finkelhor, et al., 1995), a primary goal of these programs. Less attention has been paid to another goal, however, the possibility of preventing psychological morbidity in the wake of victimization (Toth & Cicchetti, 1993). There are suggestions that preventive educational programs can alter some of the factors thought to be associated with victim impact, like self-blame (Finkelhor, et al., 1995). Victimization first-aid—rapid responses to children who have experienced victimization—may be a way of reducing other impacts as well. Developmental studies of the effectiveness of preventive education and victimization first-aid could provide a useful basis for program development that could make widespread improvements in public health.

Psychotherapy for the effects of victimization on children is a relatively recent development. There is a large variety of programs and models that have proliferated in the last decade, many to treat the effects of sexual abuse (Cicchinelli, 1986; Keller, Cicchinelli, & Gardner, 1989) and others focused on physical abuse (Toth & Cicchetti, 1993) and the witnessing of violence (Gruszniski, Brink, & Edleson, 1988; Jaffe, Wolfe, & Wilson, 1990; Peled & Davis, 1995). While the evaluation studies of these treatments show promising results (Finkelhor & Berliner, 1995), few true randomized experimental designs have been used, and more importantly, the research has done little to clearly delineate what works most effectively with which kinds of victims. Little consideration has been given to the extent to which the widespread sexual abuse treatment models are applicable to other kinds of victimization. There is much room for developmentally oriented research to improve the effectiveness of treatment for child victims, including more theoretical guidance in the selection and design of treatments (Toth & Cicchetti, 1993).

The longitudinal study of child development with frequent contact over the course of childhood is one of the most potent tools in the social scientific domain, and while such longitudinal studies have been or are underway on related topics of child abuse (Egeland, 1991) and delinquency (Elliott, Huizinga, & Menard, 1989; Loeber & Farrington, 1995), gathering information about some forms of victimization, we do not know of longitudinal studies whose central focus is the full range of

child victimizations and their impact. The goal of such studies would be to see how proneness to victimization develops, how different kinds of victimizations might be interrelated, what effects victimization has, how and whether such effects persist, how they interact with development, and whether there are such things as sleeper effects that appear at a remote developmental distance from victimizations to which they are related. All these undertakings would greatly assist the advancement of the study of child victimization and provide an increasing foundation of knowledge for assisting child victims.

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