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Children as Victims of Violence: A National Survey

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ABSTRACT. *Objective.* The goal of this study was to gain a more comprehensive perspective on the scope, variety, and consequences of child victimization, which has been obscured by a fragmentation into specific problems like sexual abuse or kidnapping.

Methods. Two thousand children aged 10 to 16 years were interviewed in a national telephone survey of children.

Results. In the previous year, a quarter of the children had experienced a completed victimization, one in eight had experienced an injury, and one in a hundred required medical attention as a result. Nonfamily physical assaults were the most numerous. Contact sexual abuse occurred to 3.2% of girls and 0.6% of boys. There were also substantial numbers of incidents of attempted kidnappings and violence directed to children's genitals.

Conclusion. The victimization of children occurs to a greater extent than has been previously reported and is poorly represented in official statistics.

Implication. The authors argue for a more comprehensive interest in children's victimization including better national statistics about the problem. *Pediatrics* 1994;94:413-420; *violence, victimization, crime, assault, sexual abuse, kidnapping.*

Although in recent years there has been a great deal of public and media attention to victimized children, the concern has been largely fragmented. Professionals have focused on specific forms of victimization, such as child abuse, sexual abuse, handgun violence, and kidnappings, mostly as separate problems. But the fragmentation has inhibited a comprehensive perspective on the overall victimization of children.

Such a comprehensive perspective would emphasize better the true toll of child victimization. For example, one reality, not widely appreciated because

of the fragmentation, is that children are far more prone to victimization than adults.¹ National crime statistics, even with their limitations (detailed below), show teenagers to be at two to three times greater risk than the adult population for assault, robbery, and rape.² Even if not a single younger child were victimized, the level of teen victimization alone would make the rate for all children higher than the rate for all adults. But the official statistics are not collected and presented in a way that make this point evident for policy makers.

A comprehensive perspective on all child victimization would also better illustrate the commonalities and interrelationships. Different kinds of victimization often overlap: for example, sexual assault is the primary motive for nonfamily kidnapping.³ Certain kinds of victimizations create vulnerability for others (eg, intrafamily sexual abuse increases vulnerability for teen sexual assault⁴). Moreover, different kinds of victimizations probably share common risk factors (eg, poverty, inner-city residency).

A comprehensive perspective on child victimization would also allow a clearer focus on the impact of victimization on children. Although the pervasive and long-term impact of some forms of victimization, like sexual abuse, is now well recognized, dismissive stereotypes still exist about others. Researchers and professionals, for example, often consider peer assaults to be unworthy of attention, even though there is no reason to think that children are less sensitive to the effects of peer violence than adults would be. Illustrating the utility of a comprehensive approach, a Massachusetts study recently suggested that each year one in every 42 teenage boys receives hospital treatment for an assault-related injury.⁵

One obvious obstacle to a comprehensive perspective on child victimization has been the general unavailability of good statistics. The Uniform Crime Report,⁶ one of the major crime victimization sources, does not report information by age, except

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for homicide, so breakouts on children are not possible. The National Crime Survey⁷ does collect information on certain victimizations against children, but only down to age 12, and it has been widely criticized for failing to use a child-sensitive methodology (the children are not interviewed in private and questions are too vaguely formulated to gather candid disclosures about family violence and sexual victimization). Public health statistics do not routinely count victims of inflicted injuries unless it leads to death. Finally, even when data on crime, child abuse, and other child victimizations are gathered, they often greatly underestimate the scope and seriousness of the problems because they are limited to cases known to official agencies or reported by caretakers, both sources unaware of many offenses that occur against children.

The present study was undertaken with the specific goal of sketching a more comprehensive picture of the range and frequency of children's victimization, and illustrating the feasibility and utility of gathering such information directly from children.

METHODS

Study Design

The study staff interviewed by telephone a nationally representative sample of 2000 young people between the ages of 10 and 16 and their caretakers. A national sample of households was contacted and screened for the presence of appropriate age children through random digit dialing. Interviewers spoke with the primary caretaker in each household, asking him or her some questions relevant to child victimization prevention and explaining the objectives of the study. They then obtained parental permission to interview the child. Speaking to the children, the interviewers again explained the study, obtained consent and made sure that the children were alone and free to talk openly. They then proceeded with an interview that lasted between 30 minutes and an hour. The interviewers, employees of an experienced, social science research firm, had extensive training and background in conducting interviews with children. All children were offered the number of a national telephone hotline at the end of the interview. In addition, children who were judged to be in possible jeopardy from child abuse were recontacted by a psychologist trained in telephone counseling, who arranged for referrals to local authorities.

The participation rate was 88% of the adults approached, and 82% of the eligible children in the households of cooperating adults, despite the fact that the study involved children, a potentially sensitive topic, a lengthy interview and required the consent of two individuals. Almost three-quarters of the child nonparticipation came from the caretakers denying permission to interview the children and the rest from the children not wishing to be interviewed. The youngest children (aged 10 and 11) had marginally lower levels of participation. An analysis of the households with child nonparticipants showed them to be demographically indistinguishable from the participants, although there was a slightly greater salience for issues of violence (more concern, more perception of threat) among the parents of participants.

Sample

The final sample of 1042 boys and 958 girls was fairly well matched to US Census statistics for a population of this age: about 10% Black, 7% Hispanic, 3% other races including Asian and Native American. Fourteen percent came from families with incomes of under \$20 000. Fifteen percent were living with a single parent, another 13% with a parent and step-parent, and 3% with some nonparental caretaker. A slight undercounting of Black and Hispanic children compared to US Census estimates was corrected in analyses by using weights.

Instrumentation

Children were asked a total of 12 questions about possible victimizations (see Appendix). The victimization questions were followed up with more extensive questions about the details of the episode, on the basis of which the episodes were classified into one of several categories and also as attempted or completed.

For reasons of time, we only gathered detailed information on a maximum of two episodes. For children with more than two victimizations, an algorithm gave priority to sexual victimizations, to episodes that the children rated as "most bothersome," and to victimizations occurring in the last year. However, this probably resulted in a slight undercounting of nonsexual, less severe, and more temporally remote victimizations. In addition, for reasons of time, no questions were asked about the youths' perpetration of violence or participation in violent gang activity. Thus, it is impossible to estimate how many of the victimizations occurred in the context of an aggressive, high-risk lifestyle that some youths lead.

RESULTS

A quarter of the children reported a completed victimization (excluding corporal punishment) in the previous year and over a third a completed or attempted victimization (Table 1). Over half the children reported a completed or attempted victimization at some time in their lives. Nonfamily assaults were the most numerous type of victimization. Boys were over three times more likely than girls to have experienced a completed nonfamily assault in the previous year (Table 2), most of which were committed by known perpetrators under the age of 18 (Table 3). The rates did not vary by age.

Children experienced family assaults at about one-third the rate of nonfamily assaults. There were no age or gender differences. A little less than half the family assaults were committed by adults. The survey also revealed that well over a quarter of these youths were still being corporally punished by their parents. However, there was a significant decline in corporal punishment use with age (46% of 10-year olds vs only 15% of 16-year olds; $\chi^2 = 123.5$, $P < .001$).

Sexual abuse was substantially more common among girls than boys (contact episodes occurring to 3.2% of girls vs 0.6% of boys). It was also more common among older children, with 9% of the 16-year-old girls reporting contact abuse in the last year. A little less than half of the reported sexual assaults (42%) were committed by other juveniles, 16% by family members and 72% by nonfamily acquaintances (Table 3). Sexual abuse was more prevalent among Black children and among children from the Mountain and Pacific regions of the US.

Violence to genitals was a form of assault actually reported by more respondents than completed sexual abuse. Boys were substantially more likely than girls to have been victimized in this manner.

It is interesting to note that 2.2% of children reported an attempted kidnapping in the last year, mostly by adult strangers, almost none of which involved the successful removal of the child. Girls were more often the targets of such attempts, as were older children (1% of 10-year olds vs 4% of 16-year olds; $\chi^2 = 13.4$, $P < .05$).

While more of the victimizations reported by the youths in this sample were perpetrated by other youths, a significant proportion (23%) was victim-

TABLE 1. Self-Reported Victimizations

Type of Victimization	% Ever (95% CI)	% Last Year (95% CI)
Any victimization (excluding corporal punishment)		
Attempted and completed	51.3 (49.1-53.5)	37.1 (34.9-39.3)
Completed only	35.1 (33.1-37.1)	25.4 (23.4-27.4)
Nonfamily assault		
Attempted and completed	32.5 (30.5-34.5)	22.2 (20.4-24.0)
Completed only	22.2 (20.4-24.0)	15.6 (14.0-17.2)
Family assault*		
Attempted and completed	13.0 (11.6-14.4)	8.6 (7.4-9.8)
Completed only	7.5 (6.3-8.7)	5.2 (4.2-6.2)
Nonparent family perpetrator		
Attempted and completed	8.4 (7.2-9.6)	6.2 (5.2-7.2)
Completed only	5.1 (4.1-6.1)	4.1 (3.3-4.9)
Parent perpetrator		
Attempted and completed	4.5 (3.5-5.5)	2.1 (1.5-2.7)
Completed only	2.2 (1.6-2.8)	0.9 (0.5-1.3)
Corporal punishment	74.5 (71.4-77.7)	28.5 (26.5-30.5)
Sexual abuse		
Attempted and completed	10.5 (9.1-11.9)	6.7 (5.5-7.9)
Attempted only	6.0 (5.0-7.0)	3.8 (3.0-4.6)
Serious noncontact only	2.5 (1.9-3.1)	1.9 (1.3-2.5)
Contact only	3.3 (2.5-4.1)	1.9 (1.3-2.5)
Rape (completed only)	0.7 (0.3-1.1)	0.5 (0.1-0.9)
Violence to genitals		
Attempted and completed	9.0 (7.8-10.2)	5.1 (4.1-6.1)
Completed only	7.5 (6.3-8.7)	4.2 (3.4-5.0)
Kidnapping		
Attempted and completed	6.1 (5.1-7.1)	2.2 (1.6-2.8)
Completed only	0.2 (0.0-0.4)	0.0

Weighted n = 2072.

* Nonparent and Parent breakdowns do not add up to the total estimates for Family Assault as some cases had missing values for perpetrator identity.

ized by adults (Table 3). Adults actually outnumbered children as the reported perpetrators of both the sexual abuse and the kidnapping incidents. In family assaults, other youth perpetrators somewhat outnumbered adults.

Two-thirds of all victimizations were disclosed to someone, but only a quarter to an authority and only 6% to the police (Table 4). Kidnapping attempts were particularly likely to be disclosed to police and nonfamily assaults more likely to be disclosed to school authorities. There was a slightly greater likelihood among girls to disclose to someone (74% vs 63%; $\chi^2 = 13.3, P < .001$), but no gender differences in disclosures to police or school authorities.

Children who experienced one form of victimization were more likely to have experienced another form as well. For example, victims of sexual assault were 2.67 times more likely (95% CI 1.97 to 3.59) than other children to have experienced an additional form of victimization. The victims of attempted kidnapping and genital violence were particularly vulnerable to additional victimizations (odds ratio = 5.24, 95% CI 3.51 to 9.40; and 4.66, 95% CI 3.51 to 7.45, respectively). Only the victims of family assault were not more likely to report other types of victimizations.

Ethnicity, family income, region of residence, and type of metro area were also associated with risk for

victimization (Table 5). Black and Hispanic children, those from Mountain and Pacific states, and those from large cities were more likely to experience victimization in general. Black youth had particularly elevated rates for sexual assault and kidnapping. Low-income children had particularly high rates of family assault and genital violence.

A little less than a third of all children victimized in the last year (31%) reported having suffered physical injuries as a result of their assault (Table 6). This translated into an annual rate of 114 per 1000 children per year injured as a result of a victimization. Nonfamily assault was responsible for the most injuries. Ten out of a thousand children per year got medical attention as a result of victimization-related injuries.

DISCUSSION

Comparison to Official Victimization Statistics

This study reveals levels of child victimization that far exceed those reported in official government victimization statistics. The rate in this study for assault is three times higher than the 5.2% rate for 12- to 15-year olds reported in the National Crime Survey (NCS) for 1991.⁷ The rate for rape is five times as high as the NCS estimate of 0.1%. We think these discrepancies illustrate the advantages of using children as respondents, interviewing them as confidentially as

TABLE 2. Victimizations by Gender

Type of Victimization	% Ever		% Last Year	
	Girls	Boys	Girls	Boys
Any victimization (excluding corporal punishment)				
Attempted and completed	44.8	57.6§	32.1	42.0§
Completed only	26.1	43.9§	18.5	32.1§
Nonfamily assault				
Attempted and completed	22.8	42.0§	14.3	30.0§
Completed only	11.9	32.2§	7.7	23.4§
Family assault				
Attempted and completed	14.4	11.6	8.9	8.2
Completed only	8.3	6.7	5.7	4.8
Nonparent family perpetrator				
Attempted and completed	8.8	8.0	6.1	6.2
Completed only	5.5	4.7	4.2	3.9
Parent perpetrator				
Attempted and completed	5.6	3.4*	2.5	1.7
Completed only	2.6	1.9	1.1	0.7
Corporal punishment	71.4	77.5‡	27.3	29.6
Sexual abuse				
Attempted and completed	15.3	5.9§	10.2	3.4§
Attempted only	8.2	3.7§	5.8	1.9§
Serious noncontact only	3.9	1.2§	2.9	0.9§
Contact only	5.6	1.0§	3.2	0.6§
Rape (completed only)	1.3	0.0§	1.0	0.0§
Violence to genitals				
Attempted and completed	1.7	16.2§	1.0	9.2§
Completed only	1.3	13.5§	0.8	7.5§
Kidnapping				
Attempted and completed	8.0	4.2§	3.4	1.0§
Completed only	0.4	0.0	0.0	0.0

Weighted n values: boys = 1049; girls = 1023.

* $p < .05$; ‡ $p < .01$; § $p < .001$.

TABLE 3. Perpetrator Identity by Type of Victimization*

Identity of Perpetrator§	Victimization Type‡					
	All Victimizations (n = 1006)	Nonfamily Assault (n = 543)	Family Assault (n = 201)	Kidnapping (n = 38)	Sexual Abuse/ Assault (n = 132)	Genital Violence (n = 88)
18 years and older						
Family	9%	N/A	42%	0%	11%	0%
Known	8%	3%	N/A	0%	41%	5%
Unknown	6%	2%	N/A	94%	7%	0%
Under 18 years old						
Family	12%	N/A	58%	0%	3%	9%
Known	57%	82%	N/A	2%	33%	83%
Unknown	8%	12%	N/A	4%	5%	4%

* Based on child's account of the most recent victimization incident.

‡ Includes both attempted and completed incidents.

§ Cases in which the identity of the perpetrator was missing are excluded from this analysis.

TABLE 4. Rates of Disclosure by Type of Victimization*

Disclosure	Victimization Type‡					
	All Victimizations	Nonfamily Assault	Family Assault	Kidnapping	Sexual Abuse/ Assault	Genital Violence
To anyone	67%	74%	59%	90%	60%	45%
To any authority	25%	37%	7%	29%	6%	13%
To school authorities	21%	33%	5%	14%	5%	11%
To police	6%	7%	4%	21%	3%	3%

* Based on child's account of the most recent victimization incident.

‡ Includes both attempted and completed incidents.

possible, and asking questions that are specifically tailored to children.

However, the rates in this study are not even as high as some other estimates based on self-reports. For example, in the National Youth Survey (NYS), 31% of 11- to 17-year olds reported an assault in the last year.¹² The difference is in part explained by the fact that the NIS estimate included assaults by siblings and other nonparent family members, which ours does not, and covered a slightly older, and thus possibly more victimization prone, age group.

The virtual irrelevance of official crime statistics in documenting the victimization of children is also underlined in this study by the data on disclosure. While one in four of the victimizations were reported to some authority, only 6% were reported to the police (Table 4), the agency which collects crime statistics. Two of the most sensitive and serious forms of assault—sexual abuse and genital violence—were almost never reported to the police. Obviously the scope of victimization to children cannot be assessed well through police-based statistics.

Gender and Victimization

Boys and girls in this age range, as this survey shows, face somewhat different victimization perils (Table 2). As has been well recognized, girls are at substantially greater risk for sexual victimization. The girls' higher rate for attempted and completed kidnapping is also probably a reflection of the fact that sexual assault is the predominant motive behind that crime.³ Kidnapping and sexual assault are also the types of victimization most likely to be perpetrated by adults, so a higher percentage of the

perpetrators against girls are adults (38% vs 13%; $\chi^2 = 82.9, P < .001$).

In contrast, boys face higher risks than girls from nonfamily assaults, which mostly occur at the hands of peer acquaintances. They also experience slightly higher rates of corporal punishment. In addition, a very remarkable finding from the study is the large proportion of boys (over one in eight) who had been a victim of violence aimed at their genitals. This is a form of violence about which, to our knowledge, information has not been gathered before. Boys appear to suffer about five times more completed genital violence than sexual abuse, although we must be cautious about such comparisons because boys may substantially underreport sexual victimizations. Nonetheless, this finding strongly suggests that more attention should be paid to this form of assault and its potential to leave lasting physical and psychological scars on youth in the midst of pubescent development.

Interrelationship among Victimizations

Many children (23%, or 45% of all those victimized) experienced more than one type of victimization. The utility of a comprehensive inventory of victimizations is illustrated in this study by the fact that the likelihood of a child experiencing any particular victimization (with the exception of family assault) was increased if he or she had experienced another type of victimization as well. The risks of experiencing genital violence and attempted kidnapping were particularly high if the child had some other type of victimization. In practical terms, this

TABLE 5. Percent Victimized,* by Income, Racial/Ethnic Background, Region, and Type of Metro Area

	Any Victimization	Nonfamily Assault	Family Assault	Kidnapping	Sexual Abuse	Genital Violence
Income						
LT \$20K	57.0	32.7	18.4	5.6	12.2	12.5
\$20-50K	49.7	32.3	11.6	6.9	10.2	8.7
GT \$50K	50.2	31.0	12.7	5.2	10.3	7.7
Race/ethnicity						
Black	59.0§	31.2	16.1	10.4§	18.8¶	8.5
White	49.4§	31.8	12.1	5.4§	9.4¶	8.9
Hispanic†	54.3§	37.8	14.8	5.4	8.2¶	11.2
Other	50.6§	34.8	10.4	3.3	10.5¶	7.4
Region						
New England	48.5¶	28.3	10.5	11.1	9.6	11.7§
Mid-Atlantic	54.4¶	35.1	16.9	5.5	10.6	7.4§
South Atlantic	46.5¶	28.5	12.1	5.9	8.5	5.9§
E. North Central	46.4¶	32.1	11.5	4.3	9.3	7.4§
E. South Central	48.6¶	28.6	7.5	7.3	11.6	14.8§
W. North Central	50.6¶	31.2	12.2	6.3	9.5	10.9§
W. South Central	49.0¶	33.4	13.0	5.3	6.2	8.6§
Mountain	64.6¶	38.8	15.8	5.9	17.8	15.5§
Pacific	62.7¶	38.0	15.5	7.7	17.5	10.2§
Metro area						
Large city	59.6	35.3	16.2§	11.3¶	12.4§	9.0
Suburb	53.6	31.5	15.2§	5.7¶	13.1§	11.1
Large town	47.9	31.2	11.9§	5.2¶	8.3§	11.0
Small town	50.3	32.1	13.1§	5.9¶	11.7§	7.7
Rural	46.3	31.8	9.2§	3.6¶	7.0§	7.8

Weighted n = 2072.

* Estimates are of "ever" victimized, and include both attempted and completed episodes.

† Includes all Hispanics, regardless of racial identification.

§ $p < .05$; || $p < .01$; ¶ $p < .001$.

speaks to the need to ask victimized children about other kinds of assaults they may have experienced.

Victimizations had common risk factors as well (Table 5), such as minority group membership or residing in the Mountain or Pacific regions or in large cities. This points to the need for etiologic models that cut across various forms of victimization.

Victimization and Injury

One in eight of all surveyed children reported a victimization-related injury in the last year, and one

TABLE 6. Injury and Medical Attention in Last Year by Victimization Type

Type of Victimization	Annual Rate Per 1000 US Children	95% Confidence Interval	% of All Victims of This Type
Victimizations resulting in injury			
Total	114	(100 to 128)	31%
Nonfamily assault	81	(69 to 93)	36%
Family assault	19	(13 to 25)	22%
Sexual assault	11	(7 to 15)	16%
Genital violence	6	(2 to 10)	11%
Kidnapping	<1		5%
Victimizations requiring medical attention			
Total	10	(6 to 14)	3%
Nonfamily assault	5	(1 to 9)	2%
Family assault	0		0%
Sex assault	3	(1 to 5)	4%
Genital violence	1	(0 to 3)	2%
Kidnapping	<1		5%

Weighted n = 2072.

in a hundred required victimization-related medical attention (Table 6). The majority of injuries (70%) as well as those requiring medical attention (50%) resulted from nonfamily assaults. Sexual abuse, by contrast, resulted in about 10% of the injuries and 30% of the medical attention. The contrast is important, because sexual assault has received in recent years so much more attention from clinicians than other forms of assault, in part because of its well established serious psychological sequelae.¹³ However, nonsexual assault needs to be taken seriously also, especially by health practitioners, because it is responsible for so much of the injury and medical care resulting from victimization. Moreover, nonsexual assault involving injury can have very serious psychological consequences, too, not necessarily of less magnitude than sexual assault, as demonstrated in other analyses of these data.¹⁴

Boys in this age group are at particularly high risk for injury. Their rates of injury are significantly higher than girls' for victimizations overall (151 vs 77 per 1000; $\chi^2 = 28.0$, $P < .001$), for nonfamily assault (121 vs 40 per 1000; $\chi^2 = 45.7$, $P < .001$), and for genital violence (11 vs 1 per 1000; $\chi^2 = 7.7$, $P < .01$). Despite their higher rates of injury, however, boys in this sample did not get medical attention much more frequently than girls.

Our findings regarding victimization-related injuries requiring medical attention (8.0 per 1000 for 10- to 14-year olds) are even higher than those obtained by Guyer et al⁵ (4.4 per 1000) from a Massachusetts sample. Guyer et al, using a record review methodology, counted only hospital and emergency room

visits, while our self-report methodology allowed for the inclusion of visits to private physicians as well. This is an additional illustration of an advantage of a child interview methodology.

Surveying Children

The results of this study suggest advantages in interviewing children directly over relying on reports by professionals or public agencies to tally the scope and impact of victimization on children. The children responded well to the task and felt positively about the experience. In our survey debriefings, two-thirds of the youths said the interview had been a good experience for them. Only five children out of two thousand reported that it had been bad. Despite our asking about experiences of personal victimization, including sexual victimization, only 39 children said they found anything in the interview upsetting.

The study provides some qualified support as well for the feasibility of telephone interviewing in such efforts. Telephone interviewing has perhaps been underestimated as an effective means of surveying young people. Children of this age generally spend a lot of time talking on the phone with their friends, usually with some degree of privacy, often about personal subjects. Within their own households, they may be able to be interviewed on the phone much less obtrusively than they would if an unfamiliar adult interviewer arrived on the premises. Moreover, telephone interviews give children a great deal of control over a potentially threatening situation. By simply hanging up, they can always terminate this kind of anonymous interview, something much more difficult in a face-to-face encounter.

Although telephone interviewing sometimes elicits skepticism from those trained in in-person history-taking, it is a well established epidemiological method,⁸ and is now even used by the Bureau of the Census for conducting the National Crime Survey.⁹ It allows access to 94% of US households.¹¹ Comparative studies have shown telephone interviews to be as effective as in-person interviews for eliciting information even about such sensitive topics as drug usage and sexual behavior.¹⁰

However, this study does not specifically compare the effectiveness of telephone interviewing with in-person interviewing for their respective abilities to elicit candid and accurate information about childhood victimizations. The especially high rates of childhood sexual abuse disclosed in two intensive in-person epidemiological studies with adults have persuaded some researchers of the advantages of that approach for that particular topic.^{4,15}

Telephone interviewing has also been faulted for its inability to access households without phones, households that may contain a disproportionate number of children vulnerable to victimization and other perils. Off-setting this problem, however, may be the ability of telephone interviewing to obtain much higher participation rates. In-person interviewers have problems gaining access to increasingly crime-conscious households, particularly in high-crime areas, and also to adolescents who are

rarely at home and need to be recontacted on numerous occasions before an interview can be completed.

Limitations

The rates from the current study are certainly not a full inventory of the victimizations children suffer. A number of limitations in the study suggest an undercounting of the true rate.

1) The telephone survey and household-based design certainly excluded some high risk children, such as children in households without phones, children in juvenile correctional and mental health facilities, children with serious disabilities, and alienated and angry children who would be perhaps more inclined not to participate.

2) It is probably difficult for children even under the best of circumstances to disclose especially intimate victimizations and family abuse to a stranger interviewer, especially if they are under any risk of retaliation by the perpetrator. This is suggested, for example, by the relatively low rate of intrafamily sexual abuse disclosed in this study compared to what is reported by adults retrospectively.¹⁶

3) There is evidence from other studies that many childhood victimizations may be forgotten or repressed,¹⁷ and thus unavailable for disclosure in short interview. Some have suggested that boys are particularly reticent to disclose.¹⁸

4) Due to time constraints, details were not obtained on every victimization of every child, so that some episodes may not have been counted, especially in the lifetime prevalence estimates.

Conclusions

Victimization is a major peril of childhood. According to this study, one-quarter of 10- to 16-year olds (or 6.2 million youth, extrapolating from this national survey to a population of 24,327,000 based on US Census data), experience some form of completed assault or abuse every year. One out of eight (or 2.8 million) experience an injury. One out of a hundred (or almost 250,000 youth) need medical attention as a result. According to other sources, over 2000 children aged 0 to 17 years (over 400 aged 10 to 17 years) are victims of homicide, which is one of the five leading causes of child mortality,¹⁹ and 1000 to 2000 die as a result of child abuse and neglect.^{20,21}

A substantial portion of this victimization is not counted and not recognized in any official way. Even child deaths due to maltreatment may be underestimated by as much as 85%, because they are misclassified as accidents, due to natural causes, or "of undetermined origin," according to a recent study.²¹ The current study has documented how much victimization escapes the notice of police, official statistics, and even other self-report studies which utilize less sensitive methodology.

The topic of child victimization needs a great deal more attention and research. To bolster this concern, we need much better statistics to document the scope, nature, and trends of child victimization. Comprehensive annual, national, and state figures should be collected and made available on all officially reported crimes and forms of child abuse com-

mitted against children. Inadequate as they may be, they at least draw attention to children as especially vulnerable victims of crime. These statistics need to be supplemented by regular national studies to assess the vast quantity of unreported victimization, including family violence and child-to-child victimization. It is only by appreciating the full scope and diverse forms of child victimization that we can target an intelligent social policy at preventing and alleviating this problem.

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APPENDIX: INSTRUMENTATION

Nonfamily Assault

Screener Questions:

1) "Sometimes kids get hassled by other kids or older kids, who are being bullies or picking on them for some reason. Has anyone—in school, after school, at parties, or somewhere else—picked a fight with you or tried to beat you up?"

2) "Has anyone ever ganged up on you, you know, when a group of kids tries to hurt you or take something from you?"

Definitions:

The definition of an attempted or completed assault included any child responding yes to either of these questions (except that any episode involving a family member perpetrator was moved from this category to the family assault category). A completed nonfamily assault was an episode that included actual punching, kicking, hitting with an object, or threatening with a weapon.

Family Assault

Screener Questions:

1) "Sometimes kids get pushed around, hit, or beaten up by members of their own family, like an older brother or sister or parent. Has anyone in your family ever pushed you around, hit you, or tried to beat you up?"

2) "Has anyone in your family gotten so mad or out of control you thought they were really going to hurt you badly?"

Definitions:

A completed family assault included the occurrence of actual punching, slapping, kicking, hitting with an object, or threatening with a weapon.

Kidnapping

Screener Questions:

1) "We've heard about some kids getting hassled by adults or older kids in cars. Has anybody ever tried to kidnap you, or tried to get you to get into their car when you thought you might be taken somewhere and hurt?"

Definitions:

Completed kidnappings were limited to episodes in which the child was actually taken somewhere.

Sexual Abuse/Assault

Screener Questions:

Note: The introduction to this set of screeners read as follows:

"Now another thing some kids report these days is adults or older kids who try to trick them or force them into doing something sexual. This includes an older person who tries to touch your private parts, or tries to make you touch or look at their private parts. Kids report that these types of things sometimes happen to them, even with people they know well and trust, like teachers and relatives."

1) "Has there ever been a time when an older person, like an adult, an older teenager, a babysitter, or someone like that deliberately touched or tried to touch your private parts (for females: including your breasts)?"

2) "Has there ever been a time when an older person, like an adult, an older teenager, a babysitter, or someone like that tried to make you touch or look at their private parts?"

3) "Has there ever been a time when an older person tried to feel you, grab you, or kiss you in a sexual way that made you feel afraid or bad?"

4) "Has there ever been a time when someone your own age—a boy, a girl, or a group of them—tried to threaten, force, or trick you into doing something sexual that you didn't want to do?"

5) "Has there ever been a time when anyone—an older person or someone your own age—did something sexual to you that you didn't want?"

6) "Sometimes they won't actually threaten or hurt you, but adults and older teenagers may act in ways that are strange or suspicious or that make you wonder what they're up to. Has there ever been a time when an older person began to act in a strange or suspicious way around you that made you wonder if they were trying to get sexual with you? This would include acting in a way that seemed too friendly, or hanging around you when they weren't wanted, or touching you in ways you didn't like, or trying to get you to do things that were weird or strange. Has this ever happened to you?"

Definitions:

The sexual incidents which we defined as completed fell into two categories: serious noncontact incidents, and contact incidents. Serious noncontact incidents included a perpetrator touching the child in a sexual way (but without contact to the private parts) or exposing him/herself to the child. Also included in the serious noncontact incidents were those in which a parent asked the child "to do something sexual." Contact incidents included a perpetrator touching the sexual parts of a child under or over the clothing, penetrating the child, or engaging in any oral-genital contact with the child.

Violence to Genitals

Screener Questions:

1) "Has there ever been a time when anyone intentionally tried to hurt your private parts by hitting you, kicking you there, or trying to hit them with an object?"

Definitions:

Completed genital violence included any episode which involved actual violent contact with the child (eg, hitting or kicking). It should be noted that, although it could not be unambiguously ascertained that the violent contact landed on the private parts, it was clear from the context that this was the intent of the contact.

Corporal Punishment

Screener Questions:

1) "When was the last time one of the adult(s) where you were living slapped, hit, or spanked you?"

Definitions:

These two questions were not included in the algorithm for the selection of two incidents for the extensive follow-up questions.

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