National Institute of Justice

Technical Working Group on Violent Victimization Research

December 2–3, 2014

Washington, D.C.

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Cambria Suites Hotel

899 O St. N.W.

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Meeting Report Prepared by:

Winfield Swanson, Consultant

CSR, Incorporated

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Welcome and Introductions—Nadine Frederique, NIJ

Dr. Frederique opened the meeting at 9:10 a.m., welcomed everyone and invited participants to introduce themselves.

Violent victimization has been a National Institute of Justice (NIJ) research topic for many years and NIJ is looking to further develop its program of research on violent victimization. This group was drawn from different fields to help focus NIJ research in this area and to provide varying perspectives on approaching this broad topic. This meeting is a first step in the planning process. NIJ may send participants a survey and will follow up in some way. The four topical areas under discussion today are: race and victimization, victim–offenders, special populations and victim services. However, participants should feel free to add areas, as it is recognized this is just a place to start.

Opening Remarks—Howard Spivak, NIJ

The research conducted at NIJ on violent victimization has been a patchwork with a focus on certain populations and certain issues. Now NIJ wants to cast a wider net to think more broadly about victims, victimization and victim services. NIJ wants to understand current gaps, identify future research questions, and move away from a patchwork approach to something more integrated. Subjective interpretations of the effects of victimization are increasing in importance as the science around victimization grows— namely, the relationship between the experience of violence and crime to physical and mental effects later in life. It is all the more important to prevent violence and to devise better interventions. Dr. Spivak encouraged participants to think more broadly when considering the overlap between violence and crime, *e.g.,* some violence is not always considered a crime and that it is not only a criminal justice problem but is viewed differently across disciplines. The part of our population affected by crime is at risk for various chronic diseases, post-traumatic stress disorder (PTSD), medical problems, etc.

Doing this work requires strong and well-integrated partnerships, beginning with government/private sector and researchers/practitioners. Currently, NIJ works closely with our partners at the Office for Victims of Crime (OVC) and the Bureau of Justice Statistics and we hope such collaborations will grow. This meeting is the beginning of what NIJ hopes will be a longer-term process to develop a strategic plan around victims and victimization. And, as we learn more, we want to modify our focus accordingly.

NIJ's Program of Research on Violent Victimization: History and Next Steps—Dara Blachman-Demner, NIJ (<u>View slides</u>)

This meeting is the first step of an ongoing process. NIJ is the research, development and evaluation arm of the U. S. Department of Justice (DOJ), the nation's leader in scientific research on crime and justice. NIJ is dedicated to improving knowledge and understanding of crime and justice issues through science and to providing objective and independent knowledge and tools to reduce crime and promote justice.

Participants for this meeting will consider violent victimization, (i.e., when a person is harmed or threatened with violence, including rape, sexual assault, robbery, non-sexual assault, and homicide). Researchers strive to understand and reduce the occurrence and impact of these crimes—how and when they occur and the consequences for victims. The primary focus is on adults, with an emphasis on young adults, given their high rates of violent crime victimization. (NIJ maintains separate portfolio categories by age.)

Since 2000, NIJ has funded various projects, the majority being OVC–funded evaluations of victim-specific programs, services or policies. Early work began to examine the overlap between criminality and violent victimization. Since fiscal year (FY) 2012, NIJ has tried to make violent victimization more prominent in calls for proposals.

Complementary research portfolios include children exposed to violence, violence against women, gang violence and so on. In the last 2 years, more effort has been devoted to considering victimization more broadly. This meeting focuses on violent victimization with particular emphasis on race, ethnicity, and culture; victim services; the victim–offender overlap; and special populations.

Ongoing research projects include program evaluations of Vision 21-inspired and other OVC-sponsored demonstration projects, victim–offender overlap, race and victimization, and a general study of homicide risks. Other related projects were funded under NIJ signature programs, including the W.E.B. DuBois Fellowship program, the Graduate Research Fellowship Program, and a Data Resources Program, using the National Crime Victimization Survey (NCVS) and other secondary data sets. OVC programs include Vision 21, a study of successful victim service policies and practices, including program and policy evaluation. NIJ also works with Department of Health and Human Services (HHS) agencies, including the Centers for Disease Control and Prevention (CDC).

NIJ sees this meeting as a first step to working toward establishing sustainable programs through regular calls for proposals, continued and enhanced coordination among OVC, BJS, CDC, et al., and continued input from the field through workshops, web-based forums, and white papers. The objective of this meeting identifies four areas of interest as

a starting point. NIJ is known for its work on violence against women, and this meeting is intended to focus on other aspects of violent victimization. The participants' role is important to isolate major areas of interest, to assist in prioritizing key research areas, to provide information on emerging challenges and innovations in research methods, and to highlight key research areas.

Background and Context: Violent Victimization in the United States: Major Issues and Trends—Bethany Backes [for Arthur Lurigio, Loyola University of Chicago] (View slides)

The following constitutes highlights from a working paper in progress. *Xkgy 'hwn'hpcn'tchv+

Criminal victimization is common in the United States and touches the lives of most residents. Violent offenses are defined as murder, forcible rape, robbery and aggravated assault. Violent victimization rates consistently reflect an overrepresentation among youth, minorities and the most impoverished residents of urban areas. In an effort to better measure crime, the Uniform Crime Report (UCR) program was established in 1929, followed several decades later by the National Crime Victimization Survey (NCVS) (formerly the National Crime Survey) in the 1970s. These data are used in a variety of ways and it is important for this group to consider how to best use these datasets in understanding trends, patterns and the context of victimization.

The UCR program was designed to collect reliable and uniform crime statistics across the nation. The Federal Bureau of Investigation (FBI) collects, publishes and archives these statistics that are provided by law enforcement agencies. It is important to note that this is a largely voluntary program and participation and completeness of data will vary by law enforcement agency. Under the UCR program, violent offenses include murder, forcible rape, robbery and aggravated assault. Data are limited by inclusion of only "official" crime data and only the most serious crime in a multiple-crime incident. Other limitations that have been noted include the purposeful downgrading of crime to show crime reductions and the under-submission of data.

The NCVS is a household-based survey and includes 160,000 individual interviews from some 90,000 households. Its focus is the impact of crime and the characteristics of offenders. It provides estimates of victimization by type of offense, which is useful in understanding why victims fail to report crimes to the police. It sheds light on interactions and relationships between victims and offenders and can be useful in understanding victimization by population or sub-groups. Some noted limitations of the NCVS include the potential for respondent error, memory decay, telescoping, fear of

retaliation, respondents not identifying an incident as a crime, and underreporting. The NCVS is currently undergoing a major redesign.

The UCR indicates that 1,214,590 violent crimes were reported for 2012—a decline of 48 percent since 1993. Aggravated assault accounts for 63 percent of the violent offenses reported. Over the past 20 years, violent crime has consistently declined. The NCVS documented 6,842,590 violent victimizations in 2012—a decline of 49 percent since 1993. The violent victimization rate was much higher among young people, African Americans, men (except for rape and intimate partner violence), and people in lower income brackets.

Crime is estimated to cost victims $450 billion annually. In 2000 alone, violent crime cost $27 billion. Criminal justice expenditures (i.e., the expense of operating the correctional systems) cost $80 billion in 2010—an increase of 350 percent since 1980. And that does not count long-term health issues and the emotional burden (e.g., feelings of vulnerability or dread, chronic anxiety, depression, PTSD). Cost-of-crime studies are important to conduct but it is difficult to identify both tangible and intangible costs to victims and society as a whole.

The crime victims' movements has been shaped largely by the field of victimology, the women's movement, noted examples of system failure, and grassroots efforts. The victims' rights movement began about 30 years ago and was focused on improving the treatment of victims by the criminal justice system. The criminal justice system was viewed as chronically failing to protect victims and the movement identified a need for victims to have an independent and participatory role in criminal proceedings. Typically, victims had been relegated to a witness role, but since the early 1980s, legislative initiatives have asserted victims' rights and their protection, such as the President's Task Force on Victims of Crimes (1982), the Omnibus Victim and Witness Protection Act (1982), the Victims of Crime Act (1984), the Justice for All Act (2004), and statewide crime victims' rights legislation.

Several forms of assistance stemmed from the victims' rights movement, including victim compensation, victim notification and information, victim and witness protection, victim services and additional advocacy. A broad spectrum of services are available to crime victims; however, a relatively small percentage of victims is aware of such services or accesses them.

Overall, violent victimization is common but not ubiquitous and has been declining for 20 years. National measurements are useful and complementary but have shortcomings, and the NCVS is currently undergoing a redesign. The likelihood of violent victimization appears to vary largely by demographic characteristics. Victimization is costly to society

and individual victims, and more information is needed on tangible and intangible costs of crime.

Research on the Victim–Offender Overlap—Mark Berg, University of Iowa (View slides)

The victim-offender overlap entails a situational dynamic, which opens new pathways for research. The following facts are apparent: a large proportion of victims are offenders and vice-versa; victimization is among the strongest correlates of offending and vice-versa; and the violence linkage seems strongest and the magnitude is contingent on circumstances (among the most durable facts). The pattern is rather reliable across data sources; age, sex and gender account for variations.

The following research questions relate to the source of overlap: What mechanism accounts for the strong positive association between victim and offender? Under what conditions is the overlap stronger or weaker? Do the same theoretical mechanisms predict each outcome? For indirect processes such as gun carrying, does that process increase rates of offending? (Yes, gun carrying encourages risk taking.) Does an unidentified other variable account for the entire causal system? Are victims and offenders symptoms of a common underlying condition? (If so, it would account for the entire relationship.)

Critical implications for scientific significance and policymaking are the prevalence of interpersonal violence, which would allow targeting high-risk groups to maximize benefits. But this idea rests on the common cause assumption. We need to illuminate the scope of leading theories of victimization and offending to reveal new insights about the evolution of disputes, (i.e., the process that leads to a killing). Knowing this might allow us to bring tools to the police department to reduce police officers' use of force.

Common design features of studies of victimization and offending are include cross-sectional surveys using items to assess the victimization experience 6 or 12 months after the fact, longitudinal surveys using repeated panel designs, hospital admission data, mortality files, and official police data (e.g., arrest data). Little of the victim-offender overlap is explained by standard theoretical processes or statistical adjustments for confounding. We have exhausted the pool of theoretically derived assumptions found in criminology, and data limitations preclude additional mining. Recent work has clarified, but not unmasked, the complex sources of this phenomenon. Consequently, the body of science is more coherent but not much deeper than it was 20 years ago.

Limitations of those methods are that survey items create a questionable dichotomy between victim and offender that masks incident dynamics and obscures escalation of

conflicts and the victim's potential role. A single survey item captures elements of victimization and offending in an incident. One challenge is isolating contributing conditions. The survey item is a blunt tool that cannot capture the true interaction. (For example, A insults B in front of B's friends, so B threatens A with violence. A responds by pushing B (moderate physical aggression). B strikes A, then B exits with friends. A may believe he is a victim, and so may B. A survey does not capture the insult or the shove.)

Non-recursive pathways complicate causal ordering. Without knowing which occurred first, it is difficult to isolate causal mechanisms, which obscures the "true" effects of victimization on offending, and vice-versa. Temporal ordering attempts to minimize causal problems by specifying prior year lags of X (with X = some number of years). Yet lags may omit information between years; there is no way of knowing whether the victim and offender events are related, which is an unintended cost of empirical clarity. Lags omit an enormous amount of information between years, which can overstate effects. We also lack within-person designs. Few studies control for unobserved confounders, so effects may be overstated.

Disciplines speak past one another. We, as criminologists, do not consider literature on aggression in (social and developmental) psychology of direct relevance to the overlap. The narrow criminological focus results in hypotheses framed from standard theories. These narrow academic approaches are then used to address broad and complicated social phenomena. We need a concerted focus on design challenges, such as implications of item definitions and response patterns. We rely on notions of aggression and coercion vs. crime, but rarely do we study non-offender victims and nonviolent conflicts. We need to develop new data sets with variables from a broader list of social science theories and to study social interactions, the escalation process (how a minor dispute evolves to serious violence), and why some conflicts end peacefully.

We need to fund and promote experimental research on competitive games and interactional dynamics, and we need to study aggressive intent. That would allow us to isolate causal mechanisms, which in turn suggests behavioral processes. We could develop experimental prevention programs as a pathway to understanding the mechanisms behind overlap, whether they be school-based, arrest-based, or court-based. We need to examine mechanisms unfolding during early developmental periods in toddlerhood and earlier, when evocative traits take hold. The family is the training ground—aggressive behavior is a way to control and get what you want. Longitudinal data usually omit infant and toddler years and this neglects developing process measures. Prospective designs should be the standard because retrospective designs come with too many limitations, although they are less expensive.

We should also expand the definition of what constitutes offending, relying on operational definitions of aggression or coercion (e.g., corporal punishment is permitted in some schools but would be considered assault in others.) We rely on operational definitions to separate aggression from coercion, but relying on non-legalistic (hence behavioral) definitions may bring about a more precise understanding of the types of behavior correlated with the victimization risk. Thus, we need to shift the focus of research to a broader range of behaviors.

Much has been learned from null findings. They eliminate potential explanations so we can turn elsewhere. Explaining the source of the overlap has significant implications for theory and prevention. Prevention is important because when a strategy is effective it can reduce the number of homicides. We need an interdisciplinary focus—one that requires new theoretical and data tools. Broad policy changes are a product of such a collaborative effort.

Discussion: Identification of Research Issues, Questions and Gaps—Dara Blachman-Demner, NIJ[1]

Victim–Offender Overlap
- We need to identify several retaliatory disputes. Part of the issue is that victims and offenders are coming into a situation and we don't pay attention to the nature of the dispute. Dispute characteristics at the dispute level may be drawing in both victim and offender, but we don't know how that occurs.
- The victim advocacy field is moving in that direction (e.g., with battered women and victims of sexual violence). However, policymakers will argue against it because they want a clean definition.
- People who work on the victim-offender relationship do so in their silos of expertise—child abuse, dating violence, and domestic violence.
- All these things are clearly related. NIJ hopes to provide more linkages among its portfolios. Research on the overlap of victims and offenders is a starting point.

Childhood Experiences
- An observational study published in the mid-1990s addressed toddlers who failed to observe social norms and were repeatedly victimized. It raises the issue of whether people believe their behavior is harmful.

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[1] For this and all other discussion sections, bullets are specific comments made by individual participants grouped by the note-taker into common themes. In a few cases, similar points were merged into one bullet statement. All comments are the opinions of one or more participants and do not reflect the official position of NIJ or the U.S. Department of Justice.

- It would be fantastic to study early childhood development and how parents help children resolve conflicts over toys, etc.
- Most adults we talk about come from the high-risk group that has had adverse childhood experiences. Failure to ameliorate or modify those situations and effects early on is a huge problem.
- We need to address what happens to kids who are victimized and what their responses are. More work has been done on females than males. Much female victimization occurs in the home, and this needs more research as to the effect on the victim and change in the victim's behavior.

Gender
- Implicit in research on the victim-offender overlap is that the predictors are the same for both men and women. Some research suggests that different processes might be operating. Research on the link between victimization and revictimization suggests that for men, offending is the primary mediating mechanism, whereas for women, drug and alcohol use, as well as offending, operate as explanatory mediators.

Genetics
- Studying the genetic basis of these behaviors is important.
- Research results indicate that the oxytocin receptor gene (*OXTR*) promotes and has a role in methylation, which implies behavioral phenotypes as a neurobiological basis of social behavior and cognition. Similar work has been done on serotonin. However, biomarker research costs some $300,000 or $400,000. NIJ might be able to partner with the National Institutes of Health (NIH) or CDC.

Victims
- Changing the terms "violence, abuse, assault" to "illegal" broadens the identity of victims. They tend to become vulnerable after victimizations.
- Greater interest is emerging in starting with a general pool of study participants to see whether people use violence or not.
- Victim blaming is found among some groups, such as young black men and women.
- Victim-blaming stems from a dichotomy: criminal justice is about a single moment in time, but the study of the overlap is longitudinal. We are afraid of victim-blaming because of the comparative fault concept in criminal justice.

Criminal Justice System
- For a number of crime types, the criminal justice system is the entrée to a number of victim services. We see the good victim/bad offender dichotomy and there is no place in the criminal justice system to consider the overlap. System-based advocates are most aligned to that highly adversarial dichotomized model.

Research Methods
- Measurement issues are key. We need more methods research linked with the best measurements the field has—surveys, gaming, observational studies, etc. Otherwise we make the same mistakes over and over.
- What existing data have been underutilized that we could use to start addressing these issues sooner? A solicitation might be issued for re-use of existing data (e.g., Gerald Patterson's Oregon Youth Study). And we have data from work by Ken Dodge, Pat Tolan and others.
- A multidisciplinary component is framing research well so it cannot be misused. Attorneys read the introduction and conclusion of research reports and then take words. People misuse research all the time and we have to prevent that.
- We need intense interdisciplinary conversations, and this is equally true concerning policy and funding for different services.
- From an academic perspective, not all institutions are receptive to interdisciplinary research, so the interdisciplinary aspect must be written into the solicitation.

Institutional Review Boards
- Researchers are generally poor at explaining to policymakers why research is important; neither do some institutional review board (IRB) members understand the victims' field. In particular, IRBs need to have a better understanding of the methods (e.g., snowball sampling) that are necessary for research with difficult-to-reach populations (e.g., lesbian, gay, bisexual, and transgender [LQBT] youth).
- Collaborative meetings would be a good way to rectify this situation. Furthermore, each of us can and should volunteer to sit on an IRB.

Research Questions
- What are the consequences of victimization? Could that experience lead to offending? These issues have important implications for policy.
- How can we prevent victims from offending?
- One thing holding back victimization research is fear of asking certain questions about victims; many questions are off the table. We need to lose that fear and ask the hard questions, such as was the victim using drugs or alcohol before

victimization occurred? This question can open the research to charges of blaming the victim. The question may be objective, but the answer is subjective.

- A good victim advocate asks the tough question to know what is going on with victims to get appropriate services for them. In criminal justice, we have to ask those tough questions even though stigma comes with those questions and answers. Partnership between criminal justice and victim advocates would be possible and productive. It is important how you ask the questions that carry societal stigma. To do that, we need to look at the surveys that did it successfully. We need good stem questions. We do not need to recreate the wheel. Victims have as much stigma against themselves as others do, so we have to explain why we ask what questions.

- People experience a variety of types of violence, and a small portion of offenders actually use violence. The intersection with the justice response could be illuminating. What are the differences in how victims and offenders are treated in the system itself? For example, how do judges describe victims and offenders, and how does that influence outcomes? How do ordinary people deal with conflict? What is the difference between conflict and conflict that resulted in violence?

- What about the non-offending victim and the tipping point to violence?

Race and Victimization—Tanya Sharpe, University of Maryland (View slides)

Victimization involves the direct victim or victims as well as the indirect victims—namely, surviving family, friends and co-workers. Yet investigators devising strategies and approaches have not talked to the people impacted, and the literature does not reflect the African American experience.

Violent victimization is categorized as simple assault, aggravated assault, rape or robbery. The highest rates of simple, aggravated and violent assault occur among 15- to 24-year-old African American men, whereas the highest rates of rape and sexual assault occur among Native American women. African American and Latino males are disproportionately represented among homicide victims. Of 31,672 deaths in the United States from firearm injuries (19,392 suicides and 12,280 homicides), more than half were African American, while African Americans account for only 13 percent of the U. S. population; 25 percent of the victims were European American, who make up 65 percent of the population.

Research has been predominately conducted in urban areas, including mental health outcomes for victims (PTSD, trauma), risk and protective factors, coping (emotion- and

problem-focused, and service utilization). Gaps in the research include limited comparisons between urban, suburban, and rural victims; small samples for people of color; a dearth of perspectives of victims of color in the literature; limited research relevant to victim typology; and limited research on survivors of homicide victims. In short, blacks and Latinos are overrepresented in victimization, but underrepresented in the literature. The experience of being a homicide survivor thrusts you into a culture of shame, blame and stigma. Already subjected to racism and discrimination, these victims internalize the survivor stress because they don't want another stigma. All of this intersects in the social-cultural context.

It would be helpful to define terms and develop tools of measurement. Data collection should be expanded to where people frequently reside and what their perspective is, (e.g., where they access services). We need national studies on crime, victimization and survivors of homicide victims among populations of color, as they are overrepresented among victim and perpetrator populations. We have to start at a basic level with the people who have been impacted so they can describe their experiences; then we can determine whether available services are appropriate. We should specifically target victims of color. It would also be helpful to have more opportunities for interdisciplinary collaboration for both setting research agendas and conducting research collaboratively.

Tools of measurement need to be developed and utilized that best reflect how populations of color cope with violent victimization in their culture and religion. We should consider the culture of the type of victimization (e.g., homicide, sexual assault, gender-based). Studies must use mixed methods: exploratory methods to unearth unknown experiences of violent crime and victimization for blacks, and participatory action research methods to target the particular population so they feel accessibility, ownership and creditability of the research—so they are part of the process. Then we need to develop and implement interventions that are culturally relevant to the population. Models are another tool, but they must be developed and implemented in culturally responsive ways that examine the mechanisms by which victimization affects quality-of-life indices for diverse racial, ethnic and victimization groups. Longitudinal studies are important in terms of tracking, and we need increased support for more longitudinal research to examine the links between crime victim exposure and long-term physical and mental health, as well as the social consequences (e.g., employment, community engagement).

The variables to be considered in analysis must be expanded to include estimated cost related to crime victimization (e.g., job loss, depression, family function, cost to community), medical and mental health, community, and engagement with the criminal justice system and law enforcement (e.g., frequency, recidivism, quality of experience).

The victim may well not make the connection between trauma and physical and mental health (e.g., "I have a pain in my right side where Johnny was shot.")

Moreover, we need to look at victimization from a macro-perspective, from the geographic areas where African Americans are experiencing grief and loss (e.g., by using geographic information system (GIS) mapping.) Another area of research interest is victims' relationships with court advocates and how that affects whether they seek services and help.

Discussion: Identification of Research Issues, Questions and Gaps—Nadine Frederique, NIJ

Race and Ethnicity
- We need to discuss racial differences, the nature of victimization, and the risk of violent victimization—there is a sharp difference in the level of seriousness (e.g., gun violence vs. other kinds of violence.)
- As for descriptive data, there is not much research on bi-racial or multiracial people, and we have to get at that. The effect depends on age and how different cultures deal with homicide. We need to consider homicide where it occurs often compared with where it occurs rarely.
- People affected increases geometrically with minority status. If we start with disenfranchised persons, what happens if a group is criminalized by color?
- We must talk about Native Americans, especially those who do not live on reservations. African Americans and Native Americans are not represented in the literature although they are overrepresented in the statistics.
- When we say "race," we mean black or white or Hispanic, not Mexican, Puerto Rican, Colombian, etc; however, these are distinct cultures. The literature also shows that native-born persons act very differently from foreign-born. We should collect data that allow us to distinguish these peoples.
- We are so tied to numbers, we get trapped in re-aggregating things that should not be aggregated. There are many different kinds of African Americans, Asians and Latinos. We merge different patterns when we do that. We encourage NIJ to think of ways to fund these gaps in research.
- The race of the researcher is a huge barrier. Hiring data collectors of the same ethnicity as the target population can help.
- We also need to consider household income. The implications of homicide in the African American community raise the notion of "contagion of violence." It implies that families that suffer homicide will retaliate, but we do not see that at

the rates that contagion would imply. We should look at the rate at which subsequent violence does <u>not</u> occur.

Rural Populations and Location
- It takes a coordinated effort to address rural residence, and race or ethnicity. For example, in cases of homicide, all these people are bound together by loss of a loved one, but getting them to come in the standard way will not happen. We need to get data to allocate resources in a thoughtful, planned way. We need to use different, more creative ways to reach them, perhaps allowing different sampling frameworks to get at the different populations. We may have to provide transportation, or in rural areas we can use tele-help so these people do not have to come into the cities.
- We are starting to see new methods in GIS mapping that identify areas of states where, e.g., migrant laborers would be likely to camp. We can then send a research team to that area.
- We need to do more work on how messages vary across spatial and historical content. Higher victimization rates for one group or another are not the same everywhere. If we distinguish, we can then examine what limits those disparities.
- We need to look at the victimization process from a broader perspective (e.g., the neighborhood's cascading effects.)

Victim Compensation
- Most states' Victims' Bill of Rights came about because of a high-profile homicide of a middle- or upper-class white person; we need to critically analyze that foundation. How applicable is this to the underserved? We must challenge the foundational assumptions that we continue to build on.
- Victims get compensation only if they cooperate. This is unfortunate because the ones who need it the most may get it the least.
- Compensation programs came out of the desire for victims to cooperate with the criminal justice system, not from the belief that they deserve it. More recently, we have come toward the idea that victims are entitled to compensation because they are victims and not just people who can do something for the system.
- Only a small fraction of victims receive victim compensation. In part, this is because most victims are not aware of the program. But it is also the case that there are many restrictions on who can receive compensation.

Policymakers

- The personal story—not the research—has moved policymakers. Therefore, victim impact statements should be studied. It would at least make victims feel they are being listened to.

Victim Services and Resilience
- Mothers of homicide victims are very actively engaged, but the degree depends on where they are in being able to connect with people, those in key places, and other survivors. However, not all surviving family members are the same. Also, they should not go to a survivors' group immediately, but perhaps start with individual therapy. The group members tend to be incredible advocates for other survivors. This gives them a sense of empowerment and control. A problem is that women become heroes of the pedestal type, but an exhausted person cannot be put an on a pedestal.
- The coping issue is important, and related is the longitudinal study. A study done by psychologists in Kentucky followed victims every 6 months and showed that the victims whose symptoms persisted were those for whom victimization is not a one-time event. Repetition is the problem, not coping ability.
- Some follow-up studies of trauma show that participating in research may impact one's involvement in advocacy. Survivors now participate in some victims' advisory councils. They are from the community and have been victimized, so they are important contacts for researchers. Victims can help inform the statistics.
- Many crime victims get entrée to services, but the good-victim/bad-offender model may not be useful, and services are not designed to recognize such nuances. Trauma symptoms have been shown to be reduced for families who have some court interaction with the offender.
- How does the trauma of being a homicide survivor compound the trauma of other disadvantages being experienced?

Intervention and Prevention
- How can we apply what we already know to intervention and prevention strategies? The public health perspective might be useful. The community-based intervention approach and environmental interventions could also be useful, but we need more research.

Violence on Campus
- A campus is its own community, with its own system of justice; it is a special population. We hear about sexual assault but we are swamped by "normal" victimization on campus because campuses bring in many people from many

more cultures (e.g., rural Michiganians vs urban Chinese peoples). In fact,
campuses are the third most common place for hate crimes. Given the heightened
focus on these issue by policymakers, we are currently in a unique time when
some positive actions could happen on college campuses.

- One of the meeting participants served on the Cleary Act Committee and will
share the information and the final regulatory language. The investigative team
for the Office of Civil Rights is particularly focused on hate crimes (e.g.,
campuses are now obligated to report all hate crimes and to label them as such.)

Criminal Justice

- There has been a boom in literature about sexual violence victims and their
relationship with criminal justice. Understanding those communications would be
revealing of effects on victims and of declination rates.
- Criminal justice is important. When a homicide occurs in a white, middle-class
neighborhood, there's easy access to both the civil and administrative parts of the
criminal justice system; that easy access doesn't happen in lower-class
communities. This area is ripe for research.
- Also, many crime victims have nothing to do with the criminal justice system; we
need information about them too.
- The criminal justice system attracts a lot of criticism, but no other system is
stepping up and at least they're trying. Research shows there can be positive
outcomes as well as negative, but because we have not studied what we are doing
right, we cannot capitalize on that.

Research Methods

- We need mixed methods. Often an overlooked approach is critical for areas where
we have enormous gaps. We need to include these specifics in funding
announcements so reviewers can understand the need and importance.

Victimization Among Special Populations: Sexual Minorities/LGBTs—Amy Hequembourg, SUNY Buffalo (View slides)

Sexual minorities include lesbian, gay, bisexual and transgender (LGBT) individuals. For a
variety of methodological reasons, it is difficult to definitively estimate the size of the sexual
minority population in the United States. However, some estimates suggest that about 3.5 percent
of the population identifies as lesbian, gay, or bisexual, and as many as 700,000 transgender
individuals likely reside in the United States. They are at disproportionately high risk for
experiencing bias-based crimes. While sexual minorities make up only 3.5 percent of the

population, 30 percent of reported hate crimes each year involve sexual orientation- or gender identity-based violence.

Sexual minorities report a range of health risk behaviors and poorer health outcomes compared to heterosexuals. These disparities are thought to be the consequence of experiencing sexual minority-based stigma that creates unique stressors that are above and beyond typical stressors found in the general population. These disparities are important to consider for their potential intersection with violent victimization, particularly risky drinking patterns and mental health problems (e.g., anxiety, depression).

The FBI's Uniform Crime Reports indicated that 1,376 cases of sexual orientation-based hate crime offenses were reported to U.S. law enforcement agencies in 2012, with more than half of these reported crimes directed at sexual-minority men. Estimates of violent victimization among this population are not widely available, although other sources (e.g., National Coalition of Anti-Violence Programs, Center for Disease Control and Prevention's National Intimate Partner Violence and Sexual Assault Survey) do provide some insights into the magnitude of the problem. These data indicate that sexual minorities are at greater risk for being victimized than heterosexuals, with some subgroups of sexual minorities (e.g., bisexual women, transgender individuals) at increased vulnerability.

Violent victimization is uniquely detrimental to sexual minorities; it is not only experienced as a personal attack but also serves as a symbolic reminder of vulnerability, isolation and lack of legal protection to the LGBT community. Biased-based attacks targeting sexual minorities tend to be more violent and to produce greater adverse long-term psychological consequences for LGBT victims than other forms of crime. Violence targeting sexual minorities appears to have unique characteristics, but further research is needed to better differentiate the nature of this biased-based violence from violence targeting other minority groups.

Reported rates of violent victimization targeting sexual minorities are conservative at best because underreporting is common. Sexual minorities are reluctant to report crimes because there is a history of prejudice against this population in our criminal justice system. Sexual minority victims also underreport experiences of violence due to fear of re-victimization and fear of "outing" oneself. Underreporting also occurs because law enforcement officers often lack the training, skills and means to identify a bias-related crime and document it properly.

Further research is needed to better understand the extent, nature and consequences of bias-based crimes targeting sexual minorities. However, researchers face a number of methodological challenges, including the difficulty of recruiting sufficient samples of this hidden population for their studies. A necessary first step toward solving this problem is to include questions about

sexual orientation and gender identity in all research, particularly population-based studies. Furthermore, studies utilizing longitudinal designs are needed to better understand the complex causal processes underlying vulnerability to and consequences of violent victimization among this population. In order to better understand how multiple and overlapping identities impact experiences of violence, researchers should enroll sufficient subgroups in their research— particularly bisexuals and racial/ethnic minorities—to conduct comparative analyses. We should consider community-based study designs that utilize other recruitment approaches, such as Respondent-Driven Sampling. We need to evaluate existing programs and seek better understanding of how current services can be refined to meet the needs of this population. Other issues to consider are secondary victimization, the identification of mechanisms associated with victimization, the role of risky alcohol use in experiences of violence, and long-term psychological consequences of violent victimization among sexual minorities. Finally, we need to identify, develop and test intervention and prevention programs to reduce violent victimization incidents among LGBTs.

Research on Victimization Among People with Disabilities— Angela Browne, VERA Institute of Justice (View slides)

Definitions of disabilities vary. For purposes of this presentation, disabilities include: a physical, mental or health impairment that substantially limits one or more major life activities of an individual; a record of such impairment; or being regarded as having such an impairment. Approximately one in five Americans has some type of disability (Brault, M., Americans with Disabilities, 2010; 2012). Disabilities include cognitive, physical, sensory and psychiatric impairments. Each disability type has unique victimization risk factors, reporting challenges and research considerations.

The voices of people with disabilities are often silenced; they have few channels to report victimization, they may not label what is happening as victimization, and the perpetrators may be people they depend on for care, housing or survival. Rates of victimization are very high (62 per 1,000 individuals with disabilities vs. 25 per 1,000 non-disabled individuals), while access to informed help sources is often very limited.

Current literature suggests that women with disabilities experience sexual assaults that are more severe, involving more types of assault by more perpetrators over a longer period. There has been little research on men. Moreover, victimization may also take nonviolent forms, such as controlling access to or breaking the victim's adaptive or assistive equipment and withholding medication or food. In addition to the challenges victims face in reporting these offenses, individuals with disabilities may appear to be easy targets, unable to protect themselves, and have often been taught to be compliant from an early age. Although this is usually intended to help them cope with daily life, it increases their vulnerability to abuse. They also may be viewed as less credible by

authorities and thus discounted. Perpetrators may be persons the victim relies on for care, housing and survival, and persons they are near regularly (e.g., family members; intimate partners; personal care attendants; program or hospital staff; transportation providers; other clients, consumers, or patients at care providers' homes or hospitals.

Factors contributing to reluctance to report among people with disabilities include: concern about not being believed or seen as credible; concern that a 'disability' label might be used against them; concern that their disability will be made public or be made a matter of public record; concern about retaliation by caregivers; concern that they will be institutionalized; and concern that they will be referred to Adult Protective Services.

Study design instruments must be accessible and effective (i.e., they should use simplified language and offer accommodations or modifications for deaf participants.) Furthermore, they should capture unique realities, risks and considerations, including types of abuse that may be unique to certain types of disabilities. Caregiver abuse should be recognized as a form of domestic violence. When collecting data, researchers should be sensitive to the location and presence of potential perpetrators and should use caution regarding using proxy respondents (e.g., family members, caregivers) to respond for the participant, since proxies might underreport due to lack of knowledge that the individual has been victimized or because they are the perpetrator. Research considerations vary by disability type. Other issues include sampling, study design and data collection, informed consent, interview location (accessible and neutral), confidentiality (staff, interpreters, helpers, and contacts), instrument challenges (accessible, interpretable), and interviewer mandate to report (which varies by state).

Estimates of the number of people with disabilities in the United States vary widely. Reasons include lack of standardized definitions and the fact that some individuals may not identify as having a disability. People with a disability are sometimes hard to reach through traditional random sampling techniques such as phone, mail, or door-to-door sampling, and studies have depended largely on convenience samples and care providers. Surveys often do not ask specifically about disability status, or they do ask but combine types of disabilities, masking information on risks for different disability types.

Informed consent requires a form written in simplified language that eliminates repetition, to reduce confusion and difficulty for interpreters and for respondents who are deaf. (In sign language, repeated information is treated as new information.) Depending on the range of disabilities among the respondents, the consent form may also need to be accompanied by a built-in, non-insulting competency assessment. Some states require researchers to file reports of abuse if violence is disclosed during interviews, and participants should be made aware of this possibility before the interview begins. (See www.rainn.org for maps at state level for this requirement.)

Discussion: Identification of Research Issues, Questions and Gaps—Bethany Backes, NIJ

Offenders
- Frequent offenders have multiple motivations, and researchers could categorize that.
- We need data on the motivations and childhood experiences of perpetrators.

Victims
- Multiple characteristics (e.g., having a disability and self-identifying as LGBT) may make people more vulnerable.
- The Vera [Institute] study does not include a study of details of the actual sexual assault; it only verifies that a violent sexual incident occurred. It also does not collect data on nonphysical abuse such as financial abuse.
- We need to study the declination rates of these kinds of cases (victims with disabilities). Case file records across studies indicate that, in most jurisdictions, very few cases proceed to indictment or trial.
- In addition to the observation that very few cases proceed to indictment or trial, another challenge is our capacity to believe the victim vs. our capacity to convince a jury of 12 to believe the victim.
- We need to think about the communities from which we collect data (e.g., the absence of hate crimes in a particular area does not necessarily imply tolerance.) Where minorities come forward, the police have come forward first. (This would be the District Attorney's Office.)
- The theme for special populations is underreporting to the police department. NIJ has a policing/criminal research division that perhaps could address this.
- Relevant issues are community trust and victim reporting to the police department.

Deafness
- For people in the deaf community, we need to consider how the primary communication mode is related; variation is tremendous—lip reading, sign language. Knowledge of deaf populations comes primarily from college settings (e.g., Gallaudet University in Washington, DC), where the deaf community does not consider deafness a disability.

- The first consideration is safety. We have to go to the communities themselves and get expert advice from them.

Consent/Assent in the Study of Disability
- To address consent vs. assent, Vera [Institute] investigators worked with advisors from the advocacy and service-provider communities.
- Another issue is the complex issue of guardianship. People who have guardians may be more likely to be victims; some guardians may also be the perpetrators. This must be considered in revealing the purpose of a study (e.g., to learn more about physical or sexual violence or other forms of abuse) to guardians and asking their permission for the potential respondent to participate in the study.
- People have a range of disabilities with a range of severity. In the Vera study, the competency assessment is built in to the consent process but is framed as making sure the interviewer has clearly explained the study.
- The advantage of not interviewing subjects in the place they usually spend their time is that it reduces the risk that they might be at the site of victimization or near the perpetrator. A timed option, which is informal, can be offered if they change their mind.

LGBT
- Obtaining consent for LGBT youth is a challenge if they are not "out," as they may be outed in the process of reporting.
- The LGBT population is missed in broader studies. Researchers put these individuals at risk unless they can finds ways to not out them. They want to tell their story, and often researchers are the only people they can talk to.
- As for LGBT populations and domestic violence, having a police liaison was valued in the community. However, we need to be careful; we need police (or other officials) who are sensitive to the issue, although not necessarily of the same group (e.g., LGBT, women).
- Some things are age-related: victimization of individuals in the mid-20s to 30s often involves alcohol; for young children, it is runaways; for older people, domestic violence. But these crimes are not only age-related; they involve ethnicity and sexual identification as well.

Mental Health
- Many police departments develop strategies to train officers to interact with and engage people with mental health problems, but these strategies have not been evaluated. In some places they send a mental health practitioner with the officer.

- There are Web-based technology aids for training and interventions, such as prevention for firefighters and training courses using mental health practitioners who work with these people. If we can't get resources to the victims, technology may help because most people today have internet access or smart phones.

Services/Research Intersection
- All work is community based, but some agencies and communities have no clue about what goes into research. We need to educate them on the meaning of "variable," "logic model," etc., at the macro-level. During these training discussions we can talk about relevance, importance and process.
- When working with a program, you're helping program recipients as you carry out your research. Results can then be co-presented to other community-based programs.
- There are also structural impediments and regional challenges.
- A challenge with community partnership is that they see evaluation as a way to prove their program works rather than a way to determine what works and what doesn't.
- NIJ is funding research in practitioner partnerships; researchers and practitioners need to collaborate and interpret each other's material, so there is a translational side. We also need large-scale partnership projects. We need to help people to not be scared of research. A large evaluator piece is tied to funding.
- Additional areas in need of research include:
  o Substance abuse and disability ;
  o Chronically homeless adults, a third are veterans who are reluctant to seek assistance;
  o Mental health that is either a cause or a consequence of victimization;
  o Muslims, Sikhs, and Middle Easterners, who have experienced an increase in hate crimes since 9/11;
  o Racial hoaxes, where people blame a particular crime on a race; and
  o Mass tragedies. (Currently, we only do after-incident reports and reports on the impact on the community.)

Recap and Plans for Day 2—Dara Blachman-Demner, NIJ

We discussed three of the four areas of focus—race, victim–offenders and special populations. On day 2 we will discuss victim services, and then participants will join break-out groups for deeper discussion of the four areas. We want to identify priorities, overlaps and common themes.

The day's sessions were adjourned at 4:20 p.m.

December 3, 2014

Recap of Day 1and Review of Today's Agenda—Nadine Frederique, NIJ

Dr. Frederique opened the meeting at 9:04 a.m.

Angela Moore, Division Director at NIJ, gave more detail on NIJ's Policing Portfolio; Brett Chapman and Eric Martin (not present) manage this research. The Justice System Division spans the gamut from policing to reentry, including police response to crimes, police interaction with victims, and how police are viewed by the citizenry. The division does a little work with the Office of Victims of Crime, trying to enhance police response and how they treat victims. But it is an across-the-board response; it is not focused on victims *per se*. The goal for the police department is to treat everyone with respect. Recently, body-worn cameras were introduced, and we want information on response to that.

Discussion
- We have two issues: victims, and police working with victims. The most important tool the police department has is information, which they get from people in crisis. There is little in the way of looking at people as a tool of the trade, and how they relate to them.
- Recanting would be addressed by the Victimization Division—it's more about the victim than the police, although they could work on police understanding. We need to make police understanding primary to our work.
- Regarding body cameras: Once turned off, the contents must be transferred to the prosecutor's office by disk or electronically, but in a format they can use to review the contents and include it in case material. Identification and control of the information are among issues to be considered.
- Russell Strand has done a massive amount of work on training. There is a division between training and research, but there are some areas of training that could be worthwhile to explore.

The State of Victim Services Research—Bruce Taylor, NORC at the University of Chicago (View slides)

Since the 1980s, studies have looked at who victim providers serve, and the efficacy of victim services (i.e., whether services reduce violence and increase adjustment). Some of the early work was broad and covered a variety of crime victim types. With funding later

focusing on intimate partner violence (IPV), a fair amount of the research on victim services shifted to mainly IPV victims. This presentation will focus on two main areas: research on who victim service providers (VSP) and informal networks are reaching and whether they are addressing the main stated needs of crime victims; and research on the effectiveness of victim services on outcomes such as reductions in victimizations, satisfaction with services, and quality-of-life outcomes.

To begin with, there are some definitional issues to discuss. First, who is a victim? Must victimization involve violation of criminal law? Does psychological abuse qualify? The legal definition of a crime victim serves as the gatekeeper to rights and service provisions. Second, which types of victims should be studied? Currently, it is mainly domestic violence and sexual assault victims.

Decisions also have to be made on what counts as a victim service. Services could be formal or informal; system-based (justice, health, mental health), community-based, or faith-based. Services can be provided by agencies and groups whose principle function is to serve crime victims, or by groups (e.g., hospitals) whose main function is something else and who provide victim services as an add-on. Research is needed in areas such as emotional support and listening, safety services, professional therapy, criminal justice advocacy, and individual needs assessment. We also need to know the extent to which victims need help navigating the criminal justice system (e.g., getting case information, understanding case handling, going to criminal justice appointments) or need practical assistance (e.g., help getting to doctor appointments).

What do we know from the extant literature on victim services?

First, we know from studies in the 1970s, 80s and 90s that few crime victims use formal victim services. Based on NCVS data from 1993 to 2009, only 9 percent of victims used services provided by government- or privately funded VSPs. Victims have multiple needs but only a small percentage receive help from VSPs. Many victims do not seek services because they are not aware of their availability. Many victims reported relying on personal networks for assistance. Researchers have also found a somewhat higher use of victim services is reported by crime victims who have involvement in the criminal justice system, and that even crime victims with psychological symptoms are reluctant or delay treatment for assistance with issues associated with their victimization. In a general population study, Norris and colleagues (1990) found that only 12 percent of crime victims contacted mental health professionals within 3 months of the crime, but violent crime victims who were repeat victims and crime victims with depression were more likely to seek treatment. They also found that sexual assault victims were most likely to use victim services (50 percent), followed by 22 percent of physical assault victims, 16

percent of homicide survivors, 14 percent of burglary victims and 4 percent of robbery victims.

Research based on National Crime Victimization Survey (NCVS) data is helpful for determining who receives victim services. NCVS data indicate that those receiving victim services are more likely to report their crime to the police, more likely to be female, and more likely to have experienced serious violent crime. Also, victims in rural areas are more likely to receive services. Based on NCVS data, reporting to the police increased the odds of seeking services by three times. However, we still need to uncover the mechanisms that explain police involvement in linking victims to services.

Research has also identified a number of important subgroup of victims that are underserved. Young men of color are most likely to be victimized by violent crime but few receive services. There are few services for non-domestic violence and nonsexual assault victims, and for victims who identify as LGBT, are members of various racial/ethnic minority groups, who have mental health or substance abuse issues, or who have disabilities.

Furthermore, there is conflict between the services provided and what victims need. Victims who do reach VSPs often have multiple needs addressed. For example, domestic violence victims at shelters are also likely to receive individual and group counseling, legal services, case management, child care, life and career skills, transportation, medical care, and/or financial assistance. Back in 1990, Davis and Henley noted a mismatch for kinds of assistance offered by VSPs and the needs of victims. The most prevalent needs of victims are practical in nature (e.g., better locks), but these are the services least likely to be offered by VSPs. Still to this day, there is very little data on the efficacy of VSP programs on victims and whether services match their needs. Theoretically important variables are often unmeasured (e.g., economic and emotional dependence, social and cultural factors), and this holds back research on predictors of reporting behavior.

There are important gaps in our knowledge of the services provided by informal sources to victims. We need to know more about the number of victims who get informal help by crime type and their characteristics, the types of informal help provided, the extent the help or aid affects the recovery process, and how providing aid to victims affects the helpers emotionally and financially.

There are significant gaps in our understanding of predictors and barriers to help-seeking and service use by victims. In 2010, McCart and colleagues used Andersen's (1995) model to review three main determinants of help-seeking that will be important for researchers to explore:

- Predisposing characteristics. Individual-level factors (e.g., age, gender, ethnicity, education, socioeconomics, marital status) influence help seeking.
- Enabling resources. Factors at the individual- and community-level that can either facilitate or impede service use (e.g., insurance coverage, transportation, social support, service awareness).
- Needs. An individual's subjective perception of need or an evaluative need provided by a professional.

The research designs used in victim services research are also of low rigor. Typical evaluation designs for victim service program research are generally low quality—data collected at a single point in time; small, nonrandom samples of victims; and no comparisons of served vs. non-served, or of victims' situation before and after receipt of services. There are few evaluations; not until 2001 did victim service programs' funders start requiring evaluations. Few randomized clinical trials (RCT) and quasi-experiments have been done. Research on whether victim service programs improve outcomes for victims is generally inconclusive and mixed for a variety of victim service outcomes (e.g., victim safety, psychological well-being, victim satisfaction. However, there has been some promising work in coordinated community responses to violence and therapies for certain child and adult crime victims.

Generally, with one major exception, we do not have strong data to address the question of whether or not victim services improve outcomes for victims. One of the most researched victim services is second responder programs—home visits by a crisis response team following up on an initial police response to domestic violence. A meta-analysis of the best eight studies (five RCTs and three quasi-experiments) on this intervention was done by Davis, Weisburd, and Taylor in 2008. This team detected a small positive effect for increased police complaints and reports of domestic violence and abuse to police for those receiving the second responder program compared to the control group. However, this team found no effect on actual domestic violence and abuse based on self-reported victim surveys.

We have few data on how to optimize and structure delivery of victim services, although there is some evidence that coordinated service leads to improved victim satisfaction. Recent developments in using technological communication advances are being used to address barriers. Some internet-based programs for trauma-exposed victims (e.g., interactive psycho-educational modules; multiple-week, therapist-assisted treatment programs) are promising, but they need follow-up.

Costs are the least-studied aspect of victim services, individually and programmatically. Based on national survey data collected by Cohen and Miller in 1994 from mental health

staff, crime victims obtaining treatment made up 20–25 percent of client populations and over $8 billion in services, with fatal crime, rape and child abuse cases involving even higher costs. Also, cost, services offered, and their evaluation are currently being addressed by BJS's current national survey on VSPs.

Some of the key lessons learned from this literature are that most victims neither report to authorities nor seek needed health care services. Beyond these facts, however, much remains to be learned. We know there are multiple barriers to reporting and to service utilization, but we have few data on what victims need to navigate the criminal justice system to overcome these barriers. Most research on the use of victim services is based on small samples that are not generalizable, and therefore may not be applicable to other regions. For example, in 2009, there was a review of 18 intervention studies for victims of intimate partner violence; only 3 qualified as rigorous research. Most research has been done on female victims of sexual assault or domestic violence. We need more research on male crime victims and other forms of violent crime (e.g., physical assaults, robberies) to help place our existing knowledge in better context, and which might further elucidate predictors of, and barriers to, reporting and help seeking. We also have good data to suggest that young men of color are most likely to be victimized by violent crime, but few receive services. Research also suggests that there are fewer services for non-domestic violence and non-sexual assault victims. Today every state has at least some programs available to victims, but we lack "compiled information about the current capacity of service providers, including data on their current funding sources, staff and management expertise and diversity, use of technology, and other indicators of organizational capacity" (National Center for Victims of Crime, 2011, p. 8). Overall, we lack a clear picture of the most basic components of victim services efforts (e.g., how victims come to VSPs, funding, costs of running VSPs, services offered/used, outcomes for victims using services), and without such knowledge, it will be very difficult to move the field forward.

Discussion: Identification of Research Issues, Questions and Gaps—Bethany Backes, NIJ

Research Gaps and Questions
- NIJ has an ongoing OVC-funded evaluation project to examine wraparound legal services for crime victims in six different jurisdictions.
- The first problem is that researchers are not well-funded and are not interested in understanding the complexities of how a service is provided. Service providers are busy providing and don't have time to conduct research. Many victim services

are not trauma-related but address practical issues such as job skills or building and rebuilding self-esteem.

- Another issue is the effect on victims of forensic science, cold-cases, innocence projects, and jury expectations in the way of forensic science. Studying these issues has to be multidisciplinary.
- Victim agencies are hesitant to go to evidence-based practice; much training is needed to convince them of its importance.
- The impact of case declination—can we prove this to a jury vs. "did this happen to you?"
- The use of technology is growing exponentially.
- We don't know the research questions because we don't know the outcomes we are aiming for. What is the ultimate goal of victim services? Victim services cut such a wide swath; each service may have different outcomes and objectives. The field has not defined research questions. For example, is the goal to end domestic violence, or for victims to understand their options to become more safe? Maybe we need to study multiple research questions and discuss outcomes starting with what victims need.
- Researchers must work closely with providers, but they often don't speak the same language.
- Our data are old. Much research dates from the early 1990s. Cost estimates come from work done in 1982 and 1983, and many things have changed since then, including post-9/11 experiences. Technological advances are important for funders, and part of that is prioritization.

Victim Services
- VSPs are flexible in applying funding streams to provide services for the individuals who come in the door. These workers have an underappreciated skill, which we should learn more about.
- In some cases, VSPs may only be able to provide one type of service, which may or may not fit the needs of all victims.
- We have to move past victim satisfaction as an outcome measure. We need to look at issues such as future employment and housing. However, research doesn't capture that. What additional measures are needed to capture that?
- We begin with a baseline assumption of efficacy, that what the VSP is doing is effective; this creates a barrier. The word has to get out that we do not have hard evidence to back up what we are doing.
- Dynamics differ between long-term crisis therapy and getting the locks fixed.

- Many victims don't report crimes because of complicit internal behavior (e.g., the streetwalker who gets mugged is not likely to report the mugging). Research may explain why they do not report.

Randomized Clinical Trials
- RCTs require negotiations to be undertaken and they require much education of providers. Providers tend to think you're taking something away from the victim; therefore, treatments look very similar to controls. RCTs have value but there are other good options too.
- There is now push-back against use of RCT as the gold standard, even in the field of health. We did not need one to know that sanitation is beneficial.
- It is not design issues that are not holding us back; it is the absence of research.

Research Methods
- Now we have evidence-based ignorance, and that's the exposed part of the iceberg. We are not looking at non-reporting. We don't know what it means for a program to work other than asking the victim. Individual programs at the state level have tried to define outcomes, but they are based on victims' beliefs.
- To measure the effect of services on women, these investigators found a proxy: They counted the number of social service workers and police officers per capita in the metropolitan area and compared those with the incidence of reported IPV. Places with more social service workers and police officers had lower rates of IPV.
- There are so many differences across places, in terms of what people are doing, that it is hard to compare. However, people doing anything is better than not. We should not confine ourselves to the micro-level. Something is going on—how do we get at it?
- We don't always have to do experiments if the effect is large. In this area we do experiments and find small or negative effects (e.g., more victim services lead to more violence). We need macro-level experimental data, but there are so many variations about what's going on. No statistical model allows for this much variation, but we can find out if the presence of more police officers reduce crime. As in physical health, even though effects are small, we do many things to retain health. The effects of duress were found to have a huge effect. The rigor of the design helps uncover the large effect that gets covered by all the other things people are doing. It calls for continuous evaluation.

- Design methods are impeding the research; that is why research in certain areas is absent *(*e.g., how to ask questions—there are provider questions and research questions).
- We need a consistent, methodical way to conduct research. How many interventions are designed to address risk factors that have been modified by input from providers and victims?
- Focus on the kind of victim creates another silo. The victim needs service now, and we have to figure out how to get around that impediment.
- There is an emphasis on quantitative methods to the exclusion of qualitative field research, but, for example, we cannot get at race issues with quantitative research.
- We can get data with laptops while victims are waiting for services and can include qualitative information with the quantitative data.
- Research staff is a critical problem. We need to start with generalists who then specialize (as in the medical world). We have to ask victims, but that cannot be our only criterion.

Criminal Justice System
- Some perceive a criminal justice bias in victim services, which can create problems. Criminal justice goals are penalogical services.
- Several service providers balk at the term "crime" victim when they mean financial abuse, protective orders or fraud victims. They think only in terms of services, not crime. For criminal justice, victim service is keeping victims notified of the proceedings.

Access to Services
- Finding services is important for the victim, but it is often quite challenging to figure out where to go for the appropriate service. We need research to find out how to increase awareness to utilize existing services more efficiently—traditional media vs. newer tools, minority vs. majority populations.
- Do services work for existing programs? Health-seeking options are nonexistent unless they fit into the categories being studied—sexual assault, domestic violence, etc. Other kinds of victimization are ignored. Also, the language is not the same. We need to keep the scope broad in terms of services availability.
- Victims are so different from each other and their needs are similarly different. We don't ask them about the efficacy of the service in a way that gives us useable data. There is often a disconnect between what the victims need and what service providers think they need. We could have blocks of types of needs; then, have some service providers say what they think they need and compare that with what

victims say they need. We have to listen to what victims say. If you ask, they will tell you. But questions have to be asked in a standardized way to produce useable data.

People with Disabilities
- About one in five people in the United States has a disability. For domestic violence, the cutting edge is that people with disabilities be explicitly included in everything to do with domestic violence, whether they live in a group home or a facility. People with disabilities should be included in the mission statement, in practical issues, and in capacity issues. Often, the underserved are not mentioned anywhere. Most handicapped people who are abused are abused by people they know well.

Compensation
- The most recent research on victim compensation for tangible losses was done in the 1980s. We don't know whether victims know about the possibility of compensation.
- A secondary resource is restitution, but that requires receipt of costs before a judge will order it. If imposed, the funds are generally transferred to a different office, such as the Probation Office. Victim services could be helpful in working with the Probation Office to be sure the victim receives the money.
- We have dealt with traditional victims, but crime is evolving and changing. (For instance, a New England state with pharmaceutical companies looked at the companies' sale of harmful drugs as health care fraud, but they will file criminal charges for people who have suffered serious effects from using the drugs. Compensation board insurance is now dealing with that [the company went out of business].) There is huge inequity in compensation, state by state, and there are still so many limitations in available services depending on where you live in this country.
- Research suggests that restitution is not always imposed, even when restitution is statutorily mandated. Moreover, even when imposed, full restitution is paid in less than half of all cases.

Break-out Groups

Participants broke into groups to discuss the following topics:

- Race and victimization;

- Victim-offender overlap;
- Special populations; and
- Victim services

Report Out: Prioritization of Research Issues, Questions and Gaps—Dara Blachman-Demner, NIJ

Victim-Offender Overlap

1. Foster research on measurement issues, including measurement of items and structure of questions. Concerning conflicts and situational issues, without proper measurements, what are we analyzing?
2. Funding streams that allow researchers to locate data sources are not easy to find, (e.g., data gathered several years ago on adolescents).
3. Locate early childhood data to identify family process precursors. This would allow us to develop life-course chronology of victim-offenders and conflicts in general. The way children are taught to resolve conflicts is manifested in adolescence and afterward.
4. Do a better job of promoting research that integrates substantive research on intimate partner violence and its methods.
5. Fund research on disputes (including nonviolent ones), the evolution of conflict, the relationship between offending and victimization, social networks, and social resources.
6. Incorporate in research new technologies to document incidents, and apps on phones; this relates to measurement. We tend to be foggy about temporal relationships between one event and another. And we need to resolve etiology.
7. Fund development of interventions that rely on institutionalized populations or those in schools. That way, we can convey to people actively involved that there may be unfortunate outcomes if they continue what they are doing. It would involve mechanisms to resolve conflicts without violence, would involve parents, and would involve evaluation.
8. Focus on contextual mechanics that may moderate the relationship between victim and offender. Focus on: history and timing (whether something has changed over time), contemporary American violence trends, rural/urban differences, and school settings.
9. More work on gender differences in victim–offender overlap. It has been a male-focused line of research and we have generalized too much from that line of research.

Race and Victimization

1. Context, both social and cultural, of victimization. We talk about race, but what does that mean? The issue of race in terms of cultural trauma. We should gain a fundamental grounding in understanding, build from that, and develop different models.
2. Victimization theories at micro- and macro-level. We need a guide to have more focused research. We need to know what exists; such a document would be helpful.
3. Racial stereotypical attribution and victimization. How do stereotypes play into victimization and how can we change stereotypes?
4. We need offender data. Currently, we only gather data and information from victims.
5. We should be clear whom we are talking about (e.g., using "ethnicity" when you mean "Hispanic").
6. Variations by client types.

Special Populations

1. Special populations are those that are unique in some way relevant to the operation of the criminal justice system. One approach to thinking about them is in terms of statistical interaction: a procedure or practice that is effective for most citizens is ineffective or harmful for a particular group of people. For example, general police practices for interviewing may be counterproductive for the mentally ill; victim services may be ineffective for some groups (e.g., LGBT teenagers) for whom services might mean being identified, when they do not want their identity to be known.
2. Which populations? Physically or mentally disabled, LBGT, homeless, veterans, Middle Easterners, Muslims?
3. Males are usually considered as offenders, but we need to also consider them as victims.
4. Risk of victimization—factors that cause victimization and unique factors of these populations (e.g., victim literacy, health literacy). We need more descriptive information about crime.
5. Accessing services should be included in the report to the police department. Health-seeking could occur with friends or a mental health professional or by calling the police.
6. Police training to respond appropriately.
7. Community trust.
8. Interaction with the criminal justice system; bridges to policing.

9. Methods and ethical issues crosscut the way that researchers can study how different parts of the criminal justice system deal with special populations. For example, there are questions about sampling strategies that may be the only way that some groups can be studied, if those sampling strategies might make generalization difficult. Regarding ethics, special populations raise questions about whether individuals can give true consent—or even assent—if others (e.g., caretakers) may be affected by responses to questions.
10. Privacy implications of technology.
11. Violence risk, accessing systems—all are affected by methods.
12. Characterizing these types of victims.

Victim Services

1. Conduct a victim needs study. To what extent can services be aligned to that? Include victim compensation and informal services. Some 90 percent of victims do not get services, and we need more data on why.
2. Effectiveness research on victim services. We need to think broadly about outcomes. A way to get at that may be to talk to providers in addition to conducting a victim needs study.
3. Cost of service. It is hard to get people to provide continued funding if they don't know how much it costs. Also, the cost of victimization. We need cost/benefit analyses, including the cost of unaddressed victimization. It is important to understand the costs behind all this.
4. The role of restorative justice.
5. The role of the police. Why is it that people who contact the police are much more likely to seek services? The role of police officers as guides to services. Laws that mandate police to give information on services and the format in which it is given (e.g., is it more effective to use 8- x 11-inch paper or a three-fold brochure? We need to make the most of marketing technology (e.g., apps to notify people).
6. Increase the literature on poly-victimization and do not "silo" groups of victims. Do we need to develop victim services that respond to poly-victimization?
7. Non-traditional service providers. How and whether they reduce the effects of trauma.
8. Challenges include collecting data from victims, and hard-to-reach populations, which makes it expensive. Therefore, we may have to move incrementally.
9. Commitment to rigorous research and explicit recognition of this need.
10. Methods. Build on existing work such as the changes in NCVS, and explore the longitudinal nature of data and whether they are repeat victims.

11. The need for multiple approaches and multiple sources, not just RCTs (e.g., data collected locally, methods to deal with them.)
12. Needs and why services are accessed. Protective factors that appear or do not.

Common Themes

1. Different modes of presenting information—how best to frame information to be meaningful and to resonate with people. Use small experiments to get at this.
2. First we have to ask victims if they want services, rather than assuming they do. Research from California shows that large percentages of victims are totally unaware of the possibilities, so many never contact anyone who would ask them if they want services.
3. Methods approach—being deliberate about rolling out an agenda to look at race/ethnicity and services, but also victims' perception of services. Qualitative data that speak to that experience. Phase 1, gather data (that don't exist—how do we get the samples?). Phase 2, analyze.
4. Terminology. Crime vs. victimization. How is the term "victim" received by the public regarding marketing, funding and clients?
5. Cost could be thought about as a tax on the government when people are victimized, because they are not contributing and producing. That might be more than the cost of remediation.
6. Racial bias in victim services can sometimes be seen in victim compensation. It may require cooperation with the police in communities where some individuals may not trust the police. The assumption is that all victims need certain services, but some people are not identified as victims.
7. Develop foundational research in phases. Determine and identify characteristics of offenders as well as victims.
8. Common challenges: disaggregate the kinds of victimization. We may be talking about these problems at too high a level of aggregation to figure out how to do that. Context, poly-victimization, and overlap challenge how to do research. Maybe NIJ could seek tools for how to do it. Products that come from research have to go to various audiences—researchers, service providers, policymakers— which means terminology and delivery of products must be appropriate to each.
9. Victimization experiences for young, poor, urban, black and Hispanic males have implications for victim-offender overlap and VSPs. In the United States, this implies a discussion of gun violence (which was not brought up). Firearms are one dimension of this cluster of issues. We need incident characterization.

10. Continued support for interdisciplinary meetings (like this one) to discuss how to dissect, roll-out and publish this kind of research. This spills over to victim services.
11. Translation of research to practice. With all research, we must keep in mind its practical application of how we would use it in the field for different audiences.
12. What do you want to accomplish? The field must be ready for the answers in real time, and that may help in instances of retaliation.
13. What do court systems need to be more effective? Research should provide that, and it is being worked on in a translational study. Start with the end-users and what they need from the research. This policy applies across the board now.
14. We need expert witnesses on gender bias, racial bias, etc. One participant strongly encouraged others to consider this. One challenge is that the world researchers live in is different from the world of the court. We need to establish researcher/practice partnerships. We need to educate researchers so they can be effective witnesses. Jurors have to be able to interpret all information presented, so the expert witness is really a teacher on the stand.
15. Victims go through various impacts and needs at each stage of the criminal justice system process—declination, sentencing, parole, cold cases. Service providers must adapt and offer appropriate services.
16. Another issue is that not many cases get to trial. When we ask victims what they think they need, services are offered in a uniquely American framework. It is important to think outside the box. (For example, in Australia, where they have government-supported medical and psychiatric services, they work with restorative justice.)
17. Role of the community—both the role it plays and its potential role. Race/ethnicity, health-seeking, informal network. Young people are the most often victimized and the least likely to get services.
18. Macro-level factors—context; urban vs. rural.
19. Innovative use of technology (e.g., evaluation of interventions and data collection).
20. Methods, theory and how to bring these together as a community.
21. Applying for a solicitation requires 6–8 weeks for prospective researchers to get the necessary sign-offs to apply, so enough time must be allowed between notification of available grants and the application date.

Wrap-Up, Summary and Next Steps—Bethany Backes, NIJ

NIJ will be reaching out to participants about publications and input and will share meeting notes and presentations on the NIJ Web site (www.nij.gov). Ms. Backes was thankful for the various levels of expertise; practitioner perspective is essential to NIJ's research.

Adjournment

Ms. Backes adjourned the meeting at 3:00 p.m..

Participants

Irshad F. Altheimer
Associate Professor
Rochester Institute of Technology
Department of Criminal Justice
93 Lomb Memorial Drive
Eastman Hall, 2164
Rochester, NY 14623
Phone: 585-475-6299
Email: ixagcj@rit.edu

Mark T. Berg
Assistant Professor
University of Iowa
Department of Sociology
68 Sutherland Place
Iowa City, IA 52245
Phone: 314-775-8946
Email: mark-berg@uiowa.edu

Connie L. Best
Professor and Clinical Psychologist
Medical University of South Carolina
National Crime Victims Research and
Treatment Center
67 President St. MSC861
Charleston, SC 29425
Phone: 843-792-2945
Email: bestcl@musc.edu

Angela Browne
Senior Research Fellow
Vera Institute of Justice
1100 First St. N.E., Suite 950
Washington, DC 20002
Phone: 202-210-9910
Email: abrowne@vera.org

Steve Derene
Executive Director
National Association of VOCA Assistance
Administrators
5702 Old Sauk Road
Madison, WI 53705
Phone: 608-233-2245
Email: steve@navaa.org

Stephanie Frogge
Assistant Director
Institute for Restorative Justice and Restorative
Dialogue
The University of Texas at Austin
8901 Tina Court
Austin, TX 78758
Phone: 936-577-1072
Email: frogge@mail.utexas.edu

Meg Garvin
Executive Director and Professor of Law
National Crime Victim Law Institute
310 SW 4th Ave., Suite 540
Portland, OR 97204
Phone: 503-830-9472
Email: garvin@lclark.edu

Amy Hequembourg
Senior Research Scientist
Research Institute on Addictions
University at Buffalo
1021 Main St.
Buffalo, NY 14203
Phone: -716-598-4357
Email: ahequemb@ria.buffalo.edu

Susan Howley
Public Policy Director
National Center for Victims of Crime
2000 M St. N.W., Suite 480
Washington, DC 20036
Phone: 202-467-8722
Email: showley@ncvc.org

Catherine Kaukinen
Associate Professor
University of Colorado, Colorado Springs
1420 Austin Bluffs Parkway
Academic Offices Building, Suite 305
Colorado Springs, CO 80918
Phone: 719-235-2871
Email: catherine.kaukinen@uccs.edu

Janet L. Lauritsen
Curators' Professor
University of Missouri-St. Louis
Criminology and Criminal Justice
One University Blvd.
St. Louis, MO 63121
Phone: 314-516-5427
Email: janet_lauritsen@umsl.edu

Arthur J. Lurigio
Professor and Associate Dean
Loyola University
College of Arts and Sciences
1032 W. Sheridan Road
SC230
Chicago, IL 60660
Phone: 773-508-3503
Email: alurigi@luc.edu

Christopher D. Maxwell
Professor
Michigan State University
School of Criminal Justice
655 Auditorium Road
438 Backer Hall
East Lansing, MI 48824
Phone: 517-896-2709
cmaxwell@msu.edu

John F. McDevitt
Associate Dean
Northeastern University
7 Beaver Brook Road
Holliston, MA 01746
Phone: 617-314-3651
Email: j.mcdevitt@neu.edu

Callie M. Rennison
Associate Professor and Associate Dean
University of Colorado, Denver
1380 Lawrence St., Suite 500
Denver, CO 80204
Phone: 303-514-9306
Email: callie.rennison@ucdenver.edu

Lee E. Ross
Associate Professor of Criminal Justice
University of Central Florida
12805 Pegasus Blvd.
HPA1, Room 361
Orlando, FL 32816-1600
Phone: 407-823-0757
Email: lross@ucf.edu

Barry Ruback
Professor
Penn State University
Sociology Department
211 Oswald Tower
University Park, PA 16802
Phone: 814-865-1307
Email: bruback@psu.edu

Tanya L. Sharpe
Associate Professor
University of Maryland
School of Social Work
525 West Redwood St.
Baltimore, MD 21201
Phone: 410-706-3829
Email: tsharpe@ssw.umaryland.edu

Steven R. Siegel
Director, Special Programs Unit
Denver District Attorney's Office
201 West Colfax Ave.
Department 801
Denver, CO 80202
Phone: 720-913-9022
Email: srs@denverda.org

Bruce G. Taylor
Senior Fellow
NORC at the University of Chicago
Public Health
4350 East-West Highway, 8th Floor
Bethesda, MD 20814
Phone: 301-634-9512
Email: taylor-bruce@norc.org

Min Xie
Associate Professor
University of Maryland
Department of Criminology and Criminal
Justice
2220 LeFrak Hall
College Park, MD 20742
Phone: 301-405-7063
Email: mxie@umd.edu

Heather Zaykowski
Assistant Professor of Sociology
University of Massachusetts
100 Morrissey Blvd.
Boston, MA 02125-3393
Phone: 617-287-6254
Email: hzsjuhawkz@gmail.com

FEDERAL STAFF/CONTRACTORS

Bethany L. Backes
Social Science Analyst
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-305-4419
Email: bethany.backes@usdoj.gov

Dara R. Blachman-Demner
Social Science Analyst
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-514-9528
Email: dara.blachman-demner@usdoj.gov

Bethany Case
Victim Justice Program Specialist
Office for Victims of Crime
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-307-3336
Email: bethany.case@usdoj.gov

Christine R. Crossland
Senior Social Science Analyst
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 230531
Phone: 202-616-5166
Email: christine.crossland@usdoj.gov

Sarah A. DeGue
Behavioral Scientist
Centers for Disease Control and Prevention
Division of Violence Prevention
4770 Buford Highway, MS-64
Atlanta, GA 30030
Phone: 770-870-4235
Email: sdegue@cdc.gov

Lisa Fedina
Graduate Research Assistant
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-305-9838
Email: lisa.fedina@ojp.usdoj.gov

Nadine Frederique
Social Science Analyst
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-514-8777
Email: nadine.frederique@usdoj.gov

Joye E. Frost
Director
U.S. Department of Justice
Office for Victims of Crime
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-305-1715
Email: joye.frost@usdoj.gov

Jennifer Holmes
Graduate Research Assistant
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-353-8410
Email: jennifer.holmes@ojp.usdoj.gov

Seri Irazola
Director, Office of Research and
Evaluation
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-616-0685
Email: seri.irazola@usdoj.gov

Lynn Langton
Statistician
Bureau of Justice Statistics
810 Seventh St. N.W.
Washington, DC 20001
Phone: 202-353-3328
Email: lynn.langton@usdoj.gov

Angela M. Moore
Division Director
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-307-0145
Email: angela.moore.parmley@usdoj.gov

Carrie Mulford
Social Science Analyst
National Institute of justice
810 Seventh St. N.W.
Washington, DC, 20531
Phone: 202-307-2959
Email: carrie.mulford@usdoj.gov

John T. Picarelli
Division Director
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20001
Phone: 202-307-3213
Email: john.picarelli@usdoj.gov

Michael Planty
Chief, Victimization Unit
Bureau of Justice Statistics
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-514-9746
Email: michael.planty@usdoj.gov

Marilyn Roberts
Deputy Director
Office of Justice Programs
Office for Victims of Crime
810 7th St. N.W., 8th Floor
Washington, DC 20531
Phone: 202-616-9055
Email: marilyn.roberts@usdoj.gov

Howard Spivak
Deputy Director and Chief of Staff
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-616-1702
Email: howard.spivak@ojp.usdoj.gov

Phelan Wyrick
Division Director
National Institute of Justice
810 Seventh St. N.W.
Washington, DC 20531
Phone: 202-353-9254
Email: phelan.wyrick@usdoj.gov

Appendix: Slide Presentations and White Paper

NIJ's Program of Research on Violent Victimization: History and Next Steps, Dara R. Blachman-Demner, Social Science Analyst, NIJ

Violent Victimization in the United States: Major Issues and Trends, Arthur J. Lurigio, Ph.D.

Reappraising Research on the Victim Offender-Offender Overlap, Mark T. Berg, Ph. D.

Race and Violent Victimization, Tanya L. Sharpe, MSW, Ph.D. Victimization Among Special Populations: Sexual Minorities/LGBTs, Amy Hequembourg, Ph. D.

Research on Victimization Among People With Disabilities, Angela Browne, Ph.D.

The State of Victim Services Research, Bruce G. Taylor, Ph.D.

Paper: Violent Victimization in the United States: Major Issues and Trends, Arthur J. Lurigio, Ph.D.

NIJ's Program of Research on Violent Victimization: History and Next Steps

Bethany L. Backes
Social Science Analyst

Dara Blachman-Demner
Social Science Analyst

Nadine Frederique
Social Science Analyst

Technical Working Group Meeting on Violent Victimization Research
December 2-3, 2014
Washington, DC

NIJ

What is NIJ?

- Research, development, and evaluation arm of USDOJ

- Nation's leader in scientific research on crime and justice

- The National Institute of Justice is dedicated to:

    - Improving knowledge and understanding of crime and justice issues through science.

    - Providing objective and independent knowledge and tools to reduce crime and promote justice, particularly at the state and local levels.

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Terminology for this Meeting

- Violent crime
  - Person is harmed or threatened with violence
  - Rape, sexual assault, robbery, assault, homicide

- Research that strives to understand and reduce occurrence and impact of these crimes
  - How and when they occur
  - Consequences and victim impact

- Primary focus on adults
  - Emphasis on young adults

NIJ'S RESEARCH PROGRAM ON VIOLENT VICTIMIZATION

Historical Overview

- Varied projects since 2000 on victimization and victim-offender overlap

- Majority are OVC funded evaluations on victim-specific programs, services, or policies

- Early funded work did begin to examine the overlap of criminality and violent victimization

- Since FY2012 have made an effort to make violent victimization more prominent in calls for proposals

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Complementary Research Portfolios

- Children Exposed to Violence

- Violence Against Women (IPV, Sexual Violence, Dating Violence, Stalking)

- Gang Violence

- Crime Prevention

- Hate Crimes

- Trafficking in Persons

- Elder Abuse & Neglect

Program Status

- FY 2012
  - Race and Victimization Solicitation
  - Victim-Offender Overlap Solicitation
- FY 2013
  - Research on Violent Victimization Solicitation
    - Race, ethnicity, culture
    - Victim services
    - Victim/offender overlap
    - Sexual orientation and gender identity

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Ongoing Research Projects

- Program Evaluation of Vision 21 efforts
  - 2012: Wraparound Victim Legal Assistance Network
  - 2014: Systems of Care for Children
- Victim-offender Overlap
  - 2012: Situational factors and the victim/offender overlap
- Race and Victimization
  - 2012: The changing geography of American immigration and its effects on violent victimization
- General victimization
  - 2013: Person or place? A contextual, event history analysis of homicide risk

Ongoing Research Projects (cont.)

- Data Resources Program
  - Studies using NCVS and other secondary datasets to examine victimization issues
- W.E.B. DuBois Fellows
  - 2014: Enhancing knowledge of dispute-related violence
  - 2014: Victimization and fear of crime among Arab Americans in metro-Detroit
- Graduate Research Fellows
  - 2014:The age-graded consequences of victimization

Interagency Coordination

- Bureau of Justice Statistics
  - Crime Victim Services Survey
  - National Crime Victimization Survey

- Office for Victims of Crime
  - Vision 21
  - Program and Policy Evaluation
  - Crime Victim Services Survey

Future Plans

- Creation of a sustainable program through regular calls for proposals and other intramural and extramural research activities

- Continued and enhanced coordination with OVC, BJS, CDC, and other identified research agencies

- Continued input from the field through workshops, web-based forums, and white papers

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This Meeting: Purpose Statement

"The objective of the technical working group is to bring together stakeholders from a variety of research, practice, and policy settings focused on violent victimization and form the foundation for NIJ's development of intensive research on the populations that are most at risk for victimization and the system responses to victimization."

This Meeting: Additional Goals

- Critical to the development of a strategic plan to support research in the field of violent victimization

- Four major areas of interest identified but that is only a starting point

- Assess for common themes and overlap across topics in the field of violent victimization

Your Role…Is IMPORTANT!

- Identify major areas of interest to the field and the readiness of topics for research and evaluation

- Assist in prioritizing key research areas within content specific topics

- Provide information on emerging challenges and innovation regarding research methods

- Highlight key issues related to dissemination, translation, and practitioner engagement with research in this field

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Outline for the Meeting

- Background and context presentation
  - *Arthur Lurigio,* highlights from working paper in progress

- Brief presentation followed by full group discussion of each of the four topic areas

- Break outs: small group discussion in one of four topic areas

- Large group summary, wrap up and next steps

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Violent Victimization in the United States: Major Issues and Trends

Arthur J. Lurigio, Ph.D.

Professor and Faculty Scholar

Senior Associate Dean

College of Arts and Sciences

Loyola University Chicago

National Institute of Justice

December 3, 2014

Backdrop

- **Criminal victimization is common in the United States.**

- **Crime touches the lives of most residents of the country directly or indirectly.**

- **Violent victimization rates consistently reflect an over-representation among victims and offenders of youth, minorities, and the most impoverished residents of urban areas.**

Current Presentation

- **Measurement of Crime**

- **Crime Trends**

- **Victim Characteristics**

- **Cost of Crime**

- **Crime Victims' Movement**

- **Crime Victims' Services and Programs**

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Measuring Violent Victimization

- **Primarily measured and reported through the Uniform Crime Report program (UCR) and the National Crime Victimization Survey (NCVS)**

- **Sources of data on violent victimizations also can be found in other databases:**

➢ **National Vital Statistics System, Fatal Injury Reports**

➢ **National Intimate Partner and Sexual Violence Survey**

➢ **National Violent Death Reporting System**

Uniform Crime Report (UCR)

Crimes reported to or discovered by the police

- **Violent Offenses:** Murder, forcible rape, robbery, and aggravated assault

➢ **Murder:** The willful (non-negligent) killing of one human being by another

➢ **Forcible Rape:** Penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim

UCR (cont.)

➢ **<u>Robbery</u>: The taking of anything of value from a person or persons by force or threat of force**

➢ **<u>Aggravated Assault</u>: The unlawful attack by a person upon another for the purpose of inflicting severe or aggravated bodily injury**

Limitations of UCR

- **Only "official" crime data**

- **Only the most serious crime in a multiple-crime incident (hierarchy rule)**

- **Purposeful downgrading of crime**

- **Sometimes less than a full-year's worth of data is available from a jurisdiction (under-submission)**

National Crime Victimization Survey (NCVS)

<u>Offenses that do and do not come to the attention of the police</u>

- **Approximately 90,000 household and 160,000 individual interviews (aged 12 and older)**

- **The impact of crime and the characteristics of offenders**

NCVS (cont.)

- **Useful in understanding why victims fail to report crimes to the police**

- **Sheds light on the interactions and relationships between victims and offenders as well as differences over time and place (e.g., rural, suburban, urban settings).**

Limitations of NCVS

- **Relies on a national sample of households**

- **Respondent errors:**

➢ **Memory Decay**

➢ **"Telescoping"**

➢ **Fear of Retaliation (non-reporting)**

➢ **Defining incident as a "non-crime"**

Victimization 2012: UCR

- 1,214,462 violent crimes were reported/recorded (387 violent crimes per 100,000 residents)

➢ **Aggravated Assault (63%)**

➢ **Robbery (29%)**

➢ **Forcible Rape (7%)**

➢ **Murder (1%)**

Victimization Trends: UCR

- **Violent crime rate has consistently declined for the past 20 years.**

- **From 1993 to 2002, declined 34%**

- **From 2003 to 2012, declined 19%**

- **From 1993 to 2012, declined 48%**

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Victimization 2012: NCVS

- **6,842,590 violent victimizations (2,610 violent victimizations per 100,000 residents)**

- ➢ **Sexual Assault**

- ➢ **Robbery**

- ➢ **Non-Sexual Assault (Simple and Aggravated)**

Victimization Trends: NCVS

- **The violent victimization rate peaked in 1981 and again in 1993.**

- **From 1994 to 2001, the violent crime rate declined 48%.**

- **From 2004 to 2013, the violent crime rate declined 16%.**

- **From 1993 to 2012, the violent crime rate declined 49%.**

Victim Characteristics

- **Violent victimization rate much higher among:**

➤ **young people**

➤ **blacks (double the rate among whites [1973 to 2006])**

➤ **men (except for rape and intimate partner violence)**

➤ **people in lower income brackets**

Cost of Crime

- **Cost to Victims**: From 1987 to 1990, crime cost an estimated $450B annually.

  Violent crime in 2000 alone cost $37B.

- **Criminal Justice Expenditures**: The expense of operating the correctional system (federal, state, local) cost $80B in 2010, growing 350% since 1980.

Cost of Crime (cont.)

➢ **Emotional Burden: Feelings of vulnerability, dread, chronic anxiety, depression, and Post-Traumatic Stress Disorder (PTSD)**

➢ **The President's Commission on Law Enforcement and the Administration of Justice (1967) asserted: "The most damaging of the effects of violent crime is fear, and that fear must not be belittled."**

Crime Victim Movement

- **Victimology**

- **Women's Movement**

- **System Failure**

- **Grassroots Efforts**

Legislative Initiatives

- **President's Task Force on Victims of Crime (1981)**

- **Omnibus Victim and Witness Protection Act (1982)**

- **Victims of Crime Act (1984)**

- **Justice for All Act (2004)**

Assistance for Crime Victims

- **Victim Compensation**

- **Victim Notification and Information**

- **Victim/Witness Protection**

- **Victim Services**

- **Victim Advocacy and Rights**

Take Away Points

- **Violent victimization is common but not ubiquitous.**

- **National measures of crime and victimization are highly useful and complementary but have shortcomings.**

- **Violent victimization has been declining for 20 years.**

- **The likelihood of violent victimization varies with demographic characteristics.**

- **Victimization is quite burdensome in terms of direct costs to victims and criminal justice expenditures.**

- **Legislation and programming have attempted to address crime victims' needs since the 1980s.**

Reappraising Research on the Victim-Offender Overlap

Mark T. Berg, PhD

Assistant Professor

Department of Sociology

University of Iowa

mark-berg@uiowa.edu

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Apparent Facts

➢ Large proportion of victims are offenders and vice-versa

➢ Victimization among the strongest correlates of offending, and vice-versa

➢ Violence linkage seems to be the strongest

➢ Pattern rather reliable across data sources

➢ Magnitude of the overlap differs under certain ecological conditions
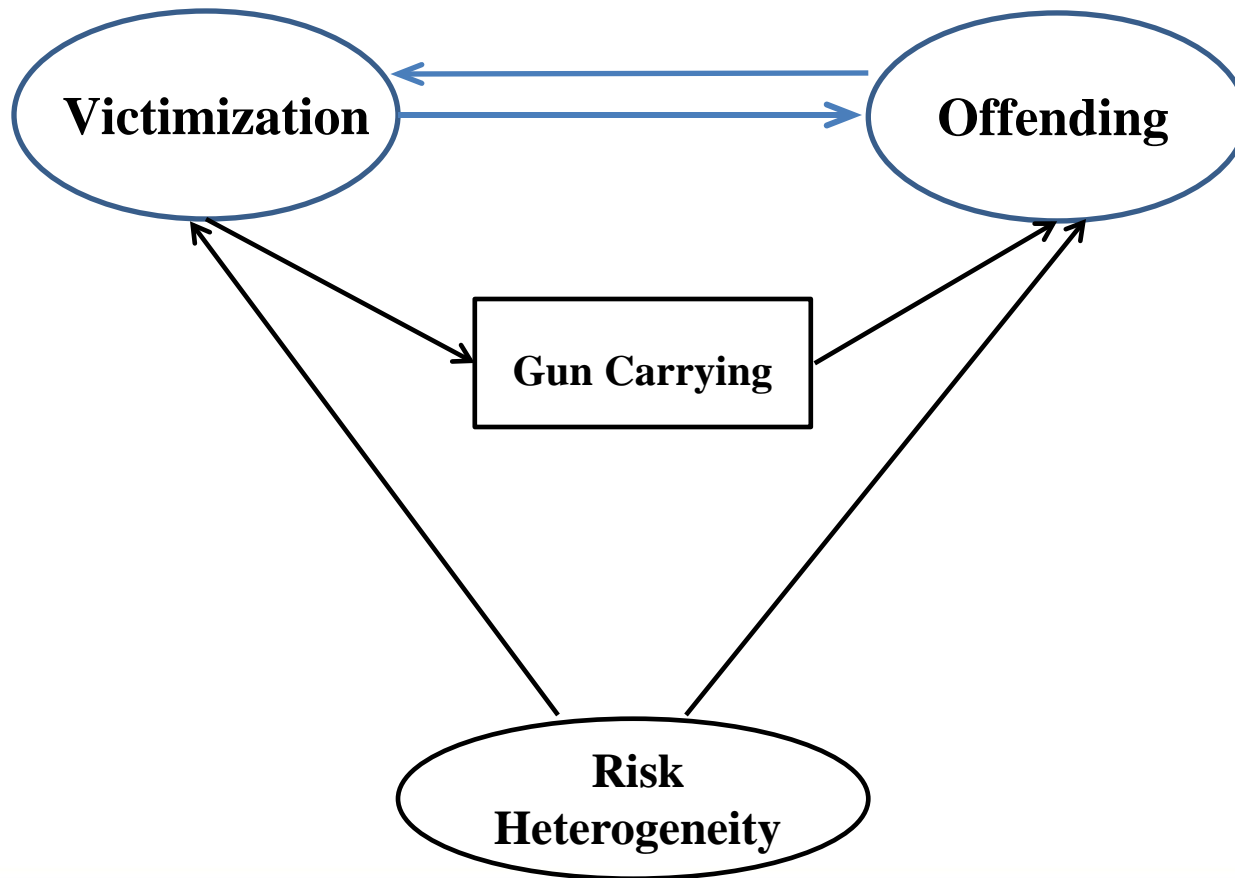
Core Research Questions: Puzzles

➢ What mechanisms account for the strong positive association between victimization and offending?

➢ Under what conditions is the overlap stronger or weaker?

➢ Do the same theoretical mechanisms predict each outcome?

Scientific Significance of the Overlap

➢Prevention of interpersonal violence.

  ➢*Target high-risk groups to maximize benefits*

  ➢ *Rests on a common cause assumption*

➢Illuminate scope of leading theories of victimization and offending

➢Reveal new insights about the evolution of disputes

➢Reduce police officer use of force

Common Design Features

➢ Cross-sectional surveys

  ➢ *Items assess prior 6 or 12 month victimization experiences, and offending (e.g., Add Health)*

➢ Longitudinal surveys

  ➢ *Repeated panel designs (e.g., Pittsburgh Youth Study)*

➢ Hospital admissions, mortality files, and official police data (e.g., arrests)

State of the Evidence

➢ Little of the overlap explained by standard theoretical processes or adjustments for confounding

➢ Exhausted the pool of theoretically-derived assumptions from *mainstream* criminology

➢ Recent work has clarified but not unmasked the complex sources of this phenomenon

➢ Few major advances in recent years

Limitations of Method I

- Survey items create questionable dichotomy, masks incident dynamics
  - *Obscures characteristics of conflicts, and the victim's potential role*
  - *Single items actually capture elements of offending and victimization in an incident*
  - *May yield strong positive, but artificial correlation*

Continued.

➢Blunt research tools: may cause some of the correlation that doesn't exist

Victim: *"In the past year have you been physically attacked by someone you did or did not know?"*

Offender: *"In the past year did you attack someone with a weapon such as a knife, stick, gun, or club?"*

Person A and B in a Dispute

Person A: insults B in front of his friends

Person B: levels threats of violence at A

Person A: responds with moderate physical aggression: forceful shove against wall

Person B: then strikes A on face, fracturing his jaw causing him to hit the ground

Person B: exits the situation with his friends

Limitations of Method II

- Non-recursive pathways, complicates causal assumptions
  - *Difficult to isolate causal mechanisms*
  - *Obscures "true" effect of victimization on offending, and vice-versa*
  - *Can be easily resolved with "blunt or aggregate" survey items*

Limitations of Method III

➢ Temporal ordering:

    ➢ *Some attempt to minimize causal problems by specifying prior year lags*

    ➢ *Yet lags omit information between years*

    ➢ *Difficult to know (with current data) if the victimization and offending events are related*

    ➢ *Comes at a cost to empirical clarity*

    ➢ *Ned to isolate "initial" event (amorphous)*

Continued.

➢ Lack of within-person designs; few studies control for unobserved confounds

  ➢ *Effects may be over-stated*

  ➢ *Yet they aren't the panacea*

Limitations of Theory and Scientific Scope

- Disciplines speak past one another
  - *Large literature on aggression in psychology and social psych of direct relevance to the overlap*
  - *Narrow criminological focus*
- Hypotheses framed from standard crim. theories
  - *Other theories neglected, but hold potential clues*

Ways Forward I

➢ Focus on design challenges: implications of item definitions, and response patterns

➢ Study non-offender victims, and non-violence

➢ Develop new datasets with variables from broader list of social science theories

➢ Study social interactions

Ways Forward II

➤ Experimental research: competitive games, interactional dynamics, aggressive intent

  ➤ *Allows the manipulation of "aggression" to isolate causal mechanisms*

➤ Develop exp. prevention programs as a pathway to understand mechanisms behind overlap

  ➤ *School-based, arrest based, court-based*

  ➤ *Does Z reduce prob. of victims becoming offenders?*

Ways Forward III

➢ Examine mechanisms unfolding during early developmental periods

  ➢ *Toddlerhood and earlier*

  ➢ *Evocative traits*

  ➢ *Longitudinal data usually omit infant and toddler years*

  ➢ *Prospective designs as the standard*

Ways Forward IV

- ➢ Expand the definition of what constitutes "offending" – rely on operational definitions of aggression or coercion
  - ➢ *Precise understanding of the behaviors that are correlated with victimization risk*
  - ➢ *Shift the focus of research to a broader range of behaviors*

Concluding Thoughts

➢ Learned a great deal from null findings

➢ The sources of the overlap have significant implications for theory and prevention

➢ Inter-disciplinary focus may be most profitable: examples: formal deterrence, terrorism

➢ Requires new theoretical and data tools

Victimization Among Special Populations: Sexual Minorities/LGBTs

NIJ Technical Working Group on Violent Victimization Research
December 2-3, 2014

Amy Hequembourg, Ph.D.
Senior Research Scientist
Research Institute on Addictions
University at Buffalo, State University of New York
ahequemb@ria.buffalo.edu

Flashback to 1988...

In a case involving the beating death of an Asian-American gay man, a Florida Circuit Judge jokingly asked the prosecutor, "That's a crime now, to beat up a homosexual?"

The prosecutor replied, "Yes, sir. And it's also a crime to kill him."

The judge replied, "Times have really changed."

As described by Berrill, K. T., & Herek, G. M. (1990). Primary and secondary victimization in anti-gay hate crimes: Official response and public policy. *Journal of Interpersonal Violence, 5, 401-413*.

Thankfully, times have changed... but how much?

- 33 states and DC have legalized same-sex marriages
- 21 states and DC have laws prohibiting employment discrimination based on sexual orientation and/or gender identity
- many states have instituted anti-bullying policies to protect LGBT students

BUT, only 30 states and DC have laws against sexual orientation hate crimes that may or may not include gender identity in its protections

See Human Rights Campaign maps: http://www.hrc.org/resources/entry/maps-of-state-laws-policies

September 2014

"It's very, very clear that the boys were attacked because they're gay," Kunkle said. "It started out with the question of, 'Is that your fucking boyfriend?' and then went to 'I'm sick of you faggots, you dirty faggots' the entire time the assault was happening. That to me is very clear why they were beat up. The language wasn't, 'You're in my way' or 'I don't like your T-shirt.' It was, 'You're a fag.'"

Quoted from Jen Colletta's article in the Philadelphia Gay News on September 25, 2014.
http://www.epgn.com/news/local/7918-gay-bashing-suspects-out-on-bail

Defining the population

"Sexual minorities" include lesbian women, gay men, bisexual men and women, and transgender men and women; i.e., 'the LGBT community'

Multidimensionality of sexual orientation: includes attraction, behavior, and self-identification

Transgender is about gender identity. Uniquely and highly vulnerable among sexual minority populations.

Prevalence of sexual minorities in the US

About 3.5% of the US adult population identifies as gay, lesbian, or bisexual… about 8 million people.

At least 700,000 transgender individuals living the US

Gary Gates at the William's Institute, UCLA School of Law:
http://williamsinstitute.law.ucla.edu/research/census-lgbt-demographics-studies/how-many-people-are-lesbian-gay-bisexual-and-transgender/

Significant health disparities

The unique stress that sexual minorities experience is associated with greater prevalence of health disparities, including:

- Risky drinking patterns, particularly among sexual minority women and transgender individuals
- Higher rates of obesity among sexual minority women
- Higher rates of some forms of cancer
- Significantly greater mental health symptoms, particularly anxiety and depression

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129(5),* 674-697. doi: 10.1037/0033-2909.129.5.674

Frost, D. M., Lehavot, K., & Meyer, I. H. (2013). Minority stress and physical health among sexual minority individuals. *Journal of Behavioral Medicine.* doi: 10.1007/s10865-013-9523-8

Violent victimization disparities

While sexual minorities comprise only 3.5% of the population, 30% of reported hate crimes each year involve sexual orientation based violence.

Stotzer, R. L. (2012). Comparison of hate crime rates across protected and unprotected groups- An update: The Williams Institute.
http://williamsinstitute.law.ucla.edu/research/violence-crime/comparison-of-hate-crime-rates-across-protected-and-unprotected-groups/

The 2012 FBI's Uniform Crime Report: 1,376 cases of sexual-orientation based hate crime offenses reported to US law enforcement agencies:

- 29% resulted from anti-homosexual bias
- 54% were motivated by anti-male homosexual bias
- 13% were prompted by anti-female homosexual bias.

U.S. Department of Justice Federal Bureau of Investigation. (2012). 2012 Hate crime statistics Retrieved November 24, 2014, from http://www.fbi.gov/about-us/cjis/ucr/hate-crime/2012

National Coalition of Anti-Violence Programs (NCAVP)

- Compile data from 14 anti-violence programs in 13 states
  - 2,001 total reported incidents in 2013
  - Similar rates from prior years, but a substantial increase in violence severity, with transgender women, people of color, and gay men at highest homicide risk
  - Fewer LGBT victims reported incidents to law enforcement and, among those who did report to the police, more reported hostile law enforcement reactions. Victims reported worrisome levels of physical violence and hostility inflicted on victims by the police
  - Furthermore, a majority (76%) reported that their experience of hate violence was not classified as a bias crime by the police

National Coalition of Anti-Violence Programs. (2014). Lesbian, gay, bisexual, transgender, queer, and HIV-affected intimate partner violence in 2013. New York, New York. http://avp.org/about-avp/national-coalition-of-anti-violence-programs

Centers for Disease Control: The National Intimate Partner Violence and Sexual Assault Survey

- Gay and bisexual men report significantly higher prevalence of sexual victimization (other than rape) compared to heterosexual men.

- Bisexual women reported significantly higher prevalence of sexual violence (including rape) compared to lesbian and heterosexual women.

Walters, M. L., & Breiding, M. J. (2013). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 findings on victimization by sexual orientation. Atlanta, Georgia: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

Violent victimization uniquely detrimental to sexual minorities

- Not only a personal attack on the character of the victim, but also a symbolic reminder to the larger LGBT community of their vulnerability, isolation, lack of legal protections

- Produces greater adverse long-term psychological consequences for victims than other forms of crime

- More violent and are more likely to involve hospitalization than other bias-based crimes

Kuehnle, K., & Sullivan, A. (2003). Gay and lesbian victimization: Reporting factors in domestic violence and bias incidents. *Criminal Justice and Behavior, 30*(1), 85-96. doi: 10.1177/009385480223916

Herek, G. M., Gillis, J. R., & Cogan, J. C. (1999). Psychological sequelae of hate-crime victimization among lesbian, gay, and bisexual adults. *Journal of Consulting and Clinical Psychology, 67*(6), 945-951. doi: 10.1037/0022-006x.67.6.945

Sexual orientation bias crimes have unique characteristics

For homicides:

- Offenders are more likely to be White males of younger age than offenders of non-LGBT bias homicides.

- Homicidal attacks are often perpetrated by small groups and often involve 'over-kill' whereby the victim is mutilated in symbolic ways, with the perpetrator using non-lethal weapons such as knives or blunt objects used to 'bash' victims.

Characteristics con't

- Targets are most often men who are perceived by the attackers to be gay.
- Public and private locations- nearly half (43%) occurring in private residences and others occurring in shelters and at the workplace.

Ciarlante, M., & Fountain, K. (2010). Why it matters: Rethinking victim assistance for lesbian, gay, bisexual, transgender, and queer victims of hate violence & intimate partner violence (pp. 1-22): National Center for Victims of Crime and the National Coalition of Anti-Violence Programs.

Gruenewald, J. (2012). Are anti-LGBT homicides in the United States unique? *Journal of Interpersonal Violence, 27*(18), 3601-3623. doi: 10.1177/0886260512462301

Gruenewald, J., & Kelley, K. (2014). Exploring anti-LGBT homicide by mode of victim selection. *Criminal Justice and Behavior, 41*(9), 1130-1152. doi: 10.1177/0093854814541259

National Coalition of Anti-Violence Programs. (2014). Lesbian, gay, bisexual, transgender, queer, and HIV-affected intimate partner violence in 2013. New York, New York. http://avp.org/about-avp/national-coalition-of-anti-violence-programs

Providing accurate estimates is challenging—underreporting common. Why?

- History of prejudice in the criminal justice system = Fear of re-victimization when reporting

- Fear of outing oneself

- Failure to account for sexual or gender identity in police reports
  - Law enforcement officers often lack the training, skills, and means to identify a bias-related crime and properly document it.

- Many victims of bias-related crimes may be a member of more than one minority group; thus, the nature of the bias crime may be reported as something that appears more obvious to law enforcement, such as race.

Methodological challenges and imperatives

Challenge to achieve sufficient power to accomplish our statistical objectives

- Critical that we advocate for the inclusion of questions about sexual orientation and gender identity in diverse research studies, particularly large population-based surveys.
  - To do this well, we need to:
    - Develop and refine empirically sound survey questions to address violent victimization among sexual minorities. Humanely and empathically.
- Utilize longitudinal study designs to better understand the complex causal processes underlying vulnerability to and consequences of violent victimization

Other methodological considerations

- Must better understand how multiple and overlapping identities impact experiences of violence by enrolling sufficient subgroups in our research to conduct comparative analyses
  - Groups to allow for sexual identity comparisons (e.g., lesbian vs. bisexual vs. heterosexual women)
  - Groups to allow for racial and ethnic comparisons

Alternatives to power-driven surveys

- consider community-based study designs that utilize other sampling methodologies, such as Respondent-Driven Sampling

- continue to strive to conduct exploratory and descriptive studies, particularly those that utilize mixed-methods approaches

- educate reviewers about gaps in knowledge and practical design solutions that acknowledge unique challenges associated with studying this population (e.g., recruitment)

Discussion primers

We need to evaluate existing programs designed to address the needs of LGBT victims of violence and seek a better understanding how current mainstream services can be refined to become more culturally-competent in meeting the needs of this population.

- need to develop evidence-based victim services.
- need to identify and bridge gaps in services (e.g., gay male victims of IPV lack shelter accommodations, transgender individuals require special consideration when incarcerated)

Need research about secondary victimization, i.e., revictimization, and other poor outcomes among sexual minorities who experience violent victimization

- What kinds of law enforcement responses are perceived as most supportive and healing for victims?
- How do sexual minorities perceive official judicial responses to their reports of violent victimization?
- What are the long-term consequences of experiencing violence for this population?

Need to identify the mechanisms associated with victimization (and how they compare to heterosexuals)

- What are the characteristics of these events, such as location?
- What are the characteristics of the perpetrator(s)?
- What are LGBT victims' help-seeking behaviors?
- What is the quality of formal and informal support systems that respond to these victims' needs?

We need to understand the intersection between violent victimization and health disparities among sexual minorities

- What is the role of risky alcohol use in elevating vulnerability to sexual assault?
- What are the long-term psychological consequences (e.g., PTSD, anxiety, depression) of violent victimization among LGBTs?

Need to identify, develop, and test intervention and prevention programs to reduce violent victimization incidents among LGBTs.

- How can we use other effective programs—such as those developed to target sexual victimization among heterosexual women—to design support services for LGBTs in culturally-competent ways?

- Which programs might be most effective for different forms of violence, e.g., bystander interventions for bias crimes?

Thanks

Special thanks to NIJ, particularly Bethany Backes and Dara Blachman-Demner, for inviting me to participate today.
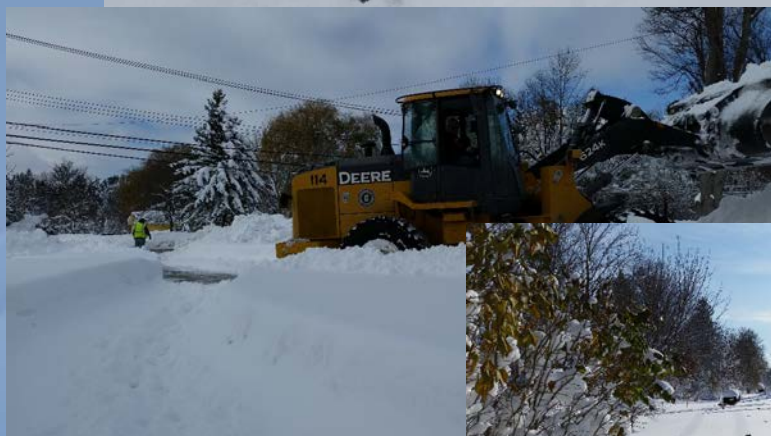
Research on Victimization Among People with Disabilities

Prepared for the National Institute of Justice — December 1, 2014

Angela Browne, Ph.D.
Principal Investigator
Vera Institute of Justice

Ashley Demyan, Ph.D.
Research Associate
Vera Institute of Justice

Suzanne Agha, Ph.D.
Senior Research Associate
Vera Institute of Justice

Definition of Disability

Definitions vary

- For purposes of this presentation, disabilities include:

  o A physical, mental, or health impairment that substantially limits one or more major life activities of an individual;

  o A record of such impairment; or

  o Being regarded as having such an impairment.

- *Approximately 1 in 5 Americans has some type of disability.**

  * Brault, M., "Americans with Disabilities," 2010; 2012

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Types of Disability

Individuals may have one or more of the following types of disabilities:

- **Cognitive disabilities** *(e.g., intellectual, developmental, and severe learning disabilities)*

- **Physical disabilities** *(e.g., amputations, quadriplegia and others conditions requiring wheelchairs or walkers)*

- **Sensory disabilities** *(e.g., low vision/blind, hard of hearing, Deaf)*

- **Psychiatric disabilities** *(e.g., bipolar disorder, schizophrenia, and other mental illnesses)*

Each has unique victimization risk factors, reporting challenges, and research considerations.

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Importance of Research on Victimization Among People with Disabilities

- Their voices are often silenced.

- They may not have channels to report their victimization on their own.*

- Despite suffering and negative outcomes, they may not label what's happening as victimization.

- They may depend on perpetrators for survival, care, and housing.

- Their rates of victimization are often very high.

- Their access to informed help sources is often very limited.

  * (See Child et al., 2011; Oschwald et al., 2011; and Tyiska, 2001 for barriers to reporting crimes against persons with disabilities.)

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NCVS Violent Victimization Data

2012 Rates of Violent Victimization per 1,000 People
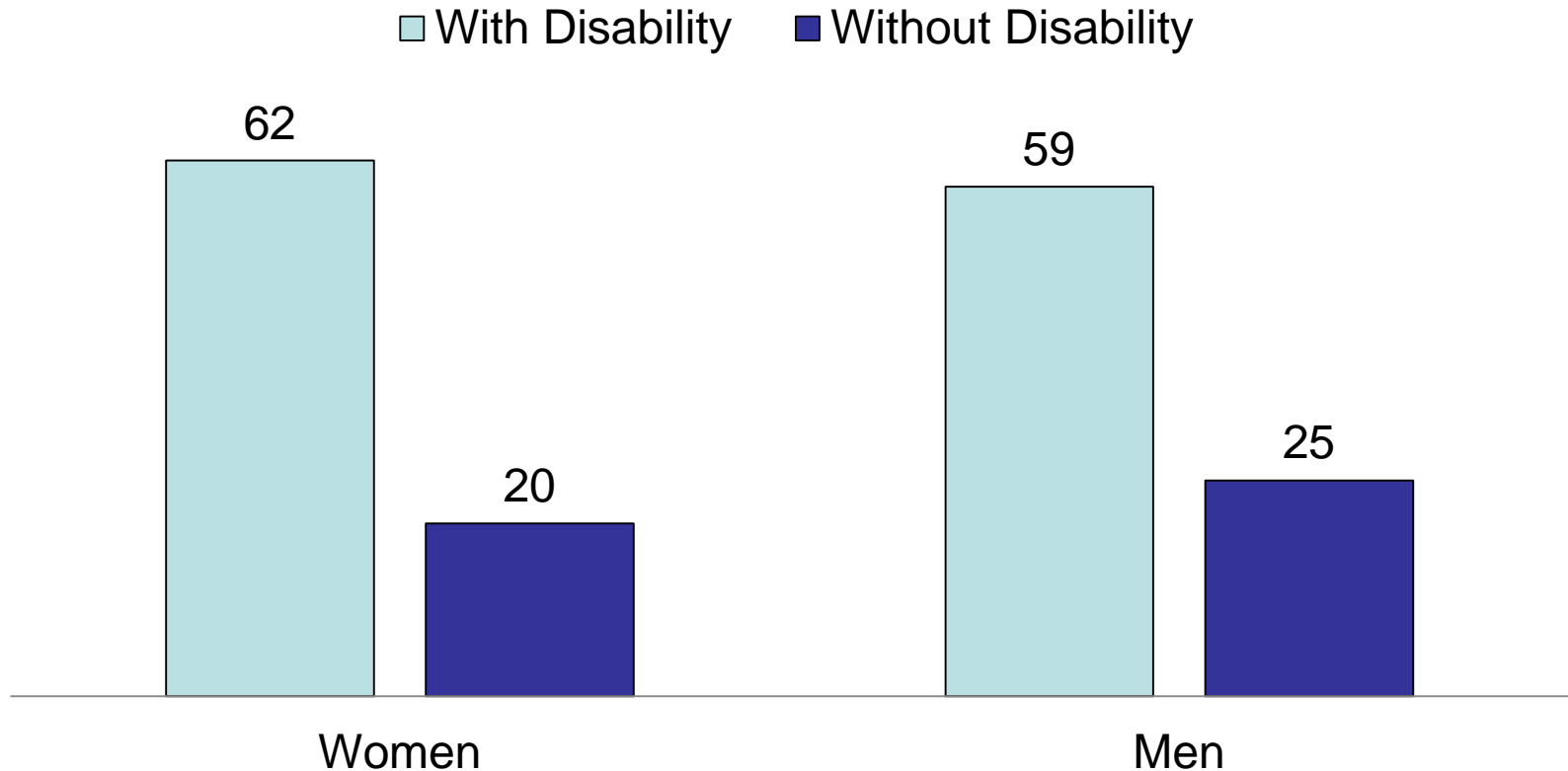
Source: BJS – Crimes Against Persons with Disabilities, 2009-2012 (2014)

Severity of Victimization Among People with Disabilities

Current literature suggests that women with disabilities:

- Experience more severe sexual assaults and
- more types of sexual assaults
- by more perpetrators
- over a longer period of time.

Little research on men with disabilities. Some studies indicate they experience higher levels of sexual assault than among women or men *without* disabilities.

Victimization may also take non-violent forms, such as controlling access to or breaking the victim's adaptive or assistive equipment, and withholding medication or food.

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Challenges for Victims with Disabilities

Individuals with disabilities may:

- Appear to be easy targets, unable to protect themselves.

- Be taught compliance from an early age.

  Many people with disabilities—especially people who have intellectual or cognitive disabilities—are taught to follow the directions of others, usually with the intent of ensuring that they cope effectively with daily life and for their safety. This conditioning, however, may also increase their vulnerability to abuse.

- Be viewed as less credible by authorities and others, and/or experience challenges in communicating and thus be discounted.

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Perpetrators of Abuse Against Individuals with Disabilities

Perpetrators often are:

- Individuals the victim relies on for care, housing, and survival, frequently those they are in proximity to on a regular basis, including:

  o Family members / intimate partners;
  o Individuals associated with family members;
  o Other clients, consumers, or patients at providers, in group homes and care settings, and in hospitals;
  o Personal care attendants;
  o Program or hospital staff;
  o Transportation providers.

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Factors Contributing to Reluctance to Report Among People with Disabilities

- Concern about not being believed or seen as credible.

- Concern that a 'disability' label will be used against them.

- Concern that their disability will be made public or be made a matter of public record.

- Concern about retaliation by caregivers or about losing caregivers/family members.

- Concern that they will be institutionalized.

- Concern that they will be referred to Adult Protective Services.

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Considerations When Conducting Research among People with Disabilities

① Sampling Issues

① Instrument Considerations

② Data Collection* / Interview Location

③ Informed Consent & Mandatory Reporting

④ Confidentiality Issues

*See Annotated Bibliography → Markesich, Jason (2008)
"Surveying Persons with Disabilities: A Source Guide"
Mathematica Policy Research.
http://digitalcommons.ilr.cornell.edu/cgi/viewcontent.cgi?article=1254&context=edicollect

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1. Sampling Issues

- Estimates of the number of people with disabilities in the United States vary widely. Reasons include:

  o Lack of standardized definitions of disability or types of disabilities.

  o Individuals may not identify themselves as having a disability.

- People with disabilities are often hard to reach through traditional random sampling techniques (e.g., phone, mail, door-to-door).

  o Large-scale/epidemiologic studies are difficult (access, subsets).

  o Existing studies often rely on convenience samples (e.g., providers).

- Surveys often do not ask about disability status (e.g., the UCR), or they do ask but combine types of disabilities, conflating responses.

Standardizing language/definitions, and distinguishing types of disabilities and associated risks, is crucial for future research.

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2. Instrument Considerations

- **Must be accessible and suitable for a diverse range of individual needs, e.g.,**
  - Simplified language and lack of repetition (to reduce confusion, anxiety, and challenges in interpretation).
  - Accommodations/modifications for Deaf participants.
  - Qualified ASL interpreter selection of interpreters:
    - Experienced in working with people with disabilities;
    - Able to accurately translate nuances of content involving trauma.

- **Should capture unique realities/risks/considerations, e.g.,**
  - Include measures of types of abuse *unique* to certain disability types.
  - Be based on an understanding of the potential for victims not to identify behaviors as abuse, and to fear loss of freedoms and family based on answers.

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3. Data Collection

- **Caution regarding proxy respondents (e.g. family, caregivers) to respond for the participant for phone, in-person, and home visits.**
    - o Might underreport victimization due to lack of knowledge.
    - o Might underreport victimization due to being the perpetrator.
    - o Might misunderstand victims' perceptions, concerns, and experiences.

- **Location considerations for in-person interviews include:**
    - o Accessibility for individuals with a range of disabilities.
    - o Waiting areas or nearby activities for family members who might accompany respondents.
    - o Consideration of seasonal weather conditions, accessibility of public transportation, costs of transportation, and transportation conditions.

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3. Data Collection Considerations (contd)

- **Training and Resources for In-person Interviews, including:**

  o Pre-training for interviewers in working with persons with disabilities, based on anticipated study respondents.

  o Pre-training for interviewers in identifying and responding to fatigue or other needs that might arise during interviews.

  o Resources available for post-interview counseling or other supports related to victimization for respondents with disabilities.

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4. Informed Consent & Mandatory Reporting

- **Considerations for Informed Consent Forms**

    o Simplified language

    o Elimination of repetitive language (e.g., for translation)

    o Built-in, non-insulting, competency assessment

    o Supportive process to encourage maximum understanding and participation among people with disabilities.

- **Considerations Regarding Mandatory Reporting**

    o Some states require researchers to file mandatory reports of abuse if violence or risk is disclosed during interviews.

    o Respondents should be made aware of this possibility if applicable, before the interview begins.

    *(See **rainn.org** for maps at state level for this requirement)*

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5. Confidentiality and Methods

- Pre-planning when recruiting for a study *focused* on victimization regarding how to maintain confidentiality, including keeping confidential that the respondent may have had a victimization experience. *(See earlier slide re: perpetrators.)*

  o This would include content in flyers, scripts for calls or emails, and any other materials describing the focus of the study.

- Pre-planning for in-home interviews related to the potential presence of perpetrators or questions and answers being overheard.

- Selection of a 'neutral' location for centralized interviewing that is accessible and welcoming, but NOT a location (e.g., provider) where the respondent is known if the study focuses only on respondents who have experienced violence/sexual violence.

5. Confidentiality and Methods (contd)

- Use of interpreters who will not recognize a study respondent (e.g., interpreters from a different city or area) to protect the respondent's confidentiality.

- Pre-planning for responses to personal assistants and family members who might want to remain with the respondent during the interview. This would include:

  o Methods for how to ascertain whether the respondent would prefer to be interviewed in private, and how to mitigate potential risk if this is communicated to a person accompanying the respondent;
  o Plans for when a personal assistant/care giver's presence is necessary during the interview and study responses in those circumstances.

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Summary

- Individuals with disabilities risks of victimization are high. Yet channels for seeking help are often limited, and reporting the victimization may risk retaliation and loss if perpetrators are families and/or caregivers.

- Research among people with disabilities is challenging and must take into account the unique considerations potential respondents may face in designing the study, sampling, recruiting, and interviewing methods, including issues of accessibility, confidentiality, and consent.

- Research studies on victimization typically do not ask about disabilities or disaggregate types of disabilities if data on disabilities is collected, even when studying victimization, help-seeking, and justice system responses.

- As NIJ expands its research agenda, it is our hope that the Institute will encourage the advancement of research methods and data collection among this population whose experiences so often remain hidden.

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Resources:

Americans with Disabilities Act. (2008). http://www.eeoc.gov/laws/statutes/adaaa.cfm

Andrews, A. B., & Veronen, L. J. (1993). Sexual assault and people with disabilities. *Journal of Social Work & Human Sexuality, 8*(2), 137-159.

Brault, M. (2012). "Americans with Disabilities: 2010" *United States Census Bureau.* http://www.census.gov/prod/2012pubs/p70-131.pdf

Casteel, C., Martin, S. L., Smith, J. B., Gorki, K. K., & Kupper, L. L. (2008). National study of physical and sexual assault among women with disabilities. *Injury Prevention, 14*(2), 87-90.

Child, B., Oschwald, M., Curry, M. A., Hughes, R. B., & Powers, L. E. (2011). Understanding the experience of crime victims with disabilities and Deaf victims. *Journal of Policy Practice, 10*(4), 247-267.

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Resources:

Curry, M. A., Renker, P., Hughes, R. B., Robinson-Whelen, S., Oschwald, M., Swank, P. R., et al. (2009). Development of measures of abuse among women with disabilities and the characteristics of their perpetrators. *Violence Against Women, 15*(9), 1001.

Curry, M. A., Hassouneh-Phillips, D., & Johnston-Silverberg, A. (2001). Abuse of women with disabilities. *Violence Against Women, 7*(1), 60.

Gilson, S. F., Cramer, E. P., & DePoy, E. (2001). Redefining abuse of women with disabilities: A paradox of limitation and expansion. *Affilia, 16*(2), 220.

Harrell, Erika. (2014). "Crimes Against People with Disabilities, 2009-2012." *Bureau of Justice Statistics.*
http://www.bjs.gov/content/pub/pdf/capd0912st.pdf

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Resources:

Martin, S. L., Ray, N., Sotres-Alvarez, D., Kupper, L. L., Moracco, K. E., Dickens, P. A., et al. (2006). Physical and sexual assault of women with disabilities. *Violence Against Women, 12*(9), 823-37.

Mitra, M., Mouradian, V. E., & Diamond, M. (2011). Sexual violence victimization against men with disabilities. *American Journal of Preventive Medicine, 41*(5), 494-497.

Nannini, A. (2006). Sexual assault patterns among women with and without disabilities seeking survivor services. *Women's Health Issues, 16*(6), 372-379.

Nosek, M. A., Howland, C. A., & Hughes, R. B. (2001). The investigation of abuse and women with disabilities. *Violence Against Women, 7*(4), 477.

Oschwald, M., Curry, M. A., Hughes, R. B., Arthur, A., & Powers, L. E. (2011). Law enforcement's response to crime reporting by people with disabilities. *Police Practice and Research, 12*(6), 527-542.

Petersilia, J. R. (2001). Crime victims with developmental disabilities. *Criminal Justice and Behavior, 28*(6), 655-694.

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Resources:

Powers, L. E., Hughes, R. B., & Lund, E. M. with contributions from Wambach, M. (2009). *Interpersonal violence and women with disabilities: A research update*. Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.

Sobsey, D., & Doe, T. (1991). Patterns of sexual abuse and assault. *Sexuality and Disability, 9*(3), 243-259.

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VERA
INSTITUTE OF JUSTICE

RACE AND VIOLENT VICTIMIZATION

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Tanya L. Sharpe, MSW, Ph.D.

University of Maryland School of Social Work

Victimization

Direct Victims

- A person who suffers physical injury, extreme mental distress, or death as a result of having experienced a violent crime.

Indirect Victims

- A member of the direct victims' family* who witnessed the crime and/or is a person whose mental health counseling and care is required for the successful treatment of the victim.

Race and Victimization

- Teens (ages 12-19) and young adults (ages 20-24) are the most likely to be victims of violent crime.

- Blacks and Latinos are more likely to be victims of violent crime than Whites.

- Rates of rape and sexual assault are highest among Native American women more so than either White or African American women.

- Those with household incomes below $7,500 are more than three times more likely to be robbed than those with incomes above $75,000.

- Black and Latino males are over represented among homicide victims.
  - * Family members and friends of victims of violent crime are disproportionately people of color

Violent Crime Categories

- **<u>Simple Assault</u>** -An attack without a weapon resulting either in no injury, minor injury (e.g., bruises, black eyes, cuts, scratches or swelling).

- **<u>Aggravated Assault</u>** - When a person purposely attacks or attempts to cause bodily injury to another with a deadly weapon *or* An attack without a weapon where serious injury results.

- **<u>Violent Victimization</u>**- Serious physical violence resulting in a knife or gun being pulled on someone wherein the victim was jumped, shot, cut or stabbed resulting in life-threatening injury or death.

Race and Crime Categories

- Blacks (ages 15-24) are <u>violently victimized</u> and <u>robbed</u> at rates higher than Whites and persons of "other races".

- Blacks (ages 15-24) are victims of <u>simple assault</u> at rates higher than the rates of persons of "other races."

- Black men (ages 15-24) are victims of <u>aggravated assault</u> at rates greater than those of White men and women.

In Summary….

- Great racial disparities and overrepresentation of people of color exist at all decision points in criminal justice processing, and have significant social consequences.

- We have yet to examine the sociocultural context, cause and consequences of race based structural inequality and its impact on race and victimization for the individual perpetrator/victim, community based outcomes, and criminal justice system.

RACE MATTERS!

Research on Race and Victimization

Current Research

- Predominately conducted in urban areas

- Examines mental health outcomes (e.g., PTSD, depression, substance abuse) for victims of violent crime

- focused on risk and protective factors (e.g., social support, prevention education)

- Focused on coping (e.g., emotion/problem focused, service utilization)

Gaps in Research

- Comparison between urban, suburban and rural victims

- Mental, physical, criminal justice outcomes of individual as both victim and perpetrator

- Small (if any) samples of Black and/or Latino participants despite being overrepresented as direct/indirect victims and perpetrators of violent crime.

- Perspectives of victims of color in the literature

- Research relevant to victim typology (e.g., homicide, sexual assault/abuse, crime)

- Survivors of homicide victims research

Implications for Future Research

- National Studies on Populations of Color

- Development and Implementation of culturally appropriate tools of measurement (e.g., race, ethnicity, victim typology)

- Participatory Action Research Methods, Mixed Methods, and Longitudinal Studies.

- Variable Focus – mental, physical, educational, cost, community engagement and criminal justice outcomes

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Thank You

Tanya L. Sharpe, MSW, Ph.D.

University of Maryland School of Social Work

tsharpe@ssw.umaryland.edu

(410)706-3829

The State of Victim Services Research

NIJ Violent Victimization Research
Technical Working Group Meeting

December 2014

Bruce G. Taylor, Ph.D.

NORC
at the UNIVERSITY of CHICAGO

Background

- Definitional issues on victims and victim services
  - Who is a victim?
    - Must victimization involve a violation of criminal law?
    - Psychological abuse?
    - Legislative definitions of a crime victim serve as the gatekeeper to rights and services provisions
  - Which types of victims to study?
    - To date, mainly DV and sexual assault has been the focus

Background

- What counts as a victim service?
  - <u>Formal</u> versus informal services
  - <u>System-based</u> (justice, health, mental health)
  - <u>Community-based</u> services.
  - <u>Faith-based</u> services.
  - Services provided by agencies/groups whose:
    - <u>Principle</u> function is to serve crime victims
    - Main function is something else and victim services is a <u>small piece of what they do</u>

What are the needs of victims?

Research suggest the following areas of need:

- Emotional support/listening

- Safety services

- Professional therapy

- Criminal justice advocacy

- Individual needs assessments/service planning

- Getting case information, understanding case handling, and going to criminal justice or doctor appointments (Brickman et al., 2002; Newmark et al., 2003).

Few victims use formal victim services many rely on personal networks (1)

- From studies in the 1970s, 80s and 90s few crime victims use formal victim services (Davis & Henley, 1990).

- Based on 1993 to 2009 NCVS data, only 9% of victims used services provided by government or privately funded victim service providers (VSPs) (Langton, 2011).

- Victims have multiple needs but only a small % receive help from VSPs (New & Berliner, 2000; Sims et al., 2005).

Few victims use formal victim services many rely on personal networks (2)

- Many victims do not seek services because they are unaware of them (Sims et al., 2005).

- Many victims reported relying on personal networks for assistance

Few victims use formal victim services many rely on personal networks (3)

- In a general population study, Norris et al. (1990):
  - Only 12% of crime victims contacted mental health professionals w/in 3 months of the crime.
  - However, violent crime victims who were repeat victims, and those with depression more likely to seek treatment.
  - 50% of sexual assault victims, 22% of physical assault victims, 16% of homicide survivors, 14% of burglary victims, and 4% of robbery victims use victim services

Few victims use formal victim services many rely on personal networks (4)

NORC at the UNIVERSITY of CHICAGO

- A somewhat higher use of victim services is reported in crime victims who have involvement in the criminal justice system (Freedy et al., 1994).

- Even crime victims w/ psychological symptoms are reluctant/delay treatment (Schwarz & Kowalski, 1992).

- Female crime victims showed an increased use of medical services in the year following the crime (Kimerling &Calhoun, 1994;Koss et al., 1991)

Who receives victim services?

- NCVS suggests - Most likely to be female, victims of serious violent crimes, and to have reported the crime to the police (Langton, 2011).

- Based on NCVS data, reporting to the police increased the odds of seeking services by 3 times (Zaykowski, 2014). However, we still need to uncover mechanism of police involvement in linking victims to services

- Victims living in rural areas were *more likely* to receive services than victims living in urban areas.

Underserved victims

- Young men of color- most likely to be victimized by violent crime but few receive services
- Few services for:
  - Non-DV (domestic violence) and non-sexual assault victims
  - Lesbian, gay, bisexual, transgender, and queer (LGBTQ) victims
- Victims in various racial/ethnic minority groups, and those with barriers to receiving services, such as mental health or substance abuse issues.

What services are provided by informal sources to victims? Congruence with victim needs?

Need to know more about the…

- Number of victims who get informal help by crime type & their characteristics
- Types of help provided
- Extent help/aid affects the recovery process.
- Helpers and how providing aid to victims affects them emotionally and financially.

Services provided by VSPs and congruence with the needs of victims?

- Victims who do reach VSPs often have <u>multiple needs addressed</u> (Burt et al.,2000; Smith et al., 2000).

- <u>For example</u>, DV victims at shelters - also likely to receive individual/group counseling, legal services, case management, child care, life/career skills, transportation, medical care, financial assistance (Grossman et al., 2010).

VSPs and congruence with victim needs (Cont'd-2)

- <u>Back in 1990,</u> Davis & Henley noted a **mismatch** for kinds of assistance offered by VSPs and the needs of victims

  - Most prevalent needs of victims are practical in nature (e.g., better locks)

  - However, these are the services least likely to be offered by VSPs .

VSPs and congruence with victim needs (Cont'd-3)

- <u>Still to this day,</u> little data on efficacy of VSP programs on victims and whether services match their needs.

- Theoretically important variables are often <u>unmeasured</u> (economic/emotional dependence, social and cultural factors) and this holds back research on predictors of reporting behavior.

Predictors/barriers to help-seeking and service use by victims

McCart et al., 2010, using Andersen's (1995) model, reviewed 3 main determinants of help-seeking:

- <u>Predisposing characteristics</u> - individual-level factors (e.g., age, gender, ethnicity, education, socioeco, marital status) influencing help seeking.

- <u>Enabling resources</u> - factors at the individual and community level that can either facilitate or impede service use (e.g., insurance coverage, transportation, social support, service awareness).

- <u>Needs</u> - individual's subjective perception of need or an evaluative need provided by a professional.

Questionable rigor of victim services intervention research

- Typical evaluation designs for VSP research:
  - Data collected at a single point in time
  - Small, nonrandom samples of victims
  - Little to no means of comparing served victims to non-served victims, or victims' situations before and after receipt of services (Zweig, 2013)
  - As of 1985, few evaluations and not until ~ 2001 did VSP funders start requiring evals
  - Few RCTs and quasi-experiments.

Do victim services improve outcomes for victims?

- Research on whether VSP programs improve outcomes for victims is generally <u>inconclusive</u> and mixed for a variety of victim service outcomes (see handout) such as:
  - Victim safety
  - Psychological well-being
  - Victim satisfaction with provided services
- <u>Some promising work </u>in coordinated community responses to violence and therapies for some kinds of child and adult crime victims

Do victim services improve outcomes for victims?

- One of the most researched victim services is second responder programs - home visits by a crisis response team following up on an initial police response to DV.

- A meta-analysis of the best 8 studies (5 RCTs and 3 quasi-experiments) on this intervention was done by Davis, Weisburd, and Taylor in 2008

  - We found a small positive effect for increased police complaints/reports of DV/abuse to police

  - However, we found no effect on actual DV/abuse based on self-reported victim surveys

Optimizing the delivery of victim services

- Little data on how to optimize and structure the delivery of victim services but initial evidence suggests that coordinated services leads to improved victim satisfaction (Zweig & Burt, 2006)

- Recent developments have focused on using tech/communication advances to address barriers

- Some internet-based programs for trauma-exposed victims are promising (Benight et al., 2009), ranging from interactive psycho-educ. modules (Ruggiero et al., 2006) to multiple-week, therapist-assisted txt programs (Lange et al., 2000; Litz et al., 2007).

Cost of Victim Services

- Costs are <u>least studied</u> aspect of victim services, despite victims reporting to the police have access to $ via Victims of Crime Act (VOCA) of 1984, supported by fines/penalties/forfeited bail bonds
- National survey of mental health staff - crime victims obtaining treatment made up 20–25% of client populations and <u>>$8 billion in services</u> (Cohen & Miller, 1994)., fatal crime, rape, and child abuse had highest costs.
- Data suggests mental health <u>costs are increasing</u> (e.g., $8.1 million in 1987 to $48.1 million in 1991 (National Association of Crime Victims Compensation Boards, 1992).

Key observations from literature (1)

- Most <u>victims neither report</u> to authorities nor seek needed health care services. Beyond these facts, however, much remains to be learned

- <u>Multiple barriers</u> to reporting/service utilization but we have little data on what victims need to navigate the CJ system to overcome these barriers.

- Most research on victim service usage is based on <u>small samples</u> that are not generalizable, and therefore may not be applicable to other regions (Zaykowski et al. 2014).

Key observations from literature (2)

- In a 2009 review (Stover et al.) that examined 18 intervention studies for victims of IPV, only three of the studies qualified as "rigorous" based on three criteria:
  - Random assignment of participants to a "treatment" group (i.e., individuals receiving the intervention) or a "control" group (i.e., individuals receiving "business as usual")
  - At least 20 cases included in each group
  - An outcome of IPV recidivism

Key observations from literature (3)

- Most of the research with <u>female victims</u>

- Most research on <u>sexual assault and domestic violence</u> victimization

- Need more research on <u>male crime victims</u> and other forms of violent crime (e.g., physical assaults, robberies) to help place our existing knowledge in better context, and might further elucidate predictors of, and barriers to, reporting and help seeking.

- <u>Young men of color</u>- most likely to be victimized by violent crime but few receive services, also fewer services for non-DV and non-sexual assault victims

Key observations from literature (4)

- Today every state has at least some programs available to victims, but we lack "compiled information about the current capacity of service providers, including data on their current funding sources, staff and management expertise and diversity, use of technology, and other indicators of organizational capacity" (National Center for Victims of Crime, 2011, p. 8).

- Overall, we lack a clear picture on the most basic components of VS efforts (how victims come to VSPs, funding, costs of running VSPs, services offered/used, and outcomes for victims using services).

Key observations from literature (5)

- The current BJS national survey on victim service providers addresses many of these concerns through a comprehensive view of what services are being provided to victims, who is being served, and what gaps in service delivery may exist.

Violent Victimization in the United States: Major Issues and Trends

Arthur J. Lurigio

Department of Psychology

Department of Criminal Justice and Criminology

College of Arts and Sciences

Loyola University Chicago

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I. Introduction

A. Overview of Criminal Victimization

Criminal victimization is common in the United States. Crime and punishment have been prominent features of the American landscape since colonial times (Friedman, 1993). In the 1960s, office holders at all levels of government started embracing crime as a major social and political issue and waging campaigns promising to enhance public safety (Warr, 2000). During years of escalating crime, more policing and harsher punishments were implemented to reduce criminal victimization. These efforts were undertaken largely on the basis of political ideology and with little consideration for their immediate impact or long-term consequences (Laub, 1997). The specific effects of such crime control polices on victimization have been difficult to measure, especially on a large scale.

Crime fascinates and frightens Americans, whose understandings of crime, violence and punishment are fraught with misperceptions that stem more from dramatizations and media accounts than actual crime data and criminal justice system operations (Warr, 2000). Each year, tens of millions of Americans become victims of violent, property or other types of crimes (Herman & Waul, 2004). Nonetheless, relatively little is known about the fluctuating nature of criminal victimization (Lauritsen, 2009).

In terms of its financial and emotional toll, crime is quite costly (Skogan, Lurigio, & Davis, 1990). At some point, crime will likely touch the lives of most residents of the country through direct (i.e., personal experience) or indirect (i.e., experiences of family members, friends, neighbors or acquaintances) victimization—or both (Riggs & Kilpatrick, 1990). Everyday reminders of the rampancy of crime are inescapable and can lead to vicarious victimization (Cook & Fox, 2011). Blanket news coverage of crime on network, cable, and

Internet-based news programs and blogs, as well as ubiquitous crime reality shows and documentaries, bombard Americans with images and narratives about crime, particularly events involving violent incidents and multiple victims, which are far more anxiety-provoking and less common than non-violent, single-victim incidents (Robinson, 2011). Media coverage inflates public estimates of criminal victimization and fuels fear of crime (Ferraro, 1995; Warr, 2002), which in turn can diminish the quality of people's lives (Skogan, Lurigio, & Davis, 1990). These portrayals of crime obscure the uneven risk of criminal victimization, which varies by social class, race, residence and a host of other factors (Lauritsen, 2009).

The number and type of crimes reported to the police and to interviewers in victimization surveys wax and wane for reasons that baffle criminologists and other experts; however, changes in crime rates are presumably correlated with changes in the economy, illegal drug markets, crime control strategies and the shape of the age distribution. Specifically, the emergence of a recession, the introduction of a new illicit drug sold by rival street gangs and the presence of a large proportion of the population between the ages of 16 and 25 are all believed to signal an inevitable crime wave (Blumstein & Wallman, 2000). In contrast, more police on the streets, the adoption of public-order policing tactics, the subsiding of the so-called "crack epidemic," and the burgeoning of the prison population have all been purported to contribute to the steady decline in crime (Johnson & Raphael, 2012; Levitt, 2004). However, these changes never fully (or even mostly) account for why crimes are committed or who will become a crime victim. The only constants in the ever-fluctuating criminal victimization rates are the over-representation among victims and offenders of youth, minorities and the most impoverished residents of urban areas (Laub, 1997; Walker, Spohn, & Delone, 2012).

B. National Crime Trends

National crime rates steadily declined from the mid-1980s to the mid-90s and continued to decline into the first decade of the 21st century. For example, throughout this period, homicide rates—a barometer that public officials and the general public use to gauge the overall safety of their communities—dropped to a 25-year low in 1996 (Blumstein & Wallman, 2000) and then to a 60-year low in 2010 (Federal Bureau of Investigation [FBI], 2011). From 1991 to 2004, the violent crime rate fell nearly 40 percent, from 758 per 100,000 persons to 463 per 100,000 persons (FBI, 2006). Consequently, by 2004, the violent crime rate was roughly the same as it was in 1970 and the murder rate had fallen to its lowest level since 1965 (Bureau of Justice Statistics [BJS], 2006a).

Between 1993 and 2005, violent crime rates decreased by 58 percent (Catalano, 2006). Steep declines in the violent crime rate appeared even during the crime-ridden 1980s when, in 1986, the overall level of crime dropped to its lowest level since the launching of the National Crime Victimization Survey (NCVS) in the early 1970s (see below) (Laub, 1990). However, the safety dividends of the crime reduction era have been unequally dispersed. Low-income minority communities continue to experience high absolute rates of crime, especially violent victimizations (Kearney, Harris, Jacome, & Parker, 2014).

The fairly steady reductions in crime over the past 15 to 20 years should be welcome news to Americans. Nevertheless, the volume of violent crimes committed annually in the United States is still staggeringly high compared with the volume in other industrialized nations (Farrington, Langan, & Tonry, 2004), and fear of crime is still pervasive in this country, as previously noted (Warr, 2000). Indeed, although overall criminal victimization rates generally fell from 2005 to 2012, in each of those years, 66 percent or more of Americans perceived that

crime had increased from the previous year (Saad, 2013). Whatever its causes—and despite recent drops in crime—criminal victimization continues to transform people's lives, leaving an excess of human misery in its wake that affects not only the victims themselves but also their loved ones, friends and neighbors (Herman & Waul, 2004; Riggs & Kilpatrick, 1990).

C. Current Paper

This paper examines violent criminal victimization in the United States, including its measurement, prevalence, and costs. The focus is on aggregate assessments of the pervasiveness and costliness of violent crime in this country. Also discussed are various strategies for enhancing and expanding those assessments and various legislative and programming initiatives designed to help victims recover from the trauma of violence, which can be life-long and life-altering. While the observations and conclusions of this paper are based overwhelmingly on data, one section explores controversial theories of violent victimization, some of which feature the victim's role in precipitating or participating in the attack. Even with concern from victim advocates and service providers regarding the perniciousness of "victim blaming," these theories have been propounded for more than a half century in the field of victimology and have attempted to explicate the often dynamic and complicated nature of violent incidents. Notwithstanding their heuristic value, some of these theories have been difficult to test and therefore have generated limited empirical support.

The paper falls into six major sections. Following this initial section (Section I), which presents an overview of criminal victimization and crime trends, Section II describes the measurement of violent crime, focusing mostly on the two largest and longest-standing national repositories of data on reported and unreported crime and victimization: the Uniform Crime Report (UCR) and the NCVS . Section III presents trends in violent victimization. Crime data

from the UCR and the NCVS on the most serious violent crimes (i.e., homicide, forcible rape,

robbery, and aggravated assault) are presented. Section IV features an overview of the costs of

violent victimization in financial and psychological terms. Section V enumerates the

demographic characteristics correlated with violent victimization as well as controversial

criminological theories on how victims' lifestyles and behaviors might partially contribute to the

risk of violent victimization. Section VI traces the victim's rights movement and discusses the

evolution and growth of crime victim services. Section VII recommends improvements in the

measurement of victimization trends and textures, suggesting directions for future victimization

research in order to more precisely capture the nature, extent, and consequences of violent

victimization.

II. Measuring Crime in the United States

As noted above, crime in the United States is measured and reported through two primary

mechanisms: the UCR and the NCVS (Planty, Langton, & Barnett-Ryan, 2014). These are the

nation's largest, best-known, and most widely cited criminal justice sources of violent

victimizations in the United States. However, other sources of data on violent victimizations can

be found in other databases that lie in the public health arena. For example, the Centers for

Disease Control and Prevention's (CDC) National Intimate Partner and Sexual Violence Survey

(NISVS) describes and monitors incidents of intimate partner violence, sexual violence, and

stalking, involving men and women.

In a random digit dialing telephone survey covering all 50 states, the NISVS focuses on

victimizations that are usually missing from other nationally representative surveys, such as

psychological aggression and coercive control over life choices as well as sexual and

reproductive health (CDC, 2014a). Another CDC data collection tool that records information on

violent victimization is the National Violent Death Reporting System (NVDRS) (CDC, 2014b). Operating in 32 states, the system is designed to answer questions about the "who, when, where and how" of violent deaths in order to answer the question of "why." In 2010, the NVDRS added a module on intimate partner violence (CDC, 2014b).

A. Uniform Crime Report (Part I Violent Index Crimes)

      1. Description of UCR. The International Association of Chiefs of Police created the UCR in 1929 in order to establish a standard and reliable methodology for collecting and communicating crime data throughout the country (Chilton, 2010). The Federal Bureau of Investigation (FBI) assumed responsibility for the UCR in 1930. "Police administrators from around the country were very supportive of [the UCR]. They felt that such knowledge could help identify the magnitude of the crime problem, map changes over time, and guide actions to combat the criminal element" (Doerner & Lab, 2015, p. 27).

      The UCR gathers and synthesizes information on crimes reported to or discovered by the police—that is, "offenses known to the police" (FBI, 2011). Local police department administrators compile these data in monthly reports and voluntarily submit them to the FBI for analyses and dissemination. The UCR database contains information from 17,500 police agencies located in jurisdictions that encompass 95% or more of the American population. Basic information in the UCR database includes the number of people arrested, characteristics of arrestees (e.g., gender, race, age), the number of crimes known to the police through victim or witness reports or police activity and investigation, and the number of law enforcement officers in a jurisdiction (Gaines & Miller, 2014).

      In its traditional Summary Reporting System (SRS), the UCR concentrates on eight major "street" or "predatory" (Cohen & Felson, 1979) crimes, also known as Part I Index crimes.

These include violent crimes such as homicide (murder), forcible rape, robbery, and aggravated

assault as well as property crimes such as burglary (breaking or entering), theft (larceny), motor

vehicle theft, and arson. The FBI's definitions of violent Part I Index crimes are presented below.

Data on each of these serious offenses are typically reported as a rate per 100,000 residents,

which is calculated by dividing the number of offenses by a jurisdiction's current population and

then multiplying by the standard population size; and as a percentage change from the preceding

year or other periods of time, which is calculated by subtracting the previous number of crimes

per year from the current number of crimes per year and dividing the difference by the previous

number of crimes per year.

Part II Index crimes are considered less serious offenses and consist of offenses such as

forgery, vandalism, prostitution and commercialized vice, and gambling. In its annual report,

Crime in the United States, the UCR presents crime data for the entire nation (Planty, Langton,

& Barnett-Ryan, 2014). Researchers and expert analysts can disaggregate this information by

regions of the country, states, counties, cities (towns), and American Indian reservations (FBI,

2014). In 2004, the UCR stopped publishing separate data on the aggregate crime index because

the overwhelming numbers of theft cases, which outnumbered more serious but less prevalent

violent crimes, obscured the meaningfulness of these data. The report now separates the violent

crime total from the property crime total (James & Council, 2008).

_____

Definitions of Part I Index Crimes (FBI 2010)

Murder and Non-negligent Manslaughter: The willful (non-negligent) killing of one human
being by another. The definition excludes deaths caused by negligence, attempts and assaults to
kill, suicides, and accidental death.

Forcible Rape: The carnal knowledge of a female forcibly and against her will. Excluded are
statutory offenses that involve a victim under the age of consent and incidents without force. In

December 2011, the SRS changed its definition of rape to "penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim." This definitional change was instituted in December 2013.

Robbery: The taking or attempting to take anything of value from the care, custody, or control of a person or persons by force or threat of force or violence and/or by putting the victim in fear.

Aggravated Assault: The unlawful attack by a person upon another for the purpose of inflicting severe or aggravated bodily injury. Aggravated assault is generally accompanied by the use of a weapon or by means that can result in death or by means likely to result in death and great bodily harm. Simple assaults (not involving a weapon or resulting in bodily harm) are excluded from this category.
_____

   2. Limitations of the UCR. A major limitation of the UCR is that it gathers only

"official" crime data, consisting of offenses that come to the attention of police officials and are

recorded in police departments' records; unreported crimes are not included, thereby

underestimating the number of crimes and the number of offenders (Gaines & Miller, 2014). The

UCR is a voluntary reporting system. As previously stated, not all jurisdictions report data to the

UCR; therefore, it is limited in its coverage as a crime reporting system. For example, in 2006,

law enforcement agencies reporting to the UCR were located in jurisdictions that represented

only 94% of the American population, thus excluding 18 million people from the UCR database

(FBI, 2007).

   Another limitation of the UCR is that victims fail to report crimes for a variety of

reasons, including beliefs that the incident was a private matter or that the police can do nothing

about it as well as fear of retaliation from the offender or a desire to protect the offender (Hart &

Rennison, 2003). For homicide cases, the UCR collects only details about the victim and

offenders (see below) and excludes information about weapons from forcible rape cases, which

are also reported for female victims only. Furthermore, the UCR's hierarchy rule counts only the

most serious crime in a multiple-crime incident. For example, if a home is burglarized and the

homeowner is raped during the incident, only the forcible rape would be recorded. This systematic undercounting biases the crime data downward and makes the UCR data incomparable with international crime recording systems, which count all crimes in a multiple crime episode (Gaines & Miller, 2014).

More egregious is evidence of purposeful downgrading of crime, such as the Atlanta Police Department's withholding from the UCR of more than 20,000 police reports in an effort to attract the 1996 Olympic Games and boost city tourism (Walker & Katz, 2002). Less pernicious but decidedly more rampant is the routine underreporting of crimes by police officers who, for example, are less likely to file a report if no suspect was present in the incident or identified in a citizen complaint (Walker & Katz, 2005; see Black, 1970, for the seminal study of police discretion and underreporting of crime). Accordingly, UCR data mostly reflect the results of policing strategies and deployments, not offender behavior (criminal activity); the experiences or actions of crime victims before, during, or after the incident are never included in standard UCR statistics (Regoli & Hewitt, 2008). Moreover, law enforcement agencies often report annual data that fall short of the full 12 months (Barnett-Ryan, 2007; Mosher et al., 2002)

3. National Incident-Based Reporting System. In the 1970s, in an effort to overcome some of the shortcomings of the UCR, the FBI established the National Incident-Based Reporting System (NIBRS), which records information on all the crimes committed in an incident (not only the most serious crime [the hierarchy rule]) and provides more texture to crime reports by including data on offenders, victims, and places (Regoli & Hewitt, 2008). Expected to eventually replace the UCR, NIBRS collects detailed data on each crime that becomes known to the police. These data include information regarding the incident, the victim, and the characteristics of arrestees, which constitute 53 separate crime elements for offenses in 22

categories and two groups (A and B), providing police agencies with the data needed to adduce more numbers-driven arguments for greater resources and personnel (FBI, 1999).

Analogous to the UCR, NIBRS reports crimes against persons and crimes against property; NIBRS also reports attempted and completed offenses as well as offenses in a third category known as "crimes against society." Group A offenses include crimes such as arson, assault, embezzlement, gambling, homicide, prostitution, and robbery. Group B offenses contain information on arrests only and include crimes such as disorderly conduct, liquor law violations, and check fraud. NIBRS submits data on each separate crime incident to the FBI and separately tallies the number of Part I and Part II Index crimes for jurisdictional reporting purposes (James & Council, 2008).

In addition to collecting and reporting data on a greater variety of crimes with a greater level of detail, NIBRS offers other advantages over the UCR, including the capacity to link specific incidents to offenses and to distinguish between attempted and completed crimes (James & Council, 2008), allowing "researchers to gain a more in-depth picture of the crime problem and to use that information to decide on appropriate courses of action" (Doerner & Lab, 2015, p. 29). Notwithstanding its strengths as a data collection and reporting tool, NIBRS is labor-intensive (i.e., the system contains strenuous data entry and processing requirements) and has been implemented in jurisdictions that cover only 17% of the American population (James & Council, 2008).

4. Supplemental Homicide Reports. Available from the National Archive of Criminal Justice Data, the most detailed information on homicide is contained in the FBI's Supplementary Homicide Reports (SHR), which gather and report various data: age, gender, and race of murder victims and offenders; types of weapons used in the incident; and the relationship between

victims and offenders (Cooper & Smith, 2011; James & Council, 2008). The SHR data

illuminate several interesting trends regarding homicide incidents, perpetrators, and victims. The

BJS' Patterns and Trends series presents these trends, covering a three-decade period from 1980

to 2008 (Cooper & Smith, 2011).

Regardless of its shortcomings, the UCR provides useful data for establishing national

crime trends as well as informing crime control policies and the deployment of law enforcement

resources (Fagin, 2011). Indeed, the UCR was the first—and most enduring—attempt to

establish a national, standardized measure of the incidence of crime in the United States and

continues to be the best-promulgated and most highly referenced source of information on crime

in the country (James & Council, 2008). "UCR data are now used extensively by academics and

government officials for research, policy, and planning purposes, and the data are widely cited in

the media" (James & Council, 2008, p. 2).

B. National Crime Victimization Survey (NCVS)

1. Description of NCVS. Administered by BJS and conducted by the U.S. Census

Bureau, the NCVS was designed to illuminate the "dark figure" of crime; namely, offenses that

never come to the attention of the police (Planty, Langton, & Barnett-Ryan, 2014). The first

generation of the NCVS was conducted by the National Opinion Research Center and showed

that the victimization rate found in the survey was more than two times higher than the rate

reported in the UCR (Ennis, 1967). The current NCVS is the fourth generation of the survey and

contains several revisions to improve its administration and accuracy (Doerner & Lab, 2015). As

opposed to the UCR's second-hand police report filings on crime incidents, the NCVS asks

respondents specific questions about the crimes, such as the following: Was the crime reported to

the police? Was the offense completed or just attempted? Was a weapon used in the crime? Did

the victim resist? (James & Council, 2008).

According to the NCVS, more than half (52%) of all violent victimizations—or an annual

average of 3,382,200 violent victimizations—were never reported to the police during the period

from 2006 to 2010. The most common reason for non-reporting (34%) was that the victim dealt

with the crime by reporting it to another official (e.g., a guard, manager, school official). Almost

1 in 5 unreported violent victimizations (18%) were unreported because the victim believed the

crime was not important enough to notify law enforcement authorities. Other reasons included

the belief that the police would not or could not help with the matter and the fear of offender

reprisal. Unreported crimes have negative consequences. For example, victims might be deprived

of necessary services to cope with the victimization. When violent crimes are unreported,

perpetrators are unpunished, and law enforcement and community resources are misallocated due

to the absence of timely and accurate crime information at the local level (Langton, Berzofsky,

Krebs, & Smiley-McDonald, 2012).

2. **NCVS Methodology.** Each year, approximately 90,000 household and 160,000

individual NCVS interviews are conducted with persons age 12 or older to gather detailed

information about reported and unreported crimes as well as data on victims (e.g., age, gender,

race), offenders (e.g., age, the offender's relationship to the victim), and the crime incident itself

(e.g., weapons used, location of the offense, economic costs and physical injuries caused by the

victimization). "The NCVS provides the largest national forum for victims to describe the impact

of crime and characteristics of violent offenders" (Barnett-Ryan, Langton, & Planty, 2014, p. 1)

as well as "nationally representative information on the frequency, characteristics, and

consequences of non-lethal violence and property crime against persons and households"

(Lauritsen, 2009, p. 68). Other specific benefits of the NCVS are its usefulness in understanding why victims fail to report crimes to the police and the variations in crime reporting attributable to crime and victim characteristics. The NCVS also sheds light on the interactions and relationships between victims and offenders as well as differences over time and among population types (e.g., rural, suburban, urban) (James & Council, 2008; Wells & Rankin, 1995).

Beginning in 1989, a new NCVS methodology was systematically field-tested. Annual results from the redesigned survey were first published in 1993 (BJS, 1994). New survey questions were added in response to heightened interest in certain types of victimizations, such as domestic violence, victimizations against people with disabilities, hate crime, and identity theft (James & Council, 2008). Improvements in technology and survey methods were also incorporated in the redesign of the NCVS, including more precise screening questions and cues that stimulate the recall of victimization incidents and the adoption of computer-assisted telephone interviewing \ techniques. In addition, NCVS interviewers now ask more direct and explicit questions about sexual victimization (Rennison & Rand, 2007).

3. Limitations of NCVS. The NCVS asks questions about Part I Index crimes (except arson and homicide) but it measures no crimes against businesses (i.e., commercial crimes) or victimless crimes, such as drug crimes, prostitution, and gambling. The NCVS relies on a national sample of households and is therefore subject to sampling error and must present findings based on confidence interval estimates. Therefore, the true values of the data reported are never known. Nonsampling errors stem from respondents' limited or faulty memories (i.e., memory decay) and telescoping (i.e., recalling events that transpired outside the survey period) as well as interviewer mistakes in the asking or wording of questions. Respondents also might be fearful of reporting a crime due to the possibility of offender retaliation, or they might never

have defined an incident as a criminal victimization. Furthermore, when using the "household" as the unit of analysis, if the members of such change from one wave to the next, the bounding of the initial interview's point of reference for subsequent questions is no longer useful and can result in inflated victimization rates (James & Council, 2008).

Despite its limitations, the NCVS is an invaluable source of information about the nature, prevalence, and trends regarding violent victimization among individuals and households. The survey is an indispensable complement to the UCR (see below). To improve the accuracy, breadth, and usefulness of the NCVS, BJS commissioned in 2010 the National Research Council of the National Academies to review the survey's methodology and to establish guidelines for redesigning the survey. This advisory panel consisted of experts from the fields of criminal justice policy, research and survey methodology, victim advocacy, and statistics. These experts oversaw a consortium of criminologists, social scientists, and survey experts, who conducted research on designing and improving NCVS protocols and procedures (National Archive of Criminal Justice Data, 2014).

Based on the recommendations of the panel, BJS has initiated projects to identify, develop, and test various methods for improving the collection of self-reported data on rape and sexual assault. Specifically, "other" victimizations, such as non-rape sexual assault and unwanted or coerced sexual contact that involves a threat or attempt to harm, are also being measured. "Ultimately it is the goal of BJS to redesign the NCVS to improve its methodology, assure its sustainability, increase its value to national and local stakeholders, and better meet the challenges of measuring the extent, characteristics, and consequences of criminal victimization" (BJS, 2014).

C. Comparing the UCR and the NCVS

With regard to overall trends, the findings of the UCR and NCVS are closely matched. For example, both show that property crimes are much more numerous than violent crimes, crime rates are higher in cities than in suburbs, and young men are the most likely victims and perpetrators of violent offenses (see below). Generally, when crime goes up in one data set, it goes up in the other (Rennison & Rand, 2007). The UCR and NCVS are differentially generated sources of data on crime; in juxtaposition, they elucidate critical differences between official records of victimization (UCR) and victimization experiences (NCVS). Together, they provide triangulated measures of the nature, scope, and impact of criminal victimization—each with its own strengths and limitations (James & Council, 2007)—because "crime, unlike the weather, is a phenomenon that is not directly observable. No one measure [the UCR or the NCVS alone] is capable of providing all the information about the extent and characteristics of crime" (Rand & Rennison, 2002, p. 48).

The UCR and NCVS were originally created to serve very different purposes. In designing the UCR, the FBI's primary goal was to collect and collate crime data (i.e., the number of crimes reported to law enforcement agencies throughout the country) and related statistics (e.g., the number of law enforcement officers) in order to improve the administration, management, and operations of law enforcement agencies (BJS, 2014). The UCR's Supplementary Homicide Reports provide the most reliable, timely data on several aspects of homicides in the nation. The NCVS was expressly developed to complement the UCR (BJS, 2014). BJS established the NCVS to uncover previously unknown information about victims, offenders, and crimes never reported to the police. Hence, the NCVS is the chief source of information on the characteristics of criminal victimization (BJS, 2014).

The UCR and the NCVS share common elements. For example, the two programs measure the same subset of violent crimes *sans* homicide (i.e., forcible rape, robbery, aggravated assault), which are similarly defined. However, although forcible rape is defined analogously in both, the UCR has historically measured these crimes against women only, whereas the NCVS measures it against both genders (James & Council, 2008). As noted above, the UCR has broadened its definition of rape to include a wider range of sexual crime as well as sexual violence against men. Unlike the UCR, the NCVS excludes homicide, arson, commercial crimes, and crimes against children under the age of 12. The UCR captures crimes reported to law enforcement but collects only arrest data for simple assaults and sexual assaults other than forcible rape. The UCR defines burglary as "the unlawful entry or attempted entry of a structure to commit a felony or theft." The NCVS, however, obviating the need for victims to ascertain offender motives, defines burglary as "the entry or attempted entry [into] a residence by a person who had no right to be there."

The UCR rates for crimes are largely per-capita measures (number of crimes per 100,000 persons), whereas the NCVS rates for crimes are largely per-household measures (number of crimes per 1,000 households). Since the number of households and the total population might grow at varying annual rates, trend data for rates of household crimes measured by the two programs might diverge. NCVS victimization rates for robbery include only those reported to the police. After removing UCR robberies of commercial establishments (non-households) such as gas stations, convenience stores, and banks from analyses, the results reveal closely corresponding long-term trends for this offense (Rennison & Rand, 2007).

Differences in the NCVS and the UCR data could result from sampling variations and data interpolations, respectively. NCVS data are derived from sample interviews and thus are

subject to a margin of error. BJS uses rigorous statistical methods to calculate confidence intervals around all survey estimates. BJS describes trend data in the NCVS reports as genuine only if there is at least 90% certainty that the measured changes are not the result of sampling variations. The UCR program bases its data on the actual counts of offenses reported by law enforcement agencies. In some circumstances, the UCR program estimates its data to adjust for nonresponse in nonparticipating agencies or those reporting only partial data (James & Council, 2008).

For most types of crimes measured by the UCR and NCVS, those aspects of crime not common to both can be excluded from analyses. The resulting long-term trend lines can then be brought into close concordance. The impact of such adjustments is most striking for robbery, burglary, and motor vehicle theft, whose definitions most closely coincide (Rennison & Rand, 2007). Apparent discrepancies between statistics from the two programs usually can be accounted for by definitional and procedural differences or resolved by comparing NCVS sampling variations (confidence intervals) of those crimes said to have been reported to police with those crimes as revealed in UCR statistics, thereby yielding a supposed direct comparison of 'reported crime' to 'reported crime' (Rennison & Rand, 2007).

III. Prevalence of Violent Crime

Figure 1 and Table 1 in the Appendix show a mostly steady decrement in both the UCR and NCVS indices of violent crime and victimization during a recent 20-year period (1993–2013). The continued downturn in such incidents has been characterized as one of the most profound and prolonged periods of declining victimization risk in the country's history (Zimring, 2007). The figure and table also illustrate the overall consistency between the two major data repositories for reported violent crime and victimization in the United States.

A. Violent Crimes: UCR Data

According to the UCR, the violent crime rate (e.g., murder, forcible rape, robbery, aggravated assault) has consistently declined for more than 20 years, dropping from a high of 747 per 100,000 residents in 1993 to a low of 387 per 100,000 residents in 2011 and 2012. From 1993 to 2002, the violent crime rate declined 34%; from 2003 to 2012, it declined 19%. In 2012, it was 48% lower than in 1993 (FBI, 2014). In 2012 (when the rate of violent crimes per 100,000 residents was 387), 1,214,462 violent crimes were reported and recorded nationwide. In that same year, aggravated assault was by far the most common violent crime (63%), followed by robbery (29%), forcible rape (7%), and murder (1%). Firearms were used in nearly 70% of the nation's murders, 41% of robberies, and 22% of aggravated assaults (see below) (FBI, 2014).

Between 1980 and 2010, more than 500,000 murders were reported or recorded in the United States—nearly 6 times more than the cumulative and combined totals of American combat-related deaths recorded in the Korean and Vietnam conflicts and the ongoing War on Terror (FBI, 2014). As most homicide victims are young, a significant number of productive years are lost as a consequence of murder. In addition, the surviving loved ones of homicide victims often experience profound and long-lasting emotional trauma (Zinzow, Thomson, & Rheingold, 2013).

The most prominent overall trends are the steady and sometimes marked increases in homicides in the second half of the 20th century and the smooth and mostly steady decreases in homicides in the final decade of the 20th century as well as in the first decade of the current century. For example, beginning in the early 1950s, homicides trended upward, more than doubling from a rate of 4.6 per 100,000 residents in 1962 to 9.7 per 100,000 residents in 1979. The upturn stalled in the early 1980s, only to resume in the late 1980s and early 90s, reaching

peaks in terms of both numbers (23,040) and rates (10.2 per 100,000—the highest rate ever

recorded), first in 1980 and again in 1991 (24,703 homicides—the highest number ever

recorded—with 9.8 per 100,000). Thus, from 1960 to 1990, the number of homicides more than

doubled (157%); however, from 1990 to 2010, the number of homicides fell by nearly 40%.

From 1992 to 2011, the homicide rate declined by nearly half (49%), from 9.3 to 4.7

homicides per 100,000 residents—the lowest rate since 1963 (Smith & Cooper, 2013). More

recently, the number of yearly homicides averaged 13,340 from 2008 through 2012 (FBI, 2014).

In 2012, a total of 14,827 homicides were reported at a rate of 4.7 per 100,000, which equaled

the rate of homicides in 1963—a 17% higher rate than the lowest rate of the previous century

(4.0 in 1957) and a 54% lower rate than the highest rate of the previous century (10.2 in 1980).

The homicide rate in 2012 increased 0.4%, compared with the rate in 2011, and decreased 13%

and 17%, compared with the rates in 2008 and 2003, respectively. Nearly 70% of the homicides

committed in 2012 involved a firearm, and more than 70% of those involved a handgun (see

below) (FBI, 2014).

B. Guns and Violent Crime

From 1985 to 1993, nearly all of the overall increases in the homicide rate involved gun-

related murders; conversely, homicide rates involving other weapons declined during those years

(Committee on Law and Justice, 2004). The likelihood of death in a violent altercation

significantly increases when either the victim or the attacker has a firearm (Cook & Moore,

1995). For example, the mortality rate for gunshot wounds to the heart is 84%, whereas the

morality rate for stab wounds to the heart is 30% (Asensio et al., 1998).

Handguns are lightweight and easy to carry and conceal. They are successful at inflicting

mortal wounds that sometimes result in instantaneous death. Handguns are also, by far, the most

favored weapons for committing murders in public places; victim resistance is nearly impossible, the shooting incident lasts seconds, and the offender can be far removed from the scene during and after the shooting incident. Knives, baseball bats, brass knuckles, fists, and feet are not as lethal as guns and take more time to cause damage. Hence, fewer guns overall would probably, but not necessarily, equate to fewer homicides (Lurigio, 2012).

The number of incidents of homicides committed with a firearm in the United States is greater than that in other developed countries. For example, in 2009, the gun-related homicide rate in the United States was 3.0 per 100,000 residents. In comparison, the gun-related homicide rates in the United Kingdom and Germany, where gun control laws are highly stringent, were 0.07 and 0.20 per 100,000 residents—40 and 13 times lower, respectively, than the rate in the United States (United Nations Office on Drugs and Crime, 2011). However, gun-related homicides in Switzerland are similarly low (i.e., 0.52 per 100,000 residents in 2010), despite the fact that the country has the third-highest number of guns per resident in the world (gunpolicy.org).

In the last 10 years (2004–2013), in the United States, firearm victimizations dropped from 465,510 to 332,950, resulting in a 28% decline. During this period, the number of such victimizations reached its highest point in 2006 (614,410) and its lowest point in 2013 (332,950). From 1992 to 2011, the rate of homicides involving a firearm declined by 49%, whereas the percentage of homicide victims killed by a firearm (67%) remained unchanged during that same period (Smith & Copper, 2013).

The mere presence of a gun in a household increases the risk of gun-related death. A recent study found a high correlation between gun ownership and homicides in the United States; specifically, the homicide rate increases 0.9% for each percentage-point increase in gun

ownership. States with the highest rates of gun ownership also have the highest rates of gun-related homicides (Siegal et al., 2014). Paradoxically, although violent crime rates have been decreasing, handgun purchases for protection have been increasing. For example, the percentage of owners reporting that they purchased guns for protection rose from 26% in 1999 to 49% in 2013 (Pew Research Center, 2013). Proponents of gun ownership have argued that these data present strong evidence for the protective effects of guns on public safety (Lott, 2010).

Guns are also involved in other types of violent victimizations. The use of firearms in assaults, rapes, and robberies contributes to the death rate from interpersonal violence in the United States. Indeed, firearms are a major contributing cause of death and injury in incidents of interpersonal violence. The lethal combination of the ready accessibility of guns and the willingness of people to use them in ill-fated attempts to resolve interpersonal conflicts has consistently fueled the high rates of violent death in the United States (Zimring & Hawkins, 1997).

According to the NCVS, in 2011, nearly 470,000 people were victims of nonfatal crimes that involved a firearm (Planty & Truman, 2013). The number of nonfatal firearm-related victimizations reached its peak in 1994 (1,568,200) and its lowest point in 2008 (371,300). From 1993 to 2011, an average of 25% of robberies and 28% of aggravated assaults were committed with a firearm. For example, in 1994, nearly 30% of victims of robbery, rape, and aggravated assault faced an offender who was armed with a gun (Zawitz, 1994). From 1993 to 2001, an average of 10% of violent victimizations involved a firearm, which was the most common weapon used in nonfatal violent crimes. During this period, firearm violence declined 63% (Perkins, 2003). From 1994 to 2011, handguns were involved in no fewer than 84% (and as

many as 93%) of nonfatal violent victimizations that were committed with a weapon (Planty &

Truman, 2013).

Analyses of NCVS data from the late 1980s and early 1990s shows that among those

injured in firearm-related victimization incidents, 19% sustained gunshot wounds and 15%

sustained serious injuries (Zawitz, 1996). From 2007 to 2011, 23% of firearm victims sustained

injuries (46,000 victims were wounded by gunshots). Among those injured, 72% received

treatment for their injuries. More than 40% of the incidents of nonfatal firearm violence occurred

in or around victims' homes or lodgings; only 1% of the victims of nonfatal firearm violence

protected themselves with a firearm during the incident (Planty & Truman, 2013).

C. Violent Crimes: NCVS Data

According to the NCVS, from 1973 to 1994, the violent victimization rate fluctuated,

peaking in 1981, falling until the mid-1980s, and then peaking again in 1993 (Rennison, 2002).

From 1994 to 2001, the rate fell dramatically (62%), declining from approximately 8,000 to

approximately 3,000 per 100,000 persons aged 12 and older. The rate climbed to 3,210 in 2003,

decreased to 2,260 in 2011, and grew to 2,610 in 2012 (6.8 million violent victimizations)

(Truman, Langton, & Planty, 2013), compared with 5.7 million violent victimizations in 2001

(Rennison, 2002). The rate of nonlethal violence in 2002 (2,300 per 100,000 persons aged 12 and

older) was the lowest ever recorded in the NCVS (Lauritsen, 2009). In 2013, 6.1 million

residents experienced violent crimes. The rate of violent crime (2,600.1 per 100,000 residents)

declined 11% from the previous year. The decline in violent crime victimizations was the result

of declines in stranger-on-stranger violence. From 2004 to 2013, the rate of violent crime

declined 16%; this decline can be explained in part by the dramatic decline in the number of

crime victims (more than 400,000 fewer in 2013 than in 2004) during this period (Truman &

Langton, 2014).

D. Summary of Violent Crime and Victimization Trends

As presented in Table 1 and Figure 1, violent victimization and crime generally declined

from 1993 through 2013, with the steepest declines occurring in the 1990s (in both the UCR and

NCVS data reporting programs). Declines continued in both programs during the 2000s but were

less prominent than those reported in the 1990s; declines were comparatively less steep in the

UCR dataset. The statistics reported in the NCVS and the UCR were highly correlated (r = .79)

(i.e., the reductions in violent victimizations and crimes kept apace in both programs).

IV. Cost of Crime

A. Overview

Broadly defined to include interpersonal and self-inflicted acts of harm, violence is the

leading cause of mortality and morbidity in the United States, resulting annually in 50,000 deaths

and nearly $2.2M in medically treated injuries (National Center for Injury Prevention and

Control, 2007). The costs of interpersonal violence alone are extensive and prodigious. The

expenses incurred stem from premature deaths, injuries, and disabilities, which result in years of

lost productivity as well as medical costs for injury-related treatment and physical rehabilitation.

The economic burden of violent victimization is complicated and challenging to measure, and is

especially difficult to document and compare systematically and reliably from place to place and

year to year (Corso et al., 2007).

The costs of criminal victimization have been divided into two major components:

tangible (e.g., victim loss and criminal justice expenditures) and intangible (e.g., pain, suffering,

psychological distress, diminished quality of life) (McCollister, French, & Fang, 2010) (see below). Since the 1980s, numerous studies have been conducted to estimate the costs of crime (Heaton, 2010). The first, and most-cited, methodology is the accounting approach, which draws upon various data sources (e.g., UCR, NCVS, NIBRS) in order to apply a basic cost calculus for each crime type (Miller, Cohen, & Wiersema, 1996). The second approach, contingent valuation, asks survey respondents about their willingness to pay for crime reduction programs for each type of crime (Harrison & Rustrom, 2008). The third approach, hedonic valuation, asks respondents to estimate the effects of crime on housing prices and other community amenities (Linden & Rockoff, 2008).

A recent RAND Corporation report compared the annual crime cost estimates (2007 dollars) of three high-quality studies (Heaton, 2010); two used the accounting approach (Cohen & Piquero, 2009; French, McCollister, & Reznik, 2004) and one used the contingent valuation approach (Cohen et al., 2004). Overall, the cost valuation approach yielded higher cost estimates than the accounting approach. The results of the studies were as follows: homicide ($8.6M average), with a range of $5M to $12M; rape ($217,866 average), with a range of $150,000 to $283,000; robbery ($67,277 average), with a range of $23,000 to $127,715; and serious assault ($87,238 average), with a range of $55,000 to $122,943.

These estimates vary greatly within and especially between approaches. Nevertheless, the author of the report noted, "It is clear from these numbers that the total social costs of crime are large, certainly much more than simply the costs of enforcement. Additionally, the fact that estimated costs are quite large when we look across several different methodologies for calculating costs gives us greater confidence that the actual social costs of crime are substantial" (Heaton, 2010, pp. 5–6). Indeed, the sizeable overall costs of crime victimization were

demonstrated in a study that combined data from several sources (e.g., UCR, NIBRS, NCVS)

and covered a variety of expenditures, including criminal justice system costs (see below), crime

victim costs (see below), and emotional costs (see below) (McCollister, French, & Fang, 2010).

In 2008 dollars, the total approximate annual costs of a single incident of violent crime

victimization were as follows: murder ($9B), forcible rape ($200,000), aggravated assault

($13,000), and robbery ($5,000).

B. Criminal Justice System Expenditures

The financial burdens of criminal victimization can be captured generally along three

dimensions. The first type of financial burden involves the expense of operating the correctional

system (federal, state, local), which had an $80B price tag in 2010, growing 350% since 1980

(Kyckelhahn, 2013). These costs have stretched local and state budgets, begging for a

reexamination of sentencing policies and the institution of reforms, such as a shift in public

safety expenditures away from the use of prisons for nonviolent offenders to an investment of

resources in education and local policing (Lofstrom & Raphael, 2013). Other substantial direct

outlays stemming from criminal justice system operations include annual expenditures of $113B

for police protection and $42B for the prosecutorial and judicial costs of processing state and

local criminal cases (Kyckelhahn, 2011).

C. Direct Financial Losses to Victims

The second type of financial burden involves victim costs associated with lost property

and wages, medical care, insurance premiums, crime prevention strategies, and other

expenditures. For example, in 2004, the costs of violent crime exceeded $1B (BJS, 2006b). In

2005, more than $360M worth of property was stolen during robberies (FBI, 2005). From 1987

to 1990, crime cost an estimated $450B annually, broken down into the following expenditures:

$18B for medical and mental health care costs; $87B for other tangible costs, such as lost (or damaged) property, income, and work productivity; and $345B for costs associated with diminished quality of life (e.g., pain, suffering, fear, avoidance behaviors) (Miller, Cohen, & Wiersema, 1996). Crime victim costs can also include private and public expenditures for target-hardening and environmental modifications to reduce crime, such as safety lighting, security fences, locks, alarm systems, antiviral software programs, and armored car services (Anderson, 2011).

One of the most comprehensive national studies of the cost of violent victimization estimated that the economic burden of such experiences in 2000 was $37B; most of the costs (89%, $33B) were associated with lost productivity, and the remainder was attributable to medical expenses (11%, $4B) (Corso et al., 2007). The costs of violent victimization were concentrated among young people (ages 15 to 44), who accounted for 75% of violence-related injuries and 83% of violence-related expenses. In 2000, homicides alone cost more than $22B in terms of medical costs and lost productivity (Corso et al., 2007).

An earlier study found that the lifetime costs of violent victimization amounted to $105B annually (in 1993 dollars), and included the costs associated with medical care, lost wages, and victim services. The estimate quadrupled with the inclusion of pain, suffering, and diminutions in the quality of victims' lives (Miller, Cohen, & Wiersema, 1996). The study also included a review of other studies that had attempted to quantify the intangible costs of crime. For example, one investigation combined the results of 50 studies to derive a lifetime estimation of $2.7M attributable to each episode of fatal victimization (Miller, 1990). Using the same data source, another study determined that loss to be between $3M and $7M (Viscusi, 1993).

D. Emotional Burdens

The third type of financial burden involves the implicit cost of fear and the emotional sequelae of criminal victimization. The less tangible costs of crime include lasting psychological harm that destroys victims' ability to feel safe in their own homes or neighborhoods. Victimization can produce feelings of vulnerability, dread, chronic anxiety, and depression. Victims often struggle to regain a sense of control in their lives that is critical to well-being. Victimization can result in shame, guilt, self-blame, and isolation (Office of Victims of Crime, 1998); "these emotional costs can be more debilitating than the financial losses resulting from crime" (Doerner & Lab, 2015, p. 84). As noted above, fear of crime can be harmful to entire communities. Nearly 50 years ago, the President's Commission on Law Enforcement and Administration of Justice (1967) asserted, "The most damaging of the effects of violent crime is fear, and that fear must not be belittled" (p. 3).

Fear of crime remains a pervasive and defining element in American culture (Warr, 1994) and is largely an emotional reaction and rarely based on a rational determination of the odds of being attacked (Warr, 2000). In terms of people's crime-related feelings and behaviors, perceived vulnerability trumps actual risk (Stiles, Halim, & Kaplan, 2003). For example, older white women express significant fear of violent crime despite being at low risk for such victimization. In contrast, younger men of color express little fear of violent crime even though they are at high risk for such victimization (Pastore & Maguire, 2002). Worry and concern about criminal victimization remain common in spite of steady reductions in violent and property crime. For example, one of five survey respondents reports being frequently or occasionally worried about being a victim of murder (Maguire, 2013).

A long-term insidious cost of violent victimization, fear of crime renders residents less likely to interact with neighbors and to use local businesses. Fear of violent crime can also cause

an exodus from neighborhoods, usually of those residents who are financially able to relocate, thereby decimating the core of the informal social control networks in communities and initiating the downward spiral of neighborhood decay (Cullen & Levitt, 1999; Skogan, 1990). This fear might be "the largest of the costs of crime" (Kleiman, Caulkins, & Gehred, 2014, p. 15). The costs of such devastation are incalculable.

Many victims of serious crime are diagnosed with post-traumatic stress disorder (PTSD), a psychiatric problem that affects thoughts, feelings, and behaviors. Victims' "pain and suffering" resist quantification, but are among the most deleterious consequences of crime (DiMaggio & Galea, 2007). PTSD symptoms include intense anxiety, depression, recurrent and distressing dreams and recollections of the event, flashbacks of the episode, persistent symptoms of physiological reactivity (e.g., exaggerated startle responses, hypervigilance, and sleep difficulties), impairment in social and occupational functioning, and disrupted interpersonal relationships (American Psychiatric Association, 2013).

Compared with non-victims, crime victims experience significantly higher rates of current (10% vs. 4%) and lifetime (25% vs. 9%) PTSD (Kilpatrick & Acierno, 2003). The risk of developing PTSD is highest among victims of the most serious crimes: 49% among rape victims, 24% among other types of sexual assault victims, and 32% among aggravated assault victims (Sidran Foundation, 2004). Furthermore, crime victims have extremely high rates of comorbid psychiatric disorders; for example, in one study, 88% of male crime victims and 79% of female crime victims with symptoms of PTSD also met the diagnostic criteria for depression, substance use disorders, and phobias (Kilpatrick & Acierno, 2003).

The families and friends of homicide victims are another group (secondary victims) who are vulnerable to PTSD. Research has indicated that the current and lifetime prevalence rates of

PTSD among surviving family members and friends of homicide victims were 10% and 22%, respectively (Thompson, Norris, & Ruback, 1998). "Merely hearing about the victimization of a neighbor, friend, acquaintance, or coworker can also result in secondary victimization effects, such as increased anxiety and fear of crime" (Herman & Waul, 2004, p. 11). Female survivors of the homicide of a family member or close friend experienced higher rates of PTSD than non-homicide survivors (comparison group); 22% experienced lifetime PTSD, and 9% had current PTSD (Kilpatrick & Acierno, 2003).

An extensive review of numerous studies, spanning more than 30 years of research and a variety of methodologies and violent crime victim populations (also including the survivors of homicide), found considerable evidence of the adverse consequences of crime victimization on the quality of victims' lives (Hanson, Sawyer, Begie, & Hubel, 2010). These consequences were described in three categories that operationally defined the components of "quality of life": role functioning, social-material conditions and life satisfaction, and well-being. In terms of each of the three categories, violent crime victims can experience reductions in their ability to parent effectively (e.g., Casanueva et al., 2008), to enjoy healthy and satisfying interpersonal relationships (Nelson & Wampler, 2000), to work productively (e.g., Swanberg, Mack, & Logan, 2007), and to engage socially (e.g., Gutner et al., 2006). As noted previously, they are also likely to incur healthcare expenses (e.g., Max et al., 2004). However, evidence for the effects of violent victimization on life satisfaction and well-being is unclear (e.g., Michalos & Zumbo, 2000).

In support of the findings of the aforementioned review, a recent NCVS study found that more than two-thirds (68%) of serious violent crime victims (i.e., sexual assault, rape, robbery, firearm violence) experienced socio-emotional problems, which were defined as combinations of severe distress and problems in school, work, and relationships. More than 9 of 10 violent crime

victims reported some type of emotional symptoms (e.g., anxiety, vulnerability, depression), and

more than 6 of 10 serious violent crime victims reported some type of physical symptoms (e.g.,

sleep problems, fatigue, gastrointestinal disturbances). More than three-quarters of the most

serious violent crime victims (e.g., rape, firearm violence, violence with medically treated

injuries) endured socio-emotional impact. Victims of violence who experienced socio-emotional

problems were more likely than those who had no such problems to report the victimization to

the police and to seek victim services (Langton & Truman, 2014).

E. Challenges in Measuring Costs

Estimates of the cost of violence are fraught with numerous methodological and

measurement challenges (McCollister et al., 2010). Nonetheless, continued efforts should be

made to capture the economic burden of violent crime, which is "draining U.S. society of vital

resources" (Corso et al., 2007, p. 478). The complications that hinder the accurate estimation of

cost are abundant. As discussed in this paper, underreporting of all types of violent crimes (with

the exception of homicide in the UCR) occurs in both the UCR and NCVS, which are major

repositories of cost-estimate data.

Undercounting is apparent in other realms of data collection. For example, a bias in cost

estimates is produced when there is a failure to recognize and define a presentation in an

emergency department visit as an instance of interpersonal violence (other than intimate partner

violence). Physicians and other healthcare providers might neglect to ask about the intent of the

injuries, and patients might be unwilling to report such injuries, which leads to underestimates of

violence and its costs (Corso et al., 2007). Similarly, a significant percentage of violence-related

injuries are never medically treated and, thus, are never calculated in the costs of violent

victimization (Simon et al., 2006). A more substantial and troublesome shortcoming in the

estimation of the cost of violence is the fundamental lack of information on the "magnitude of intimate partner violence, sexual violence, and child maltreatment" (Corso et al., 2007, p. 481).

Inaccuracies in measurement can be related to the victims themselves. For example, people in the lowest income strata are more likely to be victims of gunshots and other types of violent crimes (Cook & Ludwig, 2000). Their income levels are lower than average, and they might be less inclined to seek medical care due to lack of insurance coverage, though that might be changing with the passage of the Affordable Care Act. The over-representation of the economically disadvantaged among victims of violent crime suppresses overall cost estimates. Similarly, calculations of the costs of violent victimization are suppressed by the inclusion of women, youth, and the elderly (all typically lower wage earners). In addition, the costs attributable to the caretakers of victims (e.g., lost wages) are usually absent from the bottom line of economic burden (Corso et al., 2007).

V. Risk of Criminal Victimization: Demographic Characteristics and Theories of Victimization

The risk of violent victimization is related to several factors. Individuals' vulnerability to violent crime varies with their demographic and personal characteristics, as well as with their participation in activities and social networks and their use of public places, which can increase their exposure to predation. Since 1937, theories of victimization have explored the dynamic interactions between victims and offenders as well as the victim or offender behaviors that culminate in violent outcomes (Tobolowsky, 2000).

Theories of victimization that focus on victim precipitation and involvement have been roundly criticized as "victim blaming," especially by early victim advocates who sought to eliminate the pernicious stigmatization associated with sexual violence (Campbell & Raja,

1998). Nonetheless, theories of victimization have long contributed to the discourse on

victimology and can further knowledge regarding the causes of violent victimization and

strategies for its prevention (Doerner & Lab, 2015). Such perspectives argue that "choices of

where to go, what to do, and how to proceed (even when made innocently) influence the chances

of becoming a victim. Recognition of this process may provide insight into personal offenses,

like homicide and assault" (Doerner & Lab, 2015, p. 56).

A. Demographic Characteristics

1. Age. A wealth of data from the NCVS has demonstrated a consistent and strong

inverse relationship between age and criminal victimization (BJS, 2008). Rates of personal

crimes peak among those ages 16 to 24 and are lowest among those 65 and older. In particular,

rates of violent crime victimization (e.g., robbery, aggravated assault) are much higher for

younger people than for older people; the difference is less pronounced for property offenses.

The victimization and offending rates for homicide both peak for young people between the ages

of 18 and 24. More than one-third of homicide victims and nearly one-half of homicide

perpetrators are younger than age 25. Violent victimization in the late 1980s and early 90s was

concentrated disproportionately among persons younger than age 24, particularly among

teenagers (Lauritsen, 2009). The homicide rates of adolescents and young adults increased

steeply from the late 1980s to the early 90s, with a peak in 1993, demonstrating that "lethal

violence in the late 1980s and early 90s [was] primarily a youth phenomenon" (Lauritsen, 2009,

p. 74). Between 1999 and 2008, homicide rates were stable for people ages 35 to 49 and those

older than age 50 (Cooper & Smith, 2011). From 2002 to 2011, the homicide rate was highest

among young adults ages 18 to 24; from 2002 to 2011, young adults also experienced the

greatest decline (22%) in the homicide rate, from 15.2 to 11.9 per 100,000 residents (Smith & Cooper, 2013).

      2. Race and Ethnicity. Prior to 2003, the NCVS distinguished between only white and black for reporting purposes. From 1973 to 2006, the violent crime rate among blacks was double the rate among whites. This differential has appeared during periods of increases and decreases, as well as peaks and troughs, in victimization data. For example, the rate of violent victimization among blacks in 1981 (a peak year) was roughly 4,000 per 100,000 residents; among whites, it was roughly 2,000 per 100,000 residents. The rate of violent victimization among blacks in 2002 (a trough year) was roughly 1,200 per 100,000 residents; amongw, it was roughly 600 per 100,000 residents (BJS, 2008).

      Blacks have been consistently over-represented as both homicide victims and homicide offenders, with victimization rates six times higher and offending rates eight times higher than those of whites. Young (age 14 to 24) black men constitute 1% of the general population but 16% of homicide victims and 27% of homicide offenders (since 1994), declining from a high of 35% of homicide offenders in 1993. Black men are also significantly more likely than white men to be victims of drug-related homicides. Homicide, however, is intraracial: 84% of white victims are killed by white offenders, and 93% of black victims are killed by black offenders (Cooper & Smith, 2011). Black men lose more years of life before age 65 to homicide than to heart disease, which is the nation's leading cause of death (Heller et al., 2013). The homicide gap between blacks and whites is five to one (Lauritsen, 2009) and between Hispanics and whites is two to one (Langley & Sugarmann, 2014).

      The UCR database on violent crime contains no information about ethnicity; nonetheless, ethnic differences can be discerned from the NCVS (Lauritsen & Heimer, 2010). For example, in

2013, with respect to the percentage of the population within a category of ethnicity, persons of two or more races experienced the most violent crime (excluding homicide) at approximately 4%, accounting for 114,190 crime victims, followed by American Indians and Alaska Natives at approximately 3%, accounting for 38,310 violent crime victims. Blacks (1.3%) and Hispanics (1.3%) experienced slightly higher percentage rates than whites (1.1%), accounting for 430,380 540,130, and 1.9 million violent crime victims, respectively. In 2004, Hispanics (1.2%) experienced a lower prevalence rate of violent victimization than both whites (1.5%) and blacks (1.7%). The rates of violent and serious violent crime in 2013 were highest among blacks (2,510 per 100,000 residents and 950 per 100,000 residents, respectively), followed by Hispanics (2,480 per 100,000 residents and 750 per 100,000 residents, respectively) and whites (2,220 per 100,000 residents and 680 per 100,000 residents, respectively). By far, the rates of violent and serious violent crime in 2013 were highest among American Indians and Alaska Natives (5,630 per 100,000 residents and 3,900 per 100,000 residents, respectively) (Truman & Langton, 2014).

      3. Gender. Men commit more than 70% of all types of crimes (U.S. Department of Justice, 2011) and also fall prey disproportionately to victimization. With the exceptions of rape and intimate partner violence, the rate of violent victimization is substantially higher among men than among women. The gender differential in violent victimization is greatest in the youngest age category (ages 12 to 24), begins to diminish after age 25, starts to converge after age 35, and becomes nearly equivalent at age 65 and older (Laub, 1997). Men are overwhelmingly the victims (77%) and perpetrators (90%) of homicide. The homicide rate is three times higher among men than women, and the rate of offending is nine times higher among men than women; however, women are substantially more likely than men to be victims of intimate partner violence (64%) and sex-related murder (82%) (Cooper & Smith, 2011). The gender gap steadily

narrowed in terms of both violent crime and serious violent crime rates from 2004 to 2013

(Truman & Langton, 2014). From 2002 to 2011, the homicide rates among men and women

declined by 16% and 20%, respectively (Copper & Smith, 2013).

      4. Income. The risk of violent victimization rises rapidly with extreme poverty and

disadvantage (Lauritsen, 2009). Also at higher risk for violence are adults living alone and

parenting their children alone (single parents) (Lauritsen, 2009). The relationship between

economic disadvantage and violence has been consistently found in cross-sectional research at

various levels of analyses (e.g., states, census tracts, neighborhoods) (e.g., Land, McCall, &

Cohen, 1990; Land, McCall, & Cohen, 1991; Lauritsen, 2001; Lauritsen & Heimer, 2010;

Lauritsen & White, 2001; Peterson, Krivo, & Hahan, 2006; Rosenfled & Fornago, 2007). Strains

on neighborhood economies and corresponding family incomes have independent effects on

individuals' risk of victimization (Lauritsen, 2001) and increase the likelihood of intimate

partner violence (Benson, Fox, De Maris, & Van Wyk, 2003).

      Research has indicated that people in lower income brackets are more likely to be

victimized than people in higher income brackets. For example, people with annual household

incomes of $7,500 are more than three times more likely to be a victim of robbery and more than

four times more likely to be a victim of aggravated assault than those with annual household

incomes of $75,000 (BJS, 2008). The violent crime victimization rate in 2010 was three times

higher for people with annual household incomes of less than $15,000 than for those with annual

household incomes greater than $75,000 (Kearney, Harris, Jacome, & Parker, 2014). An

evaluation of the Moving to Opportunity for Fair Housing Demonstration Program showed that

the provision of resources to lift residents out of oppressive poverty reduced victimization rates

by more than 15% among program participants (Katz, Klingid, & Liebman, 2000).

During the years 2008 to 2012, people living at or below the federal poverty level for households were more than twice as likely to be a victim of violent crime as those living in the highest-income-bracket households (3,980 per 100,000 residents versus 1,690 per 100,000 residents, respectively). People living in poor households experienced serious violent victimization at a rate three times higher than those living in the highest-income-bracket households (1,520 per 100,000 residents versus 450 per 100,000 residents, respectively). In addition, people at or below the federal poverty level were more likely to be victims of stranger- and firearm-related violent victimization. The overall inverse relationship between household income and violent victimization (from 2008 to 2012) was the same for blacks and whites; however, the rate of violent victimization for Hispanics was invariant across income levels (Harrell et al., 2014).

5. Location of Residence. Violent crimes are more likely to occur in major metropolitan areas (big cities) than in suburban and rural areas. In 2012, for example, the rate of serious violent victimization in urban areas was more than double that in rural areas (Truman, Langton, & Planty, 2013). Homicides are most likely to occur in large cities, particularly those with a population of 1 million or more (Cooper & Smith, 2011). From 2002 to 2011, cities of 100,000 or more residents experienced the largest decline (23%) in homicide rates, compared with smaller communities (i.e., those with fewer than 100,000 residents) (Smith & Copper, 2013). The highest percentages of violent victimization occur in the South, followed by the Western, Midwestern, and Northeastern regions of the country. The proportion of murders that occur in the South (43%) was more than three times greater than the proportion in the Northeast (12%) (FBI, 2006). However, in 2013, the rates of violent and serious violent victimization were highest in the Western region and lowest in the Southern region (Truman & Langton, 2014).

B. Theories of Victimization

For more than 70 years, theories of victimology have explored victims' roles in violent criminal incidents. Unlike criminological theories, which underscore the causes of crime in terms of offender characteristics and motivations, victimological theories postulate that victim characteristics and motivations can affect the risk of victimization overall, as well as the instigation and culmination of specific criminal encounters. In such theories, victims exert varying degrees of influence over the occurrences and eventualities of criminal attacks. Thus, these theories have assumed that the offender-victim dyad can create or alter episodes of criminal attack through a process of shared responsibility. As discussed below, such frameworks have been subjected to fierce criticism due to their emphasis on victim blaming (Karmen, 1991). Other theories of victimology have examined sociological and environmental factors that can affect victimization risk at different times and places without assigning responsibility to victims for contributing to their own harm.

1. Early Typologies of Crime Victims. From the late 1930s through the 1950s, Mendelsohn and his colleagues (most notably von Hentig, 1948) "explored the relationships between victims and offenders . . . [and] developed victim typologies that identified victim characteristics that might increase a person's risk of victimization . . . or even contribute to or precipitate the victimization" (Tobolowsky, 2000, p. 18). Such frameworks became the foundation for victim precipitation theory and were considered an improvement over the static, one-sided, perpetrator-centric explanations of traditional criminologists (Fattah, 1979).

Mendelsohn (1956) created hierarchical levels or classes of victim culpability, ranging from the "completely innocent victim" to the "victim as guilty as the offender" to the "victim guiltier than the offender." Based on Mendelsohn's formulations, Wolfgang (1958) studied

patterns in criminal homicide, which suggested that victims played a major role in their own

killing by being "the first to show and use a deadly weapon, to strike a blow in an altercation—in

short, the first to commence the interplay or resort to physical violence" (p. 252). In Wolfgang's

(1958) investigation, more than one-fourth of the homicides began with a dispute that culminated

in death. He also found that many of the homicides in his research involved non-strangers as well

as the use of alcohol. Wolfgang even speculated that some homicide victims were actually

suicidal and provoked their killers in order to fulfill a death wish (Wolfgang, 1959).

Schafer (1968) built upon the preceding theories to create more explicit and detailed

gradations of victim precipitation. The lowest degree of victim culpability or contribution to the

victimization involves instances of no victim responsibility (innocent target of offender). Other

categories ascribe greater responsibility to victims with respect to their role in facilitating the

crime, such as precipitative victims (i.e., when the offender is reacting to the victim's behaviors)

and self-victimizing victims (e.g., people who gamble, use drugs, or engage in the sex trade).

One influential study of victim precipitation that involved a national sample of police reports

defined victim precipitation —for example, in the case of aggravated assault—as "occurring

when the victim was the first to use either physical force or insinuating language and gestures

against the subsequent attacker" (Curtis, 1974, p. 598). The research found that victim

precipitation was most common in incidents of homicide, followed by aggravated assault and

robbery.

2. Lifestyle Exposure Theory. Lifestyle exposure theory aligns with the preceding

discussion regarding the relationship between demographic characteristics and victimization risk

(see above). Indeed, the lifestyle exposure model comprises variations in demographic

characteristics (e.g., age, gender, race, income). Such differences affect people's lifestyles, which

encompass "routine daily activities, both vocational activities (work, school, keeping house, etc.) and leisure activities" (Hindelang, Gottfredson, & Garofalo, 1978, p. 241) (see below). Several explanatory models predict that demographic characteristics are related to lifestyle choices, which affect the risk of criminal victimization (e.g., Hindelang, Gottfredson, & Garofalo, 1978; Kennedy & Forde, 1990).

Specifically, lifestyle factors that can affect the risk of violent victimization include the kinds of activities people engage in and the "where and when" of those activities (see Cullen & Wilcox, 2010). For example, frequenting bars in high-crime areas and exiting them alone and intoxicated in the middle of the night are a recipe for becoming a victim of armed robbery or some other type of violent crime. Taxi drivers and musicians often work late hours in high-crime areas—lifestyle factors that might explain their high rates of robbery. In contrast, spending quiet evenings in a secure suburban home reading a book by the fireplace is likely to keep a person out of harm's way. Elementary school teachers and college professors have an affinity for activities that keep them in safe environments, which might explain their lower likelihood of being victims of robbery (cf., Fattah, 1991).

Between these extremes is a continuum of risk that varies with individual characteristics, behaviors, and the settings in which people interact with others. Unstructured time in public (especially at night); attenuated ties to family, school, and work; and attachments to criminal subgroups and cultures create fallow ground for criminal activities and victimization (Hindelang et al., 1978). In addition, alcohol and drug use, coupled with structural variables in a community that create places for offenders to gather with little or no guardianship, also increase the risk of violent victimization (Cullen & Wilcox, 2010) (see below).

3. Routine Activities Theory. Routine activities theory and lifestyle theory are obviously linked (Meir & Miethe, 1993). With a focus on the social ecology of crime, the routine activities theory posits that the concurrence of three elements increases the likelihood of violent victimization: motivated (likely) offenders, suitable and attractive targets (people and objects), and the absence of capable guardians whose presence or watchfulness could prevent the occurrence of a crime (Cohen & Felson, 1979). The risk of victimization increases when offenders and targets are in proximity to each other, providing offenders with ready and practicable opportunities for offenses. The likelihood of victimization also increases when offenders are undeterred by other persons who might intervene or identify them and when they have easy egress from the scene. Together, these conditions facilitate the commission of a criminal act by creating a perfect storm for victimization.

With respect to victimogenesis (cause of victimization), routine activities theory emphasizes the probability of certain individuals (prospective victims) traversing certain locations at certain times and under certain circumstances, which leads them into contact with certain people (prospective offenders) (Hindelang et al., 1978; Meier & Miethe, 1993). The risk of becoming a victim is heavily dependent upon the number of hours spent outside the home; the frequency of leaving the home in the evening and returning late at night, including being a habitué of bars and other alcohol-serving establishments; and the likelihood of contacts with neighborhood offenders (Killias, 1989). Routine activities theory emphasizes situational elements—namely, the opportunity for committing a crime and the lack of informal controls among potential victims, and also in their personal environment (Miethe & Meier, 1994). "Taken together, a routine activity approach predicts the greatest risks for predatory crime when potential victims have high target suitability (i.e., high visibility, accessibility, and attractiveness)

and low levels of guardianship" (Meir & Miethe, 1993, p. 474).

According to research on routine activities theory, the precipitous increase in crime between 1960 and 1970 was attributable to an increase in suitable targets due to the purchase of more durable goods, such as cars, bicycles, and stereos, and the proliferation of unoccupied homes during the daytime. The increase in durable goods was accompanied by a decrease in capable guardians, as more women joined the workforce and more families engaged in leisure activities outside of the home. The existence of more empty homes created greater opportunities for burglaries. Similarly, the presence of more women in public rendered them more vulnerable to criminal victimization (Cohen & Felson, 1979). Numerous other studies have found some empirical support for routine activities as an explanatory framework for crimes, such as residential burglary and theft (Cohen & Cantor, 1980), and for urban homicides (Messner & Tardiff, 1985), as well as repeat victimizations (Gottfredson, 1981).

4. Fattah's Theory of Victimization and the Structured-Choice Model. Fattah's (1991) theory of criminal victimization risk consists of 10 basic factors that include the dimensions (and convergences) of person, place, and time. The model also attributes the risk of victimization to behaviors that can be provocative, which increases the likelihood of violent crime, or negligent, which in turn increases the likelihood of property crime. Scenarios that are more or less conducive to crime are determined by personal characteristics that are correlated with victimization, such as age and gender, the communities in which people live (e.g., high- or low-crime neighborhoods), the places in which people socialize and the times when they are there (e.g., "places of public entertainment, where the risks of becoming a victim are higher than at work or at home" [Fattah, 1991, p. 19]), and the individual's inclination to engage in high-risk behaviors (e.g., soliciting a prostitute, purchasing illegal drugs, participating in other markets for

illicit goods and services, interacting with known offenders). The dynamic, interactive

perspective of victim precipitation attributes no blame to victim behavior and contains no

normative or value judgments, such as victim guilt or responsibility (Fattah, 1994).

Fattah's (1991) theory has never been translated into a well-specified and testable

conceptual framework (cf. Smith & Bouffard, 2014). Nonetheless, it aligns with the structural

choice model of victimization, which integrates lifestyle exposure theory with routine activities

theory (Miethe & Meier, 1990). The model contains macrodynamic factors, such as the high- and

low-crime neighborhoods in Fattah's theory, which constitute a criminal opportunity structure

for victimization by bringing together victims and offenders in physical proximity with one

another. Residents in areas with lower criminal opportunity structures are at lower risk for

predatory victimization, and vice versa. These factors are combined with microlevel processes—

the lifestyle exposure components of Fattah's theory—that determine the accessibility of

victimization targets. Offenders rationally select targets as a function of net rewards (risk versus

benefit ratios) (Meir & Miethe, 1993).

5. **Typologies of Victim Accountability.** Karmen's (2004) typology of victim

accountability consists of six victim categories that are defined by increasing blameworthiness or

shared responsibility, ranging from complete innocence to facilitation, precipitation, provocation,

or active participation in a crime. More germane to violent crime victims are Karmen's (2006)

dimensions of victim involvement in the incident: repeat victims, facilitating victims,

precipitating victims, and innocent victims. Repeat victims routinely place themselves in risky

situations. The following example uses aggravated assault in a bar setting.

A young man who continues to frequent a bar, despite its reputation as a setting for

violent altercations and his previous experiences of being assaulted there, is an example of a

repeat victim. With respect to victim facilitation, victims are partially responsible for their attacks because they "unknowingly, carelessly, negligently, foolishly, and unwillingly make it easier for the criminal to commit the crime" (Karmen, 2006, p. 101). A young man who frequents a bar on an evening in which he will be in contact with a crowd of men who have threatened to assault him if he returns on the day they are there is an example of a facilitating victim. A young man who frequents a bar becomes intoxicated and pushes and verbally threatens a patron. He is involved in a serious altercation in which he initiated the brawl; this is an example of a precipitating victim. Finally, a young man walks past a bar during the afternoon. He is attacked from behind unprovoked by one of the patrons emerging from the establishment and is clearly an innocent victim.

6. Social Disorganization Theory. Apart from individual differences, community-level factors (e.g., poverty, unemployment, income inequality, residential instability, percentage of single-parent households) can exert pressure on residents to engage in delinquent and criminal behaviors, which increase the risk of violent victimization (e.g., Bursik & Webb, 1982). These factors are captured in social disorganization theory, which originated in the seminal research of the Chicago School of Sociology (Bulmer, 1984). Among a wealth of major empirical findings regarding the causes of delinquency and criminality, Chicago School researchers found that disorganized areas marked by divergent values and transitional populations produce criminality (e.g., Shaw & McKay, 1972).

Social disorganization theory suggests that violent victimization is more likely to occur in areas where social control has deteriorated and neighborhood homogeneity and solidarity have diminished (Bursik & Grasmick, 1993). Racial inequality creates social isolation and concentrations of truly disadvantaged residents. In such communities, social organization is

weakened, family cohesiveness is diminished, and structural barriers deny residents legitimate opportunities for social mobility and success. These conditions spawn subcultures in which crime, violence, and illegal drug use become normative (Sampson & Wilson, 1995). Several studies have tested macro-sociological theories that hypothesize about the effects of social structures on differential rates of violent victimization. For example, these investigations have indicated that violent victimization levels are higher in communities that are more heterogeneous in terms of race and age (Sampson, 1984); that are characterized by weaker friendship networks and lower rates of participation in formal and voluntary community organizations (Sampson & Groves, 1989); and that have lower levels of collective efficacy (Sampson, Raudenbush, & Earls, 1997), which is the ability of residents to share values as well as pool efforts and resources in order to solve problems that adversely affect the commonweal.

7. **Social Network Theory.** Social network theory is the study of how people establish relationships and interact with one another in reciprocal and nonreciprocal exchanges. Networks can also be described as the structure of interrelationships, and people in the network referred to as actors or nodes in the network (Freeman, 2004). For incidents in which victim and offender relationships are known, the vast majority of homicides (78%) involve nonstrangers, such as a spouse, other family member, or acquaintance (i.e., members of the same social network) (Cooper & Smith, 2011).

Victims of violent crime and violent offenders often live in the same social and physical environments and have similar backgrounds and proclivities. For example, more than 90% of homicide suspects and more than 70% of homicide victims in Chicago have criminal convictions (Rozas, 2009). Similarly, more than 80% of homicide victims in Baltimore have criminal records (Herman, 2009); those percentages are 77% and 75% in Milwaukee and Philadelphia,

respectively (Johnson, 2007). In Chicago, people who simply knew a homicide victim were nine times more likely than those who did not to become a victim or perpetrator of homicide (Papachristos, Braga, & Hureau, 2012). As Papachristos (2009) states, "[homicide offenders] do not kill because they are poor, black, or young or live in a socially disadvantaged neighborhood. They kill because they live in a structured set of social relations in which violence works its way through a series of connected individuals" (p. 75).

Based on social network theory, police officials in Chicago launched a custom notification initiative in the city's most violent neighborhoods. As part of the initiative, the department created a "heat list" consisting of potential victims and subjects with the greatest propensity to become involved in future violence. The list is based on an analysis of the identified person's known associates, as well as the person's history of violence as a perpetrator and/or victim. Tailored to the background of each person, a custom notification letter is hand-delivered to the individuals' homes to inform them of the consequences (i.e., arrest, prosecution, and sentencing) of new or continued participation in violent acts. The letter also provides information about the availability of employment or other social services to help extricate the individual from a high-risk lifestyle. No known studies of the effects of this program have been conducted, but this initiative seems promising and could benefit from an empirical investigation of its impact.

8. Limitations of Victim Precipitation and Lifestyle Theories. The basic assumptions of victim precipitation theories have been challenged. For example, victim precipitation presumes that victims' behaviors can fully explain the criminal act; that offenders only decide to engage in the act after the victim provokes the offender through signals and behaviors that are necessary and sufficient for the act to occur; and that the incident involves discernible victim

intent as an element of precipitation (Franklin & Franklin, 1976). Routine activities theory is

one of the best-known, best-studied, and most-cited of the above victimization theories (Doerner

& Lab, 2015). Yet studies of this theory as well as similar theories of victimization are

challenged by definitional issues, such as the operationalization of a "potential offender,"

"vulnerable target," and "capable guardian." Also elusive in terms of measurement and

interpretation is the concept of "lifestyle."

By the 1970s, so-called "anti-victim" perspectives, which are predicated on victim blame

and responsibility, had been roundly criticized in various quarters (Karmen, 1991). Many

scholars and victim advocates have denounced the ideological basis of such concepts as victim

provocation, precipitation, and facilitation. These notions were equated with a radical form of

victim blaming that placed inordinate emphasis on victims' instead of offenders' culpability in

violent attacks (Karmen, 1991). Such explanations and their corresponding prevention programs

and strategies were relatively ineffective in controlling crime and therefore served little purpose

other than to criticize crime victims (Karmen, 1991).

Victim precipitation theories are also problematic for several other reasons (Eigenberg,

2014). The presumption of these perspectives is that victims know how to prevent their

victimization and can always eschew risky behaviors and avoid risky places. Absolute avoidance

ignores reality in a free and complex society in which victimization is pervasive, especially in

poor neighborhoods where the risk of violent victimization is disproportionately high.

Victimization is traumatic (see section on costs), and victim blame adds to the suffering of crime

victims (see section on crime victim assistance) and draws attention away from the root causes of

crime and violence (e.g., intergenerational poverty).

Perhaps the most vehement attacks on victim blame were leveled against Amir's (1971) research on rape, which strongly suggested that a certain percentage of such victims bore responsibility for their attacks. The backlash from feminists and victim service providers was especially fierce, leading to a heightened sensitivity toward victim blaming, which was regarded as tantamount to offender rationalization (criminal thinking and neutralization) as a cognitive strategy to dismiss victim suffering and loss (Fattah, 1979). From a methodological standpoint, Amir was criticized for relying solely on official police records and employing theoretical perspectives that lacked empirical support (Meier & Miethe, 1993). In addition, Amir was disparaged for proffering psychological explanations on the basis of aggregate-level data and for rendering extreme inferences from a limited dataset (Meier & Miethe, 1993).

In general, studies of victim precipitation have been rife with other methodological shortcomings, including the interchangeable operational uses of the terms 'facilitation,' 'precipitation,' and 'provocation' (Smith & Bouffard, 2014). True victim precipitation is difficult to examine due to the absence or incompleteness of data in police records regarding the victim's role as the primary and direct aggressor in a crime. For example, homicide cases defy easy explanations of the victim's role in the event. The victim is obviously unable to recount the attack. Homicides often occur in private settings and are often witnessed by only two people—the offender and the victim—only one of whom is able to illuminate the specific nature of the event and who is likely to be a highly self-serving reporter. Furthermore, studies of victim precipitation rarely incorporate statistical controls; therefore, results stemming from such studies are often inconclusive and provide no valid or elucidative sense of the effects of victim behaviors on the initiation or culmination of the crime (Smith & Bouffard, 2014).

VI. Assistance for Crime Victims

A. Crime Victims' Movement

As noted above, crime victims can experience various adverse consequences that often require ameliorative care and services. The recognition of crime victims as a group with special needs and interests gained widespread notoriety and momentum in the crimes victims' movement, which emerged from a confluence of events. Initially, the overall purpose of the victims' movement was to reintegrate victims into the criminal justice system by inviting them to participate in the prosecution of their cases (Davis, Smith, & Henley, 1990; Doerner & Lab, 2015). Four major factors—political, social, research, and legal developments—were responsible for the early growth of the movement (Young & Stein, 2004).

1. Victimology. The first factor in the early growth of the crime victims' movement was the emergence of the field of victimology. Victimology is the scientific study of crime victims, their relationship to offenders, and the situations and behaviors that place them at risk for criminal victimization. Victimologists also study the harmful consequences of crime as well as the effectiveness of victim service programs (Karmen, 2004). Schafer's (1968) book, *The Victim and His Criminal*, released in the midst of the enormous crime wave of the 1960s, was an influential publication that spurred interest in victimology as an area worthy of scholarly attention and as a source of knowledge that could help explain and stifle the unexpected and unprecedented explosion in crime sweeping the United States, which continued, mostly unabated, for the next 20 years (see above). In the 1990s, however, critics attacked the field of victimology for becoming more ideological and less scientific and for urging victims to embrace the "victim identity," which critics believed perpetuated victim suffering (Karmen, 2004).

2. Victim Compensation. The second factor in the early growth of the victims' movement was the development of victim compensation programs, initiated in New Zealand

(1963) and Great Britain (1964) through the advocacy efforts of Margery Fry, an English

magistrate (Edelhertz & Geis, 1974). In the United States, the first victim compensation

programs appeared in California (1966) and New York (1966), and were predicated on the

notion that crime victims are citizens who deserve government assistance. By 2002, all 50 states

as well as the District of Columbia, the U.S. Virgin Islands, Puerto Rico, and Guam had

instituted victim compensation programs (Doerner & Lab, 2015).

Compensation programs originated as a concept in ancient Greece and Rome and have

been characterized as "welfare programs" for crime victims (Schafer, 1970). In these programs,

the state assumed responsibility for victims' care and accepted blame for their plight due to "[its]

long inattention to poverty and social injustice," considered to be among the root causes of crime

(Goldberg, 1970, p. 176). In the 1970s, the notion of victim compensation as a vehicle for

attaining justice and encouraging victim participation in the criminal justice system replaced the

notion of victim compensation as a vehicle for victim healing. Accordingly, filing a police report

and cooperating with the prosecution became prerequisites for receiving state funds to pay for

medical bills or replace lost wages (Young & Stein, 2004).

3. Women's Movement. The third factor spurring the victims' movement was the

women's movement, which empowered female victims of sexual assault and domestic violence

to demand more respectful and humane treatment in the court system. The women's movement

also offered victim advocates examples of effective strategies to increase public attention to

social and political issues, and such strategies led to the creation of laws and public policies that

benefited female victims of crime (Young & Stein, 2004). The early focus on the emotional

devastation of sexual assault victims paved the way for research on the emotional suffering of

crime victims in general (Lurigio, 1987), "increasing public sensitivity to the psychological

effects of crime on victims, particularly feelings of powerlessness, isolation, and guilt"

(Friedman, 1985, p. 791).

4. System Failure. The fourth factor propelling the victims' movement was the failure of

the criminal justice system to control crime and bring offenders to justice. Confidence in the

system began to erode with the rising crime rates in the 1960s and reached a nadir with a widely

cited and controversial review of the effect of correctional programs, which concluded that

"nothing works" with regard to the rehabilitation of criminals. As Martinson (1974) stated, "with

few and isolated exceptions, the rehabilitative efforts that have been reported so far [have] had

no appreciable effect on recidivism" (p. 25). The court system's effectiveness was also

challenged, as a greater proportion of cases were lost and an increasing number of crime victims

walked away disheartened and dissatisfied with the legal process (Friedman, 1985). Witnesses

who were initially cooperative but turned their backs on the court system after they received

shoddy treatment from police officers, prosecutors, and judges caused most prosecutorial failures

(Cannavale & Falcon, 1976).

In other words, the system that was supposed to assist crime victims and punish offenders

instead harmed victims by neglecting their basic needs and making their cooperation in the court

process difficult and emotionally painful (Bard & Sangrey, 1979). Victims were expected to

participate in a court system that had "treated them with less respect than it [had] treated the

offender" (Sales, Rich, & Reich, 1984, p. 114). Victims' negative experiences were so common

that their participation in the criminal justice system resulted in a "second wound," also referred

to as "secondary victimization" (Lurigio, Skogan, & Davis, 1990; Symonds, 1980).

5. Grassroots Efforts. The final factor affecting the growth of the victims' movement

was the proliferation of grassroots organizations and shelters founded mostly by crime victims to

support other crime victims and their surviving family members. These organizations sustained

victims in their efforts to recover from the trauma and hardship encountered in the aftermath of

crime. In addition, they advocated for changes in laws that led to the development of additional

government services and victim protection and compensation programs (Young & Stein, 2004).

According to Davis and Henley (1990):

> Operating with close ties to the community rather than to the criminal justice system did
> have some advantages. Grassroots programs were tied to service networks within the
> community. Being outside of the criminal justice system, the programs had the credibility
> to work with victims distrustful of the system, including those who didn't report crimes
> to authorities (p. 162).

The victims' movement spawned the implementation of various reforms and

interventions to enhance public sensitivity toward crime victims as well as improve their

treatment—both in and out of the criminal justice system. Numerous victim service programs

were established independently or in conjunction with police departments and prosecutors'

offices in order to satisfy victims' needs for compensation, justice, and services (Davis &

Henley, 1990). The favorable attention to crime victims that arose during the 1970s occurred at

the national, state, and local levels.

B. President's Task Force on Victims of Crime

President Ronald Reagan took an historic step forward in the federal government's

recognition of crime victims by proclaiming National Victims of Crime Week in 1981. One year

later, advocacy for crime victims gained further impetus with the convening of the President's

Task Force on Victims of Crime (1982), which was formed in response to a presidential

executive order that called for a nationwide study of the criminal justice system's treatment of

crime victims. Its members argued that, "If we take the justice out of the criminal justice system,

we leave behind a system that serves the criminal" (p. vi).

After interviewing crime victims and experts in the field of victim assistance, task force

members ultimately proposed 68 recommendations in 5 general areas: executive and legislative

action at the federal and state levels; federal action; action for criminal justice system

professionals (e.g., police officers, prosecutors, judges, parole board members); action for other

organizations (e.g., hospitals, churches, schools, mental health agencies); and an amendment to

the US Constitution, augmenting the Sixth Amendment rights of crime victims, guaranteeing that

"the victims in every criminal prosecution shall have the right to be present and to be heard at all

critical stages of judicial proceedings" (Hook & Seymour, 2004, p. 113).

C. Victims' Rights

In 1982, Congress passed the Omnibus Victim and Witness Protection Act, which

mandated that victim impact statements must be considered at sentencing in all federal criminal

cases. The act's provisions also required that victims and witnesses be protected from defendant

intimidation and that victims receive offender restitution. Additionally, the act promulgated

guidelines for the fair and humane treatment of victims and recommended stricter bail laws

(Davis & Henley, 1990).

The US Supreme Court first acknowledged the rights of crime victims in *Morris v.

Slappy* (1983). In this case, the Supreme Court held that a victim's rights had been properly

affirmed when it reversed a Court of Appeals ruling to overturn a verdict against a defendant.

The defendant argued that his due process rights were violated when a judge refused to

reschedule his case because his original public defender was unavailable on his court date

(Viano, 1987). In reversing the lower court's decision, the Supreme Court stated that the "court

(of appeals) wholly failed to take into account the interest of the victim of these crimes, and that .

. . in the administration of criminal justice, courts may not ignore the concerns of victims . . . this

is especially so when the crime is one calling for public testimony about a humiliating and

degrading experience" [103 S. Ct. 1618].

In 1984, Congress passed the Victims of Crime Act (VOCA), "ending nearly 20 years of

floor debates, lobbying, political posturing, maneuvering, and last-minute compromises"

(Karmen, 2004, p. 318). The passage of VOCA reasserted the federal government's role in the

victim assistance field and provided substantial resources for the continued expansion of that role

(Newmark, 2006). VOCA established a federal Crime Victims Fund consisting exclusively of

revenue from the payment of fines, penalties, bond forfeitures, and special assessments leveled

against individuals and businesses (Doerner & Lab, 2015).

VOCA generates millions of dollars to support state victim compensation and assistance

programs (Deem, Nerenberg, & Titus, 2007; Gaboury, 1992). Since its inception, the Crime

Victims Fund has received more than $13B. In 2010 alone, the fund generated $2.3B for

disbursement to crime victims. Approximately $40M of those dollars was allocated for

improving services for victims of federal crimes (Office for Victims of Crime [OVC], 2011). To

be eligible for VOCA funding, state programs must, for example, encourage victims to cooperate

in the prosecution and conviction of defendants; include victims of drunk driving or domestic

violence among those eligible for benefits; expand accessibility to services, particularly for

victims in underserved populations; and maximize resources in order to reduce the various costs

of crime (Gaboury, 1992; Newmark, 2006).

VOCA allows funds to be used to compensate victims of financial crimes, such as fraud,

cybercrimes, identity theft, and financial abuse of the elderly. Victims of financial crimes are an

underserved population eligible for direct assistance in several areas, including mental health

assistance, respite care, and advocacy services (OVC, 2004). VOCA funds can also be awarded

to states for public education and publications geared toward preventing financial victimization (Deem et al., 2007).

D. Justice for All Act

In 2004, President George W. Bush signed into law the Justice for All Act (H.R. 5107, Public Law 108-405). The act was designed to protect crime victims' rights and eliminate the backlog of DNA samples gathered from convicted offenders and crime scenes, as well as those collected for inclusion in a federal DNA repository. Furthermore, the act amended the federal criminal code to accord crime victims with several specific rights, such as the right to be notified of any public court proceeding or parole hearing and to receive victim restitution. The act also allows federal crime victims—under certain circumstances—to petition the court to reconsider plea agreements or sentences (OVC, 2006).

In the previous two decades, all states have passed laws in support of victims' rights as well as a victims' bill of rights (National Center for Victims of Crime [NCVC], 2007). These rights include the right to be treated with fairness and respect; to receive a written explanation of their legal rights at first contact with the criminal justice system; to be notified when the state begins the prosecution process; to have their dignity and privacy protected during the criminal justice process; to be heard at proceedings; to be protected from the alleged or convicted offender before, during, and after the trial; to obtain information from the criminal justice system regarding the progress of their cases; and to be given information about social services and victim compensation for medical expenses and lost or damaged property. Once defendants are convicted, victims have the right to address the court or submit a written statement regarding the crime's effect on their lives, which the judge can consider in rendering a sentencing decision (cf. National Victims' Constitutional Amendment Network, 2012).

E. Victim Service and Compensation Programs

      1. Service Programs. As noted previously in this paper, the victims' movement in the United States emerged in the 1970s. A major component of the movement was the creation of victim service and compensation programs. Fueled by grassroots efforts and spurred by Law Enforcement Assistance Administration (LEAA) funding, victim service programs proliferated in the United States and in numerous other countries, especially those located in Great Britain and Europe. Between 1970 and 1975, the LEAA spent more than $22M on these programs, which are typically housed in police departments and prosecutors' agencies to facilitate victim cooperation "in the apprehension, prosecution, and conviction of criminals" (Davis, Lurigio, & Skogan, 1999, p. 101).

      Since the 1970s, victim service programs have received hundreds of millions of VOCA dollars earmarked for victim assistance and compensation (Doerner & Lab, 2015). Victim service programs offer a range of services, from crisis interventions for victims who are struggling to adjust to post-victimization trauma, to emergency aid for victims with immediate practical needs (e.g., new locks, shelter, clothing, food, cash), to court advocacy for victims who are overwhelmed by the complexities of the legal system (Skogan, Davis, & Lurigio, 1991).

      2. Service Program Research. In a study of a small sample of crime victim programs, four major categories of victim needs were identified: crime prevention (e.g., protection from the offender); household logistical support (e.g., repairs of broken locks or doors); counseling, advice, and advocacy (e.g., psychological treatment); and property replacement (e.g., assistance with insurance claims) (Davis et al., 1999). Victims reported that family members and friends were the most common source of assistance. Approximately 4% of victims indicated that they received help from a victim service program to meet their crime prevention, logistical, or

property replacement needs. Nearly one-fourth reported that a victim service program helped

with their counseling-related needs (Davis et al., 1999). The neediest victims (i.e., those with the

most problems) were the most likely to receive assistance from a victim service program (cf.

Friedman, Bischoff, Davis, & Person, 1982; Langton & Truman, 2014).

In the late 1990s, Safe Horizon and associates (Newmark, Bonderman, Smith, & Liner,

2003) and the Urban Institute/San Diego Association of Governments (Brickman, Davis,

Rabinovich, Cantor, & Shapiro, 2002) conducted two extensive national surveys of VOCA-

funded and other types of direct service programs for crime victims as well as other sources of

crime victim assistance. Overseen by the National Institute of Justice and funded by OVC, these

studies examined victim needs and the ways in which they were addressed through formal

programming and other means (Newmark, 2004). Both surveys identified three general

categories of victim needs: emotional and psychological recovery, information and advocacy,

and concrete or tangible assistance (Newmark, 2004). The Urban Institute study examined

VOCA-funded programs only, whereas the Safe Horizon study did not differentiate between

VOCA-funded and non-VOCA-funded programs.

Among the 18 victim needs listed in the Urban Institute survey, the most common needs

(expressed by 50% or more of the victims) were emotional support, service planning, and

criminal justice system advocacy (Brickman et al., 2002). The Safe Horizon study reported that

such needs include being listened to when upset, understanding the handling of their cases, and

obtaining case information (Newmark et al., 2003). In both national surveys, victims of the most

serious crimes (e.g., domestic violence, robbery, assault) reported the highest number of needs

for services (Brickman et al., 2002; Newmark et al., 2003). In the Urban Institute study, victims

who had participated in VOCA-funded service programs with an active outreach component

expressed more needs than those who had participated in VOCA-funded service programs with no active outreach component.

The Urban Institute study found that the VOCA-funded victim service programs addressed nearly all of victims' major needs, whereas the Safe Horizon study found that victim service programs were much less likely to address victims' needs (Brickman et al., 2002; Newmark et al., 2003). For example, victims in the Safe Horizon survey indicated that police, prosecutors, and people in the victim's personal networks were more effective than were victim service providers in listening to victims' emotional distress, helping victims understand case information, and escorting victims to doctors' offices and the courts (Newmark et al., 2003). In contrast, VOCA-funded service providers received high marks from their clients on all client satisfaction items (Brickman et al., 2002). For example, large percentages of victims indicated that victim service staff treated them fairly and respectfully, demonstrated a lot of concern for them, and tried to understand and help them. Nearly all indicated that they would refer a friend to such services.

The lack of favorable responses regarding service programs in the Safe Horizon study was explored further during site visits and in focus groups (Newmark, 2004). Researchers found that victims had often failed to access services because they were either unaware of the availability of such services or perceived themselves as being ineligible for such assistance. In some instances, the scarcity of funding required programs to allocate services to only victims of the most serious crimes. Hence, victims were unlikely to view these service programs as a useful resource (Newmark et al., 2003). Among the most common unaddressed victim needs in the Safe Horizon study were difficulty recovering their stolen property and obtaining criminal justice system advocacy, informationorders of protection (Newmark, 2004).

The NCVS found that a victim services agency assisted an average of only 9% of the victims of violent crime (i.e., rape, aggravated assault, and robbery) from 2000 to 2009. Female victims of violent crime and victims of interpersonal violence as well as victims who were injured during the incident were the most likely groups to receive services. In addition, victims who reported the crime to the police were more likely to receive assistance from a victim service agency than those who did not (Langton, 2011). Underserved victims generally included young minority men, people with substance use and other mental health disorders, non-sexual assault victims, and members of lesbian, gay, bisexual, transgender, and queer communities (Taylor, 2014). Several other studies have reported that only a small percentage of crime victims actually access and use victim services (e.g., Davis & Henley, 1990; New & Berliner, 2000; Sims, Yost, & Abbott, 2005). Repeat victims of violent crimes (Norris et al., 1990), victims who reported crimes to the police (Zaykowski, 2014), and victims whose cases were prosecuted were more likely to use the services available (Freedy et al., 1994).

3. Compensation Programs. All 50 states (as well as the District of Columbia, Guam, Puerto Rico, and the US Virgin Islands) currently have victim compensation programs (Doerner & Lab, 2015), which receive one-third of their funding from federal VOCA dollars; the remaining funds are generated from offender fines and fees (National Association of Crime Victim Compensation Boards, 2007; Newmark, 2006). Each year, these programs serve nearly 200,000 victims and their family members, allocating approximately $450M to foster victim recovery (Doerner & Lab, 2015). Victim compensation programs vary in terms of their rationales and resources (Karmen, 2004); nonetheless, most programs contain a number of basic requirements and features, all of which are intended primarily to alleviate the financial consequences of crime (Parent, Auerbach, & Carlson, 1992).

Programs concentrate their resources on serving victims of the most serious crimes—robbery, rape, and child abuse—and their funds largely pay for these victims' medical bills (Newmark, 2006). Property crime victims are ineligible for compensation. When victims have received compensation from private insurance companies and government entitlement programs, such as Medicaid, programs deduct that amount from final compensation awards and usually set the maximum award allotted to crime victims at $25,000 (Karmen, 2004; National Association of Crime Victim Compensation Boards, 2007). However, state residency is not a requirement for compensation; for example, a resident of Kansas who is victimized in Florida can apply for compensation from Florida's program.

To be eligible for compensation, victims are required to report the crime promptly and cooperate with the police officials in the apprehension and criminal prosecution of the offender (Newmark, 2006). Victim compensation programs also typically award dollars only to "innocent" crime victims; that is, any evidence of victim precipitation or "contributing misconduct" precludes a victim from receiving compensation. For example, in Illinois (similar to many other states), the criteria include the following stipulation: "The victim must not have contributed to his/her injury by engaging in a wrongful act, being the offender or accomplice of the offender, or substantially provoking the incident" (Office of the Attorney General, State of Illinois, 2014). Similarly, the Wisconsin State Statute specifies that no award may be ordered if the victim "engaged in conduct, which substantially contributed to the infliction of the victim's injury or death or in which the victim could have reasonably foreseen could lead to the injury or death or committed a crime which caused or contributed to the victim's injury or death" (Wisconsin State Statute, Chapter 948).

According to the NCVC (2014), most states include "victim innocence" as a requirement for a state compensation award. Nonetheless, determinations of "victim innocence" are fraught with all the problems discussed earlier in this paper regarding attributions of victim responsibility for violent attacks (see above). Hence, the feasibility, validity, and fairness of applying the criterion of "victim innocence" as a prerequisite to grant victim compensation should be seriously questioned. The conviction of an offender and identification of a victim in a case should be the primary basis for considering an award. To do otherwise is to incorporate an element of victim blaming in a program designed to serve victims' needs and hasten their recovery.

Through the long-standing efforts of victim advocates and service providers as well as public officials and state legislators, the criminal justice system appears to be more attentive to victims' needs for services and support and less likely to subject them to a "secondary victimization" experience in which "victims were often harmed as much by the system's response as by the crime itself" (Derene, Walker, & Stein, 2007, p. 17). The confluences of programming, legislation, and increased awareness about the plight of violent crime victims have created more opportunities for fostering victim recovery and overcoming the stigma of victimization (Howley & Dorris, 2013).

VII. Improvements in the Measurement of Violent Victimization

The measurement of violent victimization has improved steadily in its methodological preciseness and sophistication. Attempts to sharpen existing tools and add new approaches for capturing the most serious crimes must persist for the sake of theory development, knowledge expansion, and service improvement. The collection of better data will result in better understanding of the causes and extent of violent victimization, as well as the formulation of

strategies for its prevention: primary (eradicate the causes of violence at the individual and community level); secondary (identify those at risk of violence and victimization and intervene before episodes erupt); and tertiary (minimize harm to the survivors of violence through services and programs).

A. Incidence, Victimizations, Prevalence, and Concentration

The annual counting of crimes and victimizations remains a critical recordkeeping enterprise that should continue at the local, state, and federal levels. The collection and reporting of these data could be enriched by adding five different but highly related elements to the accounting and analytic process. The first is the differentiation among incidents (number of individual crimes and victimizations/number of persons in the specified population), prevalence (number of victims/number of persons in the specified population), and concentration (number of victimizations/number of victims) (Lauritsen & Rezey, 2013). Counting a single incident with several victims as "one crime" is a misrepresentation of the impact of crime and has been allegedly employed to manipulate crime statistics for falsely enhancing police performance (Conklin, 2003). Counting victimizations alone masks the fact that victimization risk varies by person, place, and time factors. Identifying concentrations of victims would greatly foster our ability to prevent occurrences and to respond more effectively to the victims of violent crime.

B. Victimization Risk

The second element is an exploration of victim risk, which increases with each episode of crime committed against a person. For example, studies of victims of sexual assault show the cumulative risk of repeat victimizations (Daigle & Fischer, 2013). In addition, studies demonstrate that social and economic variables interact with demographic characteristics to affect the likelihood of victimization. This research has implications for crime prevention

practices and helps explicate the victim-related factors that contribute to the varying likelihood of victimization at different ages and in different settings and circumstances (Clark & Cornish, 1985).

More research attention should be focused on the phenomenon of repeat or repetitive victimization, also known as "series victimizations," which the NCVS defines as "six or more similar but separate crimes [that] the victim is unable to recall individually or describe in detail to an interviewer" (BJS, 2003, p. 5). Other definitions of repeat victimization include "two or more incidents of the same type of victimization within a short time frame (e.g., a few days, weeks, or months or within a year)" (Daigle & Fisher, 2013, p. 372). Beyond the same individual being victimized again, virtual repeat victimization can involve a similar person, item, or place targeted by the same offender (Farrell, 2010); whereas near repeat victimization can involve a neighbor who is victimized in the same manner as the initial victim (Johnson & Bowers, 2005).

As noted above, adding prevalence and concentration analyses to crime data reports will help illuminate the phenomenon of repetitive victimizations and is crucial in gaining an appreciation of these types of crimes (Lauritsen & Rezey, 2013). Data from the International Crime Victims Survey suggest that several crimes are likely to have been instances of repeat victimization, striking the same victim in reoccurring episodes. For example, 46% of sexual assaults, 41% of other types of assault, and 27% of robberies are incidents of repeat crimes (Weisel, 2005). Similar data from the British Crime Survey indicate that 2% of victims account for 41% of property crimes, while 1% of victims account for 59% of personal crimes (Johnson & Bowers, 2005).

More specific and parsimonious explorations of risk could simply involve measuring the relationships between the risk of violent criminal victimization and demographic characteristics

(see above) (Tewksbury & Mustaine, 2010). However, most needed are in-depth analyses (through the application of advanced statistical techniques) that examine the complex inter-relationships among the risk factors for both victimization and offending, and how they interact and change over time and place.

An explication of crime and victimization trends also will emerge from analyses of disaggregated national crime data. Drilling down more deeply into the criminal victimization data within and among subgroups defined by race, ethnicity, income, and census tract will help clarify the variability of victimization rates across places and times; these rates are hidden in the aggregate data sets but apparent in such fine-grained analyses (Lauritsen & Heimer, 2010). Furthermore, asking victims to elaborate on the question of "why were you victimized" (Addington, 2008) would lead to more victim-centered theories of violent victimization, which could include qualitative descriptions of violent victimizations, as well as to reports of victim intent and motivation in different instances of violent crime (Cantor & Lynch, 2000).

C. Social Structure or Place Analyses

The third element is the exertion of more emphasis on the ecology of victimization. Various types of crime clusters can form so-called "hot areas" or "hot spots." The underlying premise of a "routine activities theory of context and place" is that such locations emerge and evolve because various social contexts have different characteristics related to opportunity and guardianship or social control. For example, neighborhoods differ in terms of their proximity to areas of high offender and gang concentrations, as well as in terms of their accessibility to offenders. Different places also contain a greater or lesser supply of attractive targets and provide a better or worse overall level of security or potential for surveillance or guardianship. More targets and less guardianship attract more opportunities for crime and violence. Hence, the rates

of victimization within these areas are likely to be higher, which was noted in the preceding

discussion of social disorganization theory. In terms of violent crimes in particular, offender and

victimization patterns certainly covary (Papachristos et al., 2012).

D. Cost Estimates

The fourth element is a broader calculation of the costs of violent victimization. As

suggested earlier, future measures of the costs of violent crime must move beyond a simple count

of incidents and a cost account of the direct losses incurred from medical and funeral expenses.

Other economic burdens of violent crime consist of direct crime avoidance costs, second-order

avoidance costs, residuals of fear, social hostility, and costs of law enforcement (Kleiman et al.,

2014). Examples of such costs could include residents' purchases of handguns for self-protection

(direct crime avoidance costs); convenience store closures to avoid armed robberies, resulting in

a loss of local jobs and tax revenue (second-order avoidance costs); a spate of shootings leading

to the distrust of neighbors and avoidance of social gatherings or events, weakening social bonds

and rendering a neighborhood more susceptible to violence (social hostility); and the

expenditures of overtime pay for police officers dispatched to patrol violence-plagued streets

(costs of law enforcement). The "pain and suffering" of violent crime victims (emotional burden)

also needs to be captured with greater precision in future cost analyses (McCollister et al., 2010).

E. Victim Service Program Effectiveness

The fifth element is the collection of data relating to the effectiveness of victim service

programs. Few rigorous studies of victim assistance agencies have ever been conducted (Taylor,

2014). Most investigations have employed small sample sizes and focused on female victims of

sexual assault. In addition, the basic characteristics of victim service agencies have never been

systematically or widely examined, leaving numerous questions unanswered, such as who is

being served, where are the major gaps in services, how are programs being funded, and what are the costs of such programs (NCVC, 2011; Taylor, 2014).

In conclusion, varying criminal victimization trends at the macro level are multifactorial and defy easy explanation. The nearly three-decade decline in crime has been consistent and substantial but has yet to be fully expounded. A long view clearly demonstrates the highly variable and possibly cyclical nature of victimization. Like social and economic indicators of every sort, crime statistics are inherently—and often inexplicably—variable and unpredictable. With respect to violent victimization, annual statistics have fluctuated around each decade's central tendencies, which have steadily declined, as exemplified in this paper's discussion of violent crime and victimization rates.

Notwithstanding these data, declarations of returning to the safety of the 1960s are largely premature and simply inaccurate. The overall violent victimization rate in the 2000s (474.93 per 100,00 residents) was nearly 2.5 times higher than the rate in the 1960s (197.24 per 100,000 residents) and slightly higher than the rate in the 1970s (451.72 per 100,000 residents). Moreover, the violent victimization rate in the United States continues to exceed that of every post-industrial country in the world (e.g., Japan, Germany, United Kingdom, South Korea, France, Italy) (Van Dijk, Van Kesteen & Smit, 2008). Accordingly, violence persists as a major threat to the health and well-being of the residents and the economic viability of this country. Vigilant tracking of the targets and costs of violent crime is an important component in devising strategies to prevent cyclical upturns in the number and rate of violent victimization.

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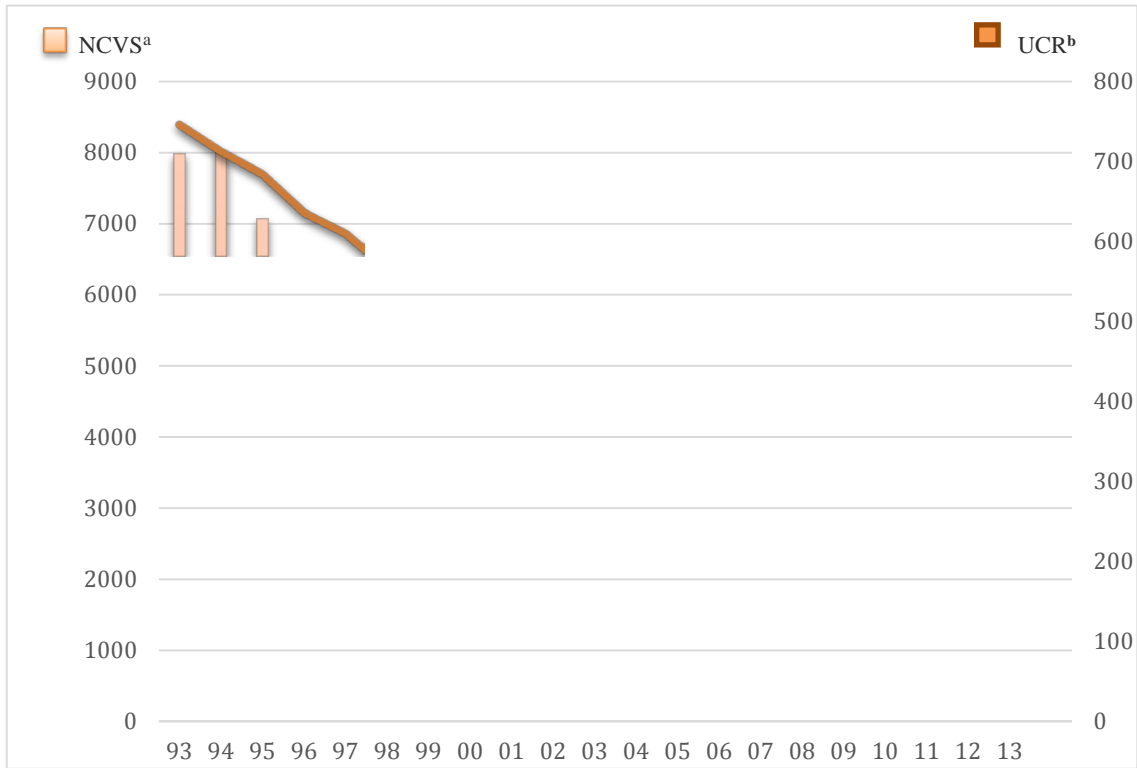
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Appendix

Figure 1: Violent Crime Victimization Rate (per 100,000) 1993–2013

[a] Source adapted from: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, National Crime Victimization Survey, 1993–2013
[b] Source: US Crime Rates per 100,000 1960-2013

Table 1: Violent Crime Victimization Rate (per 100,000) 1993–2013

NCVS[a]		UCR[b]	
1993	7980	1993	747
1994	8000	1994	713
1995	7070	1995	685
1996	6470	1996	637
1997	6110	1997	611
1998	5410	1998	566
1999	4720	1999	523
2000	3750	2000	507
2001	3260	2001	505
2002	3210	2002	494
2003	3210	2003	476
2004	2780	2004	463
2005	2840	2005	470
2006	3410	2006	474
2007	2720	2007	467
2008	2530	2008	458
2009	2230	2009	432
2010	1930	2010	405
2011	2260	2011	387
2012	2610	2012	388
2013	2320	2013	368

[a] *Source adapted from: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, National Crime Victimization Survey, 1993–2013*
[b] *Source: US Crime Rates per 100,000 1960–2013*