



Published in final edited form as:

J Soc Serv Res. 2013 May 1; 39(3): 322–334. doi:10.1080/01488376.2013.769835.

Understanding Children and Adolescents' Victimizations at Multiple Levels: An Ecological Review of the Literature

Bushra Sabri, PhD, LMSW, ACSW [Post-Doctoral Fellow],

Johns Hopkins University, 511 N Washington Street, Baltimore, MD 21205, USA, Phone: 319-331-3732

Jun Sung Hong, MSW, MA [Doctoral candidate],

School of Social Work, Children and Family Research Center, University of Illinois at Urbana-Champaign, 1010 West Nevada Street, Urbana, IL 61801, USA, Phone: 217-244-4662

Jacquelyn C. Campbell, PhD, RN, FAAN [Anna D. Wolfe Chair and Professor], and

Johns Hopkins University, School of Nursing, 525 N. Wolfe Street, Baltimore, MD-21205; Phone: 410-955-2778

Hyunkag Cho, PhD, MSW [Assistant Professor]

Michigan State University, School of Social Work, 254 Baker Hall, East Lansing, MI 48824, USA, Phone: 517-432-3732

Bushra Sabri: bushrasabri@gmail.com; Jun Sung Hong: jhong23@illinois.edu; Jacquelyn C. Campbell: jcampbe1@jhu.edu; Hyunkag Cho: chohyu12@msu.edu

Abstract

This article examines children and adolescent exposure to violence in various contexts. A systematic review of the literature was conducted to identify the definitions and types of violence reported in studies on victimization using the ecological systems framework. Sources included research studies and/or reports from scholarly journals ($n = 140$), books ($n = 9$), conference/workshops ($n = 5$), and web sources, such as Uniform Crime Reports ($n = 23$). The findings indicated that research differed in terminologies, conceptual and operational definitions, sample sizes and age group classification for children and adolescents. Further, studies lacked focus on the co-occurrence and inter-relatedness of victimization, and how these factors might affect the outcomes. Many studies employed a cross-sectional design, which limits strong conclusions about the temporal order of victimization experiences and outcomes. Future research efforts need more consistency among researchers in conceptual and operational definitions and the use of more rigorous designs. Increased holistic assessments are critical for effective prevention and intervention strategies for at-risk children and adolescents

Keywords

adolescents; children; ecological systems theory; victimization; violence

Introduction

A considerable number of research studies have documented several negative effects of children's exposure to violence in the home, school, and the community among children and adolescents (e.g., Baldry & Winkel, 2003; Buckner, Beardslee, & Bassuk, 2004; Voisin, 2007). For the most part, studies on children's exposure to violence have focused exclusively on a single type of violence victimization (Finkelhor, Ormrod, & Turner, 2007), all of which were reportedly associated with mental health problems, poor school performances, interpersonal conflicts, and substance use (Bal, De Bourdeaudhuij, Crombez,

& Van Oost, 2004; Cleary, 2000; La Greca & Harrison, 2005; McCabe, Lucchini, Hough, Yeh, & Hazen, 2005; Ramisetty-Mikler, Goebert, Nishimura, & Caetano, 2006; Seals, & Young, 2003).

As argued by Finkelhor et al. (2007), a problem with this literature is that such studies on singular types of victimization have failed to obtain complete victimization profiles, which can create problems if, for instance, a child who experiences one type of victimization are also at risk of experiencing other types of victimization. Moreover, “at-risk” children and adolescents may experience multiple types of victimization within various contexts. To illustrate, children and adolescents who are exposed to one type of violence (e.g., violence in the neighborhood) are likely to experience other types of violence (e.g., maltreatment in the home). Thus effective violence prevention and intervention strategies necessitate a systematic understanding of children and adolescents’ exposure to violence in multiple contexts. This sort of integration of different forms of violence is supported by research studies, which show that multiple victimizations are associated with more post-traumatic stress disorder (PTSD), repeated victimization and perpetration of violence, which calls for prevention and intervention strategies that address multiple forms of violence perpetration and victimization (e.g. Chalk & King, 1998; Institute of Medicine, 2008).

The focus of this review is to examine existing research on children and adolescent’s exposure to violence in various settings (e.g., home, school, community) using Bronfenbrenner’s (1977) ecological systems framework (see Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). The definition and types of violence victimizations were examined, followed by a review of current empirical studies on children’s exposure to violence at the micro- (i.e., physical and emotional maltreatment and neglect by a caregiver, peer violence, dating violence), meso- (i.e., community violence; Finkelhor, Ormrod, & Turner, 2007), and exosystems levels (i.e., sexual violence). Although the ecological model also suggests that influences at the macrosystems level can increase the likelihood of children’s exposure to violence, there is a major dearth of research studies that have examined the macrosystems level.

Using Bronfenbrenner’s (1977) ecological perspective, the focus of this review addresses the following questions: 1) What types of violence exposure at different ecological levels were examined in the literature on child and adolescent victimization? 2) How did researchers define and operationalize childhood and adolescence victimization types?

Method of Selection

Empirical and theoretical studies in the English language were identified through electronic bibliographic databases and manual searches, using terms, such as “adolescent victimization,” child abuse,” “sibling violence,” “peer violence,” “child maltreatment,” “dating violence,” “violent victimization.” Databases utilized for this study include googlescholar.com, Medline, PsycInfo, and Social Science Abstracts. Empirical and theoretical studies published from 1979 to 2011, which focused primarily on the definition, measures, and effects of violence victimization occurring during childhood and adolescence were reviewed. This research is based on empirical and systematic review studies that a) quantitatively or qualitatively assessed child and adolescent outcomes associated with various types of violence victimization, b) focused on definitions and measures used to assess for various types of victimization, and/or c) provided prevalence data on child and adolescent victimization. Of the peer-reviewed journal articles, 140 articles that met the inclusion criteria were selected and reviewed. To summarize, the sources included peer-reviewed journals ($n = 140$), conference and workshop summaries or reports ($n = 5$), electronic sources such as Bureau of Justice Statistics Bulletin and Uniform Crime Reports

($n = 23$) and books ($n = 9$). Although most of the sources reviewed included adolescents-only samples, some contained both children and adolescents in their samples (cross-sectional), while other studies focused on adult samples to examine violence victimization during childhood or adolescence (retrospective or longitudinal).

Victimization types were examined based on how they have been conceptually and operationally defined in the literature. This review was based on: a) a review of conceptual and operational definitions provided by the researchers in their articles; and b) studies, which included definitions in the National Victims Assistance Academy, Child Welfare Information Gateway, Crime Victims Research Center in South Carolina, Center for Disease Control and Prevention, National Institute of Justice, the National Center for Victims of Crime and Crime against Children Research Center. Categories of victimization discussed in the subsequent sections are largely based on the outcomes literature on children and adolescent victimization. The majority of outcome articles from the peer-reviewed journals focused on the following victimization types: abuse by a caregiver, peer violence, dating violence, community violence, and sexual violence. Findings from these studies suggest that these types of victimization are associated with negative physical, emotional, psychological, and social outcomes.

Findings from the Review

Definition and Types of Victimization

The National Victim Assistance Academy (2007) identifies a ‘violence victim’ as any individual who has suffered injury and harm by forces beyond his or her control, and not of his or her personal responsibility (Burnley, Edmunds, Gaboury, & Seymour, 1998). The intent of the perpetrator is to harm his or her victim. The Bureau of Justice Statistics (2007) also defines victimization as a criminal activity with the purpose of harming a person or a group of people physically, psychologically or emotionally (Pimlott-Kubiak & Cortina, 2003). Examples of violent crimes include attempted or completed rape, sexual assault, personal robbery or simple assault (Bureau of Justice Statistics, 2010). Thus, violent victimization may include incidents where the perpetrator intentionally threatens, attempts, or actually inflicts physical harm or injury to the victim (Greene, 2002; Reiss & Ross, 1993). However, the definition of ‘violence’ or ‘violent victimization’ is ambiguous, as there are varying parameters defining experiences that are considered to be violent. For example, the Semiannual Uniform Crime Reports (2012) recognizes *robbery* as a ‘violent’ crime; however, researchers (e.g., Green & Pomeroy, 2007) disagree, arguing that it is a ‘non-violent’ criminal activity.

The complexities surrounding the term ‘violence’ may be attributed to how violence is defined. Definition of violence is based on 1) behavior or intention of the perpetrator, injurious effect on the victim or circumstances involved in violence victimization or a combination of all these; and 2) victim’s perceptions, coping processes or other mediators/moderators, which shape their perceptions of violence (Campbell, 2000; Guterman, Cameron, & Staller, 2000). Definitions may also include the means of violence perpetration, such as *use of weapons* to threaten or cause injury to the victims. According to other definitions (e.g., Plass & Carmody, 2005), the perpetrator may use a weapon or threaten to use a weapon, but the victim may not necessarily be injured. Regardless of the motive or means, the definition of ‘violence victimization’ includes the notion of *physical harm or injury intended by the perpetrator*.

For purposes of this review, violent victimization was defined as experiences that can result in physical, mental, and/or behavioral harm to children and adolescents. ‘Non-violence victimization’ occurrences are incidents, which do not necessarily involve a perpetrator

intending to cause any direct harm or injury to the victim. Examples include theft or vandalism, as well as adverse life experiences, such as accidents, serious illnesses or natural disasters (Finkelhor & Ormrod, 2000; Finkelhor, Turner, & Ormrod, 2006).

Ecological Systems Framework

The ecological systems theory was first developed by Urie Bronfenbrenner in the 1970s. Bronfenbrenner (1977) coined this framework as “the scientific study of the progressive mutual accommodation, throughout the life span, between a growing human organism and the changing immediate environments in which it resides, as this process is affected by relations obtaining within and between these immediate settings, as well as the larger social contexts, both formal and informal in which the settings are embedded” (p. 514). The ecological environment is perceived as a set of nested structures, in which each structure is situated inside the next.

Bronfenbrenner’s (1977) ecological model provides a useful framework for understanding children and adolescents’ exposure to violence victimization. In recent years, researchers and practitioners have recognized the importance of a framework that considers assessment of risk and protective factors within multiple contexts. Thus, understanding the behaviors and actions of family, peers, and community, as well as broader level influences, such as cultural characteristics is imperative. The ecological model postulates that children’s exposure to violence can be explained from a complex interplay between and among the four nested systems: micro- (e.g., home), meso- (e.g., home-school), exo- (e.g., community, and macrosystems (e.g., cultural values; Bronfenbrenner, 1977; Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002). Moreover, the ecological model can be used as a framework to assess for different types of co-occurring victimization experiences at multiple system levels, and to understand the impact of these experiences on adolescents’ health. In addition, the model can be used as a guide to assess the need for individual-level and environmental level prevention and intervention programs for at-risk adolescents (Whittaker, Schinke, & Gilchrist, 1986).

The subsequent section is devoted to a more detailed exploration of the ecological systems model in relation to children and adolescents’ exposure to violence and its three major systems levels. The following section examines findings from studies that were included in the review, which are categorized into following sub-sections: micro-, meso-, and exosystems.

Microsystem—The most direct influences in the outcomes associated with victimization are within the microsystem level, which consists of individuals and groups of individuals with whom the individual interact, and assigns subjective meanings to those interactions (Heise, 1998). These direct influences include interpersonal relationships within the family, peer groups and school settings (Bronfenbrenner, 1994). A developing child’s exposure to violence in interpersonal relationships within the microsystems may directly threaten their physical and emotional safety, and reduce the availability of, access to, or quality of potential learning opportunities in the school and community (Bowen & Bowen, 1999). Additionally, according to Kessler and Magee (1994), exposure to family violence as a child renders vulnerability to maladaptive coping, to difficulties in handling interpersonal conflicts, and to increased emotional reactivity to life stresses. This may lead to counterproductive interactions with others in the microsystem and other system levels, increasing the child’s risk of being re-victimized (DeMaris & Kaukinen, 2005; Kessler & Magee, 1994).

Bronfenbrenner (1977) depicts the microsystem as a pattern of activities, social roles, and interpersonal relations experienced by the individual in a direct setting (e.g., home, school)

with particular physical, social, and symbolic features that would invite, permit, or inhibit engagement in a sustained, progressively more complex interaction with the immediate environment. Family violence (e.g., abuse by a caregiver, sibling violence), peer violence, and dating violence are examples of microsystem level violence that commonly occurs in direct settings where the individual child is embedded.

Physical child maltreatment: Physical child maltreatment is defined as intentional or unintentional infliction of physical harm or injury (Perry, Mann, Palker-Corell, Ludy-Dobson, & Schick, 2002). Although physical maltreatment is used interchangeably with corporal punishment, many researchers emphasize the need to better make a distinction between physical abuse and corporal punishment (Straus & Hamby, 1997) in order to better understand the immediate and long-term effects (see Fendrich, Mackesy-Amiti, Wislar, & Goldstein, 1997). Nevertheless, studies have shown that both corporal punishment and physical abuse can potentially result in similar negative immediate and long-term outcomes on the victims (Durrant, 2005). Researchers have found that physical abuse has major consequences for children's physical, emotional, and mental health; cognitive skills; educational attainment; and social and behavioral development (English, 1998, for a review). Physically abused children are also at heightened risk of engaging in risk-taking (Bornovalova, Gwadz, Kahler, Aklin, & Lejuez, 2008; Holmes, 2008) and delinquent (Stewart, Livingston, & Dennison, 2008) behaviors.

Emotional child maltreatment: Emotional child maltreatment frequently occurs when caretakers display demeaning behaviors toward the child, marginalize the child from other siblings, show lack of love and nurturance, and subject the child to inappropriate levels of punishment (National Victims Assistance Academy, 2002). Regrettably, we found few studies on the effects of emotional maltreatment on children, which is attributed to scant research attention because it is commonly perceived to be less damaging than physical maltreatment (see Kaplan, Pelcovitz, & Labruna, 1999, for a review). Findings from the existing research however suggest that emotional abuse might have a stronger relationship to long-term behavioral problems, including internalizing and externalizing behaviors, social impairment, low self-esteem, and suicidal behaviors than other forms of maltreatment (e.g., McGee, Wolfe, & Wilson, 1997). Perceived emotional rejection by caregivers has also been associated with poor adolescent and young adult outcomes (Kaplan, Pelcovitz, & Labruna, 1999).

Neglect: According to a report by the US Department of Health and Human Services (2003), neglect was the most common form of maltreatment in 2003. Furthermore, the Fourth Federal National Incidence Study on Child Maltreatment found that there were no significant changes documented in the rates of child neglect from 1993 to 2006 (as cited by Daro, 2010). However, the applicability of the term 'neglect' on adolescents has been consistently debated among scholars, as adolescents tend to be more independent from their caregivers, whereas younger age children are dependent on their caregivers. Caretakers are usually not held accountable for 'adolescent neglect', and may even be considered 'justifiable' in some cases (Sturkie & Flanzer, 1987). As a result, adolescent neglect cases are frequently unsubstantiated and under-reported (Fagan, 2005).

A limited number of empirical studies have also examined the consequences of neglect. For example, a review of research on the effects of neglect by Crouch and Milner (1993) suggests that caregiver neglect can be detrimental to children's physical, intellectual, social/behavioral, affective, and psychological state. Kinard (1998) also highlighted some issues regarding the outcomes of different types of maltreatment. First, in the case of multiple maltreatment experiences, outcomes may differ depending on which type of maltreatment first occurred. Second, the effects of experiences within each category of maltreatment may

also differ based on the frequency of the occurrences. For example, a child who experiences neglect in multiple areas may have different outcomes than a child who is neglected in one or two areas. Despite the complexities involved in maltreatment, we should also note that some researchers studied outcomes of maltreatment utilizing a single item or question on maltreatment history. Researchers also have mostly focused on the effects of a single type of maltreatment rather than the effects of co-occurring maltreatment experiences (e.g., Fagan, 2005; Fergusson & Lynskey, 1997; Perez, 2001).

Peer violence: Peer violence, or peer victimization occurs mostly in the classroom or in school areas (Rodkin, 2004). Existing research suggests varieties of categorizations on peer victimization. In a review of cross-sectional studies on peer victimization published between 1978 and 1997, Hawker and Boulton (2000) found that peer victimization was mostly classified as indirect, relational, physical, verbal, and generic victimization. Many researchers also categorize peer victimization as overt and relational victimizations. Overt victimization refers to physical harm by a peer, while relational victimization refers to social harm (e.g., spreading rumors, exclusion; La Greca & Harrison, 2005; Prinstein, Boergers, & Vernberg, 2001; Storch & Masia-Warner, 2004; Storch, Ledley, & Lewin, 2006).

Peer victimization in school has been found to be associated with a number of negative outcomes, as examined by several researchers. Several cross-sectional studies have shown that children and adolescents who are victimized by their peers in school are likely to experience internalizing behaviors, such as loneliness (Arseneault et al., 2006; Kochenderfer & Ladd, 1996), depression (Craig, 1998; Neary & Joseph, 1994; Slee, 1995), and anxiety (Craig, 1998); school avoidance (Kochenderfer & Ladd, 1996); externalizing behaviors, such as aggression (Arseneault et al., 2006; Craig, 1998); psychosocial problems (Rigby, 2000); and suicidal behaviors (Rigby & Slee, 1999). A limited number of retrospective reports and longitudinal studies (e.g., Rigby, 2003, for a review) also found that peer victimization is a significant risk factor for health and mental health problems, such as suicidal behavior (see Brunstein Klomek, Sourander, & Gould, 2010, for a review). Further evidences indicate that children who bully others at school are significantly more likely to exhibit antisocial and violent behavior during adolescence and adulthood (Rigby, 2003). Although longitudinal research provides a stronger support for understanding the detrimental effects of bullying experiences on children and adolescents, there is a major dearth of longitudinal research.

Dating violence: Previous research studies on dating violence have mainly focused on the experiences of college students (Holt & Espelage, 2005). However, considering the deleterious health, psychosocial, interpersonal outcomes associated with adolescents' experiences in dating violence (Espelage & Holt, 2007; Holt & Espelage, 2005; Silverman, Raj, Mucci, & Hathaway, 2001), researchers in recent years have focused on adolescents. According to the Center for Disease Control and Prevention (2012), dating violence involves physical, psychological or emotional, and sexual victimization within a dating relationship, as well as from acts, such as pinching, hitting, kicking, sexual harassment, forced sexual assault, and stalking. As with violence between marital and cohabiting couples, there are negative outcomes associated with dating violence, including injury, depression, low self esteem, substance use, school problems, and teen pregnancy (Davila, Steinberg, Kachadourian, & Fincham, 2004; Hagan & Foster 2001; Lewis & Fremouw 2001; Silverman et al., 2001; Zimmer-Gembeck, Siebenbruner, & Collins, 2001). A limited number of longitudinal findings also indicate that victims of dating violence are also more likely to be victims of intimate-partner violence in adulthood (Hendy et al., 2003; Smith, White, & Holland, 2003).

Mesosystem—Mesosystem consists of relationships between and among microsystems, such as the home, school, and community. An example of a mesosystem is exposure to community violence and its effect on relationships in the home and school. Studies have documented that exposure to community violence can adversely affect children's sense of safety and well-being. Children who are consistently exposed to violence in the community are also likely to experience disruption in typical developmental trajectories, depression, PTSD, cognitive problems, family problems, and peer problems (Gorman-Smith & Tolan, 1998; Margolin & Gordis, 2000). Furthermore, the prevalence of community violence may contribute to violence in the microsystem, such as home and school. For example, exposure to violence in inner-city neighborhoods might result in increased stress and frustration that invariably leads to family-level violence (Cicchetti & Lynch, 1993). Children with accumulated risk exposures (e.g., poly-victimization) are also highly likely to engage in delinquent and violent behaviors in immediate environments, such as home and school. To illustrate, a longitudinal research by Mrug and Windle (2009), which investigated the effects of children's exposure to community violence from a sample of 603 children, found that violence exposure was predictive of both internalizing and externalizing behaviors in the home and in school. A recent meta-analytic study by Fowler et al. (2009), which estimated the effects of exposure to community violence on mental health outcomes across 114 studies, also found that community violence had strongest impact on PTSD and externalizing problems and smallest impact on internalizing symptoms. Victimization by community violence was the strongest predictor of symptomatology compared to witnessing or hearing about community violence. Witnessing community violence had a greater effect on externalizing problems than hearing about violence, but both types of exposure had a same effect on other internalizing problems. Adolescents exposed to community violence were more likely than younger children to exhibit externalizing behaviors and exposure, whereas younger children were more likely than adolescents to exhibit greater internalizing problems.

Poly-Victimization is another example of a mesosystem level violence. Poly-victimization is defined as "having experienced multiple victimizations of different kinds, such as sexual abuse, physical abuse, bullying, and exposure to family violence" (Finkelhor, Turner, Hamby, & Ormrod, 2011, p. 4). Children who are prone to violence exposure are likely to experience various types of violence in a number of settings (e.g., home, school). Studies focusing on single types of victimizations fail to cover victimization profiles of study samples (Finkelhor, Ormrod, & Turner, 2007). Studies that exclusively examine one form of victimization are limited in many ways. First, these studies overlook the effects of other forms of victimization that may affect the adolescents, which can potentially lead to over-estimation of the impact of one type of victimization experiences. Second, the studies neglect the inter-relatedness of multiple victimizations. For instance, physical assault may co-occur with sexual assault (Finkelhor, Cross, & Cantor, 2005), and physical abuse may co-occur with verbal abuse (DiLillo, Fortier, & Perry, 2006). It is also necessary to consider how one type of violence can trigger the occurrence of another type of violence (Finkelhor et al., 2005). Thus, a holistic approach for assessing the effects of victimization is essential (Higgins & McCabe, 2000; Finkelhor et al., 2007).

Victimizations forms may be inter-related and one form of victimization experience may increase the likelihood of another type of victimization. According to Finkelhor et al.'s (2005) findings, children and adolescents who had experienced one form of victimization in a given year had a 69% chance of experiencing another type of victimization. The average number of poly-victimization experienced by adolescents was three. However, a retrospective, cross-sectional study on the effects of multiple forms of child abuse and neglect by Vranceanu, Hobfoll, and Johnson (2007) reports that multiple experiences were associated with PTSD in adulthood. Poly-victimization experiences have been found to be

associated with more severe symptoms than repeated or chronic single victimization. Research on the effects of multiple victimization types also found that when other victimization types were considered, the effects of individual victimizations were reduced or eliminated (Finkelhor et al., 2007).

Exosystem—Exosystem considers aspects of the environment beyond the immediate system that directly affects the individual. Exosystem consists of a link between two or more interactions or settings, but the individual is embedded in only one (Bronfenbrenner, 1977). Exposure to violence can be influenced by a larger system, which may not be directly experienced by the individual. Violence exposure at multiple environments is an example of an exosystem level factor. Certain distal factors may or may not directly affect the individual, but can influence the microsystem that contains the individual. Sexual violence is an example of an exosystem level violence. Sexual violence may be reinforced by culturally prescribed gender role socialization, which legitimizes violence against females in the home (see Berkel, Vandiver, & Bahner, 2004; Carr & VanDeusen, 2004; Lisak, Hopper, & Song, 1996).

Males and females are socialized differently, according to gender role socialization theory. Gender roles have been identified as encouraging and internalizing aggressive behaviors, such as violence and sexual assault (Ludeman, 2004). Simonson and Mezydlo-Subich (1999) have conceptualized aggression and victimization within the Sex Role Socialization Analysis of Rape, which suggests that both males and females internalize expectations for normative gender-role behavior throughout their developmental stage. Females are socialized as submissive and docile, while males are taught to be dominant and aggressive. Cultural norms such as male sexual entitlement and rigid gender roles are associated with acceptance of sexual violence (World Health Organization Report, 2002). Furthermore, cultural norms may be related to maladaptive self-perceptions associated with sexual violence victimization. For instance, community and societal norms are linked to female celibacy, and girls are frequently blamed when they are sexually victimized, leading to their negative self-appraisals and associated psychological distress (Campbell, Dworkin, & Cabral, 2009).

Studies have consistently reported immediate and long-term health and mental health consequences associated with sexual violence victimization (e.g., Campbell, 2002; McFarlane et al., 2005; Sadler et al., 2000; Zoellner, Goodwin, & Foa, 2000). According to Golding (1999), sexual violence-health link is supported by various studies, and many demonstrate dose-response relationships (i.e., greater frequency and severity of sexual assault are associated with greater adverse health outcomes). Furthermore, a review by Campbell (2002) also indicates that sexual violence victimization is associated with detrimental outcomes for mothers as well as for children, which necessitates increased assessment and intervention. Sexual violence victimization is antecedent to many health-care problems, such as sexually transmitted diseases and PTSD (McFarlane et al., 2005).

Discussion

Researchers over several decades have made tremendous strides in enhancing our knowledge and understanding on children and adolescents' experiences in violence at various contexts. However, findings have been inconsistent due to variations in the terms and conceptualization of victimization (e.g., abuse, maltreatment). Such ambiguity may be attributed to the varying criteria for classifying types of victimization, such as community violence. As noted above, some researchers define community violence as victimization that only occurs outside the family, while others recognize community violence as victimization occurring both inside and outside the family. Further, we should note that victimization is

not mutually exclusive. For instance, ‘maltreatment’ can include physical, sexual, or psychological abuse. Moreover, experiences in maltreatment are influenced by context-specific factors at different levels of the ecological framework such as cultural norms, quality of parenting, demographic characteristics of the community, sources of social support and access to resources (Lynch & Cicchetti, 1998).

In addition to the definition, researchers also use varying measures to study victimization. Some researchers use measures that assess for victimization history using a single item while overlooking relevant factors, such as severity of experiences, age of onset, and relationship to the perpetrator. Other researchers use detailed measures that assess multiple experiences and include follow-up questions to further probe into these experiences. Moreover, the measures vary in the time frame. Some measures have a reference period of one year while others assess for lifetime exposure to violence, which can potentially generate recall bias.

Research on adolescent victimization is also inconsistent in classifying what age group falls under ‘adolescence.’ For instance, some researchers classify adolescence using the age-group criterion of 12–18 years, while others classify adolescence using the age-group criterion of 11–17 years or 10–19 years. We should also note that some of the conceptual and operational definitions of victimization fail to distinguish between childhood and adolescent victimization. This makes it difficult to understand the age dynamics involved in the outcomes of victimization experiences. The outcomes of victimization may be influenced by the interaction occurring in the ecological systems model (Zielinski & Bradshaw, 2006). The contextual systems may interact to cause developmental or health-related changes differently for various developmental age groups. A standard approach therefore is necessary to address inconsistencies in research findings examining age-specific outcomes of victimization and to effectively highlight developmental, health, and behavioral problems of children and adolescents at different developmental stages.

Results obtained in some studies may also not be generalized to other populations due to sampling issues. For instance, many community violence studies have exclusively focused on inner-city samples. Some studies are based solely on clinically referred samples or samples under the notice of CPS. Results of such studies may be confounded by factors related to reporting or those that represent the most severe cases of victimization (Stevens, Ruggiero, Kilpatrick, Resnick, & Saunders, 2005). Also, CPS referred samples may exclude victimizations by non-caretakers, and the juvenile justice system may exclude victimizations that do not fit the conventional crime criteria of law enforcement agencies (Finkelhor et al., 2005).

Additionally, cultural differences in definitions and perceptions of victimization may result in under-reporting of victimization and associated problems, especially among racial/ethnic minority groups. For instance, due to cultural variations in parenting practices, minority adolescents may not report physical abuse. Corporal punishment that may be considered physical abuse by White adolescents may not be for minorities. Minority adolescents may normalize confrontational interaction with his or her caregiver, whereas a White adolescent may consider it as an emotional abuse.

Victimization surveys conducted in households using random digit telephone dialing procedures present a different dilemma. These surveys may exclude adolescents in households without a telephone. Thus, researchers need to devise a more systematic procedure, which ensure adequate representation of the population studied. Representative samples are needed not only to obtain accurate prevalence estimates, but also to conclude that the findings of the outcome studies can be generalized to other groups.

The outcome studies have also been inconsistent in reporting the effects of children and adolescents' experiences in victimization. Adolescents who are multiply victimized may be differentially affected than adolescents who are singly victimized (Finkelhor, Cross, & Cantor, 2005). Similarly, adolescents who experience victimization in a particular order of occurrence may be affected differently than others with different order of occurrence of these experiences (Kinard, 1998). Many studies also have not yet considered the co-occurrence and inter-relatedness of victimization, and how these factors might affect the outcomes.

Finally, violence victimization of children and adolescents needs to be examined more from the perspective of 'harm' on the victim rather than the perspective of violation of legal provisions. However, much of the research on victimization focuses on outcomes of victimization forms that are based on the parameters defined by the majority opinion, policy-makers or the legal system. Other forms of victimization that do not necessarily fit these parameters but are 'harmful' such as sibling violence have been overlooked as a result. In this review, most of the studies on outcomes of victimization were based on cross-sectional research designs, even though longitudinal research designs are considered more appropriate in examining how victimization experiences may relate to change in individual functioning over time. According to Spaccarelli and Fuchs (1997), longitudinal research clarifies the impact of both victimization experiences as well as secondary stressors (related to family, peers, and community level factors) in predicting outcomes. Longitudinal designs are more beneficial than cross-sectional designs in examining the dynamics involved in the process of recovery.

The ecological model can be used as a framework to explain why some children or adolescents are prone to violence exposure or are likely to developing victimization-related adjustment problems, while others are less vulnerable. Researchers need to continuously examine how interaction among factors at multiple levels of the social ecology place children and adolescents at risk for victimization and negative health outcomes. For instance, victimization at exo or macrosystem are likely to predict victimization occurring in the child or adolescent's immediate (microsystem) environment (Lynch & Cicchetti, 1998). In addition, researchers must identify protective factors within ecological contexts that can mitigate adverse outcomes, such as internalizing and externalizing behaviors. An ecological approach to understanding victimization can be used as an assessment tool for identifying context-specific risk factors, which can result in effective prevention and intervention strategies.

Conclusion

This review examined children and adolescents' exposure to different types of violence at multiple contextual levels. The strengths of this review included using multiple data sources such as peer-reviewed journal articles, conference presentations, reports from workshops, and government reports. Although this was a systematic review of the literature, it was not a comprehensive review of all literature on children and adolescents' victimization. Moreover, the review was limited to English language sources. These limitations aside, findings from this review can contribute to understanding the various types of victimizations within multiple level contexts.

Some children and adolescents are at risk of exposure to different types of violence in various settings, which consistently undermines their safety, health and well-being. Although the existing literature has made a tremendous stride in enhancing our understanding of the relationship between violence and negative outcomes, there is a major need for consistency in definitions in order for research to be comparable. In addition,

additional rigorous designs are needed to establish strong evidence of causal links between the types of victimization exposure and the associated outcomes. Moreover, additional studies are needed to focus on victimization types that have received limited research attention. And finally, researchers need to explore children and adolescents' violence exposure and associated consequences in racially and ethnically diverse communities. Violence prevention programs that are appropriate for individual communities are essential for decreasing the likelihood of violence exposure. Most importantly, comprehensive policies and intervention programs that address children and adolescents' exposure to multiple types of victimization need to be in place.

References

- Arseneault L, Walsh E, Trzesniewski K, Newcombe R, Caspi A, Moffitt TE. Bullying victimization uniquely contributes to adjustment problems in young children: A nationally representative cohort study. *Pediatrics*. 2006; 118:130–138. [PubMed: 16818558]
- Bal S, De Bourdeaudhuij I, Crombez G, Van Oost P. Differences in trauma symptoms and family functioning in intra and extrafamilial sexually abused adolescents. *Journal of Interpersonal Violence*. 2004; 19:108–123. [PubMed: 14680532]
- Baldry AC, Winkel FW. Direct and vicarious victimization at school and at home as risk factors for suicidal cognition among Italian adolescents. *Journal of Adolescence*. 2003; 26:703–716. [PubMed: 14643741]
- Barnett, O.; Miller-Perrin, CL.; Perrin, RD. Family violence across the life span: An introduction. 2. Thousand Oaks, California: Sage Publishers; 2005.
- Berkel LA, Vandiver BJ, Bahner AD. Gender role attitudes, religion, and spirituality as predictors of domestic violence attitudes in White college students. *Journal of College Student Development*. 2004; 45:119–133.
- Berthold SM. War traumas and community violence: Psychological, behavioral, and academic outcomes among Khmer refugee adolescents. *Journal of Multicultural Social Work*. 2000; 8:15–42.
- Bornoalova MA, Gwadz MA, Kahler C, Aklin WM, Lejuez CW. Sensation seeking and risk-taking propensity as mediators in the relationship between childhood abuse and HIV-related risk behavior. *Child Abuse & Neglect*. 2008; 32:99–109. [PubMed: 18155295]
- Bowen NK, Bowen GL. Effects of crime and violence in neighborhoods and schools on the school behavior and performance of adolescents. *Journal of Adolescent Research*. 1999; 14:319–342.
- Bronfenbrenner U. Toward an experimental ecology of human development. *American Psychologist*. 1977; 32:513–531.
- Bronfenbrenner, U. Ecological models of human development. In: Husen, T.; Postlethwaite, T., editors. *International encyclopedia of education*. 2. New York: Elsevier Science; 1994. p. 1643-1647.
- Brunstein Klomek A, Sourander A, Gould A. The association of suicide and bullying in childhood to young adulthood: A review of cross-sectional and longitudinal research findings. *Canadian Journal of Psychiatry*. 2010; 55:282–288.
- Buckner JC, Beardslee WR, Bassuk EL. Exposure to violence and low income children's mental health: Direct, moderated and mediated relations. *American Journal of Orthopsychiatry*. 2004; 74:413–423. [PubMed: 15554803]
- Bureau of Justice Statistics. Violent victimization rates by age, 1973–2005. 2007. Retrieved April 7, 2012, from <http://www.ojp.usdoj.gov/bjs/glance/tables/vagetab.htm>
- Bureau of Justice Statistics. Terms & definitions: Crime characteristics and trends. 2010. <http://bjs.ojp.usdoj.gov/index.cfm?ty=tdtp&tid=93>
- Burnley, JN.; Edmunds, C.; Gaboury, MT.; Seymour, A., editors. *Theoretical perspectives of victimology and critical research*. 1998 National Victim Assistance Academy. 1998. Retrieved from https://www.ncjrs.gov/ovc_archives/nvaa/ch03.htm
- Caffaro JV, Conn-Caffaro A. Treating sibling abuse families. *Aggression and Violent Behavior*. 2005; 10:604–623.

- Campbell JC. Promise and perils of surveillance in addressing violence against women. *Violence Against Women*. 2000; 6:705–727.
- Campbell JC. Health consequences of intimate partner violence. *The Lancet*. 2002; 359:1331–1336.
- Campbell R, Dworkin E, Cabral G. An ecological model of the impact of sexual assault on women's mental health. *Trauma, Violence, & Abuse*. 2009; 10:225–246.
- Carr JL, VanDeusen KM. Risk factors for male sexual aggression on college campuses. *Journal of Family Violence*. 2004; 19:279–289.
- Center for Disease Control and Prevention. Understanding teen dating abuse: Fact sheet. 2006. Retrieved April 7, 2012, from <http://www.cdc.gov/ncipc/pub-res/DatingAbuseFactSheet.pdf>
- Centers for Disease Control and Prevention. Teen dating violence. 2012. Retrieved from http://www.cdc.gov/violenceprevention/intimatepartnerviolence/teen_dating_violence.html
- Chalk, R.; King, PA. *Violence in families: Assessing prevention and treatment programs*. Washington, DC: National Academy Press; 1998.
- Cicchetti D, Lynch M. Toward an ecological/transactional model of community violence and child maltreatment: Consequences for children's development. *Psychiatry*. 1993; 56:93–117.
- Cleary SD. Adolescent victimization and associated suicidal and violent behaviors. *Adolescence*. 2000; 35:671–682. [PubMed: 11214206]
- Craig WM. The relationship among bullying, victimization, depression, anxiety, and aggression in elementary school children. *Personality and Individual Differences*. 1998; 24:123–130.
- Crouch JL, Milner JS. Effects of child neglect on children. *Criminal Justice and Behavior*. 1993; 20(1): 49–65.
- Daro, D. *Child abuse prevention: A job half done*. Chicago: University of Chicago; 2010.
- Davila J, Steinberg S, Kachadourian L, Fincham F. Romantic involvement and depressive symptoms in early and late adolescence: The role of a preoccupied relational style. *Personal Relationships*. 2004; 11:161–178.
- Demaris A, Kaukinen C. Violent victimization and women's mental and physical health: Evidence from a national sample. *Journal of Research in Crime and Delinquency*. 2005; 42:384–411.
- DiLillo, D.; Fortier, MA.; Perry, AR. Physical child abuse and neglect. In: Liller, K., editor. *Injury prevention for children and adolescents: Integration of research, practice, and advocacy*. Washington, DC: American Public Health Association Press; 2006. p. 283-304.
- Durrant, JE. Distinguishing physical punishment from physical abuse: Implications for professionals [Electronic Version]; *Envision: The Manitoba Journal of Child Welfare*. 2005. p. 4 Retrieved April 7, 2012, from <http://www.envisionjournal.com/application/Articles/77.pdf>
- English DJ. The extent and consequences of child maltreatment. *The Future of Children*. 1998; 8:39–53. [PubMed: 9675999]
- Eriksen S, Jensen V. All in the family? Family environment factors in sibling violence. *Journal of Family Violence*. 2006; 21:497–507.
- Eriksen S, Jensen V. A push or a punch: Distinguishing the severity of sibling violence. *Journal of Interpersonal Violence*. 2009; 24:183–208. [PubMed: 18417730]
- Esbensen F, Huizinga D, Menard S. Family context and criminal victimization in adolescence. *Youth & Society*. 1999; 31:168–198.
- Espelage DL, Holt MK. Dating violence and sexual harassment across the bully-victim continuum among middle and high school students. *Journal of Youth and Adolescence*. 2007; 36:799–811.
- Fagan AA. The relationship between adolescent physical abuse and criminal offending: support for an enduring and generalized cycle of violence. *Journal of Family Violence*. 2005; 20:279–290.
- Fendrich M, Mackesy-Amiti ME, Wislar JS, Goldstein PJ. Childhood abuse and the use of inhalants: differences by degree of use. *American Journal of Public Health*. 1997; 87:765–769. [PubMed: 9184503]
- Fergusson DM, Lynskey MT. Physical punishment/maltreatment during childhood and adjustment in young adulthood. *Child Abuse & Neglect*. 1997; 21:617–630. [PubMed: 9238545]
- Finkelhor, D.; Ormrod, R. Characteristics of crimes against juveniles [Electronic Version]. *OJJDP Juvenile Justice Bulletin*. 2000. Retrieved April 7, 2012, from <http://www.ncjrs.gov/pdffiles1/ojjdp/179034.pdf>

- Finkelhor D, Cross TP, Cantor EN. The justice system for juvenile victims: A comprehensive model of case flow. *Trauma, Violence & Abuse*. 2005; 6:83–102.
- Finkelhor D, Ormrod RK, Turner HA. Poly-victimization: A neglected component in child victimization. *Child Abuse & Neglect*. 2007; 31:7–26. [PubMed: 17224181]
- Finkelhor D, Turner H, Ormrod R. Kid's stuff: The nature and impact of peer and sibling violence on younger and old children. *Child Abuse & Neglect*. 2006; 30:1401–1421. [PubMed: 17118448]
- Finkelhor, D.; Turner, H.; Hamby, S.; Ormrod, R. Poly-victimization: Children's exposure to multiple types of violence, crime and abuse. 2011. Retrieved November 4, 2012, from <https://www.ncjrs.gov/pdffiles1/ojjdp/235504.pdf>
- Finkelhor, D.; Turner, H.; Ormrod, R.; Hamby, S.; Kracke, K. Children's exposure to violence: A comprehensive national survey. 2009. Retrieved April 7, 2012, from <https://www.ncjrs.gov/pdffiles1/ojjdp/227744.pdf>
- Fowler PJ, Tompsett CJ, Braciszewski JM, Jacques-Tiura AJ, Baltes BB. Community violence: A meta-analysis on the effect of exposure and mental health outcomes of children and adolescents. *Development & Psychopathology*. 2009; 21:227–259. [PubMed: 19144232]
- Garbarino J. An ecological perspective on the effects of violence on children. *Journal of Community Psychology*. 2001; 29:361–378.
- Golding JM. Sexual-assault history and long-term physical health problems: Evidence from clinical and population epidemiology. *Current Directions in Psychological Science*. 1999; 8:191–194.
- Gorman-Smith D, Tolan P. The role of exposure to community violence and developmental problems among inner-city youth. *Development and Psychopathology*. 1998; 10:101–116. [PubMed: 9524810]
- Green DL, Pomeroy E. Crime victimization: Assessing differences between violent and nonviolent experiences. *Victims and Offenders*. 2007; 2:63–76.
- Greene, MB. Violence. 2002. Retrieved April 7, 2012, from <http://www.healthline.com/galecontent/violence>
- Guterman NB, Cameron M, Staller K. Definitional and measurement issues in the study of community violence among children and youths. *Journal of Community Psychology*. 2000; 28:571–587.
- Hagan J, Foster H. Youth violence and the end of adolescence. *American Sociological Review*. 2001; 66:874–899.
- Halpern CT, Oslak SG, Young ML, Martin SL, Kupper LL. Partner violence among adolescents in opposite-sex romantic relationships: Findings from the National Longitudinal Study of Adolescent Health. *American Journal of Public Health*. 2001; 91:1679–1685. [PubMed: 11574335]
- Hashima P, Finkelhor D. Violent victimization of youth versus adults in the National Crime Victimization Survey. *Journal of Interpersonal Violence*. 1999; 14:799–820.
- Hawker SJ, Boulton MJ. Twenty years research on peer victimization and psychosocial maladjustment: A meta-analytic review of cross-sectional studies. *Journal of Child Psychology and Psychiatry*. 2000; 41:441–455. [PubMed: 10836674]
- Heise LL. Violence against women: An integrated, ecological framework. *Violence Against Women*. 1998; 4:262–290. [PubMed: 12296014]
- Hendy HM, Weiner K, Bakerofskie J, Eggen D, Gustitus C, McLeod KC. Comparison of six models for violent romantic relationships in college men and women. *Journal of Interpersonal Violence*. 2003; 18:645–665.
- Higgins DJ, McCabe MP. Relationships between different types of maltreatment during childhood and adjustment in adulthood. *Child Maltreatment*. 2000; 5:261–272. [PubMed: 11232272]
- Hodges EVE, Perry DG. Personal and interpersonal antecedents and consequences of victimization by peers. *Journal of Personality and Social Psychology*. 1999; 76:677–685. [PubMed: 10234851]
- Holmes WC. Men's self-definition of abusive childhood sexual experiences, and potentially related risky behavioral and psychiatric outcomes. *Child Abuse & Neglect*. 2008; 32:83–97. [PubMed: 18035415]
- Holt MK, Espelage DL. Social support as a moderator between dating violence victimization and depression/anxiety among African American and Caucasian adolescents. *School Psychology Review*. 2005; 34:309–328.

- Hussey JM, Chang JJ, Kotch JB. Child maltreatment in the United States: Prevalence, risk factors, and adolescent health consequences. *Pediatrics*. 2007; 118:933–942. [PubMed: 16950983]
- Institute of Medicine. Workshop on violence prevention in low- and middle-income countries: Finding a place on the global agenda. Washington, D.C: National Academies Press; 2008.
- Jezi DR, Molidor CE, Wright TL. Physical, sexual and psychological abuse in high school dating relationships: Prevalence rates and self-esteem issues. *Child and Adolescent Social Work Journal*. 1996; 13:69–87.
- Kaplan SJ, Pelcovitz D, Labruna V. Child and adolescent abuse and neglect research: A review of the past 10 years. Part 1: Physical and emotional abuse and neglect. *Journal of the American Academy of Child & Adolescent Psychiatry*. 1999; 38:1214–1222. [PubMed: 10517053]
- Kessler RC, Magee WJ. Childhood family violence and adult recurrent depression. *Journal of Health and Social Behavior*. 1994; 35:13–27. [PubMed: 8014427]
- Kinard EM. Classifying type of child maltreatment: Does the source of information make a difference? *Journal of Family Violence*. 1998; 13:105–112.
- Kochenderfer BJ, Ladd GW. Peer victimization: Cause or consequence of school maladjustment? *Child Development*. 1996; 67:1305–1317. [PubMed: 8890485]
- Krug, EG.; Dahlberg, LL.; Mercy, JA.; Zwi, AB.; Lozano, R. World report on violence and health. Geneva: World Health Organization; 2002.
- La Greca AM, Harrison HM. Adolescent peer relations, friendships, and romantic relationships: Do they predict social anxiety and depression? *Journal of Clinical Child and Adolescent Psychology*. 2005; 34:49–61. [PubMed: 15677280]
- Lewis S, Fremouw W. Dating violence: A critical review of the literature. *Clinical Psychology Review*. 2001; 21:105–127. [PubMed: 11148892]
- Lisak D, Hopper J, Song P. Factors in the cycle of violence: Gender rigidity and emotional constriction. *Journal of Traumatic Stress*. 1996; 9:721–743. [PubMed: 8902743]
- Ludeman RB. Arrested emotional development: Connecting college men, emotions, and misconducts. *New Directions for Student Services*. 2004; 107:75–85.
- Lynch M, Cicchetti D. An ecological-transactional analysis of children and contexts: The longitudinal interplay among child maltreatment, community violence, and children's symptomatology. *Development and Psychopathology*. 1998; 19:235–257. [PubMed: 9635223]
- Margolin G, Gordis EB. The effects of family and community violence on children. *Annual Review of Psychology*. 2000; 51:445–479.
- McCabe KM, Lucchini SE, Hough RL, Yeh M, Hazen A. The relation between violence exposure and conduct problems among adolescents: A prospective study. *American Journal of Orthopsychiatry*. 2005; 75:575–584. [PubMed: 16262515]
- McFarlane J, Malecha A, Watson K, Gist J, Batten E, Hall I, Smith S. Intimate partner sexual assault against women: Frequency, health, consequences, and treatment outcomes. *Obstetrics & Gynecology*. 2005; 105:99–108. [PubMed: 15625149]
- McGee RA, Wolfe DA, Wilson SK. Multiple maltreatment experiences and adolescent behavior problems: Adolescents' perspectives. *Development and Psychopathology*. 1997; 9:131–149. [PubMed: 9089128]
- Mohr A. Family variables associated with peer victimization: Does family violence enhance the probability of being victimized by peers? *Swiss Journal of Psychology*. 2006; 6:107–116.
- Mrug S, Windle M. Bidirectional influences of violence exposure and adjustment in early adolescence externalizing behaviors and school connectedness. *Journal of Abnormal Child Psychology*. 2009; 37:611–623. [PubMed: 19199024]
- National Center on Child Abuse and Neglect. Child sexual abuse: Incest, assault, and sexual exploitation, a special report. Washington, DC: Author; 1978.
- National Victim Assistance Academy. Child victimization. 2002. Retrieved April 7, 2012, from <http://www.ojp.usdoj.gov/ovc/assist/nvaa2002/chapter11.html>
- National Victim Assistance Academy. Theoretical perspectives of victimology and critical research. 2007. Retrieved April 7, 2012, from <http://www.ojp.usdoj.gov/ovc/assist/nvaa/ch03.htm>

- Neary A, Joseph S. Peer victimization and its relationship to self-concept and depression among school girls. *Personality and Individual Differences*. 1994; 16:183–186.
- Office of Juvenile Justice and Delinquency Prevention. Child maltreatment. 2006. [Electronic Version]. Retrieved April 7, 2012, from <http://ojjdp.ncjrs.gov/ojstatbb/victims/qa02108.asp?qaDate=2003>
- Perez DM. Ethnic differences in property, violence, and sex offending for abused and nonabused adolescents. *Journal of Criminal Justice*. 2001; 29:407–417.
- Perry, BD.; Mann, D.; Palker-Corell, A.; Ludy-Dobson, C.; Schick, S. Child physical abuse. In: Levinson, D., editor. *Encyclopedia of crime and punishment*. Vol. 1. Thousand Oaks, CA: Sage Publications; 2002. p. 197-202.
- Pimlott-Kubiak S, Cortina LM. Gender, victimization, and outcomes: Reconceptualizing risk. *Journal of Consulting and Clinical Psychology*. 2003; 71:528–539. [PubMed: 12795576]
- Plass PS, Carmody DC. Routine activities of delinquent and non-delinquent victims of violent crime. *American Journal of Criminal Justice*. 2005; 29:235–245.
- Preliminary Annual Uniform Crime Report. Crime in the United States. 2006. Retrieved April 7, 2012, from <http://www.fbi.gov/ucr/06prelim/index.html>
- Preliminary Semiannual Uniform Crime Report. Crime in the United States. Federal Bureau of Investigation, United States Department of Justice; Washington, D.C. 20535: 2012. Retrieved from <http://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s/2012/preliminary-semiannual-uniform-crime-report-january-june-2012>
- Prinstein MJ, Boergers J, Vernberg EM. Overt and relational aggression in adolescents: Social-psychological adjustment of aggressors and victims. *Journal of Clinical Child Psychology*. 2001; 30:479–491. [PubMed: 11708236]
- Ramisetty-Mikler S, Goebert D, Nishimura S, Caetano R. Dating violence victimization: Associated drinking and sexual risk behaviors of Asian, Native Hawaiian, and Caucasian high school students in Hawaii. *Journal of School Health*. 2006; 76:423–429. [PubMed: 16978166]
- Reiss, AJ.; Ross, JA. *Understanding and preventing violence*. Washington, D.C: National Academy Press; 1993.
- Rigby K. Effects of peer victimization in schools and perceived social support on adolescent well-being. *Journal of Adolescence*. 2000; 23:57–68. [PubMed: 10700372]
- Rigby K. Consequences of bullying in schools. *The Canadian Journal of Psychiatry*. 2003; 48:583–590.
- Rigby K, Slee P. Suicidal ideation among adolescent school children, involvement in bully-victim problems, and perceived social support. *Suicide and Life-Threatening Behavior*. 1999; 29:119–130. [PubMed: 10407965]
- Rodkin, PC. Peer ecologies of aggression and bullying. In: Espelage, DL.; Swearer, SM., editors. *Bullying in American schools: A social-ecological perspective on prevention and intervention*. Mahwah, NJ: Lawrence Erlbaum Associates Publishers; 2004. p. 15-35.
- Ruchkin VV, Schwab-Stone M, Kuposov R, Vermeiren R, Steiner H. Violence exposure, post-traumatic stress, and personality in juvenile delinquents. *Journal of American Academy of Child & Adolescent Psychiatry*. 2002; 41:322–329.
- Sadler A, Booth BM, Nielson D, Doebbeling BN. Health-related consequences of physical and sexual violence: Women in the military. *Obstetrics & Gynecology*. 2000; 96:473–480. [PubMed: 10960645]
- Scarpa A, Haden SC, Hurley J. Community violence victimization and symptoms of posttraumatic stress disorder. *Journal of Interpersonal Violence*. 2006; 21:446–469. [PubMed: 16501214]
- Schafer M, Kulis M. Bullying/mobbing unter Schülern—Jeder kennt und Keiner weis Bescheid [The Bullying Hotline]. *Kinder-und Jugendarzt*. 2000; 31:1–3.
- Schafer M, Werner NE, Crick NR. A comparison of two approaches to the study of negative peer treatment: General victimization and bully/victim problems among German school children. *British Journal of Developmental Psychology*. 2002; 20:281–306.
- Seals D, Young J. Bullying and victimization: Prevalence and relationship to gender, grade level, ethnicity, self-esteem, and depression. *Adolescence*. 2003; 38:735–747. [PubMed: 15053498]

- Silverman JG, Raj A, Mucci LA, Hathaway JE. Dating violence against adolescent girls and associated substance use, unhealthy weight control, sexual risk behavior, pregnancy, and suicidality. *Journal of the American Medical Association*. 2001; 286:572–579. [PubMed: 11476659]
- Simonson K, Mezydlo-Subich L. Rape perception as a function of gender-role traditionality and victim-perpetrator association. *Sex Roles*. 1999; 40:617–634.
- Slee PT. Peer victimization and its relationship to depression among Australian primary school students. *Personality and Individual Differences*. 1995; 18:57–62.
- Smith PH, White JW, Holland LJ. A longitudinal perspective on dating violence among adolescent and college-age women. *American Journal of Public Health*. 2003; 93:1104–1109. [PubMed: 12835193]
- Spaccarelli S, Fuchs C. Variability in symptom expression among sexually abused girls: Developing multivariate models. *Journal of Clinical Child Psychology*. 1997; 26:24–35. [PubMed: 9118173]
- Stevens TN, Ruggiero KJ, Kilpatrick DG, Resnick HS, Saunders BE. Variables differentiating singly and multiply victimized youth: Results from the National Survey of Adolescents and implications for secondary prevention. *Child Maltreatment*. 2005; 10:211–223. [PubMed: 15983106]
- Stewart A, Livingston M, Dennison S. Transitions and turning points: Examining the links between child maltreatment and juvenile offending. *Child Abuse & Neglect*. 2008; 32:51–66. [PubMed: 18082884]
- Storch EA, Masia-Warner C. The relationship of peer victimization to social anxiety and loneliness in adolescent females. *Journal of Adolescence*. 2004; 27:351–362. [PubMed: 15159093]
- Storch EA, Ledley DR, Lewin AB. Peer victimization in children with Obsessive-Compulsive disorder: Relations with symptoms of psychopathology. *Journal of Clinical Child and Adolescent Psychology*. 2006; 35:446–455. [PubMed: 16836482]
- Straus MA. Measuring intrafamily conflict and violence: The conflict tactics scale. *Journal of Marriage and the Family*. 1979; 41:75–87.
- Straus, MA. Conflict Tactics Scales [Electronic Version]. Encyclopedia of domestic violence. 2007. Retrieved April 7, 2012, from <http://pubpages.unh.edu/~mas2/CTS44G.pdf>
- Straus, MA.; Hamby, SL. Measuring physical and psychological maltreatment of children with the Conflict Tactics Scales. In: Kantor, GK.; Jasinski, J., editors. *Out of the darkness: Contemporary research perspectives on family violence*. CA: Thousand Oaks; 1997. p. 119-135.
- Sturkie K, Flanzer JP. Depression and self-esteem in the families of maltreated adolescents. *Social Work*. 1987; 32:491–496.
- Turner HA, Finkelhor D, Hamby SL, Shattuck A, Ormrod RK. Specifying type and location of peer victimization in a national sample of children and youth. *Journal of Youth and Adolescence*. 2011; 40:1052–1067. [PubMed: 21373905]
- U.S. Department of Health and Human Services. *Child Maltreatment 2003*. Administration on Children, Youth and Families. Washington, DC: U.S. Government Printing Office; 2003. Retrieved from <http://archive.acf.hhs.gov/programs/cb/pubs/cm03/cm2003.pdf>
- Voisin DR. The effects of family and community violence exposure among youth: recommendations for practice and policy. *Journal of Social Work Education*. 2007; 43:51–66.
- Vranceanu A, Hobfoll SE, Johnson RJ. Child multi-type maltreatment and associated depression and PTSD symptoms: The role of social support and stress. *Child Abuse & Neglect*. 2007; 31:71–84. [PubMed: 17215039]
- Wall AE, Barth RP. The NSCAW Research Group. Aggressive and delinquent behavior of maltreated adolescents: Risk factors and gender differences. *Stress, Trauma and Crisis*. 2005; 8:1–24.
- Whittaker JK, Schinke SP, Gilchrist LD. The ecological paradigm in child, youth, and family services: Implications for policy and practice. *Social Service Review*. 1986; 60:483–503.
- Wittebrood K, Nieuwbeerta P. Criminal victimization during one's life course: The effects of previous victimization and patterns of routine activities. *Journal of Research in Crime and Delinquency*. 2000; 37:91–122.
- World Health Organization. *World report on violence and health*. 2002. Retrieved April 7, 2012, from http://www.who.int/violence_injury_prevention/violence/world_report/en/summary_en.pdf
- Zielinski DS, Bradshaw CP. Ecological influences on the sequelae of child maltreatment: A review of the literature. *Child Maltreatment*. 2006; 11:49–62. [PubMed: 16382091]

- Zimmer-Gembeck M, Siebenbruner J, Collins A. Diverse aspects of dating: Associations with psychological functioning from early to middle adolescence. *Journal of Adolescence*. 2001; 24:313–336. [PubMed: 11476609]
- Zoellner LA, Goodwin ML, Foa EB. PTSD severity and health perceptions in female victims of sexual assault. *Journal of Traumatic Stress*. 2000; 13:635–649. [PubMed: 11109236]