

Child Victims

Siniša Franjić

Department of Criminal law, Faculty of Law, International University of Brcko District, Brcko, Bosnia and Herzegovina, Europe

ABSTRACT

No matter what form of violence they are involved, children are often victims. Victims are even children who abuse other children because the system does not want to recognize them as abusers until a terrible tragedy happens. Violent children find victims who are vulnerable or disfigured by other children (skin color, walking style, name, size, religion, glasses, family, and dress). They are often silent, calm, passive, anxious, unsafe, and cautious children with low self-confidence. They have a few friends who sometimes stand in their defense. Victims of violence often have the feeling of guilt and feel that they are themselves guilty of what is happening to them. Victims of violence want to fit in their environment in any way. Child victims often try to hide from adults that they are victims of violence because they think that they will be considered weak and cowardly.

Key words: Children, delinquency, violence

INTRODUCTION

hildren are arguably the population group most vulnerable to crime.^[1] The overall risk of being victimized before reaching the age of 18 years is higher than for an adult. In a national sample of over 2000 American children, aged 2-17 years, 71% of the children reported that they had been victimized in the previous year. Over half of the participants experienced some kind of assault during the study year, with higher rates for boys than for girls, 1 in 10 experienced injury as a result. About one-fifth also experienced bullying. One in four children experienced property victimization and 1 in 8 a form of child maltreatment. One of the most serious consequences of victimization is that it significantly increases the risk for further victimization. These "polyvictims" are particularly distressed and vulnerable. Sexually assaulted children are most likely (97%) to become polyvictims, experiencing additional victimizations such as assault, maltreatment, and property crime. Due to their dependency on adults, children have very little control over their environments and, therefore, often cannot escape harmful situations. Children witnessing domestic violence provide a stark example of childhood victimization due to

abusive environments. It is known today that roughly half of the children who witness domestic violence in their homes are also victims of abuse themselves.

At the same time, only a small portion of child victims report the crimes against them, especially when they have been sexually assaulted or abused within their families. Moreover, children who find the courage and disclose their victimization are often further traumatized by the criminal justice system. Even when stress-reducing techniques are used, children of various ages are excluded from the process, are not consulted, and are treated, at best, as objects of protection rather than as stakeholders. Furthermore, child victims are often left without emotional healing because their specific needs and the developmental consequences of their victimization are not considered. Only very rarely do they experience a sense of justice and closure following their involvement in the criminal justice process.

MALTREATMENT

Child maltreatment is recognized as a complex global problem.^[2] The estimates of the incidence of maltreatment

Address for correspondence:

Siniša Franjić, Faculty of Law, International University of Brcko District, Brcko, Bosnia and Herzegovina, Europe. Tel.: +387-49-49-04-60. E-mail: sinisa.franjic@gmail.com

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vary. The World Health Organization (WHO) reports that approximately 31,000 children under the age of 15 years are victims of homicide every year, and international studies have found that 25-50% of children reported being physically abused. In the United States, the National Child Abuse and Neglect Data System estimated that 772,000 million children were victims of maltreatment in 2008 and that approximately 1740 children died as a result of child maltreatment that year. However, these numbers do not accurately reflect the actual incidence of child maltreatment, and the number of children who die from child abuse and neglect, in the United States and worldwide, is unknown. Many factors are cited in creating the challenges of understanding, classifying, and measuring child maltreatment, including the definition of child maltreatment, the country reporting the maltreatment. the types of maltreatment being studied, and the types and quality of the research.

Some may expect that a death from child maltreatment should be rather obvious. The mention of "Child Abuse Homicide" brings to mind injuries such as head trauma and rib fractures, but the deaths that fall into this category are much broader. Researchers cite similar issues in fatal and nonfatal child maltreatment but add that the process of correctly identifying fatal child maltreatment suffers from variations in death investigations, differences among child death review processes, and limited coding options for child deaths through the International Classification of Disease codes.

The issues of classification of fatal child maltreatment are broad. Some assert that the numbers of maltreatment fatalities are underestimated because the deaths are incorrectly attributed to falls, drowning, or other causes. Other issues with identifying the role of maltreatment in a death may be that fatal child maltreatment may be a result of chronic abuse over time or may involve a single impulsive or planned incident. It can be a direct result of a caregiver's action or a result of the caregiver's failure to act. The neglect may be chronic or acute. Neglect to the point of a death being certified as a homicide may include starvation but may also include improper supervision so irresponsible that death could be an expected result, such as leaving an infant unattended in a bathtub for 30 min. National Dana for the United States found that 40% of the child maltreatment deaths were caused by multiple forms of maltreatment with neglect accounting for over 30% and physical abuse for over 20% of the deaths.

VICTIMIZATION

Children are arguably the most criminally victimized people in society.^[3] They suffer high rates of all the same crimes that adults do, plus a load of offenses specific to their status as children, such as child maltreatment. They are beaten by family members, bullied and attacked by schoolmates and peers, abused and raped by dating partners, and targeted by sex offenders in both physical and virtual realms. Childhood is indeed a gauntlet.

The claim that children are the most criminally victimized population is not one that requires definitional gerrymandering to prove. It is true even if we talk in the narrowest terms about conventional crime – police blotter crime – and leave out for the moment the special victimizations of childhood such as child abuse and neglect. For example, juveniles are 2–3 times more likely than adults in America to suffer a conventional rape, robbery, or aggravated assault – all serious violent crimes. They are 3 times more likely than adults to suffer what police call a "simple assault."

Victimization generates profound emotional distress, even trauma.^[1] Serious emotional repercussions appear not only after violent or sexual crime; there is evidence of the psychological toll paid by victims of burglary, robbery, and assault as well. The pervasiveness of distress is striking, with symptoms appearing across socioeconomic status, gender, geography, and population groups.

Being a victim of any crime changes, the way people perceive the world and themselves. Victims of crime typically experience two devastating realizations. The first is that the world is not an orderly place, with a reason for everything and logic behind actions. The second assumption shattered by crime is that of autonomy: When attacked, victims are involuntarily deprived of their power, therefore, losing their control over their body, property, and actions. The results of these experiences translate into various elevated symptoms such as depression, anxiety, hostility, and alienation.

People react very differently to crime, however, and differ in the ways and pace in which they reconstitute their perceptions of the world. Reactions to similar crimes can vary from minor, short-term stress reactions to long-lasting clinical symptoms. Furthermore, different individuals may respond with vastly different ways of coping, even to the same kind of assault. Differences in reactions to crime result from variations in the individual's internal and external resources, the crime itself, previous victimization, societal status, and other ecological circumstances.

Victims of all forms of child abuse, including physical, sexual, and psychological abuse and abuse resulting from neglect, are the least likely to report the abuse to the police or a child service agency.^[4] The reasons for the failure to report abuse by victims vary. One of the obvious reasons is that a large proportion of child abuse victims are young children who do not have the mental capacity to recognize that they are being victimized. Older children may not report physical or sexual abuse because of some sense of loyalty to the family or because they do not want to get

their parents in trouble. A victim who is sexually abused by a sibling may interpret the experience as a normal part of family life. Other reasons for a victim not telling anyone of the experience include shame and fear of being punished. In instances of sexual abuse, the victim may actually enjoy the attention or material rewards provided by the perpetrator as enticements.

ANTISOCIAL BEHAVIOR

Antisocial behavior and aggression play key roles in the diagnoses of three mental disorders.^[5] As discussed in this section, antisocial personality disorder in adults may involve aggressive, impulsive, reckless, and irresponsible behavior. It may also be very difficult for individuals with antisocial personality disorder to maintain jobs and personal relationships or to otherwise conform to social or cultural norms. In children, conduct disorder is thought to be indicated by the externalization of problems in the form of aggression toward people and animals, destruction of property, dishonesty, theft, and other serious violations of age-appropriate rules such as truancy. In addition, a persistent pattern of negative, hostile, overly aggressive, and defiant behavior in children is characteristic of oppositional defiant disorder. These disorders are typically diagnosed through interviews and questionnaires.

Antisocial personality disorder is one of the most extensively studied personality disorders. Individuals with this disorder are impulsive, aggressive, and aloof and are thought to have diminished capabilities for work, love, guilt, and cooperation with others. Antisocial personality disorder begins in childhood with substantial behavior problems either at school or at home. The disorder is typified by antisocial behavior in a broad range of social and personal contexts. Impulsiveaggressive behavior is most prominent during childhood. These behaviors include fighting, setting fires, running away from home, treating animals cruelly, and engaging in conflicts with authority figures. In adulthood, the impulsiveaggressive behaviors persist and are associated with impairments in work and social situations. Individuals with antisocial personality disorder tend to change jobs repeatedly, both by getting fired and by quitting. They also frequently use and abuse alcohol and drugs.

DELINQUENCY

While the field of juvenile delinquency stands as a monument to social science, one of its most mature, theoretically and empirically developed domains, the topic of juvenile victimization the opposite pole of the offender – victim equation – has been comparatively neglected.^[6] It is true that one can find substantial research on specific child victimization topics such as child abuse or child sexual assault, but there is nothing like the integrated and theoretically articulated interest that characterizes the field of juvenile delinquency.

This neglect is ironic for a variety of reasons. For one thing, as we will demonstrate below, children are among the most highly victimized segments of the population. They suffer from high rates of the same crimes and violence adults do, and then, they suffer from many victimizations relatively particular to childhood. Second, victimization has enormous consequences for children, derailing normal and healthy development trajectories. It can affect personality formation, has major mental health consequences, impacts on academic performance, and also is strongly implicated in the development of delinquent and antisocial behavior. It is clear that because of several factors such as children's special developmental vulnerability to victimization, its differential character during childhood, and the presence of specialized institutions to deal with it (like child protection agencies), the victimization of children and youth deserves both more attention and specialized attention within the larger fields of criminology, justice studies, and even developmental psychology. Elsewhere, we have proposed that this field be called developmental victimology.

CONTROL

While some empirical studies have examined children's use of control as a coping mechanism in varying contexts, control has not been tested in the context of childhood victimization.^[1] This is not surprising, considering the dearth of strength-based literature on children in general and child victims in particular. Therefore, the following discussion reviews some theories on control and studies focusing on children's coping with stressors other than victimization, such as homesickness, family and school problems, divorce, and medical treatment. Further research is clearly needed to explore whether these findings can be extended to childhood victimization.

Developmental psychology defines control cognitions (or appraisals) in two dimensions: Outcome contingency - the assessment whether and to what extent the outcome can be influenced by the behavior of people like the individual who assesses the situation and personal competence - the assessment of the individual's own ability to change the outcome. Children who felt that problems at school or in the family could be changed through children's behaviors, and children who felt that they personally could improve their situation, perceived their situation as more controllable than those who had lower perceptions of either outcome contingencies or their personal competence. At the same time, these two dimensions were clearly independent of each other. Contingency beliefs significantly predicted the most positive treatment outcomes: Children who believed that "what kids do" determines what happens at home and school showed the highest reduction in problem behaviors. Competence beliefs, in contrast, showed little predictive power. These findings suggest that children who believe that children in general have a say or can change a certain situation cope better with a related problem in comparison with those who believe that children's behavior or opinions are irrelevant to the subject.

With regard to control as coping, the psychological literature uses a two-process model of control to distinguish between primary control (changing the stressful environment to make it more comfortable for the individual) and secondary control (changing oneself to fit the environment). A third categorized way of coping is relinquishing control – simply giving up.

JUVENILE JUSTICE

At the first glance, the characteristics of the adversarial criminal justice process in Western societies seem to overlook many of the needs - rights of child victims.^[1] Their rehabilitation and best interests, while possibly in the background, are not assigned high priority in the process. Child victims' participation is limited and problematic. Important aspects of children's development and the right to equality are further neglected. As to protection, while this is clearly a goal of the criminal justice system (unlike the other human rights principles), the low reporting rates of crimes against children and the evidentiary difficulties associated with such crimes make it difficult for the criminal justice system to reach this goal in a satisfactory manner. Further, an investigation into the psychosocial needs of child victims such as an apology, direct (positive) interaction with the perpetrator, validation, and a sense of control reveals that they are typically not addressed in the criminal process.

In Western adversarial criminal justice systems, the major participants are the state – represented by the prosecutorial authority – and the offender. Victims are typically only witnesses. In many cases, the process ends with a plea bargain, leaving no role for the victim. In other cases, victims are called to give testimony, and while doing so, to put themselves at the hands of defense attorneys who are trained to conduct stringent cross-examinations. Seen as a "piece of evidence" (although a central one), victims often are denied opportunities to tell their stories in their own terms, to ask questions that bother them, or to talk about the aftermath of their victimization.

CONCLUSION

One of the most common forms of violence against children is sexual assault. Sexual assault usually begins between 4 and 8 years. Abusers most often do not use force, rather than persuasion, threats, and bribes. Eighty percent of sexual abusers are people whom children know. Physical evidence of sexual abuse often does not exist or is difficult to identify. For this reason, adults should be aware of unusual changes in the child's behavior. A commonly talented child could become silent and retracted. A silent child could suddenly become overly active, promiscuous, or could show excessive interest in sexual behavior. A child who did not have trouble adapting to others at the same time could begin to be afraid of confined spaces, certain peoples, or darkness. A child who was abused could start abusing other children.

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