



Child Poly-Victimization and Multi-type Maltreatment

A Bibliography

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**Championing and Strengthening the
Global Response to Child Abuse**

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Scope

This selected bibliography covers literature on co-occurring and separately occurring multiple and different types of child victimizations.

Organization

Publications include articles, book chapters, reports, and research briefs and are listed in date descending order. Links are provided to full text publications when possible. However, this collection may not be complete. More information can be obtained in the Child Abuse Library Online.

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Child Poly-victimization and Multi-type Maltreatment

A Bibliography

Lee, N., Pigott, T. D., Watson, A., Reuben, K., O'Hara, K., Massetti, G., Fang, X., & Self Brown, S. (2022). Childhood polyvictimization and associated health outcomes: A systematic scoping review. *Trauma, Violence, & Abuse, 24*(3), 1579–1592. DOI:10.1177/15248380211073847

Polyvictimization, the experience of multiple types of victimization, is associated with detrimental health outcomes. Despite extensive research on the health consequences of polyvictimization, one challenge in understanding this literature lies in the varied operationalized definitions of polyvictimization and health outcomes. This scoping review provides the volume of the current literature on this topic, documents the varied constructs of polyvictimization and associated health outcomes, identifies knowledge gaps, and guides future research directions. A systematic search of English-language original articles that presented quantitative associations of childhood polyvictimization and health outcomes was performed through six-database searches, a gray literature search, and citation mining from June 2020 to January 2021. The varied constructs of polyvictimization, health outcomes, and other study characteristics were extracted. A total of 96 studies were included. Two ways of creating continuous variables (30.21%) and four ways of constructing categorical variables (72.92%) were identified for operationalizing polyvictimization. The majority of health outcomes were mental, behavioral, or social (96.88%), while slightly more than 10% of studies examined physical health (11.46%) or general health conditions (10.42%), respectively. More than half of studies used U.S. samples (56.25%). The varied constructs of polyvictimization suggests that there is a need to establish a valid polyvictimization construct that is consistently agreed upon in the research community. Findings summarize the specific health outcomes that can be targeted for further investigation and prevention efforts. Findings also suggest that the study of resilience and coping education for childhood polyvictims is sorely needed.

Song, A., Yoon, Y., & Cho, Y. (2022). The association between polyvictimization in childhood and intimate partner violence and child abuse in adulthood. *Journal of Interpersonal Violence*, 37(9-10), 6009-6033. DOI:10.1177/08862605211073088

The main purpose of this study was to examine the association of family polyvictimization in childhood with the victimization or perpetration of spousal abuse and the perpetration of child abuse in adulthood. While associations between maltreatment in childhood and subsequent perpetration or victimization in adulthood are well documented, their association with polyvictimization in childhood (i.e., experiencing multiple types of victimization) has received less attention. This research aims to empirically investigate 1) whether early experiences of family polyvictimization are predictive of subsequent experience or spousal abuse or perpetration of child abuse and 2) whether there are gender differences in those associations. Through conducting Chi-square analysis and logistic regression analysis with South Korea's National Domestic Violence Survey 2019, the study found significant empirical evidence that polyvictimization is predictive of perpetration or experience of spousal abuse and perpetration of child abuse. Particularly, adults who experienced polyvictimization in childhood were more likely to perpetrate child abuse regardless of the type of abuse ($p < .001$). Polyvictimization in childhood was also significantly associated with perpetration and victimization of spousal abuse ($p < .001$). In regard to gender differences, this study found that males were more likely to be polyvictimized by family in childhood (15.11%) than females (10.23%), and polyvictimization was found to increase the likelihood of females being revictimized in adulthood. More attention should be paid to victimization by multiple types of violence within the family and its influence on intergenerational transmission of violence.

Chan, K. L., Chen, Q., & Chen, M. (2021). Prevalence and correlates of the co-occurrence of family violence: A meta-analysis on family polyvictimization. *Trauma, Violence, & Abuse*, 22(2), 289–305. DOI:10.1177/1524838019841601

The aims of this study are to (a) provide reliable estimates of prevalence rates of family polyvictimization by synthesizing the findings from the existing literature, (b) examine the effect sizes of the impact of one type of family victimization on other types of family victimization, and (c) investigate the correlates of family polyvictimization. Databases of literature published on or before April 2018 were searched. A total of 59 publications met the inclusion criteria and were included in the analysis for the combined odds ratios (ORs) to estimate the associations among different types of family victimization; 38 of them (99,956 participants) were used for the calculation of the combined prevalence rates of family polyvictimization. The overall co-occurrence rates of family victimization were 9.7% among the general population and 36.0% among the clinical population. The combined OR of other type(s) of victimization when one was present was 6.01 ($p < .001$). Longitudinal studies show that, when a family reported intimate partner violence, the odds of child abuse and neglect within the same family at a later stage was 3.64 ($p < .001$). Depression and post-traumatic stress disorder were two significant correlates associated with family polyvictimization. Family polyvictimization is prevalent across the world. The high co-occurrence rates and strong associations between different types of victimization on different family members warrant the need for the early detection of victims and effective preventions and interventions using a family approach, instead of treating victims from the same family individually.

Guerra, C., Pereda, N., & Guilera, G. (2021). Poly-victimization and coping profiles: relationship with externalizing symptoms in adolescents. *Journal of Interpersonal Violence*, 35(3–4), 1865–1882. DOI:10.1177/0886260517744184

Externalizing symptoms correspond to a set of behavioral problems related to aggressiveness and the violation of norms. These disorders are common during

adolescence, especially in poly-victimized populations. However, not much is known about the mechanism underlying the relationship between poly-victimization and symptoms or about the factors that could play a protective role in this relationship. It is necessary to understand the factors that influence the development of these disorders to prevent them. The aim of this study was to evaluate the relationships among coping strategies, poly-victimization, and externalizing symptoms. The participants were 144 adolescent outpatients ($M = 14.31$, $SD = 1.48$) attending child and adolescent mental health services. The participants responded to three scales that examined their coping strategies, poly-victimization levels, and externalizing symptoms. The results showed that both poly-victimization and nonproductive coping were directly associated with externalizing symptomatology. In contrast, coping in reference to others and productive coping had inverse relationships with externalizing symptoms. Finally, the results of a cluster analysis revealed three groups of adolescents with different coping strategy profiles. The group with the least externalizing symptomatology was the “active-balanced” group (high use of coping in reference to others and productive coping combined with moderate use of nonproductive coping). The group with the greatest symptomatology was the “lonely” group (high use of productive and nonproductive coping but low use of coping in reference to others). The results suggest that polyvictimization and style of coping has an impact on the development of externalizing problems. These results may be useful for designing programs to prevent or treat externalizing disorders in adolescents.

Pane Seifert, H. T., Tunno, A. M., Briggs, E. C., Hill, S., Grasso, D. J., Adams, Z. W., & Ford, J. D. (2021). Polyvictimization and psychosocial outcomes among trauma exposed, clinic-referred youth involved in the juvenile justice system. *Child Maltreatment*, 27(4), 626–636. DOI:10.1177/10775595211025096

Polyvictimization is a robust predictor of emotional and behavioral problems and is linked to involvement in juvenile justice and other public sector systems. This study extends prior

research by employing person-centered methods for identifying polyvictimization patterns among trauma-exposed, clinic-referred, justice-involved youth (n = 689; ages 12–18 years) and how identified classes differ on psychosocial outcomes and demographic characteristics. Most participants had experienced multiple traumatic event (TE) types. Latent class analyses identified three classes: mixed trauma/bereavement exposure group (55.1%; Mean = 3.0 TE types); maltreatment polyvictimized group (29.3%; Mean = 5.7 TE types); and maltreatment plus extreme violence polyvictimized group (15.7%; Mean = 9.3 TE types). Polyvictimized youth were more likely to be female, in out-of-home placements, and experiencing negative psychosocial outcomes (e.g., Posttraumatic Stress Disorder). Hispanic/Latino youth were overrepresented in the extreme polyvictimized subgroup. Results underscore the need for cross-system coordination of trauma-informed, comprehensive services for clinic-referred, justice-involved youth.

Seppälä, P., Vornanen, R., & Toikko, T. (2021). [Multimorbidity and polyvictimization in children—An analysis on the association of children's disabilities and long-term illnesses with mental violence and physical violence](#). *Child Abuse & Neglect*, 122, 105350. DOI:10.1016/j.chiabu.2021.105350

Children's disabilities and long-term illnesses (DLTIs) are a significant risk factor in the development of maltreatment. The study is focused on the association of children's DLTIs with child maltreatment and poly-victimization perpetrated by parents. The study is based on a 2013 Child Victim Survey (N = 11,364), which is a cross-sectional survey. This nationally representative survey focused on the life situation of Finnish children aged 12–17 years, as well as on experiences of violence, crime, and bullying. Multinomial logistic regression analysis was used to examine the association of children's DLTIs and child maltreatment. Poly-victimization played a significant role in child maltreatment. Children's hearing impairment (OR 5.68, 95% CI 2.25–14.35), physical disability (OR 3.32, 95% CI 1.61–6.88), and mental health problems (OR 4.37, 95% CI 1.63–11.72) increased the

odds of poly-victimization more than other forms of abuse. The situation was similar with both somatic diseases (OR 1.59, 95% CI 1.14–2.21) and psychiatric illnesses (OR 2.12, 95% CI 1.36–2.47) in children. Further, somatic and psychiatric multimorbidity in children increased the odds of poly-victimization (OR 4.17, 95% CI 2.25–7.75) slightly more than risk of physical abuse (OR 3.57, 95% CI 1.11–11.49). As control variables, child's gender and age, the family financial situation, and the parent's intimate partner violence were adjusted in all of the analyses. Clinical professionals should consider children's multimorbidity as a potential risk factor of maltreatment. The results of the study can be used to support families and children with DLTIs.

Stewart, S. L., Lapshina, N., & Semovski, V. (2021). [Interpersonal polyvictimization: Addressing the care planning needs of traumatized children and youth](#). *Child Abuse & Neglect*, 114, 104956. DOI:10.1016/j.chiabu.2021.104956

Exposure to maltreatment has a detrimental impact on both physical and mental health. However, research on the relationship between polyvictimization and care planning needs is scarce. This study investigated the associations between interpersonal polyvictimization and care planning needs for children and youth, controlling for sex and age differences. The sample included 18,701 children and youth ($M_{age} = 12.33$, $SD_{age} = 3.53$) between 4 and 18 years. Participants were recruited from over 58 mental health agencies, facilities, and schools in Ontario, Canada between November 2012 and February 2020. Multivariate binary logistic regression was used to investigate polyvictimization, sex and age groups, as predictors on care planning outcomes. Significant interaction effects were further examined using simple effects analyses. Children and youth experiencing polyvictimization, compared to those who did not, were more likely to report attachment difficulties, lack of informal support, interpersonal conflict, substance use and harm to self or others. In addition, the relationship between polyvictimization and attachment and interpersonal conflict care planning was moderated by sex. Findings emphasize the importance of focusing on interpersonal

polyvictimization and sex differences when developing treatment plans for a variety of care planning needs. Mental health practitioners could utilize the study findings to guide their clinical practices and ensure effective services are provided to those seeking mental health care.

Turner, H. A., Finkelhor, D., & Henly, M. (2021). Exposure to family and friend homicide in a nationally representative sample of youth. *Journal of Interpersonal Violence*, 36(7-8), NP4413–NP4442. DOI:10.1177/0886260518787200

This study examines the lifetime prevalence and distribution of family/friend homicide exposure among children and adolescents age 2 to 17 in the United States, and assesses the impact of family/friend homicide on emotional and behavioral outcomes, while controlling for potential co-occurring factors. Data were collected by telephone about the experiences of youth in 2008, 2011, or 2014, as part of the National Surveys of Children's Exposure to Violence (NatSCEV). Analyses are based on a pooled sample (n =11,771) from these three surveys. Approximately 8% of all children and youth ages 2 to 17 were exposed to a family/friend homicide. Older adolescents, Black youth, those living in single parent and nonparent family households, those from lower socioeconomic status households, and youth living in large cities were overrepresented among youth experiencing family or friend homicide. Exposed youth were also substantially more likely to be poly-victims, experience other major adversities, and live in neighborhoods with more community disorder. Exposure to family/friend homicide was significantly related to trauma symptoms. However, when other co-occurring factors were taken into account, only family/friend homicide that occurred within the last 2 years remained significant. With respect to delinquency, only nonfamily homicide exposure remained significant with these other factors controlled. Findings suggest that family/friend homicide represents a powerful marker for a broad level of victimization risk and adversity, demonstrating that family/friend murder is often just one relatively small part of a more complicated life of adversity. Although recent exposure is certainly distressing to youth, it is the wider, co-

occurring context of poly-victimization and other types of adversity that appears most impactful in the longer term.

Wolf, M. R., & Prabhu, S. (2021). Through the eyes of a child: Witnessing childhood trauma is as impactful as experiencing trauma for polyvictimized survivors of child sexual abuse. *Journal of Interpersonal Violence*, 36(11-12), NP5663-NP5677. DOI:10.1177/0886260518807913

In this retrospective study of 244 adult survivors of child sexual abuse (CSA), their experiences of childhood polyvictimization were analyzed as to their cumulative effect on trauma symptoms, education, and income levels. The data were gathered by anonymously sampling adult survivors of CSA from websites that were specific to this population (such as online peer support groups). Their experiences of victimization were examined as to Cumulative Polyvictimization, Witnessing Traumas (such as witnessing intimate partner violence), and Experiencing Traumas (such as child physical abuse). The majority of the sample (87%) experienced polyvictimization in childhood (in combination with CSA), with the largest part of the sample (83%) experiencing emotional abuse by someone close to them, and the smallest part of the sample (22%) experiencing child physical abuse by someone with whom they were not close. The results of the linear regressions showed that both experiencing and witnessing trauma were significantly associated with trauma symptoms for CSA survivors. These results suggest that both types of victimization (experiencing and witnessing) need to be treated as direct traumas, and a more holistic approach toward survivors of CSA is needed toward assessment and treatment.

Haahr-Pedersen, I., Ershadi, A. E., Hyland, P., Hansen, M., Perera, C., Sheaf, G., Bramsen, R. H., Spitz, P., & Vallières, F. (2020). [Polyvictimization and psychopathology among children and adolescents: A systematic review of studies using the Juvenile Victimization Questionnaire](#). *Child Abuse & Neglect*, 107, 104589.
DOI:10.1016/j.chiabu.2020.104589

Exposure to child abuse can lead to lasting mental health problems. Extant research has found that different types of child abuse tend to co-occur and overlap, which merits the investigation of the effects of exposure to multiple types of childhood mistreatment. The aim of this study was to systematically review the evidence on the associations between multiple different types of interpersonal victimization or polyvictimization, and indicators of psychopathology among children ages 0–17. The review included studies across all economic strata and research on nationally representative, community, and at-risk samples, using the same standardized assessment tool (i.e. the Juvenile Victimization Questionnaire or JVQ). The review was conducted using peer-reviewed evidence published up until August 2019 from Scopus, EMBASE, PsycINFO, Medline, CINAHL, and ERIC. Out of 4998 relevant references screened, 255 met the inclusion criteria, 22 of which aimed to address childhood polyvictimization and psychopathology. A total of 21 of the 22 included studies identified a significant positive association between polyvictimization and various indicators of psychopathology comprising both externalizing (e.g. anger), internalizing problems (e.g. depression) and total psychological distress. A range of studies demonstrated that polyvictimization was a stronger risk factor for psychopathology than individual (sub)types of victimization. Based on the study findings, we provide a set of recommendations for future research on polyvictimization and psychopathology. The present systematic review was the first to review the evidence on the associations between polyvictimization (as measured by the JVQ) and child and adolescent psychopathology in the global research literature. As a novel approach, the present review included both normative and high-risk samples. The results showed that polyvictimization is a substantial risk factor for mental health problems spanning both inner-directed and outer-directed mental health difficulties. However, the inconsistency in methods of defining and measuring polyvictimization severely undermines the

scientific impact of this body of work. Additional well-designed, longitudinal studies that take account of the context-specific nature of polyvictimization are required to better establish the causal relationships between childhood polyvictimization and psychopathology so as to improve prevention and intervention.

Hamby, S., Taylor, E., Mitchell, K., Jones, L., & Newlin, C. (2020). Poly-victimization, trauma, and resilience: Exploring strengths that promote thriving after adversity. *Journal of Trauma & Dissociation*, 21(3), 376–395. DOI:10.1080/15299732.2020.1719261

Although it is well known that victimization is associated with higher trauma symptoms, there is still limited information on the protective factors that can help people thrive after adversity. Using the Resilience Portfolio Model as a framework, this study explores a range of psychological and social strengths in a community sample of youth from the southern U.S. A sample of 440 youth aged 10 to 21 (average age 16.38, SD = 3.04) was recruited from youth-serving organizations. They completed a survey on trauma symptoms, victimization, other adversities, and 16 psychological and social strengths. Almost 9 in 10 (89.3%) youth reported one or more victimizations, with peer victimizations most common. Adult-perpetrated offenses were reported by almost half of youth (47.1%). Although several psychological and social strengths were inversely correlated with trauma symptoms at the bivariate level, hierarchical regressions indicated that a sense of purpose was the only strength that uniquely contributed to more resilient mental health in a model with all strengths and controlling for victimization, other adversities, poverty, age, and gender (total $R^2 = .33$). The variance explained by strengths (17%) was similar to the variance explained by adversities (15%). In this highly victimized sample of youth, many strengths were associated with lower trauma symptoms for youth, with a sense of purpose showing the most promise. Prevention and intervention programs may benefit from efforts to increase a sense of purpose or other meaning making activities, in addition to efforts that specifically target incidents of trauma.

Källström, Å., Hellfeldt, K., Howell, K. H., Miller-Graff, L. E., & Graham-Bermann, S. A. (2020). Young adults victimized as children or adolescents: Relationships between perpetrator patterns, poly-victimization, and mental health problems. *Journal of Interpersonal Violence*, 35(11-12), 2335-2357. DOI:10.1177/0886260517701452

Child and adolescent victims of violence are often exposed to more than one kind of physical, sexual, or emotional maltreatment. Both individually and cumulatively, such victimizations have significant ramifications on mental health. Yet little is known about the relationships in which these different kinds of victimizations occur and how the relationship between the victim and perpetrators may influence later mental health. This retrospective, self-report study of a nationally representative sample of 2,500 young adults in Sweden examines associations between different types of victimization (including poly-victimization), the victim's relationship to the perpetrator, and how these factors are related to current mental health. Results indicate differential patterns of abuse based on the perpetrator; parents were most likely to use physical aggression, whereas siblings typically perpetrated property crimes and partners committed sexual assault. Peers were the most likely perpetrator of both physical and verbal victimizations and also most often committed poly-victimization by subjecting youth to multiple forms of violence. While males were more likely to be victimized by peers, females were more likely to be victimized by parents, siblings, and partners. Significant positive relations were found for the amount of victimization by peers and mental health problems among both males and females. In addition, for females, higher amounts of youth victimization by parents and partners related to higher levels of mental health problems during young adulthood. Taken together, these results suggest that peer victimization presents the greatest risk for males, whereas dysfunctional family relationships are most detrimental to victimized females.

Mitchell, K. J., Moschella, E. A., Hamby, S., & Banyard, V. (2020). Developmental stage of onset, poly-victimization, and persistence of childhood victimization: Impact on adult well-being in a rural community-based study. *Child Maltreatment*, 25(1), 20–31. DOI:10.1177/1077559519859080

The current study examines the persistence of victimization and poly-victimization (i.e., count of multiple types of victimization) across various stages of development (ages 0–5, 6–12, and 13–18) and the related impact on adult well-being. Participants were 2,098 adults from the Appalachian region of three Southern states. Eighty-two percent of participants reported at least one type of victimization during childhood. Among adult victims, 22.6% reported one victimization in one developmental stage (i.e., one stage, but no poly-victimization), 45.8% reported one victimization in more than one stage (i.e., persistent victimization, but no poly-victimization), 20.5% reported multiple types of victimization in one stage (i.e., poly-victimization), and 11.2% reported multiple types of victimization at more than one stage (i.e., persistent poly-victimization). Results indicated a linear decline in subjective well-being, mental health, and number of healthy days as victimization becomes more persistent across childhood and more diverse in types (i.e., poly-victimization). Study findings provide support for models of victimization that take both developmental trajectories and poly-victimization into account.

Davis, J. P., Dworkin, E. R., Helton, J., Prindle, J., Patel, S., Dumas, T. M., & Miller, S. (2019). [Extending poly-victimization theory: Differential effects of adolescents' experiences of victimization on substance use disorder diagnoses upon treatment entry](#). *Child Abuse & Neglect*, 89, 165–177. DOI:10.1016/j.chiabu.2019.01.009

Although victimization is a known contributor to the development of substance use disorders, no research has simultaneously examined how characteristics of victimization experienced over time, such as the type of abuse, the presence of poly-victimization, closeness to perpetrator(s), life threat or fear, and negative social reactions to disclosing victimization, cluster into profiles that predict substance use disorders. The aim of the

current study is to assess how profiles of victimization and trauma characteristics are associated with substance use disorders and assess potential gender differences. Participants and Setting: Participants were 20,092 adolescents entering substance use treatment. We used latent class and multi-group latent class analysis to extract classes of victimization and associated characteristics. Emergent classes were used to predicted substance use disorder status at treatment intake. Five classes were extracted: poly-victimization+high harmful trauma characteristics, sexual abuse+negative social reaction and perceived life threat, emotional abuse+trusted perpetrator, physical abuse and low all. Similar classes were found for the multi-group model. In both the overall and female-specific models, the poly-victimization+high harmful trauma characteristics class was more severe than all other classes in terms of opioid use disorder, tobacco use disorder, and dual diagnosis. Other class differences were found across gender. Adolescents entering treatment can be distinguished by their profiles of victimization experiences and associated characteristics, and these profiles evidence different associations with substance use disorder diagnoses. Results point to a need for more nuanced assessment of victimization experiences and gender-specific interventions.

Lussier, P., Chouinard-Thivierge, S., McCuish, E., Nadeau, D., & Lacerte, D. (2019). Early life adversities and polyvictimization in young persons with sexual behavior problems: A longitudinal study of child protective service referrals. *Child Abuse & Neglect*, 88, 37–50. DOI:10.1016/j.chiabu.2018.10.017

There is scarce research on children and youth with sexual behavior problems (SBP) and their developmental antecedents and the research that does exist is mostly retrospective and correlational. While prior research focused on the central role of sexual victimization, recent research suggests that young persons with SBP are exposed to a series of adversities not limited to child sexual victimization and require multifaceted assessment and intervention using a developmental life course perspective. The current study includes an examination of the complete longitudinal sequence of child protective

service (CPS) investigations involving young persons with SBP. The study is based on a sample of 957 youth referred to the CPS in Quebec, Canada. The data include their longitudinal sequence of referrals from birth to age 18. Semi-parametric analyses identified four trajectories of referrals with significant differences in terms of onset, frequency, types of life adversity, and polyvictimization. The trajectories suggest that a range of developmental profiles characterize young persons with SBP, with SBP often occurring after CPS contacts for compromising issues other than sexual victimization, especially parental neglect and serious behavior problems. Of importance, polyvictimization was relatively common for this group throughout childhood and adolescence, which highlights the multiintervention needs of this population.

Sterzing, P. R., Gartner, R. E., Goldbach, J. T., McGeough, B. L., Ratliff, G. A., & Johnson, K. C. (2019). Polyvictimization prevalence rates for sexual and gender minority adolescents: Breaking down the silos of victimization research. *Psychology of Violence*, 9(4), 419–430. DOI:10.1037/vio0000123

The study objective was to identify lifetime polyvictimization rates by gender identity and sexual orientation, for a national sample of sexual and gender minority adolescents. An anonymous, incentivized, online survey was completed by 1,177 sexual and gender minority adolescents who were currently enrolled in middle or high school (14 to 19-years-old). Most of the sample experienced some form of lifetime physical assault (81.3%), bullying victimization (88.8%), sexual victimization (80.6%), child maltreatment (78.8%), property victimization (80.1%), and indirect or witnessed forms of victimization (75.0%). The overall rate of polyvictimization for the sample was 41.3%. Genderqueer assigned male at birth (65.4%), transgender female (63.2%), transgender male (57.4%), genderqueer assigned female at birth (55.0%), and cisgender female (39.3%) adolescents were significantly more likely to be lifetime polyvictimized than their cisgender male counterparts (31.1%). In addition, pansexual (56.8%), queer (52.0%), questioning (47.0%), and bisexual (45.8%) participants were significantly more likely to be

lifetime polyvictimized than their gay-identified counterparts (32.7%). Conclusions: This is the first study to identify lifetime polyvictimization rates for sexual and gender minority adolescents. These findings call into question the practice of studying single forms of victimization for this population as if they occur in isolation to one another. Future research is needed to identify the shared risk and protective factors across victimization subtypes to inform prevention and intervention strategies for this vulnerable adolescent population.

Ford, J. D., Charak, R., Modrowski, C. A., & Kerig, P. K. (2018). PTSD and dissociation symptoms as mediators of the relationship between polyvictimization and psychosocial and behavioral problems among justice-involved adolescents. *Journal of Trauma & Dissociation*, 19(3), 325–346.
DOI:10.1080/15299732.2018.1441354

Polyvictimization (PV) has been shown to be associated with psychosocial and behavioral impairment in community and high-risk populations, including youth involved in juvenile justice. However, the mechanisms accounting for these adverse outcomes have not been empirically delineated. Symptoms of posttraumatic stress disorder (PTSD) and dissociation are documented sequelae of PV and are associated with a wide range of behavioral/emotional problems. This study used a cross-sectional research design and bootstrapped multiple mediation analyses with self-report measures completed by a large sample of justice-involved youth ($N = 809$, ages 12–19 years old, 27% female, 46.5% youth of color) to test the hypothesis that PTSD and dissociation symptoms mediate the relationship between PV and problems with anger, depression/anxiety, alcohol/drug use, and somatic complaints after controlling for the effects of exposure to violence and adversities related to juvenile justice involvement. As hypothesized, PTSD symptoms mediated the relationship of PV with all outcomes except alcohol/drug use problems (which had an unmediated direct association with PV). Partially supporting study hypotheses, dissociation symptoms mediated the relationship between PV and internalizing problems (i.e., depression anxiety; suicide ideation). Implications are

discussed for prospective research demarcating the mechanisms linking PV and adverse outcomes in juvenile justice and other high-risk populations.

Hamby, S., Blount, Z., Smith, A., Jones, L., Mitchell, K., & Taylor, E. (2018). Digital poly-victimization: The increasing importance of online crime and harassment to the burden of victimization. *Journal of Trauma & Dissociation*, 19(3), 382–398.
DOI:10.1080/15299732.2018.1441357

Many forms of victimization, including bullying and property crime, are increasingly moving online, but most studies of polyvictimization still primarily focus on in-person crime and violence. Few studies have examined the importance of incorporating technology-based victimizations for assessing the true burden of violence. The purpose of this study is to explore whether digital polyvictimization contributes to post-traumatic stress and anxiety/dysphoria symptoms after controlling for in-person poly-victimization. Given that technology use and technology-based victimization are changing rapidly, a mixed methods approach was adopted. In the first two phases, focus groups and cognitive interviews (89 total participants) were used to identify the range of digital victimization and develop the Digital Poly-Victimization Scale. In the third phase, the new measure was included in a community survey ($n = 478$, 57.5% female; 62.6% earning under \$50,000 per year) in a rural Southern region, along with measures of in-person poly-victimization, posttraumatic stress and anxiety/dysphoria symptoms, and other outcomes and personal characteristics. A comprehensive measure of digital poly-victimization indicated that almost 3 in 4 participants (72.3%) had experienced at least one form of digital victimization. The results indicated that digital poly-victimization contributed unique variance to post-traumatic stress and anxiety/dysphoria symptoms ($p < .001$), health-related quality of life ($p < .01$), and subjective and family well-being (both $p < .001$), even after controlling for demographics and in-person poly-victimization. Digital victimization often presents fewer risks to perpetrators and can be expected to represent

an increasing share of the societal burden of violence. Future research on poly-victimization should pay more attention to the role of digital victimization.

Hamby, S., Taylor, E., Jones, L., Mitchell, K. J., Turner, H. A., & Newlin, C. (2018). From poly-victimization to poly-strengths: understanding the web of violence can transform research on youth violence and illuminate the path to prevention and resilience. *Journal of Interpersonal Violence, 33*(5), 719–739. DOI:10.1177/0886260517744847

For many years, an overly “siloe” approach has hampered efforts to understand violence and minimize the societal burden of violence and victimization. This article discusses the limitations of an overly specialized approach to youth violence research, which has focused too much on violence in particular contexts, such as the family or the school. Instead, a child-centered approach is needed that comprehensively assesses all exposures to violence. This concept of the total cumulative burden of violence is known as polyvictimization. The poly-victimization framework reveals that many youth are entangled in a web of violence, experiencing victimization in multiple settings by multiple perpetrators. This more accurate view of children’s exposure to violence has many advantages for advancing our scientific understanding of violence. Perhaps somewhat surprisingly, this more comprehensive view also points to new insights for resilience and prevention. This includes recognizing a parallel concept, “poly-strengths,” which captures the number of resources and assets children and their families can use to help insulate youth from violence (prevention) or assist in coping and promoting well-being after victimization (intervention). Reconceptualizing how resilience is defined and understood among youth populations can help alleviate the true societal burden of youth victimization.

Hodgdon, H. B., Liebman, R., Martin, L., Suvak, M., Beserra, K., Rosenblum, W., & Spinazzola, J. (2018). The effects of trauma type and executive dysfunction on symptom expression of polyvictimized youth in residential care. *Journal of Traumatic Stress, 31*(2), 255–264. DOI:10.1002/jts.22267

Risk for traumatic sequelae is conveyed directly by risk factors (i.e., exposure to trauma), and via the disruption of developmental competencies. Exposure to caregiver trauma is an especially salient risk factor, as its early and pervasive nature is likely to undermine multiple facets of development, most notably the emergence of cognitive controls (i.e., executive function [EF]). Deficits in EF have been observed among youth exposed to multiple types of trauma and are associated with a range of functional impairments, posttraumatic stress symptoms (PTSS), and behavioral disorders; they represent a mechanism by which the negative impact of caregiver trauma is conveyed. This study included 672 youth in residential placement, and examined the associations between both caregiver and noncaregiver trauma, measured by the Trauma History Profile (THP); executive dysfunction, measured by the Behavioral Inventory of Executive Function (BRIEF); PTSS, measured by the UCLA Posttraumatic Stress Disorder (PTSD) Reaction Index (PTSD-RI); and externalizing and internalizing problems, measured by the Child Behavior Checklist (CBCL). A structural equation model demonstrated direct associations between caregiver trauma and PTSS, $\beta = .15$; noncaregiver trauma and externalizing problems, $\beta = .14$; gender and PTSS, $\beta = .26$, externalizing problems, $\beta = .12$, and internalizing problems, $\beta = .26$; and age and externalizing problems, $\beta = -.11$. We observed indirect effects via deficits in EF between caregiver trauma and PTSS, $\beta = .04$ and externalizing problems, $\beta = .19$. Results indicate for screening for executive dysfunction among trauma-impacted youth is needed, as it represents a critical therapeutic target.

Horn, S. R., Roos, L. E., Beauchamp, K. G., Flannery, J. E., & Fisher, P. A. (2018). [Polyvictimization and externalizing symptoms in foster care children: The moderating role of executive function](#). *Journal of Trauma & Dissociation*, 19(3), 307–324. DOI:10.1080/15299732.2018.1441353

Prior research has identified the role of childhood maltreatment in externalizing problems and executive function (EF) deficits, but minimal work has been done to characterize the effects of co-occurring maltreatment types, defined as polyvictimization. Here, we sought to characterize the association between polyvictimization and externalizing problems in a sample of foster care children aged 3–4 years ($N = 84$) and examine how EF may mediate or moderate that relationship. A moderation model was supported in that only polyvictimized children with EF scores 1.62 or more standard deviations below the mean were at heightened risk for clinically severe externalizing problems, while no association between polyvictimization and externalizing problems were observed for children who scored at the mean or above on the EF measure. Findings highlight that EF may serve as a resilience factor indicating that individual differences in polyvictimized children's EF skills help to predict variability in externalizing problems. Future research on designing and optimizing intervention programs that target EF skills may mitigate the development of maladaptive outcomes for polyvictimized children.

Kerig, P. K. (2018). Polyvictimization and girls' involvement in the juvenile justice system: Investigating gender-differentiated patterns of risk, recidivism, and resilience. *Journal of Interpersonal Violence*, 33(5), 789–809. DOI:10.1177/0886260517744843

A recent dramatic rise in girls' arrests has increased our need to examine whether our models of youth justice system involvement need to be differentiated by gender. Polyvictimization, in particular, has been implicated as a powerful predictor of youth problem behavior. However, recent research suggests that polyvictimization is associated with youth involvement in the justice system in ways that differ for girls at the levels of the independent variables (i.e., the sources of risk), the dependent variables (i.e., youth outcomes), and the mediators of these associations (i.e., the purported

mechanisms that account for these relations). The present critique describes growth points in the current research with the goal of suggesting promising directions for future investigations. In particular, gaps are noted regarding our understanding of the specific forms of polyvictimization that affect traumatized girls' development, especially given the highly disproportionate prevalence of sexual abuse among justice-involved girls. In addition, increased attention is needed to gender differences in the timing of victimization and the onset of risky behavior, as well as the nature of trauma-linked youth offenses and recidivism, which research also suggests may differ for boys and girls. Furthermore, a new body of research on psychophysiological reactivity promises to shed light on gender differences in trauma response, resilience, and risk. Finally, the importance acknowledging the intersection of polyvictimization, gender, and race is noted. The article ends with a discussion of the ways in which understanding gender differences and similarities can inform gender responsive approaches to prevention and intervention efforts.

Merrick, M. T., Henly, M., Turner, H. A., David-Ferdon, C., Hamby, S., Kacha-Ochana, A., Simon, T. R., & Finkelhor, D. (2018). [Beyond residential mobility: A broader conceptualization of instability and its impact on victimization risk among children](#). *Child Abuse & Neglect*, 79, 485–494. DOI:10.1016/j.chiabu.2018.01.029

Predictability in a child's environment is a critical quality of safe, stable, nurturing relationships and environments, which promote wellbeing and protect against maltreatment. Research has focused on residential mobility's effect on this predictability. This study augments such research by analyzing the impact of an instability index—including the lifetime destabilization factors (LDFs) of natural disasters, homelessness, child home removal, multiple moves, parental incarceration, unemployment, deployment, and multiple marriages—on childhood victimizations. The cross-sectional, nationally representative sample of 12,935 cases (mean age = 8.6 years) was pooled from 2008, 2011, and 2014 National Surveys of Children's Exposure to Violence (NatSCEV).

Logistic regression models controlling for demographics, socio-economic status, and family structure tested the association between excessive residential mobility, alone, and with LDFs, and past year childhood victimizations (sexual victimization, witnessing community or family violence, maltreatment, physical assault, property crime, and polyvictimization). Nearly 40% of the sample reported at least one LDF. Excessive residential mobility was significantly predictive of increased odds of all but two victimizations; almost all associations were no longer significant after other destabilizing factors were included. The LDF index without residential mobility was significantly predictive of increased odds of all victimizations (AOR's ranged from 1.36 to 1.69), and the adjusted odds ratio indicated a 69% increased odds of polyvictimization for each additional LDF a child experienced. The LDF index thus provides a useful alternative to using residential moves as the sole indicator of instability. These findings underscore the need for comprehensive supports and services to support stability for children and families.

Mitchell, K. J., Segura, A., Jones, L. M., & Turner, H. A. (2018). [Poly-victimization and peer harassment involvement in a technological world](#). *Journal of Interpersonal Violence*, 33(5), 762–788. DOI:10.1177/0886260517744846

This article explores the ways poly-victimized youth (those experiencing multiple different types of victimization over the course of 1 year) use technology to interact with peers. Particular attention is given to the peer harassment victimization and perpetration experiences of poly-victimized youth compared with less victimized and non-victimized youth—both overall and through technology. Data were collected as part of the Technology Harassment Victimization (THV) study; a national survey of 791 youth, ages 10 to 20 across the United States. Study results document the heightened risks that poly-victimized youth experience when interacting with peers. Low and high poly-victimized youth were both at significantly greater risk of being dual victims and perpetrators of peer harassment when compared with non-victimized youth even after taking into account

other potentially explanatory factors. This was not found to be the case for less victimized youth. This was true for high poly-victims and technology-involved harassment risk as well. There were indications that poly-victimized youth were interacting with peers in more intense and risky ways in general using new technology. The increase in attention to poly-victimization in recent years has importantly identified the detrimental role that experiencing different forms of victimization have on youth. This study not only adds to that literature but suggests that there is an opportunity to interrupt additional victimization by understanding how poly-victimized youth interact with peers before and during adolescence. Although preliminary, the differences in technology use by poly-victimized youth versus others suggest that more information is needed to understand how they are relating to peers in both positive and risky ways in this environment.

Sterzing, P. R., Fisher, A. J., & Gartner, R. E. (2018). Familial pathways to polyvictimization for sexual and gender minority adolescents: Microaffirming, microaggressing, violent, and adverse families. *Psychology of Violence, 9*(4), 461-470.
DOI:10.1037/vio0000224

Objective: To examine a conceptual model of familial pathways to past-year polyvictimization, mediated by depression symptoms, posttraumatic stress symptoms, and emotional dysregulation for a large, national sample of sexual and gender minority adolescents (SGMA). Method: An online survey was completed by 1,177 SGMA (14–19 years old) who were enrolled in middle or high school. Latent class analysis was used to identify family classes based on family experiences of homo/transpositive microaffirmations, homo/transnegative microaggressions, violence, and nonviolent adversity. A single-indicator path model within a structural equation framework was used to examine pathways to polyvictimization. Results: A five-class solution based on these family-level indicators had the best fit: (a) high violence and adversity, (b) low microaffirming, high microaggressing, (c) high microaffirming with mean levels of violence and adversity, (d) high microaffirming, low microaggressing, and (e) baseline (i.e., below the mean on all

family indicators). The path model explained 40.6% of polyvictimization variance. Direct pathways to polyvictimization were observed for three family classes (high violence and adversity; low microaffirming, high microaggressing; and high microaffirming with mean levels of violence and adversity). Higher levels of posttraumatic stress were the primary indirect pathway from these three family classes to a greater likelihood of past-year polyvictimization. Conclusions: Posttraumatic stress was the primary mechanism bridging family experiences of microaggressions, violence, and nonviolent adversity to polyvictimization. Addressing trauma symptoms related to these family experiences through school-based health services may have a beneficial impact on SGMA's risk for polyvictimization.

Yoder, J. R., Hodge, A. I., Ruch, D., & Dillard, R. (2018). Effects of childhood polyvictimization on victimization in juvenile correctional facilities: The mediating role of trauma symptomatology. *Youth Violence and Juvenile Justice*, 17(2), 129-153.
DOI:10.1177/1541204018757038

Polyvictimization refers to multiple forms of victimization experienced by youths. The extent to which aggregated or cumulative early life victimization increases risk of victimization within juvenile correctional facilities is unclear. Furthermore, pathways from early polyvictimization to facility victimization may be partly explained by trauma symptomatology. Drawing upon the extant polyvictimization literature, this study explores both composite and cumulative effects of childhood victimization on later victimization within correctional facilities and the mediating role of trauma symptomatology among a nationally representative sample of incarcerated youth. Data were drawn from the Survey of Youth in Residential Placement. Incarcerated youths ($N = 7,073$) were surveyed on constructs including early victimization, trauma symptomatology, and experiences of victimization within correctional facilities. Using appropriate weights in analyses, structural equation models revealed the relationship between amassed early polyvictimization and composite facility victimization was partially explained by trauma

symptoms; facility victimization also linked to trauma symptoms. Additional models revealed that as youths report more victimization experiences, there was a successive increased likelihood for trauma symptoms, facility robbery, and facility physical victimization. The relationships between cumulative early victimization and facility robbery, physical, and sexual victimization were partially or fully mediated by trauma symptoms. Research and practice implications are discussed.

Cudmore, R. M., Cuevas, C. A., & Sabina, C. (2017). The impact of polyvictimization on delinquency among Latino adolescents: A general strain theory perspective. *Journal of Interpersonal Violence, 32*(17), 2647–2667.
DOI:10.1177/0886260515593544

Although criminological research has provided support for general strain theory (GST), there is still little known about the relationship between victimization and delinquency among Latino adolescents. This study seeks to fill the gap in the literature by examining the association between a broader measure of victimization (i.e., polyvictimization) and delinquent behavior using data from the Dating Violence Among Latino Adolescents (DAVILA) Study, a national sample of Latino youth. Logistic regression analyses were conducted to examine two issues: (a) whether polyvictimization is associated with self-reported delinquent behavior and (b) whether anger mediates the relationship between polyvictimization and delinquency. Our findings provided partial support for GST among Latino youth. Specifically, the effect of polyvictimization on delinquency was explained in part by its effect on anger. Contrary to the theory's hypothesis, the effect of polyvictimization was not conditional on the effect of social support. Overall, findings suggested that GST is a promising framework for understanding the relationship between polyvictimization and delinquency among Latino youth.

Garnett, B. R., & Brion-Meisels, G. (2017). Intersections of victimization among middle and high school youth: Associations between polyvictimization and school climate. *Journal of Child & Adolescent Trauma*, 10(4), 377–384.
DOI:10.1007/s40653-017-0183-7

Polyvictimization, defined as exposure to multiple forms of victimization, is associated with negative outcomes for youth. This study investigated the intersections between harassment, bullying, and cyberbullying (polyvictimization) and three indicators of school climate: safety, connection, and equity. Data comes from the 2015 Vermont Middle and High School Pilot Climate Survey (N = 2, 589). Almost half of the sample, (43.13%) experienced at least one form of victimization during the current school year. Students experiencing polyvictimization, compared to students experiencing no victimization or singular victimization experiences, were more likely to identify as female and transgender. In the multivariate regression models, polyvictimization was significantly associated with all school climate outcomes. These findings illustrate the additive effect of polyvictimization; highlighting intersections among bullying and harassment on indicators of school climate.

Gusler, S., & Jackson, Y. (2017). The role of poly-victimization in predicting differences in foster youths' appraisals. *Child Abuse & Neglect*, 69, 223–231.
DOI:10.1016/j.chiabu.2017.04.020

The present article examines the role of poly-victimization (i.e., number of categories of maltreatment experiences and total maltreatment exposure) in predicting differences in appraisals for 272 youth in foster care (ages 8–21). Poly-victimization was hypothesized to be predictive of negative appraisal valence (i.e., interpreting the impact of a stressful life event as being bad/negative) and appraisal rigidity (i.e., interpreting the impact of life events as being consistently positive or negative across different events) above and beyond any single category of maltreatment. Results show a high prevalence of poly-victimization, such that those youth who experience only one form of maltreatment (e.g., physical, sexual, psychological, or neglect) are among the minority of maltreated youth.

Additionally, results show that total maltreatment exposure, accounting for not only different categories of maltreatment but also different types or forms of maltreatment within those broader categories, is the most predictive of negative appraisal valence, above and beyond single categories of maltreatment and number of categories of maltreatment experienced. Contrary to the study's hypothesis, neither total exposure nor number of maltreatment categories experienced is significantly predictive of appraisal rigidity above and beyond single categories. Correlations also show that less rigid or more flexible appraisals are associated with more maltreatment experiences than are rigid appraisals. The current study highlights the importance of examining maltreatment from a poly-victimization perspective and begins to explain why some youth have more negative appraisals than others.

Harrelson, M. E., Alexander, A. A., Morais, H. B., & Burkhart, B. R. (2017). The effects of polyvictimization and quality of caregiver attachment on disclosure of illegal sexual behavior. *Journal of Child Sexual Abuse, 26*(5), 625-642.
DOI:10.1080/10538712.2017.1328474

The current study examined the relationship among self-disclosure of illegal sexual behaviors and two conceptually relevant constructs in psychotherapy: childhood polyvictimization (i.e., cumulative types of victimization experienced during childhood) and caregiver attachment. Participants consisted of 63 adolescent males participating in mandated treatment for illegal sexual behavior. Childhood polyvictimization and caregiver attachment were expected to predict self-disclosure of illegal sexual behaviors. Quality of caregiver attachment was also expected to mediate the relationship between polyvictimization and disclosure. Consistent with our main hypothesis, results indicate that quality of caregiver attachment mediated the relationship between childhood polyvictimization and self-disclosure of illegal sexual behaviors in psychotherapy. The current findings highlight the impact of polyvictimization on important therapeutic processes as well as the importance of assessing for multiple types of victimization in

adolescents who engage in illegal sexual behavior. Further clinical implications regarding the use of trauma-informed approaches during sex offender treatment are discussed.

Hasselle, A. J., Howell, K. H., Dormois, M., & Miller-Graff, L. E. (2017). [The influence of childhood polyvictimization on disordered eating symptoms in emerging adulthood](#). *Child Abuse & Neglect*, 68, 55–64. DOI:10.1016/j.chiabu.2017.04.003

Children who endure multiple victimization experiences, or “polyvictims,” are vulnerable to maladaptive outcomes. Yet, little research exists evaluating the relationship between childhood polyvictimization and disordered eating symptoms (DES) in emerging adulthood. The current study examines the relationship between childhood polyvictimization and DES in emerging adults. Data were collected from 288 participants across two universities using online self-report measures. Hierarchical regression analyses revealed a significant positive relationship between number of childhood victimization experiences and DES in young adulthood ($\beta = 0.14$; $p = 0.016$). Female participants were more likely to demonstrate DES ($\beta = 0.14$; $p = 0.008$). Further, high levels of emotion dysregulation during young adulthood were associated with more DES ($\beta = 0.33$; $p < 0.001$). Findings suggest that exposure to victimization experiences in childhood increases individuals’ risk for exhibiting DES in young adulthood. Results also highlight the strong relationship between individuals’ emotion regulation abilities and the presence of DES. Findings align with the theory that children who have endured high levels of victimization often feel overwhelmed by their emotions and circumstances, demonstrate emotion regulation difficulties, and may rely on maladaptive coping strategies, including disordered eating, to manage adversities. Study results emphasize the importance of considering victimization history when working with emerging adults displaying disordered eating symptomatology.

Hopper, E. K. (2017). Polyvictimization and developmental trauma adaptations in sex trafficked youth. *Journal of Child & Adolescent Trauma*, 10(2), 161-173. DOI:10.1007/s40653-016-0114-z

Human trafficking in children is often part of a larger constellation of childhood adversity. Many trafficked youth have been exposed to multiple layers of traumatic stress, including physical, sexual, and/or verbal abuse; witnessing violence; emotional neglect; and family dysfunction. This paper is a qualitative analysis of the charts of 32 youth who were sex trafficked as minors, including both foreign national and domestic youth. It explores their history of early adversity and polyvictimization and reviews common coercive strategies used by the traffickers, including manipulation of these children's unmet physical and emotional needs. It identifies developmental trauma adaptations in these youth, including affect dysregulation and impulsivity; alterations in attention and consciousness; issues in interpersonal relationships; and impairments in self-perception and attributions. It concludes with recommendations based on these findings, including the development of developmentally and culturally appropriate trauma-informed services for sex trafficked children and youth.

Kretschmar, J. M., Tossone, K., Butcher, F., & Flannery, D. J. (2017). Patterns of poly-victimization in a sample of at-risk youth. *Journal of Child & Adolescent Trauma*, 10(4), 363-375. DOI:10.1007/s40653-016-0109-9

Youth involved in the juvenile justice and child welfare systems are at especially high risk for exposure to violence. Research finds that poly-victims, youth who experience multiple types of victimizations, have worse outcomes than youth who experience one type of violence. We employed Latent Class Analysis to examine patterns of poly-victimization in a sample of at-risk youth (N = 467) participating in a program to reduce the effects of childhood exposure to violence and how those patterns impact self-reported violent behavior and primary mental health diagnosis. Results indicated that 96 % of the sample reported any past year violence exposure and 87 % reported at least two past year

exposures. Three victimization classes emerged: low victimization, peer and physical assault, and high violence exposure. Class membership predicted violent behavior, while results related to class membership and primary mental health diagnosis were less clear. Implications for screening, assessment, and treatment are discussed.

Sterzing, P. R., Ratliff, G. A., Gartner, R. E., McGeough, B. L., & Johnson, K. C. (2017). Social ecological correlates of polyvictimization among a national sample of transgender, genderqueer, and cisgender sexual minority adolescents. *Child Abuse & Neglect*, 67, 1-12. DOI:10.1016/j.chiabu.2017.02.017

Polyvictimization is a common experience for youth in the United States, with 20% nationally experiencing five or more different forms of victimization in the last year. Utilizing a large, national convenience sample of sexual and gender minority adolescents (N = 1177, 14-19 years old), the current study aimed to (a) generate the first estimates of last year polyvictimization (including nine victimization subtypes) for transgender, gender queer, and cisgender (i.e., assigned birth sex aligns with gender identity) sexual minority adolescents and (b) identify social ecological correlates of last year polyvictimization. The study utilized an online survey advertised through Facebook and community organizations across the United States. Approximately, 40% of participants experienced ten or more different forms of victimization in the last year and were classified as polyvictims. A significantly higher percentage of transgender female (63.4%), transgender male (48.9%), gender queer assigned male at birth (71.5%) and genderqueer assigned female at birth (49.5%) were polyvictimized in comparison to cisgender sexual minority males (33.0%). Polyvictimization rates for cisgender sexual minority females (35.1%) were not significantly different from male counterparts (33.0%). Several significant risk factors for polyvictimization were identified: genderqueer identity for participants assigned male at birth and higher levels of posttraumatic stress, family-level microaggressions, and peer rejection. The manuscript concludes with recommendations for future research including the exploration of factors (e.g., lack of community support,

gender-role policing) associated with higher polyvictimization rates for genderqueer adolescents. Additionally, professionals (e.g., foster care, homeless shelters, schools) require new tools to assess for polyvictimization among sexual and gender minority adolescents. © 2017 Elsevier Ltd. All rights reserved.

Aho, N., Gren-Landell, M., & Svedin, C. G. (2016). The prevalence of potentially victimizing events, poly-victimization, and its association to sociodemographic factors: A Swedish youth survey. *Journal of Interpersonal Violence*, 31(4), 620–651.
DOI:10.1177/0886260514556105

Studying the extent to which children are exposed to victimizing events is important to fully understand the effect of such exposure in shaping them as adults. The aim of this study was to use self-report by adolescents to measure the prevalence of victimizing events and of poly-victimization. A representative sample of 5,960 students (aged 17) from high schools in Sweden was given the self-administrated version of the Juvenile Victimization Questionnaire (JVQ) along with questions concerning gender, birthplace, parents' birthplace and employment, residence, educational program, and municipality size. The results show that 84.1% (83.0% young men and 85.2% young women) of the students had experienced victimization during their lifetime, and 10.3% were categorized as poly-victims (8.1% young men and 12.5% young women; OR = 1.62, 95% confidence interval [CI] = [1.35, 1.94]). Adolescents living with both parents were at lower risk of any form of victimization for both genders, while females were at higher risk of maltreatment, peer victimization, and, most significantly, sexual victimization. In conclusion, the vast majority of young people have been victimized during their lifetime. A greater awareness of the impact of these victimizing events on children and adolescents is important as a basis for providing a safer milieu and establishing better interventions, especially for those that have been victimized on multiple occasions. The high-exposure group was determined by using ≥ 10 events as a cutoff. Findings on this group corresponded with

findings in other international studies regarding distribution, elevated risk for females, and the possibility of limiting the effects of victimization by modifying living conditions.

Barnes, S. E., Howell, K. H., & Miller-Graff, L. E. (2016). The relationship between polyvictimization, emotion dysregulation, and social support among emerging adults victimized during childhood. *Journal of Aggression, Maltreatment & Trauma*, 25(5), 470–486. DOI:10.1080/10926771.2015.1133749

The purpose of this study was to examine the relationship between childhood polyvictimization and social support from family and friends in emerging adulthood. Emotion dysregulation was also investigated as a potential mediator underlying this relationship. Results indicated that childhood polyvictimization was significantly related to lower reports of social support from both family and friends. Emotion dysregulation was positively related to childhood polyvictimization, and negatively related to social support from family only. Additionally, emotion dysregulation partially mediated the relationship between childhood polyvictimization and support from family, suggesting that the ability to regulate one's emotions could be particularly influential in family relationships. Results underscore the pervasive nature of childhood polyvictimization, and offer directions for intervention efforts targeted at emerging adults with polyvictimization histories.

Charak, R., Byllesby, B. M., Roley, M. E., Claycomb, M. A., Durham, T. A., Ross, J., Armour, C., & Elhai, J. D. (2016). [Latent classes of childhood poly-victimization and associations with suicidal behavior among adult trauma victims: Moderating role of anger.](#) *Child Abuse & Neglect*, 62, 19–28. DOI:10.1016/j.chiabu.2016.10.010

The aims of the present study were first to identify discrete patterns of childhood victimization experiences including crime, child maltreatment, peer/sibling victimization, sexual violence, and witnessing violence among adult trauma victims using latent class analysis; second, to examine the association between class-membership and suicidal behavior, and third to investigate the differential role of dispositional anger on the

association between class-membership and suicidal behavior. We hypothesized that those classes with accumulating exposure to different types of childhood victimization (e.g., poly-victimization) would endorse higher suicidal behavior, than the other less severe classes, and those in the most severe class with higher anger trait would have stronger association with suicidal behavior. Respondents were 346 adults (N = 346; Mage= 35.0 years; 55.9% female) who had experienced a lifetime traumatic event. Sixty four percent had experienced poly-victimization (four or more victimization experiences) and 38.8% met the cut-off score for suicidal behavior. Three distinct classes emerged namely, the Least victimization (Class 1), the Predominantly crime and sibling/peer victimization (Class 2), and the Poly-victimization (Class 3) classes. Regression analysis controlling for age and gender indicated that only the main effect of anger was significantly associated with suicidal behavior. The interaction term suggested that those in the Poly-victimization class were higher on suicidal behavior as a result of a stronger association between anger and suicidal behavior in contrast to the association found in Class 2. Clinical implications of findings entail imparting anger management skills to facilitate wellbeing among adult with childhood poly-victimization experiences.

Le, M. T., Holton, S., Romero, L., & Fisher, J. (2016). Polyvictimization among children and adolescents in low-and lower-middle-income countries: A systematic review and meta-analysis. *Trauma, Violence, & Abuse, 19*(3), 323-342.
DOI:10.1177/1524838016659489

Most of the world's children and adolescents live in low- and lower-middle-income countries (LALMIC), but there is limited evidence about polyvictimization (experiences of multiple forms of victimization) among them. The aims of this article were to systematically review the evidence from LALMIC about the overall prevalence of polyvictimization and to identify the associations between polyvictimization and health and well-being among children and adolescents. A systematic search of the English-language peer-reviewed literature to identify empirical, quantitative studies conducted

in LALMIC between 2005 and 2015, assessing at least four forms of victimization among young people aged up to 19 years. Where prevalence of any victimization and of polyvictimization were reported, meta-analyses were performed. A total of 30/8,496 articles were included in the review. Evidence was available from 16/84 LALMIC and methodology and quality varied. Pooled prevalence of experiences of any victimization was 76.8% (95% confidence interval (CI) [64.8%, 88.9%]). Prevalence of polyvictimization ranged from 0.3% to 74.7% with an overall estimate of 38.1% (95% CI [18.3%, 57.8%]). None of the studies examined the associations between polyvictimization and physical or reproductive health or quality of life. Polyvictimization was associated with increased likelihood of mental health problems and involvement in health risk behaviors. Experiences of polyvictimization among children and adolescents in LALMIC are more prevalent than in high- and upper-middle-income countries and contribute to the burden of poor health among children and adolescents. Most LALMIC lack local data, and research is required to address this knowledge gap.

Turner, H. A., Shattuck, A., Finkelhor, D., & Hamby, S. (2016). Polyvictimization and youth violence exposure across contexts. *Journal of Adolescent Health, 58*(2), 208–214. DOI:10.1016/j.jadohealth.2015.09.021

The current research used latent class analysis to uncover groups of youth with specific victimization profiles and identify factors that are associated with membership in each victimization group. This study used data from National Survey of Children Exposure to Violence II. Random digit dialing and address-based sampling were used to obtain a nationally representative sample of 2,312 youth ages 10–17 years. Phone interviews, averaging 55 minutes in length, were conducted with caregivers to obtain both consent and background information and then with youths themselves. Six groups of youth emerged: (1) nonvictims (26.4%), (2) home victims (8.4%), (3) school victims (20.8%), (4) home and school victims (21.3%), (5) community victims (5.4%), and (6) polyvictims (17.8%). Polyvictims were likely to have been victimized in multiple settings by multiple

perpetrators and experienced the most serious aggravating characteristics, including incidents involving a weapon, injury, or a sexual component. Youth in the polyvictim class experienced the highest number of different victimizations types in the past year and had the most problematic profile in other ways, including greater likelihood of living in disordered communities, high probabilities of engaging in delinquency of all types, elevated lifetime adversity, low levels of family support, and the highest trauma symptom scores. The study supports the contention that a core basis of the particularly damaging effects of polyvictimization is the experience of victimization across multiple domains of the child's life. © 2015 Society for Adolescent Health and Medicine. All rights reserved.

Witt, A., Münzer, A., Ganser, H. G., Fegert, J. M., Goldbeck, L., & Plener, P. L. (2016). Experience by children and adolescents of more than one type of maltreatment: Association of different classes of maltreatment profiles with clinical outcome variables. *Child Abuse & Neglect*, 57, 1-11. DOI:10.1016/j.chiabu.2016.05.001

Most victims of child abuse have experienced more than one type of maltreatment, yet there is a lack of understanding of the impact of specific combinations of types of maltreatment. This study aimed to identify meaningful classes of maltreatment profiles and to associate them with short-term clinical outcomes. A total of 358 German children and adolescents aged 4–17 with a known history of child maltreatment were included in the study. Through interviews and questionnaires, information was obtained from participants and their primary caregivers on history of maltreatment, sociodemographics, psychopathology, level of psychosocial functioning, and health-related quality of life. Types of abuse were categorized into six major groups: sexual abuse in general, sexual abuse with penetration, physical abuse, emotional abuse, neglect, and exposure to domestic violence. A latent class analysis (LCA) was performed to determine distinct multi-type maltreatment profiles, which were then assessed for their associations with the sociodemographic and clinical outcome variables. The LCA revealed that participants could be categorized into three meaningful classes according to history of

maltreatment: (1) experience of multiple types of maltreatment excluding sexual abuse (63.1%), (2) experience of multiple types of maltreatment including sexual abuse (26.5%), and (3) experience of predominantly sexual abuse (10.3%). Members of Class 2 showed significantly worse short-term outcomes on psychopathology, level of functioning, and quality of life compared to the other classes. Three distinct profiles of multiple types of maltreatment were empirically identified in this sample. Exposure to multiple types of abuse was associated with poorer outcomes.

Pereda, N., Abad, J., & Guilera, G. (2015). Victimization and polyvictimization among Spanish adolescent outpatients. *Journal of Aggression, Maltreatment & Trauma*, 24(9), 1044–1066. DOI:10.1080/10926771.2015.1072121

This article aimed to analyze lifetime and past-year victimization and polyvictimization experiences in adolescent outpatients from a southern European country. The sample included 149 adolescents (35.6% boys, 64.4% girls), aged 12 to 17 ($M = 14.28$, $SD = 1.45$). Experiences of victimization were assessed using the Juvenile Victimization Questionnaire (JVQ; Finkelhor, Hamby, Ormrod, & Turner, 2005). Results showed that 99.3% of those interviewed had experienced at least one type of victimization during their lifetime, and 84.6% reported past-year victimization. Gender and age differences were found. Based on community criteria, the proportion of polyvictims in the sample was 32.2% for lifetime victimization and 20.1% for past-year victimization. When assessing children in the context of outpatient mental health services, it is essential that clinicians explore any history of exposure to violence, as this information is crucial in determining the young person's therapeutic needs.

Tossone, K., Jefferis, E. S., Grey, S. F., Bilge-Johnson, S., Bhatta, M. P., & Seifert, P. (2015). Poly-traumatization and harmful behaviors in a sample of emergency department Psychiatric Intake Response Center youth. *Child Abuse & Neglect*, 40, 142–151. DOI:10.1016/j.chiabu.2014.11.015

The purpose of this study is to examine risk factors for poly-traumatization, and the impact of poly-traumatization on harmful behaviors (suicidal, self-harm, and violent), among a group of pediatric patients presenting at an emergency department's psychiatric intake response center. We employed a retrospective medical chart review in a children's hospital for a 2-year span (N = 260). The study employed 2 statistical analyses. The first analysis used multinomial logistic regression to model the odds of harmful behaviors comparing increasing numbers of co-occurring traumatization types. The second analysis employed latent class modeling techniques in three ways to (a) define different poly-traumatization populations, (b) examine the relationship between predictors and class assignment, and (c) examine the relationship between class assignment and harmful behavioral outcomes. About 62% of the sample presented with at least 1 traumatization type and about 50% one harmful behavior type. Compared to those with 1, 2, or 3 traumatization types, patients with 4 or more traumatization types have higher odds of harmful behaviors. The latent class analysis revealed 2 populations: High serious victimization and minimal traumatization. History of family mental health issues was the only significant predictor of class membership. Class membership was associated with all of the harmful behavioral outcome categories. These findings support consideration of poly-traumatization as a risk factor for the high occurrence of harmful behaviors in this sample of pediatric psychiatric patients and that history of family mental health issues may contribute to the high co-occurrence of poly-traumatization.

Turner, H. A., Shattuck, A., Finkelhor, D., & Hamby, S. (2015). Effects of poly- victimization on adolescent social support, self-concept, and psychological distress. *Journal of Interpersonal Violence, 32*(5), 755-780. DOI:10.1177/0886260515586376

Past research has demonstrated the particularly damaging effects of exposure to multiple forms of victimization, or “poly-victimization,” on youth mental health. The primary objective of the present study is to begin to identify the mechanisms that help explain its powerful impact. Analyses are based on two waves of longitudinal data from the National Survey of Children’s Exposure to Violence (NatSCEV), conducted in 2008 and 2010, that comprised a telephone sample of 1,186 youth ages 10 to 17. Using structural equation modeling, we examine direct and indirect effects on distress symptoms of increased, decreased, and stable high poly-victimization between Waves 1 and 2 compared to no or low victimization in both waves. Specifically, we consider the extent to which reductions in core psychosocial resources, including family support, peer support, self-esteem, and mastery, mediate the relationship between these poly-victimization conditions and distress. Relative to stable low victimization, both increased poly-victimization and stable high poly-victimization were associated with declines in all four resources. However, only self-esteem and mastery significantly mediated the association between poly-victimization and distress, with mastery showing the strongest effect. Although significant indirect effects were evident, polyvictimization still had a strong direct effect on distress with resource factors controlled. Findings support the hypothesis that the potent effect of polyvictimization on youth mental health is, in part, due to its damaging influence on core psychosocial resources.

Bender, K., Brown, S. M., Thompson, S. J., Ferguson, K. M., & Langenderfer, L. (2014). Multiple victimizations before and after leaving home associated with PTSD, depression, and substance use disorder among homeless youth. *Child Maltreatment, 20*(2), 115-124. DOI:10.1177/1077559514562859

Exposure to multiple forms of maltreatment during childhood is associated with serious mental health consequences among youth in the general population, but limited

empirical attention has focused on homeless youth—a population with markedly high rates of childhood maltreatment followed by elevated rates of street victimization. This study investigated the rates of multiple childhood abuses (physical, sexual, and emotional abuse) and multiple street victimizations (robbery, physical assault, and sexual assault) and examined their relative relationships to mental health outcomes (meeting Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision, criteria for post-traumatic stress disorder [PTSD], depression, and substance use disorder) among a large (N = 601) multisite sample of homeless youth. Approximately 79% of youth retrospectively reported multiple childhood abuses (two or more types) and 28% reported multiple street victimizations (two or more types). Each additional type of street victimization nearly doubled youths' odds for meeting criteria for substance use disorder. Furthermore, each additional type of childhood abuse experienced more than doubled youths' odds for meeting criteria for PTSD. Both multiple abuses and multiple street victimizations were associated with an approximate twofold increase in meeting depression criteria. Findings suggest the need for screening, assessment, and trauma-informed services for homeless youth who consider multiple types of abuse and victimization experiences.

Cyr, K., Clément, M. È., & Chamberland, C. (2014). Lifetime prevalence of multiple victimizations and its impact on children's mental health. *Journal of Interpersonal Violence*, 29(4), 616–634. DOI:10.1177/0886260513505220

This study sought to document lifetime experiences of individual categories of victimizations and polyvictimization using the Juvenile Victimization Questionnaire among children from the province of Quebec (Canada) to examine whether polyvictimization predicts mental health symptoms and to assess whether categories of victimization still contribute to mental health symptoms after considering polyvictimization. Polyvictimization accounted for the most variability in scores for depression, anxiety, and anger/aggression compared with individual victimization

categories. None of the individual categories of victimization made an independent contribution to the prediction of trauma scores, once polyvictimization was considered.

Finkelhor, D., Shattuck, A., Turner, H. A., & Hamby, S. L. (2014). [Trends in children's exposure to violence, 2003-2011](#). *JAMA Pediatrics*, 168(6), 540-546.
DOI:10.1001/jamapediatrics.2013.5296

The study suggests that years of public policy designed to reduce the burden of violence and victimization among youths is having some success. To identify trends in children's exposure to violence, crime, and abuse from 2003 through 2011. Three national telephone surveys of representative samples of children and caregivers from 2003, 2008, and 2011 were compared, all obtained using the Juvenile Victimization Questionnaire; samples included parents of children 2 to 9 years old and youth 10 to 17 years old. Direct and indirect experiences of violence, abuse, and victimization during the previous year. Change in rates between 2003 and 2011 and between 2008 and 2011. Of 50 trends in exposure examined, there were 27 significant declines and no significant increases between 2003 and 2011. Declines were particularly large for assault victimization, bullying, and sexual victimization. There were also significant declines in the perpetration of violence and property crime. For the recession period between 2008 and 2011, there were 11 significant declines and no increases for 50 specific trends examined. Dating violence declined, as did one form of sexual victimization and some forms of indirect exposure. Victimization surveys with general population samples confirm patterns seen in police data and adult surveys. Crime and violence have been declining in the child and youth population as well.

Kirchner, T., Forns, M., Soler, L., & Planellas, I. (2014). Post-traumatic stress problems among poly-victimized Spanish youth: Time effect of past vs. recent interpersonal victimizations. *Child Abuse & Neglect*, 38(8), 1303-1312.
DOI:10.1016/j.chiabu.2014.02.014

The cumulative effect of lifetime interpersonal victimization experiences (e.g., child maltreatment, sexual victimizations, conventional crime, witnessing indirect victimization, peer and sibling victimizations) on posttraumatic stress (PTS) symptoms is an important topic in the scientific literature. The objectives of the present study were: (a) to analyze the relationship between lifetime interpersonal victimizations and PTS symptoms, (b) to determine the most prevalent specific PTS symptoms among poly-victimized adolescents, and (c) to establish the time-based effect of interpersonal victimization experiences that occurred in the last year versus those that occurred years before on current level of PTS symptoms. Gender differences were taken into account for each of these objectives. Participants were 823 Spanish adolescents (63% girls and 37% boys) between 14 and 18 years of age recruited from May 2010 to November 2011 from schools in Barcelona, Spain. The majority (87.6%) was of Spanish nationality. The results highlighted the cumulative effect of interpersonal victimizations on PTS symptoms. Among poly-victims adolescents, the most prevalent PTS symptom was intrusive thoughts, but some differences were observed according to gender. The time-based effect of interpersonal victimizations showed a different pattern for girls and boys. For girls, the victimizing events occurring in past years had more explanatory power of the current PTS symptoms than those that occurred more recently. In boys, the interpersonal victimizing events occurring in the last year had the greater explanatory power. These results may have clinical and therapeutic value.

Menard, S., Weiss, A. J., Franzese, R. J., & Covey, H. C. (2014). Types of adolescent exposure to violence as predictors of adult intimate partner violence. *Child Abuse & Neglect*, 38(4), 627–639. DOI:10.1016/j.chiabu.2014.02.001

Despite evidence that exposure to violence in adolescence may be more predictive of problem behavior outcomes than exposure to violence in earlier childhood, there is limited research on the relationship of adolescent exposure to violence on adult intimate partner violence (IPV) perpetration and victimization. This study examines the relationship of adolescent physical abuse victimization, witnessing parental violence, and adolescent exposure to violence in the community, to perpetration of and victimization by IPV in middle age. Respondents are drawn from a nationally representative longitudinal sample with data collected from 1976–77 to 2002–03, age 11–17 when first interviewed and 37–43 when last interviewed. Univariate descriptive statistics and bivariate correlations are presented, along with Heckman two-step models calculated separately for females and males. The use of the Heckman two-step model allows prediction not only of adult IPV, but also of selection out of intimate partner relationships (i.e., out of the at-risk population). For males, in their multivariate analysis, only physical abuse remains significant as a predictor. For females, adolescent exposure to violence is not predictive of adult IPV perpetration or victimization, but physical abuse is predictive of not being in the at-risk population (married or cohabiting). The combined index of adolescent exposure to violence is significant for both females and males in predicting selection into marriage or cohabitation, and at least marginally significant in predicting IPV.

Pereda, N., Guilera, G., & Abad, J. (2014). Victimization and polyvictimization of Spanish children and youth: Results from a community sample. *Child Abuse & Neglect*, 38(4), 640–649. DOI:10.1016/j.chiabu.2014.01.019

Most research into adolescent victimization and polyvictimization has been carried out in the United States and in northern European countries. The present study aims to

determine the prevalence of victimization and polyvictimization in a community sample of Spanish adolescents. The sample consisted of 1,107 youth ($M = 14.52$, $SD = 1.76$), 590 males and 517 females, randomly recruited from 7 secondary schools in a north-eastern region in Spain. The Spanish version of the Juvenile Victimization Questionnaire was applied, assessing 6 aggregate categories of childhood victimization (conventional crimes, caregiver, peer and sibling, witnessed and indirect, sexual, and electronic victimization). A total of 83% of adolescents reported at least 1 type of victimization during their lives, and 68.6% during the last year. Boys were generally more exposed to conventional crimes (68.0%), and girls to emotional abuse by caregivers (23.0%) and to sexual (13.9%) and electronic (17.6%) victimization during their lifetime. Age differences obtained in victimization rates for the past year confirmed that peer and sibling victimization peak in early adolescence (33.9%). Witnessing community violence was more frequent in older adolescents (34.7%). Almost 20% of the sample were considered as polyvictims (i.e., experienced victimization in 7 or more forms of victimization). Adolescent polyvictims experienced victimization in 4 or more domains during their lifetime. This study adds new information on the epidemiology of victimization in the international context and is the first to do so from the perspective of a country in south-western Europe. It illustrates that Spanish youth experience a higher level of victimization than official records suggest, and that gender and age should be taken into account when analyzing this complex area of study. © 2014 Elsevier Ltd. All rights reserved.

Álvarez-Lister, M. S., Pereda, N., Abad, J., & Guilera, G. (2013). [Polyvictimization and its relationship to symptoms of psychopathology in a southern European sample of adolescent outpatients](#). *Child Abuse & Neglect*, 38(4), 747-756.
DOI:10.1016/j.chiabu.2013.09.005

This study examined the relationship between accumulated experiences of victimization and symptoms of psychopathology in 132 adolescent outpatients aged 12–17 years ($M = 14.27$; $SD = 1.42$). The Juvenile Victimization Questionnaire and the Youth Self-Report

were used to analyze polyvictimization and symptoms of psychopathology, respectively. The interviews were conducted between December 2009 and May 2012. Cluster analysis identified a subgroup of polyvictimized patients ($n = 17$) whose general psychological impairment was significantly worse and who presented significantly more externalizing and internalizing symptoms in comparison to the rest of the sample. This difference remained significant when taking into account the clinical severity of these symptoms. These results should be taken into account when assessing and treating adolescent outpatients, for whom an adequate prognosis must be made in line with their experiences and distress. Both the self-report technique and the statistical procedure used have been shown to be suitable for identifying victimization experiences in outpatients, although this new evidence requires confirmation in future research.

Ford, J. D., Grasso, D. J., Hawke, J., & Chapman, J. F. (2013). Poly-victimization among juvenile justice-involved youths. *Child Abuse & Neglect*, 37(10), 788-800.
DOI:10.1016/j.chiabu.2013.01.005

This study replicates and extends the research literature on poly-victimization with a vulnerable and under-served population, juvenile justice-involved youths. $N = 1959$, 10–16 year old youths (76% male; 74% youth of color) consecutively newly admitted to juvenile detention facilities completed psychometric measures of trauma history, posttraumatic stress, affect regulation, alcohol/drug use, suicide risk, and somatic complaints. Using latent class analysis derived from 19 types of adversity, three unique classes best fit the data. A poly-victim class (49% female, 51% youth of color) accounted for 5% of the sample and reported a mean of 11.4 ($SD = 1.1$) types. A relatively moderate adversity class (31% female, 70% youth of color) accounted for 36% of the sample and reported a mean of 8.9 ($SD = 0.3$) types of adversity and 2.65 ($SD = 1.1$) types of traumatic adversity. A low adversity class (59% of the sample; 17% female, 78% youth of color) reported a mean of 7.4 ($SD = 0.4$) adversity types but only 0.3 ($SD = 0.45$) types of traumatic adversity. The relatively moderate adversity class was comparable to poly-victims in endorsing

extensive non-victimization traumatic adversity (e.g., accidental and loss trauma), but poly-victims were distinct from both moderate and low adversity class members in the likelihood of reporting all but one type of traumatic victimization, multiple types of traumatic victimization, and severe emotional and behavioral problems. Girls were at particularly high risk of poly-victimization, and African American and White youths also were at risk for poly-victimization. Although youth involved in the juvenile justice system typically have experienced substantial victimization, a poly-victimized sub-group, especially (but not exclusively) girls, warrants particular scientific, clinical, and rehabilitative attention in order to address the most severe behavioral and mental health problems and risks faced by this vulnerable population.

Hickman, L. J., Jaycox, L. H., Setodji, C. M., Kofner, A., Schultz, D., Barnes-Proby, D., & Harris, R. (2013). How much does “how much” matter? Assessing the relationship between children’s lifetime exposure to violence and trauma symptoms, behavior problems, and parenting stress. *Journal of Interpersonal Violence, 28*(6), 1338-1362. DOI:10.1177/0886260512468239

The study explores whether and how lifetime violence exposure is related to a set of negative symptoms: child internalizing and externalizing behavior problems, child trauma symptoms, and parenting stress. Using a large sample of violence-exposed children recruited to participate in intervention research, the study employs different methods of measuring that exposure. These include total frequency of all lifetime exposure, total frequency of lifetime exposure by broad category (i.e., assault, maltreatment, sexual abuse, and witnessing violence), and polyvictimization defined as exposure to multiple violence categories. The results indicate that only polyvictimization, constructed as a dichotomous variable indicating two or more categories of lifetime exposure, emerged as a consistent predictor of negative symptoms. The total lifetime frequency of all violence exposure was not associated with negative symptoms, after controlling for the influence of polyvictimization. Likewise, in the presence of a dichotomous polyvictimization indicator the total lifetime frequency of exposure to a particular violence

category was unrelated to symptoms overall, with the exception of trauma symptoms and experiences of sexual abuse. Taken together, these findings suggest that total lifetime exposure is not particularly important to negative symptoms, nor is any particular category of exposure after controlling for polyvictimization, with the single exception of sexual abuse and trauma symptoms. Instead, it is the mix of exposure experiences that predict negative impacts on children in this sample. Further research is needed to continue to explore and test these issues.

Macmillan, H. L., Wathen, C. N., & Varcoe, C. M. (2013). Intimate partner violence in the family: Considerations for children's safety. *Child Abuse & Neglect*, 37(12), 1186–1191. DOI:10.1016/j.chiabu.2013.05.005

Children's exposure to intimate partner violence (IPV) is increasingly recognized as a type of child maltreatment that has a level of impairment similar to other types of abuse and neglect. Despite advances in the area of IPV, the safety planning strategies recommended as part of the overall response to IPV need to be examined in terms of their implications for children. This article discusses these strategies within the context of child safety, comparing IPV safety planning with approaches aimed at reducing exposure to other types of violence such as child sexual abuse, as well as general child safety strategies. Despite the emphasis on safety planning in information available on responding to IPV, the actual effectiveness of such planning in improving safety and reducing violence is unknown. Safety planning provided to children by a parent experiencing IPV, especially when IPV is ongoing and not recognized by anyone outside the home, may lead to confusing messages for children, particularly if there is an emphasis on secrecy. While awaiting evidence about the effectiveness of specific safety planning strategies for children, we suggest basic principles and general strategies that emphasize universality in terms of education about any type of violence or abuse in the home being unacceptable, as well as the need to focus on safety in general.

Schneiderman, J. U., Smith, C., Arnold-Clark, J. S., Fuentes, J., Duan, L., & Palinkas, L. A. (2013). Overweight and obesity among Hispanic children entering foster care: A preliminary examination of polyvictimization. *Child Maltreatment, 18*(4), 264-273. DOI:10.1177/1077559513508236

This retrospective medical chart review examined the prevalence of overweight/obesity (≥ 85 th percentile) and obesity (≥ 95 th percentile) in Hispanic foster children aged 2-18 years in Los Angeles, California. Logistic regression was used for boys and girls separately to analyze polyvictimization (i.e., one vs. two or more types of maltreatment), type of maltreatment (abuse vs. neglect), and age-group as risk factors for overweight and obesity. Almost 40% of participants were overweight/obese, with the highest prevalence (47.7%) observed among children aged 12-18. Children aged 6-18 were at an increased risk of overweight/obesity and obesity compared with children aged 2-5. Although polyvictimization has been shown to have adverse health effects, in this study, it was related to slightly lower odds of obesity for boys but was unrelated to high weight for girls. Addressing the obesity epidemic among Hispanic foster children is vital to preventing continued obesity and the development of obesity-related health problems, especially by focusing on important community and family influences.

Soler, L., Kirchner, T., Paretilla, C., & Forns, M. (2013). Impact of poly-victimization on mental health: The mediator and/or moderator role of self-esteem. *Journal of Interpersonal Violence, 28*(13), 2695-2712. DOI:10.1177/0886260513487989

The current study examines the relationship between the total kinds of victimization (TKV) experienced, self-esteem, and internalizing symptoms (IS) and externalizing symptoms (ES). It also explores the mediator and/or moderator role of two self-esteem facets: self-liking (SL) and self-competence (SC). The sample comprised 736 adolescents recruited from eight secondary schools in Catalonia, Spain. The Rosenberg Self-Esteem Scale, the Youth Self Report, and the Juvenile Victimization Questionnaire were used to assess self-esteem facets (SL and SC), psychological distress (IS and ES), and the TKV suffered. This article has several innovative features. On one hand, it considers that self-esteem is

comprised of two different but related factors: SL and SC. On the other hand, it is the first study to provide evidence for the mediator/moderator role of SL and SC between victimization and psychological symptoms, taking account of the TKV experienced. Results suggest that SL is more relevant to mental health than SC. A low sense of being a worthy social being (SL) is more closely related to both victimization and poor mental health than a low sense of personal efficacy (SC). Moreover, SL seems to partially mediate the relationship between TKV and both IS and ES, whereas SC only acts as a partial mediator for the TKV–IS relationship in girls. At the same time, SL acts as a partial moderator of the TKV–IS relationship in boys. These findings support the importance of self-esteem in buffering the impact of victimization on mental health and may indicate that proper prevention and treatment policies should focus on adolescents' sense of being a good person, according to their own criteria of worth.

Wright, E. M., Fagan, A. A., & Pinchevsky, G. M. (2013). [The effects of exposure to violence and victimization across life domains on adolescent substance use](#). *Child Abuse & Neglect*, 37(11), 899–909. DOI:10.1016/j.chiabu.2013.04.010

This study uses longitudinal data from the Project on Human Development in Chicago Neighborhoods (PHDCN) to examine the effects of exposure to school violence, community violence, child abuse, and parental intimate partner violence (IPV) on youths' subsequent alcohol and marijuana use. We also examine the cumulative effects of being exposed to violence across these domains. Longitudinal data were obtained from 1,655 adolescents and their primary caregivers participating in the PHDCN. The effects of adolescents' exposure to various forms of violence across different life domains were examined relative to adolescents' frequency of alcohol and marijuana use three years later. Multivariate statistical models were employed to control for a range of child, parent, and family risk factors. Exposure to violence in a one-year period increased the frequency of substance use three years later, though the specific relationships between victimization and use varied for alcohol and marijuana use. Community violence and

child abuse, but not school violence or exposure to IPV, were predictive of future marijuana use. None of the independent measures of exposure to violence significantly predicted future alcohol use. Finally, the accumulation of exposure to violence across life domains was detrimental to both future alcohol and marijuana use. The findings support prior research indicating that exposure to multiple forms of violence, across multiple domains of life, negatively impacts adolescent outcomes, including substance use. The findings also suggest that the context in which exposure to violence occurs should be considered in future research, since the more domains in which youth are exposed to violence, the fewer “safe havens” they have available. Finally, a better understanding of the types of violence youth encounter and the contexts in which these experiences occur can help inform intervention efforts aimed at reducing victimization and its negative consequences.

Young-Wolff, K. C., Hellmuth, J., Jaquier, V., Swan, S. C., Connell, C., & Sullivan, T. P. (2013). [Patterns of resource utilization and mental health symptoms among women exposed to multiple types of victimization: A latent class analysis](#). *Journal of Interpersonal Violence*, 28(15), 3059–3083. DOI:10.1177/0886260513488692

Although the value of resources aimed to support women who experience intimate partner violence (IPV) is clear, few studies have investigated how exposure to multiple types of victimization influences women’s resource utilization. We applied latent class analysis (LCA) to a sample of 412 women who used IPV in their current relationships to test whether women’s resource utilization is associated with different patterns of victimization, including current IPV victimization, past IPV victimization, and childhood victimization. Three classes of women were identified: the Low Cumulative IPV class ($n = 121$) included women with a low prevalence of past IPV victimization and low severity of current IPV victimization; The High Past/Low Current IPV class ($n = 258$) included women with a high prevalence of past IPV victimization but low severity of current IPV victimization; and the High Cumulative IPV class ($n = 33$) included women with a high

prevalence of past IPV victimization and severe current IPV victimization. Multiple types of childhood victimization were highly prevalent among women in all three classes. Women in the High Cumulative IPV class used a greater variety of resources, experienced a greater number of posttraumatic stress and depression symptoms, drug problems, and used more severe IPV aggression compared to women in other classes. These findings highlight the heterogeneity of resource utilization among women in relationships characterized by bidirectional IPV and underscore the potential clinical utility of adapting services to meet the specific needs of women with unique profiles of victimization.

Cyr, K., Chamberland, C., Lessard, G., Clement, M., Wemmers, J., Collin-Vezina, D., Gagne, M., & Damant, D. (2012). Polyvictimization in a child welfare sample of children and youths. *Psychology of Violence, 2*(4), 385–400. DOI:10.1037/a0028040

To document extrafamily victimization, exposure to community violence and polyvictimization in a child welfare sample of children and youths. Telephone interviews were conducted among 138 adolescents aged 12 to 17 years and 82 caregivers of children aged 2 to 11 years followed by child welfare agencies in Quebec to document the victimization experienced by children during the past year. The vast majority (90%) of young people were the target of direct or indirect past-year victimizations, with the majority of these victims (93%) being the target of more than one form of victimization. More than half of the sample (54%) experienced at least four forms of victimization in the past year. This first study documenting polyvictimization in a child welfare sample outlines that practitioners should inquire about a wide range of victimization experiences. Focusing intervention on a single form of victimization (maltreatment) does not address the specific service needs of children chronically victimized and fails to address their high risk of victimization in the community. Further research is needed to understand the mechanisms linked to the increased victimization risk among maltreated children in order to develop effective intervention and prevention programs.

D'Andrea, W., Ford, J., Stolbach, B., Spinazzola, J., & van der Kolk, B. A. (2012). Understanding interpersonal trauma in children: Why we need a developmentally appropriate trauma diagnosis. *American Journal of Orthopsychiatry*, 82(2), 187–200. DOI:10.1111/j.1939-0025.2012.01154.x

Childhood exposure to victimization is prevalent and has been shown to contribute to significant immediate and long-term psychological distress and functional impairment. Children exposed to interpersonal victimization often meet criteria for psychiatric disorders other than posttraumatic stress disorder (PTSD). Therefore, this article summarizes research that suggests directions for broadening current diagnostic conceptualizations for victimized children, focusing on findings regarding victimization, the prevalence of a variety of psychiatric symptoms related to affect and behavior dysregulation, disturbances of consciousness and cognition, alterations in attribution and schema, and interpersonal impairment. A wide range of symptoms is common in victimized children. As a result, in the current psychiatric nosology, multiple comorbid diagnoses are necessary—but not necessarily accurate—to describe many victimized children, potentially leading to both undertreatment and overtreatment. Related findings regarding biological correlates of childhood victimization and the treatment outcome literature are also reviewed. Recommendations for future research aimed at enhancing diagnosis and treatment of victimized children are provided.

Finkelhor, D., Turner, H. A., & Hamby, S. (2012). [Let's prevent peer victimization, not just bullying](#). *Child Abuse & Neglect*, 36(4), 271–274. DOI:10.1016/j.chiabu.2011.12.001

This commentary argues that it is time to make bullying less of the central concept in efforts to combat peer victimization. Bullying has been a pivotal concept in the mobilization of effort in recent years to create safe environments for children. It has highlighted a phenomenon that seems to have universal resonance and is recognized internationally (Jimerson, Swearer, & Espelage, 2010). Prevalence for bullying has been measured in many countries, overall assessed as involving about 10% of the school aged

population in its chronic form (Molcho et al., 2009). It is associated with serious outcomes (Klomeck et al., 2009) and is higher among abused children (Mohapatra et al., 2010). Public policy efforts are being made in many places to combat its occurrence and its effects (Howlett, 2011; Olweus Bullying Prevention Program, 2011; Salmivalli, Karna, & Poskiparta, 2011).

Hamby, S., Finkelhor, D., & Turner, H. (2012). [Teen dating violence: Co-occurrence with other victimizations in the National Survey of Children's Exposure to Violence \(NatSCEV\)](#). *Psychology of Violence*, 2(2), 111–124. DOI:10.1037/a0027191

The purpose of this research was to examine the co-occurrence of physical teen dating violence (TDV) with other forms of victimization. The sample includes 1,680 youth aged 12 to 17 from the National Survey of Children's Exposure to Violence (NatSCEV), a nationally representative telephone survey of victimization experiences. Every victim of physical TDV (100%) reported at least one other type of victimization. Physical TDV is very closely associated with several other forms of victimization in this sample, with adjusted odds ratio ranging from 1.48 to 17.13. The lifetime rate of TDV was 6.4% for all youth, but TDV rates reached 17% for youth who had been physically abused by a caregiver, 25% for youth who had been raped, and 50% for youth (16 years) who had experienced statutory rape or sexual misconduct by a partner more than 5 years older. Victims of TDV reported, on average, twice as many other types of victimizations as those with no history of TDV. These data indicate that physical TDV is especially closely associated with some forms of child maltreatment, sexual victimization, and polyvictimization. Universal dating violence prevention programs designed for youth who have not yet, or just recently, started dating will typically include a large number of youth who have already been victimized by other forms of violence. Prevention curricula may be more effective if they address the needs of victimized youth, for example, by teaching skills for coping with prior victimization experiences.

Lacelle, C., Hébert, M., Lavoie, F., Vitaro F., & Tremblay, R. E. (2012). Child sexual abuse and women's sexual health: The contribution of csa severity and exposure to multiple forms of childhood victimization. *Journal of Child Sexual Abuse, 21*(5), 571–592. DOI:10.1080/10538712.2012.688932

Research studies have provided increasing evidence for the potential adverse impact of child sexual abuse on women's sexual health. The present study examined the association between child sexual abuse and sexual health while controlling for various forms of childhood victimization. Self-report questionnaires were administered to 889 young women from the province of Quebec. Results suggest that child sexual abuse survivors were more likely to report having experienced other forms of childhood victimization than were women without child sexual abuse. Women with a history of both child sexual abuse and multiple forms of victimization were at greater risk of experiencing more adverse outcomes, including risky sexual behaviors, sexual problems, and negative sexual self-concept. Regression analyses revealed that child sexual abuse was significantly related to indicators of sexual health outcomes even when controlling for the effect of single forms of victimization. Clinically, interventions optimizing sexual health may be particularly helpful for a subgroup of child sexual abuse survivors.

Nilsson, D. K., Gustafsson, P. E., & Svedin, C. G. (2012). Polytraumatization and trauma symptoms in adolescent boys and girls: Interpersonal and non-interpersonal events and moderating effects of adverse family circumstances. *Journal of Interpersonal Violence, 27*(13), 2645–2664. DOI:10.1177/0886260512436386

The objective of this study was to investigate the cumulative effect of interpersonal and noninterpersonal traumatic life events (IPEs and NIPes, respectively) on the mental health of adolescents and to determine if the adverse impacts of trauma were moderated by adverse family circumstances (AFC). Adolescents (mean age 16.7 years) from the normative population (n = 462) completed the questionnaire, the Linköping Youth Life Experience Scale (LYLES), together with Trauma Symptom Checklist for Children (TSCC). The lifetime accumulation of interpersonal, noninterpersonal, and AFC was independently

related to trauma-related symptoms in both boys and girls. The number of AFCs moderated the mental health impact of both IPEs and nIPEs in boys but not in girls. Cumulative exposure to both interpersonal and noninterpersonal traumatic events is important for the mental health of adolescents, and, at least for boys, family circumstances seem to be relevant for the impact of trauma. Our results suggest that broader approaches to the study, prevention, and treatment of trauma, including consideration of cumulative exposure, different types of trauma, and additional social risk factors, could be fruitful.

Silvern, L., & Griese, B. (2012). Multiple types of child maltreatment, posttraumatic stress, dissociative symptoms, and reactive aggression among adolescent criminal offenders. *Journal of Child & Adolescent Trauma*, 5(2), 88-101.
DOI:10.1080/19361521.2012.671799

This study focused on psychological correlates of child maltreatment histories among male adolescent offenders (N = 123). Four assessment strategies employed to assess four types of maltreatment revealed that approximately 81.9% of offenders had been exposed to at least one type of maltreatment; the majority had experienced multiple types. Multiple maltreatment positively predicted reactive aggression and dissociative symptoms; these relationships were stronger than relationships with traditional Posttraumatic Stress Disorder (PTSD) symptoms. The significant relationship between multiple maltreatment and reactive aggression was fully mediated by dissociative symptoms and partially mediated by PTSD symptoms. We discussed the use of complex trauma models to guide assessments of and interventions with adolescent offenders who had been traumatized by multiple types of maltreatment.

Turner, H. A., Finkelhor, D., Shattuck, A., & Hamby, S. (2012). [Recent victimization exposure and suicidal ideation in adolescents](#). *Archives of Pediatric and Adolescent Medicine*, 166(12), 1149–1154. DOI:10.1001/archpediatrics.2012.1549

This research examined the independent and cumulative effects of past-year exposure to several different types of child victimization (peer victimization, witnessing family violence, community violence, sexual assault, and maltreatment) on suicidal ideation in a nationally representative sample of adolescents. The study used 2 waves of longitudinal data from the National Survey of Children's Exposure to Violence. Conducted in 2008 and 2010 on the telephone with respondents from the contiguous United States. National sample of 1186 youth aged 10 to 17 years in wave 1. Main exposures were peer victimization, sexual assault, witnessing family violence, exposure to community violence, and maltreatment by a parent/caregiver. Outcome measure was self-report suicidal ideation in the past month. Controlling for demographic characteristics, internalizing disorder diagnoses, and wave 1 suicidal ideation, findings showed independent effects of peer victimization, sexual assault, and maltreatment by a parent/caregiver on suicidal ideation at wave 2. The risk of suicidal ideation was 2.4 times greater among youth who experienced peer victimization in the past year, 3.4 times greater among those who were sexually assaulted, and 4.4 times greater among those exposed to maltreatment, relative to children who were not exposed to these types of victimization. Findings also showed substantial effects of polyvictimization (exposure to 7 or more individual types of victimization in the past year), with polyvictims almost 6 times more likely to report suicidal ideation. Findings point to the importance of recent victimization in increasing risk of suicidal ideation in adolescents and suggest the need for victimization assessments among all youth who are believed to be at risk for suicidal ideation.

Finkelhor, D. (2011). Prevalence of child victimization, abuse, crime, and violence exposure. In J. W. White, M. P. Koss, & A. E. Kazdin (Eds.), *Violence against women and children* (Vol. 1, pp. 9-29). American Psychological Association.
DOI:10.1037/12307-001

Although the literature about the scope and nature of the problem of child victimization, abuse, crime, and violence exposure is large and growing, it is still far from satisfying the needs of policymakers, practitioners, and researchers. In this chapter, I examine and document the prevalence of the problem.

Finkelhor, D., Shattuck, A., Turner, H. A., Ormrod, R., & Hamby, S. L. (2011). Polyvictimization in developmental context. *Journal of Child and Adolescent Trauma*, 4(4), 291-300.
DOI:10.1080/19361521.2011.610432

Polyvictimization (i.e., exposure to multiple forms of victimization) appears highly correlated with indicators of traumatic stress in children. In this study, a national sample of children and youth were assessed for 36 different kinds of victimization using the Juvenile Victimization Questionnaire. Polyvictims were defined as the 10% of children experiencing the most different kinds of victimization in each of 4 developmental cohorts. The younger polyvictims had somewhat fewer victimizations overall, less sexual victimization, and more victimization at the hands of family members, particularly siblings. However, polyvictimization at every developmental level was strongly associated with distress symptoms. This study suggests the importance of assessing for and identifying polyvictims at all ages, including among preschoolers.

Finkelhor, D., Turner, H., & Hamby, S. (2011). [Questions and answers about the National Survey of Exposure to Violence](#). *Juvenile Justice Bulletin*. U.S. Department of Justice, Office of Justice Programs.

Finkelhor, D., Turner, H., Hamby, S., & Ormrod, T. (2011). [Polyvictimization: Children's exposure to multiple types of violence, crime, and abuse](#). *Juvenile Justice Bulletin*. U.S. Department of Justice, Office of Justice Programs.

As amply evidenced in this bulletin series, children's exposure to violence is pervasive and affects all ages. The research findings reported here and in the other bulletins in this series are critical to informing our efforts to protect children from its damaging effects.

Ford, J. D., Wasser, T., & Connor, D. F. (2011). Identifying and determining the symptom severity associated with polyvictimization among psychiatrically impaired children in outpatient setting. *Child Maltreatment*, 16(3), 216–226.
DOI:10.1177/1077559511406109

Polyvictimization involves experiencing multiple forms of maltreatment or other interpersonal victimization, and places children at risk for severe psychosocial impairment. Children with psychiatric problems are at risk for polyvictimization, and polyvictimized child psychiatric inpatients have been found to have particularly severe psychiatric symptoms. Cluster analysis was used to identify a polyvictimized subgroup (N = 22, 8%) among 295 outpatient admissions in 2007–2009 to a child psychiatry outpatient clinic, based on chart review of documented maltreatment, parental impairment (history of arrest, psychiatric illness, and substance use), and multiple out-of-home placements. Polyvictimization was associated with severe parent-reported externalizing problems and clinician-rated psychosocial impairment, independent of demographics and psychiatric diagnoses. Posttraumatic stress disorder (PTSD) was the only psychiatric diagnosis associated with polyvictimization. Polyvictimization merits further clinical and research assessment with child psychiatry outpatients. Evidence-based PTSD assessment and treatment for polyvictimized children with adaptations to address their severe impairment and externalizing problems also warrants empirical evaluation.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2011). [Children's exposure to intimate partner violence and other family violence](#). *Juvenile Justice Bulletin*. U. S. Department of Justice, Office of Justice Programs.

This bulletin explores in depth the NatSCEV survey results regarding exposure to family violence among children in the United States, including exposure to intimate partner violence (IPV), assaults by parents on siblings of children surveyed, and other assaults involving teen and adult household members.

Mitchell, K. J., Finkelhor, D., Wolak, J., Ybarra, M. L., & Turner, H. (2011). [Youth Internet victimization in a broader victimization context](#). *Journal of Adolescent Health*, 48(2), 128-134. DOI:10.1016/j.jadohealth.2010.06.009

The purpose of this research was to examine past-year and lifetime rates of online victimization and associations with offline victimizations, trauma symptomatology, and delinquency among adolescents. Data were collected through telephone interviews from a nationally representative sample of 2,051 adolescents (ages, 10-17) as part of the National Survey of Children's Exposure to Violence. Data were collected between January and May, 2008. Six percent of youth reported a past-year online victimization and 9% a lifetime online victimization. Almost all youth reporting a past-year online victimization (96%) reported offline victimization during the same period. The offline victimizations most strongly associated to online victimization were sexual victimizations (e.g., sexual harassment, being flashed, rape) and psychological and emotional abuse. Online victims also reported elevated rates of trauma symptomatology, delinquency, and life adversity. Prevention and intervention should target a broader range of behaviors and experiences rather than focusing on the Internet component exclusively. Internet safety educators need to appreciate that many online victims may be at risk not because they are naive about the Internet, but because they face complicated problems resulting from more pervasive experiences of victimization and adversity.

Moeller, J. R. (2011). [Conceptualizing poly-victimization: Exploring the long-term effects utilizing constructivist self-development theory](#) [Doctoral dissertation, University of Akron].

Ford, J. D., Elhai, J. D., Connor, D. F., & Frueh, B.C. (2010). Poly-victimization and risk of posttraumatic, depressive, and substance use disorders and involvement in delinquency in a national sample of adolescents. *Journal of Adolescent Health*, 46(6), 545-552. DOI:10.1016/j.jadohealth.2009.11.212

Adolescents exposed to multiple forms of psychological trauma ("poly-victimization," Finkelhor et al. *Child Abuse Negl* 2007;31:7-26) may be at high risk for psychiatric and behavioral problems. This study empirically identifies trauma profiles in a national sample of adolescents to ascertain correlates of poly-victimization. Latent Class analyses and logistic regression analyses were used with data from the National Survey of Adolescents to identify trauma profiles and each profile's risk of posttraumatic stress disorder, major depressive disorder, substance use disorders, and delinquency involvement and deviant peer group relationships. Poly-victimization classes were also compared to classes with trauma exposure of lesser complexity. Six mutually exclusive trauma profiles (latent classes) were identified. Four classes were characterized by high likelihood of poly-victimization, including abuse victims (8%), physical assault victims (9%), and community violence victims (15.5%). Poly-victimization class members, especially abuse and assault victims, were more likely than do youth traumatized by witnessing violence or exposure to disaster/accident trauma to have psychiatric diagnosis and (independent of psychiatric diagnoses or demographics) to be involved in delinquency with delinquent peers. Poly-victimization is prevalent among adolescents and places youth at high risk for psychiatric impairment and for delinquency. Moreover, poly-victimized youths' risk of delinquency cannot be fully accounted for by posttraumatic stress disorder, depression, or substance use problems, suggesting that adolescent healthcare providers should consider poly-victimization as a risk for

behavioral and legal problems even when PTSD, depression, or addiction symptoms are not clinically significant. 2010 Society for Adolescent Health and Medicine.

Hahm, H. C., Lee, Y., Ozonoff, A., & Van Wert, M. J. (2010). [The impact of multiple types of child maltreatment on subsequent risk behaviors among women during the transition from adolescence to young adulthood](#). *Journal of Youth & Adolescence*, 39(5), 528–540. DOI:10.1007/s10964-009-9490-0

The purpose of this study was to investigate how different types of child maltreatment, independently and collectively, impact a wide range of risk behaviors that fall into three domains: sexual risk behaviors, delinquency, and suicidality. Cumulative classification and Expanded Hierarchical Type (EHT) classification approaches were used to categorize various types of maltreatment. Data were derived from Wave III of the National Longitudinal Study of Adolescent Health (Add Health). Our sample consisted of White, Black, Hispanic, and Asian females ages 18 to 27 (n = 7,576). Experiencing different kinds of maltreatment during childhood led to an extensive range of risk behaviors within the three identified domains. Women experiencing sexual abuse plus other maltreatment types had the poorest outcomes in all three domains. These findings illustrate that it may no longer be appropriate to assume that all types of maltreatment are equivalent in their potential contribution to negative developmental sequelae.

Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2010). [The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative survey of youth](#). *Child Abuse & Neglect*, 34(10), 734–741. DOI:10.1016/j.chiabu.2010.03.001

Objective: To examine the co-occurrence of witnessing partner violence with child maltreatment and other forms of victimization. Data are from the National Survey of Children's Exposure to Violence (NatSCEV), a nationally representative telephone survey of the victimization experiences of 4,549 youth aged 0–17. Witnessing partner violence

(WPV) is very closely associated with several forms of maltreatment and exposure to other forms of family violence in this sample, with adjusted OR ranging from 3.88 to 9.15. WPV is also significantly associated with a wide variety of other forms of victimization, with OR ranging from 1.43 to 7.32. More than 1/3 (33.9%) of youth who witnessed partner violence had also been maltreated in the past year, compared with 8.6% of non-witnesses. For lifetime data, more than half (56.8%) of WPV youth had also been maltreated. Neglect and custodial interference were most closely associated with WPV. These data support the poly-victimization model, indicating that many youth experience multiple forms of victimization. They also indicate that the various forms of family violence are especially closely linked. Practice implications: These results provide new urgency to calls to better integrate services to adult and child victims of family violence. For example, screening to identify the needs of child witnesses could be done in domestic violence shelters, and screening to identify the needs of adult victims could be done in child protective service settings.

Turner, H. A., Finkelhor, D., & Ormrod, R. (2010). Poly-victimization in a national sample of children and youth. *American Journal of Preventive Medicine*, 38(3), 323–330.
DOI:10.1016/j.amepre.2009.11.012

Most studies of children's exposure to violence focus on separate, relatively narrow categories of victimization (such as sexual abuse, physical maltreatment, or bullying), paying less attention to exposure to multiple forms of victimization. This study documents children's lifetime exposure to multiple victimization types (i.e., "poly-victimization") and examines the association between poly-victimization and extent of trauma symptomatology. Analyses were based on telephone interviews conducted between January 2008 and May 2008 with a nationally representative sample of 4053 children aged 2–17 years and their caregivers. Exposure to multiple forms of victimization was common. Almost 66% of the sample was exposed to more than one type of victimization, 30% experienced five or more types, and 10% experienced 11 or more different forms of

victimization in their lifetimes. Poly-victims comprise a substantial portion of the children who would be identified by screening for an individual victimization type, such as sexual assault or witnessing parental violence. Polyvictimization is more highly related to trauma symptoms than experiencing repeated victimizations of a single type and explains a large part of the associations between individual forms of victimization and symptom levels. Studies focusing on single forms of victimization are likely to underestimate the full burden of victimization that children experience and to incorrectly specify the risk profiles of victims. Research, clinical practice, and intervention strategies are likely to improve with more comprehensive assessments of victimization exposure.

DeHart, D. D. (2009). [*Poly-victimization among girls in juvenile justice system: Manifestations & associations to delinquency*](#). U. S. Department of Justice.

There is considerable evidence that victimization is pervasive in the backgrounds of delinquent girls. This study collected lifespan data on girls' victimization and juvenile offending to: 1) examine range, diversity, and co-occurrence of different types of violence over the course of girls' lives, identifying strength and dynamics of relationships between forms of exposure; 2) examine independent, relative, and cumulative trajectories of risk for varied types of victimization over the lifespan, including critical periods of risk; 3) examine additional ecological factors as these relate to victimization; and 4) examine relationship of victimization to nature and chronicity of girls' offending. Life History Calendars were used in conjunction with the Juvenile Victimization Questionnaire to examine co-occurrence of multiple forms of abuse and develop a comprehensive view of girls' experiences. Our sample consisted of 100 girls adjudicated delinquent through the South Carolina Department of Juvenile Justice and up to one primary caregiver for each girl. Risk trajectories indicated girls' susceptibility to caregiver violence and witnessed violence starting prior to school age, with a second peak in risk during adolescence. In contrast, risk for gang or group attacks began rising just before pubescence, and dating violence risk logically escalated after pubescence. Sexual violence was a risk for girls

throughout their lives but was particularly prevalent during adolescence. In predicting substance use, caregiver violence displayed the greatest stability followed by sexual violence and witnessing violence. Examination of qualitative accounts revealed that use of alcohol and drugs as a means of coping was an underlying theme in girls' lives. Corruption was also evident, usually involving parents or adult sexual partners who enabled girls' substance abuse. Findings illuminate the need for education and services addressing alcohol and drug use among traumatized girls, as well as need for skill-building to develop alternative coping mechanisms to address violence, loss, and other stressors in girls' lives. Project findings have theoretical implications regarding range and consequences of violence exposure for at-risk girls, as well as applied utility for service interventions, justice interventions to promote rehabilitation and accountability, and efforts to increase ecological safety for delinquent girls through work with families and communities.

Elliott, A. N., Alexander, A. A., Pierce, T. W., Aspelmeier, J. E., & Richmond, J. M. (2009). Childhood victimization, poly-victimization, and adjustment to college in women. *Child Maltreatment*, 14(4), 330–343. DOI:10.1177/1077559509332262

This study examines the relationships among poly-victimization (i.e., high cumulative levels of victimization), six aggregate categories of childhood victimization (property crime, physical assault, peer and sibling, witnessed and indirect, sexual, child maltreatment), and college adjustment in females. This study first examines the relative contributions of poly-victimization and individual categories of childhood victimization in predicting college adjustment. The study then examines whether polyvictimization contributes any unique variance, beyond that accounted for by the combination of all six aggregate categories. Regression analyses reveal that a) poly-victimization accounts for a significant proportion of variability in scores for college adjustment, beyond that accounted for by any of the six categories of childhood victimization alone, and b) the categories of childhood victimization contribute little to no variability beyond that

accounted for by poly-victimization. Furthermore, polyvictimization accounts for a significant proportion of variability in college adjustment, beyond that already accounted for by the simultaneous entry of all six categories as predictor variables. Finally, although victimization does not predict GPA, it predicts other domains of college adjustment. Results suggest that counselors working with college students should a) assess multiple categories of victimization and poly-victimization, and b) evaluate clients' adjustment to college across multiple domains (e.g., academic, social, interpersonal).

Finkelhor, D., Ormrod, R. K., & Turner, H. A. (2009). [Lifetime assessment of poly victimization in a national sample of children and youth](#). *Child Abuse & Neglect*, 33(7), 403-411. DOI:10.1016/j.chiabu.2008.09.012

To use a lifetime assessment of victimization experiences to identify children and youth with high cumulative levels of victimization (poly-victims). Also to compare such children to other victims and non-victims, and assess the contribution of cumulative victimization to levels of psychological distress. A national sample of 1,467 children aged 2-17 recruited through random digit dialing and accessed via telephone interviews (with caretakers and youth themselves) about a comprehensive range of 33 types of victimization experiences in the previous year and at any time in their lives. Nearly 80% of the children and youth reported at least one lifetime victimization. The mean number of lifetime victimizations was 3.7 and the median 2.6. The total number of different lifetime victimizations was highly predictive of symptoms of current distress. The best linear prediction of distress on the basis of cumulative victimization entailed weighting child maltreatment and sexual assault by factors of 4 and 3 respectively compared to other victimizations. We proposed classifying poly-victims as those 10% of children and youth with the highest victimization scores, and calculating different thresholds for children at different ages. Poly-victims designated in this way had significantly more distress, more non-victimization adversities than other youth and were less likely to come from an intact family.

Finkelhor, D., Ormrod, R. K., & Turner, H. A. (2009). The developmental epidemiology of childhood victimization. *Journal of Interpersonal Violence, 24*(5), 711-731.
DOI:10.1177/0886260508317185

This article examines developmental trends in the rates of different kinds of victimization across the span of childhood. The Developmental Victimization Survey was a national telephone survey of the victimization experiences of 2,030 children from ages 2 to 17. The overall mean number of victimizations during a single year increased with age, as did the percentage of children with polyvictimizations (4 or more different kinds of victimization). However, some specific types of victimization, physical bullying and sibling assaults, were highest prior to adolescence and then declined. Other types had different developmental patterns by gender. Peer assaults increased in adolescence for boys but not for girls. Child maltreatment and sexual victimization increased in adolescence for girls but not for boys. The complex and diverse patterns of developmental vulnerability to different kinds of victimization at different ages need more exploration and explanation in order to better target prevention and intervention policies.

Finkelhor, D., Ormrod, R., Turner, H., & Holt, M. (2009). Pathways to poly-victimization. *Child Maltreatment, 14*(4), 316-329. DOI:10.1177/1077559509347012

Some children, whom we have labeled poly-victims, experience very high levels of victimizations of different types. This article finds support for a conceptual model suggesting that there may be four distinct pathways to becoming such a polyvictim: (a) residing in a dangerous community, (b) living in a dangerous family, (c) having a chaotic, multiproblem family environment, or (d) having emotional problems that increase risk behavior, engender antagonism, and compromise the capacity to protect oneself. It uses three waves of the Developmental Victimization Survey, a nationally representative sample of children aged 2-17 years. All four hypothesized pathways showed significant independent association with polyvictim onset. For the younger children, the symptom score representing emotional problems was the only significant predictor. For the older

children, the other three pathway variables were significant predictors—dangerous communities, dangerous families, and problem families—but not symptom score. Poly-victimization onset was also disproportionately likely to occur in the year prior to children’s 7th and 15th birthday, corresponding roughly to the entry into elementary school and high school. The identification of such pathways and the ages of high onset should help practitioners design programs for preventing vulnerable children from becoming poly-victims.

Finkelhor, D., Turner, H., Ormrod, R., & Hamby, S. L. (2009). Violence, abuse, and crime exposure in a national sample of children and youth. *Pediatrics*, 124(5), 1411–1423. DOI:10.1542/peds.2009-0467

The objective of this research was to obtain national estimates of exposure to the full spectrum of the childhood violence, abuse, and crime victimizations relevant to both clinical practice and public-policy approaches to the problem. The study was based on a cross-sectional national telephone survey that involved a target sample of 4549 children aged 0 to 17 years. A clear majority (60.6%) of the children and youth in this nationally representative sample had experienced at least one direct or witnessed victimization in the previous year. Almost half (46.3%) had experienced a physical assault in the study year, 1 in 4 (24.6%) had experienced a property offense, 1 in 10 (10.2%) had experienced a form of child maltreatment, 6.1% had experienced a sexual victimization, and more than 1 in 4 (25.3%) had been a witness to violence or experienced another form of indirect victimization in the year, including 9.8% who had witnessed an intrafamily assault. One in 10 (10.2%) had experienced a victimization-related injury. More than one third (38.7%) had been exposed to 2 or more direct victimizations, 10.9% had 5 or more, and 2.4% had 10 or more during the study year. The scope and diversity of child exposure to victimization is not well recognized. Clinicians and researchers need to inquire about a larger spectrum of victimization types to identify multiply victimized children and tailor prevention and interventions to the full range of threats that children face.

Finkelhor, D., Turner, H., Ormrod, R., Hamby, S., & Kracke, K. (2009). [Children's exposure to violence: A comprehensive national study](#). *Juvenile Justice Bulletin*. U. S. Department of Justice, Office of Justice Programs.

As amply evidenced in this Bulletin, children's exposure to violence is pervasive and crosses all ages. The research findings reported here are critical to informing our efforts to protect children from its damaging effects.

Gustafsson, P. E., Nilsson, D., & Svedin, C. G. (2009). Polytraumatization and psychological symptoms in children and adolescents. *European Child and Adolescent Psychiatry*, 18(5), 274-283. DOI:10.1007/s00787-008-0728-2

Previous research on the impact of traumatic experiences in children and adolescents has focused almost entirely on the effect of single trauma. Research on cumulative traumas has been lacking, but Finkelhor (Child Abuse Negl 31:7-26, 2007) has recently directed the attention to the concept of polyvictimization. As an extension of this concept, this study examined the impact of polytraumatization, operationalized as the number of different potentially traumatic events. The study population comprised two cross-sectional samples of schoolaged children (n = 270) and adolescents (n = 400). Information of life-time incidence of traumatic events was collected by the life incidence of traumatic events (LITE), and psychological symptoms by the parent version of the strengths and difficulties questionnaire (SDQ) for the school children and the self-report trauma symptom checklist for children found that exposure to at least one traumatic event was common in both the samples (63% of the children and 89.5% of the adolescents). The number of different traumatic events, polytraumatization, was highly predictive of symptoms in both samples, and with a few exceptions surpassed the impact of specific events in exploratory analyses. We furthermore replicated previous findings of the important impact of interpersonal over non-interpersonal events on symptoms in both samples, and found an indication that this effect differed by gender in different

manners in the two samples. This study emphasizes the significance of both the quantity of traumatic events, polytraumatization, as well as the quality, interpersonal events.

Margolin, G., Vickerman, K. A., Ramos, M. C., Serrano, S. D., Gordis, E. B., Iturralde, E., Oliver, P. H., & Spies, L. A. (2009). [Youth exposed to violence: Stability, co-occurrence, and context](#). *Clinical Child and Family Psychology Review*, 12(1), 39–54.
DOI:10.1007/s10567-009-0040-9

With considerable literature establishing how separate types of violence disrupt the lives of children, there is emerging interest in examining violence across multiple interpersonal domains. This paper examines four commonly occurring and frequently researched domains of violence exposure: marital physical aggression, mother-to-youth aggression, father-to-youth aggression, and community violence. A community-based sample of 103 parents and youth provided three waves of data at annual intervals beginning when the youth were aged 9–10. We explored stability of exposure, co-occurrence across different types of violence exposure, and associations with co-occurring risk factors. Approximately 30–45% of youth reported intermittent exposure over the 3 years. In addition to overlap among types of violence exposure within the family, we found overlap between parent-to-youth aggression and community violence, an association that was exacerbated in families where fathers reported high levels of global distress symptoms. Mother-to-youth, father-to-youth, and community violence related to youth behavior problems beyond the contextual risk factors of low income, stressful life events, and parents' global distress symptoms. These results highlight the importance of examining violence longitudinally, across multiple types, and with attention to contextual factors.

Kaslow, N. J., & Thompson, M. P. (2008). Associations of child maltreatment and intimate partner violence with psychological adjustment among low SES, African American children. *Child Abuse & Neglect*, 32(9), 888-896.
DOI:10.1016/j.chiabu.2007.09.012

This study assessed the unique and interactive effects of child maltreatment and mothers' physical intimate partner violence (IPV) status on low-SES African American children's psychological functioning. Mothers were recruited from a large, inner-city hospital, and those who met eligibility criteria were asked to complete a lengthy face-to-face interview while their child was assessed separately but concurrently. The sample included 152 mother-child dyads. The children's mean age was 10 years, and 45% were male. Multivariate linear regression analyses tested the main and interactive effects of child maltreatment and mothers' exposure to physical IPV on children's psychological functioning (internalizing and externalizing symptoms, traumatic stress symptoms), while controlling for covariates. Children who experienced child maltreatment and children whose mothers experienced physical IPV had higher levels of psychological distress than their respective counterparts. Post hoc analysis of significant interaction effects indicated that child maltreatment was associated with internalizing and externalizing problems and traumatic stress only when mothers reported higher levels of physical IPV. This finding did not hold true for youth whose mothers did not acknowledge elevated rates of physical IPV. African American youth from low-SES backgrounds who are maltreated and whose mothers experience physical IPV are at particularly high risk for psychological distress. Targeted prevention and intervention programs are needed for these poly-victimized youth.

Clemmons, J. C., Walsh, K., DiLillo, D. K., & Messman-Moore, T. L. (2007). [Unique and combined contributions of multiple child abuse types and abuse severity to adult trauma symptomology](#). *Child Maltreatment* 12(2), 172-181.
DOI:10.1177/1077559506298248

Studies have documented the co-occurrence and cumulative impact of multiple types of child maltreatment on later psychosocial difficulties. Other research suggests that child abuse characteristics indicative of severity may also increase risk of later adjustment problems. However, little effort has been made to examine the co-occurrence of both multiple types of maltreatment and abuse severity within a single study. The present investigation examines self-reported child maltreatment and adult functioning in a geographically diverse sample of 1,396 undergraduate students. Results indicate that experiencing multiple types of maltreatment is positively associated with more severe abuse. Although increased maltreatment types and more severe abuse are each associated with greater trauma symptomatology, abuse severity is the stronger of the two predictors. Finally, number of maltreatment types and severity of maltreatment interact to predict greater levels of trauma symptomatology. These results highlight the importance of considering both co-occurring abuse types and severity in research and clinical work with adult victims.

Finkelhor, D., Ormrod, R. K., & Turner, H.A. (2007). [Re-victimization patterns in a national longitudinal sample of children and youth](#). *Child Abuse & Neglect*, 31(5), 479-502.
DOI:10.1016/j.chiabu.2006.03.012

To understand to the degree to which a broad variety of victimizations, including child maltreatment, conventional crime, peer, and sexual victimizations, persist for children from 1 year to the next. A national sample of 1467 children aged 2-17 recruited through random digit dialing and accessed via telephone interviews (with caretakers and youth themselves) about a comprehensive range of victimization experiences in the previous year, and then re-assessed (72.3% of baseline sample) after a 1-year interval. The risk for re-victimization in Year 2 was high for children victimized in Year 1, with risk ratios ranging

from 2.2 for physical assault to 6.9 for sexual victimization. Victimization of any one type left substantial vulnerability even for different types of subsequent re-victimization (e.g., property crime victimization was associated with higher risk of sexual victimization the next year). Children with four or more types of victimization in Year 1 ("poly-victims") were at particularly high risk of persisting poly-victimization. Persisting poly-victimization was more likely for children who scored high on anger/aggression and who had recent life adversities. Desistence from poly-victimization was associated with having more good friends. Onset of poly-victimization in Year 2, in contrast to persistence from Year 1, was associated with violent or maltreating families, family problems such as alcohol abuse, imprisonment, unemployment and family disruption. Having more older siblings acted as both a risk factor and a protective factor for different groups of youth. Children previously victimized in 1 year are at higher risk of continued victimization, and the poly-victims are at particular risk. These findings suggest the potential merit of identifying these high-risk children and making them priority targets for prevention efforts.

Finkelhor, D., Ormrod, R., & Turner, H. (2007). Poly-Victimization: A neglected component in child victimization. *Child Abuse and Neglect*, 31(1), 7-26.
DOI:10.1016/j.chiabu.2006.06.008

Objective: To assess the role of multiple victimizations, or what is termed in this article "poly-victimization," in explaining trauma symptomatology. In a nationally representative sample of 2,030 children ages 2-17, assessment was made of the past year's victimization experiences and recent trauma symptoms. Children experiencing four or more different kinds of victimization in a single year (poly-victims) comprised 22% of the sample. Poly-victimization was highly predictive of trauma symptoms, and when taken into account, greatly reduced or eliminated the association between individual victimizations (e.g., sexual abuse) and symptomatology. Poly-victims were also more symptomatic than children with only repeated episodes of the same kind of victimization. Researchers and

practitioners need to assess for a broader range of victimizations, and avoid studies and assessments organized around a single form of victimization.

Finkelhor, D., Ormrod, R. K., & Turner, H. A. (2007). [Polyvictimization and trauma in a national longitudinal cohort](#). *Development and Psychopathology*, 19(1), 149–166.
DOI:10.1017/S0954579407070083

This paper utilizes a national longitudinal probability sample of children to demonstrate how important exposure to multiple forms of victimization (polyvictimization) is in accounting for increases in children's symptomatic behavior. The study is based on two annual waves of the Developmental Victimization Survey that began with a nationally representative sample of children and youth ages 2 to 17. A broad range of victimization experiences were assessed using the 34-item Juvenile Victimization Questionnaire. Eighteen percent of the children experienced four or more different kinds of victimization (polyvictims) in the most recent year. Polyvictimization in the most recent year was highly predictive of trauma symptoms at the end of the year, controlling for prior victimization and prior mental health status. When polyvictimization was taken into account, it greatly reduced or eliminated the association between most other individual victimizations and symptomatology scores.

Holt, M. K., Finkelhor, D., & Kantor, G. K. (2007). [Multiple victimization experiences of urban elementary school students: Associations with psychosocial functioning and academic performance](#). *Child Abuse & Neglect*, 31(5), 503–515.
DOI:10.1016/j.chiabu.2006.12.006

This study explored the victimization experiences of urban elementary school students to determine whether subsets of youth emerged with similar victimization profiles (e.g., no victimization, multiple types of victimization). It also evaluated whether multiple victimization was associated with greater psychological distress and lower academic performance. Participants were 689 fifth grade students from an urban, ethnically diverse

school district in the Northeast. Youth completed self-report measures in school about bullying victimization, victimization in the home and community, and psychosocial functioning. Cluster analysis suggested the existence of three distinct youth profiles: those with minimal victimization, those victimized primarily by their peers, and those with multiple types of victimizations. As hypothesized, youth with multiple victimizations experienced more psychological distress and earned lower grades than their peers. Findings highlight the heterogeneity of youth victimization experiences and their relations to functioning, and have implications for treatment planning among practitioners working with youth. © 2007 Elsevier Ltd. All rights reserved.

Vranceanu, A., Hobfoll, S. E., & Johnson, R. J. (2007). [Child multi-type maltreatment and associated depression and PTSD symptoms: The role of social support and stress](#). *Child Abuse & Neglect*, 31(1), 71–84. DOI:10.1016/j.chiabu.2006.04.010

This retrospective, cross-sectional study explored the hypothesis that multiple forms of child abuse and neglect (child multi-type maltreatment; CMM) would be associated with women's lower social support and higher stress in adulthood, and that this, in turn, would amplify their vulnerability to symptoms of depression and posttraumatic stress disorder (PTSD). Participants were 100 women recruited from an inner-city gynecological treatment center for low-income women. Data were analyzed via structural equation modeling (SEM) with Lisrel 8.0. CMM was directly predictive of decreased social support and increased stress in adulthood. CMM was also directly predictive of PTSD symptoms, but not depression symptoms in adulthood. Social support partially mediated the relationship between CMM and adult PTSD symptoms, and stress fully mediated the relationship between CMM and adult symptoms of depression. Findings support both direct and mediational effects of social resources on adult depression and PTSD symptoms in women with histories of CMM, suggesting that resources are key factors in psychological adjustment of CMM victims.

Turner, H.A., Finkelhor, D., & Ormrod, R. (2006). The effect of lifetime victimization on the mental health of children and adolescents. *Social Science & Medicine*, 6(1), 13-27. DOI:10.1016/j.socscimed.2005.05.030

This paper examines the cumulative prevalence of victimization and its impact on mental health in a nationally representative sample of 2030 children aged 2-17 in the USA. Telephone interviews conducted with both caregivers and youth revealed socio-demographic variations in lifetime exposure to most forms of victimization, with ethnic minorities, those lower in socio-economic status, and those living in single parent and stepfamilies experiencing greater victimization. Sexual assault, child maltreatment, witnessing family violence, and other major violence exposure each made independent contributions to levels of both depression and anger/aggression. Other non-victimization adversities also showed substantial independent effects, while in most cases, each victimization domain remained a significant predictor of mental health. Results suggest that cumulative exposure to multiple forms of victimization over a child's life-course represents a substantial source of mental health risk.

Arata, C. M., Langhinrichsen-Rohling, J., Bowers, D., & O'Farrill-Swails, L. (2005). Single versus multi-type maltreatment: An examination of the long-term effects of child abuse. *Journal of Aggression, Maltreatment & Trauma*, 11(4), 29-52. DOI:10.1300/J146v11n04_02

The purpose of the present study was to identify the long-term impacts of different types of child abuse and to assess differential effects of single versus multi-type maltreatment. Three hundred and eighty-four college students completed measures of child abuse history (neglect, emotional, physical, and sexual abuse), depression, suicidality, self-esteem, sexual behavior, drug and alcohol use, and delinquent behavior. The results demonstrate the high rates of co-occurrence of different types of abuse, with few differential effects identified. Rather, all types of abuse were associated with symptoms. Experiencing multiple types of abuse was associated with greater symptoms than

experiencing no abuse or a single type of abuse. The results highlight the importance of considering all types of abuse when studying child maltreatment.

Finkelhor, D., Ormrod, R., Turner, H., & Hamby, S. L. (2005). [Measuring poly-victimization using the Juvenile Victimization Questionnaire](#). *Child Abuse & Neglect*, 29(11), 1297-1312. DOI:10.1016/j.chiabu.2005.06.005

Objective: Children who experience multiple victimizations (referred to in this paper as poly-victims) need to be identified because they are at particularly high risk of additional victimization and traumatic psychological effects. This paper compares alternative ways of identifying such children using questions from the Juvenile Victimization Questionnaire (JVQ). The JVQ was administered in a national random digit dial telephone survey about the experiences of 2,030 children. The victimizations of children 10–17 years old were assessed through youth self-report on the JVQ and the victimizations of children 2–9 assessed through JVQ caregiver proxy report. Twenty-two percent of the children in this sample had experienced four or more different kinds of victimizations in separate incidents (what we term poly-victimization) within the previous year. Such poly-victimization was highly associated with traumatic symptomatology. Several ways of identifying poly-victims with the JVQ produced roughly equivalent results: a simple count using the 34 victimizations screeners, a count using a reduced set of only 12 screeners, and the original poly-victimization measure using follow-up questions to identify victimizations occurring during different episodes. Researchers and clinicians should be taking steps to identify poly-victims within the populations with which they work and have several alternative ways of doing so.

Finkelhor, D., Ormrod, R., Turner, H., & Hamby, S. L. (2005). The victimization of children and youth: A comprehensive national survey. *Child Maltreatment, 10*(1), 5-25.
DOI:10.1177/1077559504271287

This study examined a large spectrum of violence, crime, and victimization experiences in a nationally representative sample of children and youth ages 2 to 7 years. More than one half (530 per 1,000) of the children and youth had experienced a physical assault in the study year, more than 1 in 4 (273 per 1,000) a property offense, more than 1 in 8 (136 per 1,000) a sexual victimization, and more than 1 in 3 (357 per 1,000) had been a witness to violence or experienced another form of indirect victimization. Only a minority (29%) had no direct or indirect victimization. The mean number of victimizations for a child or youth with any victimization was 3.0, and a child or youth with one victimization had a 69% chance of experiencing another during a single year.

Dong, M., Anda, R. F., Felitti, V. J., Dube, S. R., Williamson, D. F., Thompson, T. J., Loo, C. M., & Giles, W. H. (2004). The interrelatedness of multiple forms of childhood abuse, neglect, and household dysfunction. *Child Abuse & Neglect, 28*(7), 771-784.
DOI:10.1016/j.chiabu.2004.01.008

Childhood abuse and other adverse childhood experiences (ACEs) have historically been studied individually, and relatively little is known about the co-occurrence of these events. The purpose of this study is to examine the degree to which ACEs co-occur as well as the nature of their co-occurrence. We used data from 8,629 adult members of a health plan who completed a survey about 10 ACEs which included: childhood abuse (emotional, physical, and sexual), neglect (emotional and physical), witnessing domestic violence, parental marital discord, and living with substance abusing, mentally ill, or criminal household members. The bivariate relationship between each of these 10 ACEs was assessed, and multivariate linear regression models were used to describe the interrelatedness of ACEs after adjusting for demographic factors. Two-thirds of participants reported at least one ACE; 81%–98% of respondents who had experienced one ACE reported at least one additional ACE (median: 87%). The presence of one ACE

significantly increased the prevalence of having additional ACEs, elevating the adjusted odds by 2 to 17.7 times (median: 2.8). The observed number of respondents with high ACE scores was notably higher than the expected number under the assumption of independence of ACEs ($p < .0001$), confirming the statistical interrelatedness of ACEs. The study provides strong evidence that ACEs are interrelated rather than occurring independently. Therefore, collecting information about exposure to other ACEs is advisable for studies that focus on the consequences of a specific ACE. Assessment of multiple ACEs allows for the potential assessment of a graded relationship between these childhood exposures and health and social outcomes.

Stanley, J., & Goddard, C. (2004). Multiple forms of violence and other criminal activities as an indicator of severe child maltreatment. *Child Abuse Review*, 13(4), 246–262. DOI:10.1002/car.855

Child protection practice still appears to view child maltreatment as an event largely isolated from other family violence and criminal activities. Research undertaken by the authors suggests that children who have been subjected to the more severe forms of abuse are likely to have come from families who engage in several forms of criminal activity, inside and outside the family, which is often severe in nature. The child who has been maltreated may also become a participant in these activities. The authors recommend that these factors should be investigated in families who have maltreated a child, as the presence or absence of several forms of concurrent violence and other criminal activity may provide an important clue about the welfare of the child.

Clemmons, J. C., DiLillo, D., Martinez, I. G., DeGue, S., & Jeffcoat, M. (2003). [Co-occurring forms of child maltreatment and adult adjustment reported by Latina college students](#). *Child Abuse & Neglect*, 27(7), 751–767. DOI: 10.1016/S0145-2134(03)00112-1

This study had two primary objectives: First, to examine the nature and co-occurrence of various forms of child maltreatment (sexual, physical, emotional, and witnessing violence) reported by Latina college students, and second, to explore coexisting maltreatment types and acculturation status as possible contributors to long-term adjustment difficulties. Participants were 112 Latina undergraduate students categorized by the number of childhood maltreatment types experienced (0, 1, or 2 or more) and acculturation level (1 to 5). The possible effects of co-occurring forms of maltreatment, in conjunction with acculturation status, were investigated with respect to participants' reported trauma symptomatology. Data were collected using self-report measures. Nearly three out of 10 participants (29%) experienced more than one type of child maltreatment and, as expected, these individuals reported greater trauma symptomatology than those reporting either a single type of maltreatment or no maltreatment at all. Those who reported multiple types also endured more severe maltreatment than did respondents who experienced a single type. Acculturation level was neither directly related to trauma symptoms nor did it moderate the lasting correlates of maltreatment among victims. Interestingly, those who experienced a single form of maltreatment reported no more trauma symptoms than did participants who reported no maltreatment history at all. This investigation documents a large degree of overlap among various forms of self-reported childhood maltreatment within a Latina college population. The results underscore the need to consider multiple forms of maltreatment, as well as severity, when making inferences regarding potential effects on later functioning.

Cook, A., Blaustein, M., Spinazzola, J., & van der Kolk, B. (Eds.) (2003). [Complex trauma in children and adolescents](#). National Child Traumatic Stress Network.

The present paper highlights seven primary domains of impairment observed in children exposed to complex trauma. These phenomenologically based domains have been identified based on the extant child clinical and research literatures, the adult research on “Disorders of Extreme Stress Not Otherwise Specified” (Pelcovitz et al, 1997; van der Kolk, Pelcovitz, Roth, Mandel, McFarlane, & Herman, 1996; van der Kolk, Roth, et al., in press), and the combined expertise of the NCTSN Complex Trauma Taskforce.

Edwards, V. J., Holden, G. W., Felitti, V. J., & Anda, R. F. (2003). [Relationships between multiple forms of childhood maltreatment and adult mental health in community respondents: Results from the Adverse Childhood Experiences Study](#). *American Journal of Psychiatry*, 160(8), 1453–1460. DOI:10.1176/appi.ajp.160.8.1453

This study examined the prevalence of a history of various combinations of childhood maltreatment types (physical abuse, sexual abuse, and witnessing of maternal battering) among adult members of a health maintenance organization (HMO) and explored the relationship with adult mental health of the combinations of types of childhood maltreatment and emotional abuse in the childhood family environment. A total of 8,667 adult members of an HMO completed measures of childhood exposure to family dysfunction, which included items on physical and sexual abuse, witnessing of maternal battering, and emotional abuse in the childhood family environment. The adults' current mental health was assessed by using the mental health scale of the Medical Outcomes Study 36-item Short-Form Health Survey. The prevalences of sexual abuse, physical abuse, and witnessing of maternal violence were 21.6%, 20.6%, and 14.0%, respectively, when the maltreatment types were considered separately. Among respondents reporting any of the maltreatment types, 34.6% reported more than one type of maltreatment. Lower mean mental health scores were associated with higher numbers of abuse categories (mean=78.5, 75.5, 72.8, and 69.9 for respondents with no, one, two,

and three abuse types, respectively). Both an emotionally abusive family environment and the interaction of an emotionally abusive family environment with the various maltreatment types had a significant effect on mental health scores. Childhood physical and sexual abuse, as well as witnessing of maternal battering, were common among the adult members of an HMO in this study. Among those reporting any maltreatment, more than one-third had experienced more than one type of maltreatment. A dose-response relation was found between the number of types of maltreatment reported and mental health scores. In addition, an emotionally abusive family environment accentuated the decrements in mental health scores. Future research examining the effects of childhood maltreatment on adult mental health should include assessments of a wide range of abusive experiences, as well as the family atmosphere in which they occur.

Banyard, V. L., Williams, L. M., & Siegel, J. A. (2001). The long-term mental health consequences of child sexual abuse: An exploratory study of the impact of multiple traumas in a sample of women. *Journal of Traumatic Stress, 14*(4), 697-715. DOI:10.1023/A:1013085904337

The current study examined exposure to multiple traumas as mediators of the relationship between childhood sexual abuse and negative adult mental health outcomes. Participants were 174 women interviewed in the third wave of a longitudinal study of the consequences of child sexual abuse. Child sexual abuse victims reported a lifetime history of more exposure to various traumas and higher levels of mental health symptoms. Exposure to traumas in both childhood and adulthood other than child sexual abuse mediated the relationship between child sexual abuse and psychological distress in adulthood. There were also some significant direct effects for child sexual abuse on some outcome measures. Results point to the importance of understanding the interconnected nature of trauma exposure for some survivors.

Dube, S. R., Anda, R. F., Felitti, V. J., Croft, J. B., Edwards, V. J., & Giles, W. H. (2001). Growing up with parental alcohol abuse: Exposure to childhood abuse, neglect, and household dysfunction. *Child Abuse & Neglect*, 25(12), 1627-1640.
DOI:10.1016/S0145-2134(01)00293-9

This study is a detailed examination of the association between parental alcohol abuse (mother only, father only, or both parents) and multiple forms of childhood abuse, neglect, and other household dysfunction, known as adverse childhood experiences (ACEs). A questionnaire about ACEs including child abuse, neglect, household dysfunction, and exposure to parental alcohol abuse was completed by 8629 adult HMO members to retrospectively assess the relationship of growing up with parental alcohol abuse to 10 ACEs and multiple ACEs (ACE score). Compared to persons who grew up with no parental alcohol abuse, the adjusted odds ratio for each category of ACE was approximately 2 to 13 times higher if either the mother, father, or both parents abused alcohol ($p < 0.05$). For example, the likelihood of having a battered mother was increased 13-fold for men who grew up with both parents who abused alcohol (OR, 12.7; 95% CI: 8.4-19.1). For almost every ACE, those who grew up with both an alcohol-abusing mother and father had the highest likelihood of ACEs. The mean number of ACEs for persons with no parental alcohol abuse, father only, mother only, or both parents was 1.4, 2.6, 3.2, and 3.8, respectively ($p < .001$). Although the retrospective reporting of these experiences cannot establish a causal association with certainty, exposure to parental alcohol abuse is highly associated with experiencing adverse childhood experiences. Improved coordination of adult and pediatric health care along with related social and substance abuse services may lead to earlier recognition, treatment, and prevention of both adult alcohol abuse and adverse childhood experiences, reducing the negative sequelae of ACEs in adolescents and adults.

Higgins, D. J., & McCabe, M. P. (2001). Multiple forms of child abuse and neglect: Adult retrospective reports. *Aggression and Violent Behavior, 6*(6), 547–578.
DOI:10.1016/S1359-1789(00)00030-6

There are few research reports of the experience of multiple forms of child abuse and neglect (multi-type maltreatment). A critical review is presented of 29 studies in which adult retrospective reports of more than one form of child maltreatment (sexual abuse, physical abuse, psychological maltreatment, neglect, or witnessing family violence) are assessed. Empirical investigations of the extent and impact of multi-type maltreatment are identified. Data on the relationship between the different forms of maltreatment and the adjustment problems associated with each type of maltreatment are critiqued. As well as using dichotomous measures of maltreatment, an important methodological problem was the failure of researchers to assess all child maltreatment types, the relationship between multi-type maltreatment and adjustment, and the role of variables influencing the occurrence or impact of maltreatment. Considerable overlap was found in the occurrence of maltreatment types. The compounding or interacting effects of experiencing multi-type maltreatment were ignored in many studies. Where an assessment was made of the specific impact of multi-type maltreatment, it was associated with greater impairment than single forms of abuse or neglect. A multidimensional approach to prevention and treatment of child abuse and neglect is required in which children's vulnerability to multi-type maltreatment is addressed.

Mitchell, K. J., & Finkelhor, D. (2001). Risk of crime victimization among youth exposed to domestic violence. *Journal of Interpersonal Violence, 16*(9), 944–964.
DOI:10.1177/088626001016009006

Explored the degree to which youth are at higher risk of crime victimization when they live in a household with an adult who has been the victim of domestic violence or another violent crime. Combined data targeting 8,267 12–17 yr olds in the 1996, 1997, and 1998 National Crime Victimization Surveys show a generally higher victimization risk for youth

who live in households with a victimized adult. The risk is elevated for youth from households with adult victims of both domestic and other nondomestic violence. Girls living in households with an adult victim of domestic violence appear to be at particularly high risk for crime victimization. Some of the added risk for such youth appears to be from family members. These findings reinforce the need to direct crime prevention and detection efforts toward youth in households in which an adult has been victimized.

Higgins, D. J., & McCabe, M. P. (2000). Multi-type maltreatment and the long-term adjustment of adults. *Child Abuse Review*, 9(1), 6-18. DOI:10.1002/(SICI)1099-0852(200001/02)9:1<6::AID-CAR579>3.0.CO;2-W

Multi-type maltreatment refers to the experience of more than one form of child maltreatment (sexual abuse, physical abuse, psychological maltreatment, neglect and witnessing family violence). Researchers have largely ignored the presence of other types of child abuse and neglect when examining the adjustment problems associated with a particular form of maltreatment. The association between 'multi-type maltreatment' and adjustment was explored in the current study. Retrospective data were obtained on (a) the degree to which maltreatment types co-occurred, (b) childhood family characteristics and (c) adjustment problems in adulthood in an Australian self-selected community sample (N = 175). As hypothesized, a large degree of overlap was reported in the experience of the types of maltreatment. Family characteristics-particularly family cohesion and adaptability-discriminated between respondents reporting single-type and multi-type maltreatment. Greater adjustment problems were associated with reports of a larger number of different maltreatment types. Multi-type maltreatment should be recognized as a crucial aspect of the nature and impact of child maltreatment and considered in the development of programmes for the prevention and treatment of child abuse and neglect. © 2000 John Wiley & Sons, Ltd.

Culbertson, J. L., & Willis, D. J. (1998). Interventions with young children who have been multiply abused. *Journal of Aggression, Maltreatment & Trauma*, 2(1), 207-232. DOI:10.1300/J146v02n01_12

This article provides an overview of theory-driven interventions for young children who have been multiply abused and their families. The interventions are based primarily upon two theories: (1) Developmental-ecological theory provides a conceptual framework for understanding the context of abuse, and for planning effective interventions for the individual, the parents, and the family, and other social contexts; (2) Attachment theory provides a conceptual framework for understanding the disordered parent/child relationships that can lead to or result from maltreatment, and can suggest directions for intervention.

Murray, C. C., & Son, L. (1998). The effect of multiple victimization on children's cognition: Variations in response. *Journal of Aggression, Maltreatment & Trauma*, 2(1), 131-146. DOI:10.1300/J146v02n01_08

Children's experience of multiple forms of abuse is regarded as traumatic, with the effect of trauma on attention and perception being the closest to a universal response to multiple victimization that may be discovered. Unique responses are a function of cultural and familial expectations, developmental level, and individual differences. Children's attributions of meaning and subsequent behaviors depend heavily on the interplay between experience, thought and action. Professionals working with multiply victimized children need to understand children's understandings and cognitive capacities in order to devise the most effective interventions.

Rossman, B. B. R., & Rosenberg, M. S. (1998). The multiple victimization of children: Incidence and conceptual issues. *Journal of Aggression, Maltreatment & Trauma*, 2(1), 1-5. DOI:10.1300/J146v02n01_01

Incidence of different types of child abuse is reported and the issue of co-occurrence of different types of abuse and adversity is raised. Three dimensions along which multiple victimization may be considered are proposed. A paradigm shift is recommended wherein professionals concerned with child abuse take into consideration all of the sources of abuse and adversity in a child's life circumstance, remaining cognizant of the child's developmental position, tasks and needs. Confronting this complexity will advance our understanding of child abuse and lead to more productive interventions and policies to support the growth and well-being of children.

Shirk, S. R., & Eltz, M. (1998). Multiple victimization and the process and outcome of child psychotherapy. *Journal of Aggression, Maltreatment & Trauma*, 2(1), 233-251. DOI:10.1300/J146v02n01_13

Maltreated youngsters present a complex picture of treatment needs. This is nicely illustrated by a review of the treatment outcome research with abused children. Prominent among their treatment issues are relationship problems and poor emotion regulation strategies. The treatment relationship and process variables in psychotherapy are of particular concern with maltreated children. Concepts and research in these areas are reviewed. Finally, the recommendation is made that multiply victimized children need a comprehensive, multi-component approach to treatment.

Sonkin, D. J., & Liebert, D. S. (1998). Legal and ethical issues in the treatment of multiply victimized children. *Journal of Aggression, Maltreatment & Trauma*, 2(1), 297–316.
DOI:10.1300/J146v02n01_16

The article discusses several common legal and ethical issues faced by clinicians when treating families where singular and multiple child victimization is an issue. The authors differentiate between legal requirements and ethical mandates, explore factors affecting reporting decisions, how dual relationships compromise treatment process, and clinicians' scope of competence and professional knowledge in child maltreatment cases. Each issue is addressed within the context of responding to cases where a child(ren) has been multiply victimized.

Claussen, A. H., & Crittenden, P. M. (1991). [Physical and psychological maltreatment: Relations among types of maltreatment](#). *Child Abuse & Neglect*, 15(1-2), 5-18.
DOI:10.1016/0145-2134(91)90085-R

Maltreatment has serious consequences for the development of children. The reason for the negative outcomes is not, however, fully understood. This study investigated the hypotheses that psychological maltreatment would be present in almost all cases of physical maltreatment and that it would be more related to detrimental outcomes for children than would severity of injury. A sample of 175 maltreated children, 39 children in mental health treatment, and 176 normative children was assessed for type and severity of maltreatment. Both hypotheses were supported. In addition, evidence is provided that psychological maltreatment can occur alone, that assessments of parental psychological maltreating behavior and negative child outcomes are highly correlated, and that child age and gender unrelated to psychological maltreatment in young children whereas family income is related. Implications for investigation and treatment are considered.