The Nature of Victimization
The Typical Victimization and Victim

The Costs of Victimization
Economic Costs
System Costs
Crime File 4.1 The Story of James
Mental Health Consequences and Costs
Fear of Crime
Recurring Victimization

Theories of Victimization
The Role of the Victim in Crime
Crime File 4.2 When Offender Becomes Victim
Routine Activities and Lifestyles Theory
Structural Causes of Victimization

Caring for the Victim
Victims' Rights
Victim Remedies and Services

Summary
Key Concepts
Review Questions
Web Sources
Web Exercises
Selected Readings
What Is Victimology?

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One of the most neglected subjects in the study of crime is its victims.
—The President’s Commission on Law Enforcement and the Administration of Justice (1967)

The term victimology is not new. In fact, Benjamin Mendelsohn first used it in 1947 to describe the scientific study of crime victims. Oftentimes considered a subfield of criminology, the two fields do share much in common. Just as criminology is the study of criminals—what they do, why they do it, and how the criminal justice system responds to them—victimology is the study of victims. Victimology, then, includes the study of the etiology (or causes) of victimization, of its consequences, of how the criminal justice system accommodates and assists victims, and of how other elements of society such as the media deal with crime victims. Victimology is a science; victimologists use the scientific method to answer questions about victims. For example, instead of simply wondering or hypothesizing about why younger people are more likely to be victims than older people, victimologists conduct research to attempt to identify the reasons why younger people appear to be more vulnerable.

The Nature of Victimization

We can learn about the extent to which persons are victimized by examining official data sources such as the Uniform Crime Report and surveys such as the National Crime Victimization Survey. Recall from Chapter 2 that the UCR is an official data source that shows the amount of crimes known to police each year. According to the UCR, in 2008, the police became aware of 1,382,012 violent crimes and 9,767,915 property crimes. The most common offense was larceny-theft. Aggravated assaults were the most common violent crime, although they were outnumbered by larceny-thefts. Each year, the BJS publishes Criminal Victimization in the United States, which is a report about crime victimization as measured by the NCVS. In Chapter 2, you also learned that the NCVS is a victimization survey in which persons are asked about their victimization experiences in the previous 6 months. From this report, we can see what the most typical victimizations are and who is most likely to be victimized. In 2010, a total of 18.7 million victimizations were experienced by the nation’s households (Rand, 2009). Property crimes were much more likely to be experienced as compared to violent crimes. Although 3.8 million violent crime victimizations were experienced, 14.8 million property crime victimizations occurred. The most common type of property crime experienced was theft, while simple assault was most commonly reported. As can be seen in Figure 4.1, the property crime victimization rate has been declining over the long term. A similar pattern is seen in Figure 4.2, which displays the violent crime victimization rate since 1993.
**FIGURE 4.1** Property Crime Victimization Rate in the United States, 1993–2010

Rate per 1,000 households

*Due to methodological changes, use caution when comparing 2006 NCVS criminal victimization estimates to other years.*


**FIGURE 4.2** Violent Crime Victimization Rate in the United States, 1993–2010

Rate per 1,000 persons age 12 or older

*Due to methodological changes, use caution when comparing 2006 NCVS criminal victimization estimates to other years.*

The Typical Victimization and Victim

The typical crime victimization can also be identified from the NCVS. Less than half of all victimizations experienced by individuals in the NCVS are reported to the police. This may be in part related to the fact that most victims of violent crime knew their offender. Most often, victims identified their attacker as a friend or acquaintance. Strangers only accounted for about one third of violent victimizations in the NCVS. In only 1 in 5 incidents did the offender have a weapon. This may be one of the reasons why most victimizations do not result in physical injury—about one fourth of assaults do, while 35 percent of robbery victims suffer a physical injury (Bureau of Justice Statistics, 2006a). Certain characteristics of victims are also evident. We can tell from the NCVS what gender, race/ethnicity, age group, and households are most likely to be victimized.

Gender

Historically, the NCVS has shown that for all violent victimizations except for rape and sexual assaults, males are more likely to be victimized than females. In 2010, however, this gender gap in violent victimization was less evident—males and females had similar rates of violent victimization, although females remained at an increased risk of experiencing rape and sexual assault compared to males (Truman, 2011). One difference between male and female victims is who offends against them. Females are more likely than males to be victimized by an intimate partner. In 2010, a total of 22 percent of violent victimization incidents against females were perpetrated by an intimate partner compared to 5 percent of incidents involving male victims (Truman, 2011).

Race and Ethnicity

The NCVS also indicates that persons of certain races/ethnic groups are at higher risks of experiencing violent victimizations than others. Persons who are black have higher victimization rates than those who are white or Hispanic (20.8 per 1,000 persons compared to 13.6 per 1,000 and 15.6 per 1,000, respectively). Those who reported being of two or more races (52.6 per 1,000) or who are American Indian or Alaska Natives (42.2 per 1,000), however, had the highest rates of violent victimization in 2010 (Truman, 2011).

Age

Age is also a risk factor for victimization. Persons who are young face the greatest risk of becoming a victim of violent crime. Individuals between the ages of 18 and 20 years have the highest violent victimization rate, followed by 21- to 24-year-olds. Persons aged 12 to 14 years are more likely to be violently victimized than persons 50 and older (Truman, 2011).

Household Characteristics

Characteristics of the household also play a role in victimization risk. Households in which the total income is low are more likely to experience property victimization than other households. But how low of a total income places a household at risk? Households in the lowest income categories—those earning less than $7,500 or
between $7,500 and $14,999 annually—faced the greatest risk of burglary and theft. Households earning less than $7,500 had a burglary victimization rate that was twice the rate of households whose income was $75,000 per year or higher. The size of the household also matters. The greater the number of people in the household, the greater the property victimization rate. In fact, households with six or more people in them had a property crime victimization rate that was almost 2.5 times higher than single-headed households (Truman, 2011).

The Costs of Victimization

Victimologists are not only concerned with who becomes a crime victim, but also the varied costs associated with being a victim of crime. These costs can be economic, but victimization can also take a toll on a victim's mental health and ability to work.

Economic Costs

Economic costs of victimization include those experienced by the victim and those the public incurs. In this sense, victimization is a public health issue. Economic costs can result from property losses; monies associated with medical care; time lost from work, school, and housework; pain, suffering, and reduced quality of life; and legal fees. In 2008, the total economic loss from crimes was estimated to be $17,397 billion by the National Crime Victimization Survey (Bureau of Justice Statistics, 2009). The NCVS also shows that the median dollar amount of loss attributed to crime when there was a loss was $200. Although this number may appear to be low, it largely represents the fact that the typical property crime is a simple larceny-theft.

Direct Property Losses

Crime victims often experience tangible losses in terms of having their property damaged or taken. Generally, when determining property losses, the value of property that is damaged or taken and not recovered as well as insurance claims administration costs are considered. According to the NCVS, in 2008, a total of 94 percent of property crimes resulted in economic losses (Bureau of Justice Statistics, 2009). In one of the most comprehensive reports sponsored by the National Institute of Justice on the costs of victimizations, Ted Miller, Mark Cohen, and Brian Wiersema (1996) estimated the property loss or damage experienced per crime victimization event. They found that arson victimizations resulted in an estimated $15,500 per episode. Motor vehicle theft cost approximately $3,300 for each incident. Personal crime victimizations typically do not result in as much direct property losses. For example, only 18 percent of personal crime victimizations resulted in economic loss. Rape and sexual assaults typically result in $100 of property loss or damage. It is very rare for a victim of a violent or property offense to recover some of his or her losses. In only about 1 in 10 instances do victims recover all or some property (Bureau of Justice Statistics, 2009).

Medical Care

To be sure, many victims would gladly suffer property loss if it meant they did not experience any physical injury. After all, items can be replaced and damage repaired. Physical injury, on the other hand, may lead to victims having to seek medical attention, which for some may be the first step in accumulating costs associated with their victimization. Medical care costs encompass costs of transporting victims to the hospital, care by a doctor, prescription drugs, allied health services, medical devices, coroner costs, insurance claims processing costs, and premature funeral expenses (Miller et al., 1996).
Results from the NCVS indicate that in 2008, a total of 542,280 violent crime victims received some type of medical care (Bureau of Justice Statistics, 2009). Of those victims, about 33 percent received care at a hospital emergency room or an emergency clinic and 9 percent were hospitalized. Receiving medical care often results in victims incurring medical expenses. Almost 8 percent of victims of violence report having medical expenses as a result of being victimized (Bureau of Justice Statistics, 2007). About 65 percent of injured victims had health insurance or were eligible for public medical services.

Costs vary across types of victimization. For example, the annual cost of hospitalizations for victims of child abuse is estimated to be $6.2 billion (Prevent Child Abuse America, 2000). Medical treatment for battered women is estimated to be $1.8 billion annually (Wisner, Gilmer, Saltman, & Zink, 1999). Per-criminal victimization medical care costs have also been estimated. Assaults in which there were injuries cost $1,470 per incident. Drunk driving victims who were injured incurred $6,400 apiece in medical care costs (Miller et al., 1996).

Gun violence is associated with substantial medical costs for victims. Although most crime victims do not require hospitalization, even if they are treated in the emergency room, a report on gun violence published by the Office for Victims of Crime showed that gunshot victims make up one third of those who require hospitalization (cited in Bonderman, 2001). Persons who are shot and admitted to the hospital are likely to face numerous re-hospitalizations and incur medical costs across their lifetime. In 1994, for all victims of firearm injuries, the lifetime medical costs totaled $1.7 billion (P. J. Cook, Lawrence, Ludwig, & Miller, 1999, cited in Bonderman). Spinal cord injuries are particularly expensive, with average totals for first-year medical costs alone reaching over $217,000. The average cost per victim of spinal cord injury related to violence is over $600,000 (DeVito, 1997, cited in Bonderman).

**Mental Health Care Costs**

When victims seek out mental health care, this also adds to their total losses. It is estimated that between 10 and 20 percent of total mental health care costs in the United States is related to crime (Miller et al., 1996). Most of this cost is a result of crime victims seeking treatment to deal with the effects of their victimization. Between one quarter and one half of rape and child sexual abuse victims receive mental health care. As a result, sexual victimizations, of both adults and children, result in some of the largest mental health care costs for victims. The average mental health care cost per rape and sexual assault is $2,200; for child abuse, it is $5,800. Victims of arson who are injured incur about $10,000 per victimization in mental health care expenditures. Victimization may also take a toll on other persons. The average murder results in between 1.5 and 2.5 people receiving mental health counseling (Miller et al., 1996).

**Losses in Productivity**

Persons who are victimized may experience an inability to work at their place of employment, complete housework, or attend school. Not being able to do these things contributes to the total lost productivity that crime victims experience. In 2008, about 7 percent of persons who said they had been violently victimized in the NCVS lost some time from work. About the same percentage of victims of property offenses lost time from work. Some victims are more prone to miss work than others. Almost one fourth of motor vehicle theft victims miss at least 1 day of work (Bureau of Justice Statistics, 2009). Data from the NCVS show that 18 percent of rape and sexual assault victims missed more than 10 days from work (NCVS, 2006), while victims of intimate partner violence lose almost 8 million paid days from work annually (Centers for Disease Control and Prevention [CDC], 2003). Employers also bear some costs when their employees are victimized; the victimized employees may be less productive, the employers may incur costs associated with hiring replacements, and they may experience costs dealing with the emotional responses of their employees. Parents also may incur costs when their children are victimized and they are unable to meet all of their job responsibilities as a result of doing things like taking the child to the doctor or staying home with the child (Miller et al., 1996).

**Pain, Suffering, and Lost Quality of Life**

The most difficult cost to quantify is the pain, suffering, and loss of quality of life that crime victims experience. When these elements are added to the costs associated with medical care, lost earnings, and programs associated with victim assistance, the cost to crime victims increases fourfold. In other words, this is the largest cost that crime victims sustain. For example, one study estimated the cost to rape victims in terms of out-of-pocket expenses to be slightly less than $5,100. The crime of rape, however, on average, costs $87,000 when its impact on quality of life is considered (Miller et al., 1996).
Another cost that crime victims may experience is a change in their routines and lifestyle. Many victims report that after being victimized, they changed their behavior. To illustrate, victims of stalking may change their phone number, move, or change their normal routine. Others may stop going out alone or start carrying a weapon when they do so. Although these changes may reduce the risk of being victimized again, for victims to bear the cost of crime seems somewhat unfair.

System Costs

The victim is not the only entity that is impacted economically as a result of crime. The United States in general spends an incredible amount of money on criminal justice. When including costs for law enforcement, the courts, and corrections, the direct expenditures of the criminal justice system are over $214 billion annually (BJS, 2006a). The criminal justice system employs over 2.4 million persons, whose payroll tops $9 billion. Obviously, crime is big business in the United States!

Insurance companies pay approximately $45 billion annually due to crime. The federal government also pays $8 billion annually for restorative and emergency services to crime victims. There are other costs that society must absorb as a result of crime. For example, it costs Americans when individuals who are not insured or who are on public assistance are victimized and receive medical care. The U.S. government covers about one fourth of health insurance payouts to crime victims. Gunshot victims alone cost taxpayers over $4.5 billion dollars annually (Headden, 1996). These costs are not distributed equally across society. Some communities have been hit particularly hard by violence, gun violence in particular. Some 96 percent of hospital expenses associated with gun violence at King/Drew Medical Center in Los Angeles are paid for with public funds (Bonderman, 2001). See Crime File 4.1 to better understand the costs of gun violence.

Crime File 4.1

The Story of James

James, 45, was shot in the knee on Sept. 9 as he sat in a car with another man, who died of his wounds at the scene. James’ injuries, which also included a hole in the arm and fragments in the eye, were not near vital organs.

His knee looked bad when he came into Froedtert’s trauma center, but that turned out to be just the beginning. The next day, he aspirated as a breathing tube was being inserted during surgery, and contents from his stomach got into his lungs.

“It is kind of like a chemical burn,” trauma surgeon James Feeney said.

James had to stay in intensive care on a ventilator and heavily sedated for almost two weeks, while his hospital charges ballooned. For about a week, he was on drugs that essentially paralyzed most of his muscles. When he began to regain consciousness, he suffered another setback, called ICU psychosis. The maddening disorder is believed to be caused by a variety of factors in intensive care, including breathing tubes, lights, beeping noises, a lack of sleep and sensory deprivation or overload. It can make patients temporarily insane.

“His agitation was so severe every time we tried to take him off (the ventilator), he would get crazy and wild,” Feeney said.

James eventually got out of intensive care and has improved dramatically. Doctors say they think they have saved his leg, although they don’t know how functional it will be. They also don’t know how much vision he lost. He is likely to need more surgeries on both the knee and the eye, Feeney said. He also will need extensive physical therapy.

“The truth is, a lot of these guys would have died 20 years ago before we had an organized system of trauma care,” Feeney said.

After a call that started off as a man shot in the leg, he spent nearly six weeks in Froedert. When he was discharged Oct. 20, the hospital charges—which will be billed to Medicare—topepd $277,000.

Medicare caps reimbursement for shooting cases at $36,000, said Blaine O’Connell, Froedert’s chief financial officer. Medicaid and Milwaukee County’s General Assistance Medical Program also pay only a fraction of the hospital’s charges.

And for many uninsured patients, the hospital may collect even less, he said.

Ultimately, the losses on all those cases are factored into the rates the hospital must charge private insurers.

Mental Health Consequences and Costs

It was first recognized in the late 1800s that people differentially respond to trauma, including victimization. Some people may cope by internalizing their feelings and emotions, while others may experience externalizing responses. It is likely that the way people deal with victimization is tied to their biological makeup, their interactional style, their coping style and resources, their equilibrium, and the context in which the incident occurs and in which they operate thereafter. Some of the responses can be quite serious and long-term, while others may be more transitory.

Three affective responses that are common among crime victims are depression, reductions in self-esteem, and anxiety. The way in which depression manifests itself varies greatly across individuals. It can include having sleep disturbances, changes in eating habits, feelings of guilt and worthlessness, and irritability. Generally, depressed persons will have a general decline in interest in activities they once enjoyed, a depressed mood, or both. Depression is a common outcome for youth who are victimized by their peers, such as in being bullied (Sweeting, Young, West, & Der, 2006). With the advent of technology and the widespread use of the Internet, recent research has explored online victimization and its effects. Online victimization will often trigger a depressive response in victims (Tynes & Giang, 2009).

Victimization may be powerful enough to alter the way in which a crime victim views himself- or herself. Self-esteem and self-worth have both been found to be reduced in some crime victims, particularly female victims. In one study of youth in Virginia, Amie Grills and Thomas Ollendick (2002) found that for girls, being victimized by peers was associated with a reduction in global self-worth, and their self-worth was related to elevated levels of anxiety. There may also be a difference in crime’s impact on self-appraisals based on the type of victimization experienced. For example, victims of child sexual abuse are likely to suffer long-term negative impacts to their self-esteem (Cutler & Nolen-Hoeksema, 1991). Sexual victimization has also been linked to reductions in self-esteem (Turner, Finkelhor, & Ormrod, 2010).

Anxiety is another consequence that is linked to victimization, as mentioned above. Persons who suffer from anxiety are likely to experience a range of emotional and physical symptoms. Much like depression, however, anxiety affects people in different ways. Most notably, anxiety often manifests as an irrational and excessive fear and worry, which may be coupled with tension and restlessness, vigilance, irritability, and difficulty concentrating. In addition, because anxiety is a product of the body’s fight-or-flight response, it also has physical symptoms. These include a racing and pounding heart, sweating, stomach upset, headaches, difficulty sleeping and breathing, tremors, and muscle tension (Dryden-Edwards, 2007).

Although anxiety that crime victims experience may not escalate to a point where they are diagnosed with an anxiety disorder by a mental health clinician, victimization does appear to be linked to anxiety symptoms. For example, adolescents who experience victimization by their peers experience anxiety at higher levels than non-victimized adolescents (Storch, Brassard, & Masia-Warner, 2003). The relationship between anxiety and victimization is complex in that victimization can lead to anxiety, but anxiety and distress are also precursors to victimization (Siegel, La Greca, & Harrison, 2009). Some victims do experience mental health consequences tied to anxiety that lead to mental health diagnoses.

Post-Traumatic Stress Disorder

One of the recognized disorders associated with a patterned response to trauma, such as victimization, is post-traumatic stress disorder (PTSD). Commonly associated with individuals returning from war and combat, PTSD is a psychiatric condition that recently has been recognized as a possible consequence of other traumatic events, such as criminal victimization. Currently classified by the American Psychiatric Association in the Diagnostic and Statistical Manual of Mental Disorders (4th edition, text revision, known as DSM-IV-TR) as an anxiety disorder, PTSD is diagnosed based on several criteria. A person must have experienced or witnessed a traumatic event that involved actual or threatened death or serious injury to the self or others, or threat to the physical integrity of the self or others. The person must experience fear, helplessness, or horror in response to the event, and the trauma is then reexperienced by the person over time via flashbacks, nightmares, images, or reliving the event. The person must avoid stimuli associated with the traumatic event and experience numbness of response, such as lack of affect and reduced interest in activities. Finally, PTSD is characterized by hyperarousal. In order for PTSD to be diagnosed, symptoms must be experienced for more than 1 month and must cause clinically significant distress or impairment in social, occupational, or other functional areas (American Psychological Association [APA], 2000). As you might imagine, PTSD can be debilitating, and can impact a victim’s ability to heal, move on, and thrive after being victimized.

Although it is difficult to know how common PTSD is for all crime victims, some studies suggest that PTSD is a real problem. Estimates of PTSD for persons who have been victimized are around 25 percent. Lifetime
incidence of PTSD for persons who have not experienced a victimization are 9 percent. Depression also commonly co-occurs in victims who suffer PTSD (Kilpatrick & Acierno, 2003). Research has shown that victims of sexual assault or aggravated assault and persons whose family members were homicide victims were more likely than other crime victims to develop PTSD (Kilpatrick & Tidwell, 1989). In support of this link, the occurrence of PTSD in rape victims has been estimated to be almost 1 in 3 (Kilpatrick, Edmunds, & Seymour, 1992).

**Self-Blame and Learned Helplessness**

After people are victimized, they may blame themselves for their victimization. One form of this is **characterological self-blame**, which occurs when a person ascribes blame to a non-modifiable source such as one’s character. In this way, characterological self-blame involves believing that victimization is deserved. Another type is **behavioral self-blame**, which occurs when a person ascribes blame to a modifiable source—behavior (Janoff-Bulman, 1979). When a person turns to behavioral self-blame, a future victimization can be avoided, so long as behavior is changed.

In addition to self-blame, others may experience **learned helplessness** following a victimization, which is a learned response to victimization. Victims learn that responding is futile, and they become passive and numb (Seligman, 1975). In this way, victims may not activate in the face of danger and, instead, may be at risk of subsequent victimization experiences.

**Fear of Crime**

Another cost associated with victimization is fear. Fear is an emotional response to a perceived threat (Ferraro & LaGrange, 1987). Persons do not have to be victims of crime to be fearful. In fact, research shows that some groups who are actually less likely to be victimized have higher levels of fear of crime than others. For example, females (Ferraro, 1995, 1996; Haynie, 1998; May, Rader, & Goodrum, 2010; Rountree, 1998) and older persons (Ferraro, 1995) have higher levels of fear of crime than males and younger people. For females, this elevated fear of crime has been attributed to their overarching fear of sexual assault. Known as the “shadow hypothesis,” this fear of sexual assault actually serves to increase females’ fears of other types of crimes (Ferraro, 1995, 1996; Warr, 1985).

Being fearful may be good if it leads people to protect themselves while still enjoying their life. Research on fear of crime shows that people, in response to fear, may engage in avoidance behaviors. **Avoidance behaviors** are restrictions that people place on their behavior to protect themselves from harm, such as staying home at night. Others may engage in **defensive or protective behaviors** to guard themselves from victimization, such as purchasing a gun or installing security lights (Ferraro & LaGrange, 1987). Although having some level of fear is likely good, as it serves to properly activate people in the face of danger and to caution people to engage in protective behaviors, exaggerated levels of fear can be problematic. People may effectively sever themselves from the outside world and not engage in activities they find enjoyable—in short, fear may paralyze some people.

**Recurring Victimization**

Another feature of victimization, which is often not discussed or known, is the real possibility that a person who is victimized once will be victimized again. In fact, persons who have been victimized are more likely than others who have not experienced any victimization to be victimized. At first, this reality probably does not make sense. After all, if you were victimized, you probably would be very likely to implement crime-reduction strategies. For example, if you had your car broken into because you had valuables in plain view, would you keep items in your car again? You probably are shaking your head no. So, why are some people prone to being victimized not once, but again, and sometimes again and again and again? Before we can address that question, let us first find out the extent to which people are victimized more than once.

**Extent of Recurring Victimization**

To know the extent to which people experience more than one victimization, let us first identify what we mean. **Recurring victimization** occurs when a person or place is victimized more than once by any type of victimization. **Repeat victimization** occurs when a person or place is victimized more than once by the same type of victimization. **Revictimization** is commonly referred to when a person is victimized more than once by any type of victimization, but across a relatively wide span of time—like from childhood to adulthood. Revictimization has been most widely studied in terms of childhood sexual abuse and sexual assault in adulthood.
Chapter 4. What Is Victimology?

Now that we know what the terms mean, let’s find out how often people and places are victimized more than once. Although most people and households in a given year are not victimized at all, some experience more than one victimization. The British Crime Survey (BCS), a victimization survey similar to the NCVS, revealed that 14 percent of burglary victims experienced two or more incidents during the same year (Nicholas, Povey, Walker, & Kershaw, 2005). Victims of personal crimes are also at a heightened risk of experiencing more than one incident. Research shows that victims of intimate partner violence, rape, and assault are all at risk of experiencing a subsequent incident following their initial victimization.

These recurring victims also experience a disproportionate share of all victimization events. For example, 6 percent of the respondents in the BCS over 10 years experienced 68 percent of all the thefts that occurred. Research on sexual victimization has produced similar results. Daigle, Fisher, and Cullen (2008) found that 7 percent of college women had experienced two different sexual victimization incidents during the previous academic year, and these women experienced almost three fourths of all the sexual victimizations.

Characteristics of Recurring Victimization

Also interesting about recurring victimization is that it is likely to happen quickly. Researchers have found that often, little time transpires between incidents. For college women’s sexual victimization, one study found that most subsequent incidents happen within the same month or 1 month after the initial incident. What this means is that victims are at an increased risk of being victimized again in the time immediately following an initial incident. Over time, the risk of experiencing another victimization wanes.

What type of victimization are victims likely to experience if they are victimized more than once? Most likely, when a person is victimized a subsequent time, he or she is likely to experience the exact same type of victimization. For example, a theft victim is likely to experience another theft if he or she is victimized a second time.

Theoretical Explanations of Recurring Victimization

We know, then, that recurring victimization is a reality that many victims face, that it is likely to happen rather quickly if it does, and that the same type of victimization is likely to occur. While we have painted a picture of what recurring victimization “looks” like, it does not address why some people are victimized a single time and others find themselves victimized again.

There are two theoretical explanations that have been proffered to explain recurring victimization. The first is called risk heterogeneity. This explanation focuses on qualities or characteristics of the victim. Those qualities or characteristics that place someone at risk of being a victim initially will keep the victim at risk of experiencing a subsequent victimization if they are unchanged. For example, if a home is burglarized because it does not have an alarm, it is at risk for recurring victimization if, after the burglary, the homeowners do not install a burglar alarm.

In contrast to the risk heterogeneity argument, the second theoretical explanation of recurring victimization is known as state dependence. According to the theory of state dependence, it is not the qualities or characteristics of a victim that are important for recurring victimization so much as what happens during and after the victimization. How the victim and the offender act and react to the victimization event will predict the risk of recurring victimization. In this way, the victim and offender are learning key information that will impact the likelihood of subsequent victimization. For example, a victim of rape or other sexual victimizations who resists or uses self-protective action is less likely than those who do not to be victimized again (Fisher, Daigle, & Cullen, 2010b). This reduction in risk is likely due to the victim learning that she has agency and control over her life. Protecting herself may even serve to be empowering so that in the future she is able to identify and avoid risk. Likewise, the offender is likely learning that she is not an “easy” target and that victimizing her will not pay off in the future. In both scenarios, the victim is less likely to find herself the target of an offender. To be clear, neither of these explanations should be used to blame the victim for the victimization. The offender is responsible for his or her actions, and blame should rest there. These explanations are, however, tools to help understand why some people are targeted over and over again.

Theories of Victimization

You just read about why recurring victimization happens, but why does a person become a victim at all? This question has plagued researchers for years. In fact, the first investigations into the study of victims were centered on understanding, as you will read about below, why people became victims.
The Role of the Victim in Crime

Although the field of victimology has largely moved away from simply investigating how much a victim contributes to his or her own victimization, the first forays into the study of crime victims were centered on such investigations. In this way, the first studies of crime victims did not illuminate victims as being innocents who were wronged at the hands of an offender. Rather, concepts such as victim precipitation, victim facilitation, and victim provocation were developed from these investigations. **Victim precipitation** is defined as the extent to which a victim is responsible for his or her own victimization. The concept of victim precipitation is rooted in the notion that, although some victims are not responsible at all for their victimization, other victims are in fact responsible for being victimized. In this way, victim precipitation acknowledges that victimization involves at least two people—an offender and a victim—and that both parties are acting and oftentimes reacting before, during, and after the incident. Identifying victim precipitation does not necessarily lead to negative outcomes. It is problematic, however, when it is used to blame the victim while ignoring the offender’s role.

Similar to victim precipitation is the concept of **victim facilitation**. Victim facilitation occurs when a victim unintentionally makes it easier for an offender to commit a crime. A victim may, in this way, be a catalyst for victimization. A woman who accidentally leaves her purse in plain view in her office while she goes to the restroom and has it stolen would be a victim who facilitated her own victimization. This woman is not blameworthy—the offender should not steal regardless of whether a purse is in plain view and easy to steal—but the victim’s actions certainly made her a likely target and made it easy for the offender to steal her purse. Unlike precipitation, facilitation helps us understand why one person may be victimized over another, but the term does not connote blame and responsibility.

In contrast, **victim provocation** occurs when a person actually does something that incites another person to commit an illegal act. Provocation suggests that without the victim, the crime would actually not have occurred. Provocation, then, most certainly connotes blame. In fact, the offender is not at all responsible. An example of a victim provocation is found in Crime File 4.2. The offender in this scenario ultimately is a victim, but he would not have been shot if not for attempting to break into a home. The distinctions among victim precipitation, facilitation, and provocation, as you probably are noticing, are not always clear-cut. But these terms were developed, described, studied, and used in somewhat different ways in the mid-1900s by several scholars.

**Crime File 4.2**

When Offender Becomes Victim

An 87-year-old Army veteran and retired postal worker, Jack Goodwin, had the rear window of his house broken when he was in bed listening to a Lakers’ basketball game. Goodwin got out of bed with his gun to investigate. He saw people at his window, raised the gun, and fired. Goodwin said, “When I saw them breaking the glass, I was, man. I got kinda—it was either me or them, then. I knew one thing—they were gonna deal with me. Cause if you’ve got enough nerve to break in somebody’s house and they’re home, they’ve got enough nerve to kill you see. There’s no if or ands about it.” One of the intruders was hospitalized in critical condition after being shot, while another escaped. Police did not plan to file charges against Goodwin, who indicated he would probably do the same thing again if in the same situation.


**Hans von Hentig**

In his book *The Criminal and His Victim: Studies in the Sociobiology of Crime*, Hans von Hentig (1948) recognized the importance of investigating what factors underpinned why certain people are victims just as criminology attempts to identify those factors that produce criminality. He determined that some of the same characteristics that produce crime also produce victimization.

In studying victimization, von Hentig (1948) looked at the criminal–victim dyad, thus recognizing the importance of considering the victim and the criminal not in isolation, but together. He attempted to identify the characteristics of a victim that may effectively serve to influence victimization risk. He considered that victims may provoke victimization—being agent provocateurs—based on their characteristics. He argued...
that crime victims could be placed into 1 of 13 categories based on their propensity for victimization. These categories are (1) young; (2) female; (3) old; (4) immigrants; (5) depressed; (6) mentally defective/deranged; (7) the acquisitive; (8) dull normals; (9) minorities; (10) wanton; (11) the lonesome and heartbroken; (12) tormentor; and (13) the blocked, exempted, and fighting. Each of these victims is targeted and contributes to his or her own victimization because of these characteristics. For example, the young, the old, and females may be victimized because of their ignorance or risk taking, or may be taken advantage of, such as women being sexually assaulted. Immigrants, minorities, and dull normals are likely victimized due to their social status and inability to activate assistance in the community. The mentally defective or deranged victims may be victimized because they do not recognize or appropriately respond to threats in their environment. Those who are depressed, acquisitive, wanton, lonesome, and heartbroken may place themselves in situations in which they do not recognize danger because of their mental state, their upset over a lost relationship, their desire for companionship, or their greed. The tormentor is a person who provokes her own victimization via violence and aggression toward others. Finally, the blocked, exempted, and fighting victim is one who is enmeshed in poor decisions and is unable to defend himself or seek assistance if victimized. An example of such a victim is a person who is blackmailed because of his behavior and would be placed in a precarious situation if he was to report the blackmail to the police (Dupont-Morales, 2009).

**Benjamin Mendelsohn**

Known as “the father of victimology,” Benjamin Mendelsohn (1947) coined the term “victimology” in the mid-1940s. An attorney, he became interested in the relationship between the victim and the criminal as he conducted interviews with victims and witnesses and realized that victims and offenders often knew each other and had some kind of existing relationship. He then created a classification of victims based on their culpability, or the degree of the victim’s blame. His classification entailed the following:

1. *Completely innocent victim:* victim who bears no responsibility at all for victimization; victim simply because of his or her nature such as being a child
2. *Victim with minor guilt:* a victim who is victimized due to ignorance; a victim who inadvertently places himself in harm’s way
3. *Victim as guilty as offender/voluntary victim:* a victim who bears as much responsibility as the offender; a person who, for example, enters into a suicide pact
4. *Victim more guilty than offender:* a victim who instigates or provokes own victimization
5. *Most guilty victim:* a victim who is victimized during the perpetration of a crime or as a result of crime
6. *Simulating or imaginary victim:* a victim who actually was not victimized at all but instead fabricates a victimization event

Mendelsohn’s classification emphasized degrees of culpability, recognizing that some victims bore no responsibility for their victimization, while others, based on their behaviors or actions, did.

**Stephen Schafer**

One of the earliest victimologists, Stephen Schafer (1968) wrote *The Victim and His Criminal: A Study in Functional Responsibility*. Much like von Hentig and Mendelsohn, Schafer also proposed a victim typology. His located victims in groups based on how responsible they are for their own victimization, using both social characteristics and behaviors. In this way, his typology includes facets of von Hentig’s typology based on personal characteristics and Mendelsohn’s typology rooted in behavior. He argued that victims have a functional responsibility to not provoke others into victimizing or harming them and that they also should actively attempt to prevent that from occurring. He identified seven categories and labeled their level of responsibility as follows:

1. Unrelated victims—no responsibility
2. Provocative victims—share responsibility
3. Precipitative victims—some degree of victim responsibility
4. Biologically weak victims—no responsibility
5. Socially weak victims—no responsibility
6. Self-victimizing—total responsibility
7. Political victims—no responsibility

Marvin Wolfgang

The first person to empirically investigate victim precipitation was Marvin Wolfgang (1957) in his classic study of homicides that occurred in Philadelphia from 1948 to 1952. He examined some 558 cases to see to what extent victims precipitated their own homicide. In those instances in which the victim was the direct, positive precipitator in the homicide, Wolfgang labeled the incident as "victim precipitated." For example, the victim would be the first to brandish or use a weapon, the first to strike a blow, and the first to initiate physical violence. He found that 26 percent of all homicides in Philadelphia during this time period were victim precipitated.

Beyond simply identifying the extent to which homicides were victim precipitated, he also identified those factors that were common to victim-precipitated homicides. He determined that often in victim-precipitated homicides, the victim and the offender knew each other. He also found that most victim-precipitated homicides involved male offenders and male victims, and that the victim was likely to have a history of violent offending himself. Alcohol was also likely to play a role in victim-precipitated homicides, which makes sense, especially considering that Wolfgang (1957) determined that the homicide often started as a minor altercation and escalated to murder.

Since Wolfgang’s study of victim-precipitated homicide, others have expanded his definition to include felony-related homicides and subintentional homicide. Subintentional homicide occurs when the victim facilitates her or his own demise by using poor judgment, placing himself or herself at risk, living a risky lifestyle, or using alcohol or drugs. Perhaps not surprising, a study of subintentional homicide found that as many as three fourths of victims were subintentional victims (N. H. Allen, 1980).

Menachem Amir

The crime of rape is not immune from victim blaming today, and it certainly has not been historically either. Menachem Amir (1971), a student of Wolfgang’s, conducted an empirical investigation into rape incidents that were reported to the police. Like Wolfgang, he conducted his study using data from Philadelphia, although he examined rapes that occurred from 1958 to 1960. He examined the extent to which victims precipitated their own rapes and also identified commonalities to this type of rape. Almost 1 in 5 rapes was labeled as victim precipitated by Amir. He found that these rapes were likely to involve alcohol, the victim was likely to have engaged in seductive behavior, she was likely to have worn revealing clothing, she was likely to have used risqué language, and she likely had a bad reputation. Amir also determined that it was the offender’s interpretation of actions that is important rather than what the victim actually does. The offender may view the victim—her actions, words, and clothing—as going against what he considers to be appropriate female behavior. In this way, the victim may be viewed as being “bad” in terms of how women should behave. He may then choose to rape her because of his misguided view of how women should act, because he thinks the woman deserved it. Amir’s study was quite controversial—it was attacked for blaming victims, namely women, for their own victimization.

Routine Activities and Lifestyles Theory

In the 1970s, two theoretical perspectives—routine activities and lifestyles theories—were put forth that both linked crime victimization risk to the fact that victims had to come into contact with a potential offender. Before discussing these theories in detail, first it is important to understand what a victimization theory is. A victimization theory is generally a set of testable propositions that are designed to explain why a person is victimized. Both routine activities and lifestyles theory proposed that a person’s victimization risk can best be understood by the extent to which the victim’s routine activities or lifestyle creates opportunities for a motivated offender to commit crime.

In developing routine activities theory, Lawrence Cohen and Marcus Felson (1979) argued that a person’s routine activities, or daily routine patterns, impacted his or her risk of being a crime victim. In so much as a person’s routine activities brings him or her into contact with motivated offenders crime victimization risk abounds. Cohen and Felson thought that motivated offenders were plentiful and that their motivation to offend did not need to be explained. Rather, their selection of particular victims was more interesting. Cohen
and Felson noted that there must be something about particular targets, both individuals and places, that encouraged selection by these motivated offenders. In fact, those that were deemed to be suitable targets based on their attractiveness would be chosen by offenders. Attractiveness relates to qualities about the target such as ease of transport, which is why a burglar may break into a home and leave with an iPod or laptop computer rather than a couch. Attractiveness is further evident when the target does not have capable guardianship. Capable guardianship is conceived as the means by which a person or target can be effectively guarded so that a victimization is prevented from occurring. Guardianship is typically considered to be social when the presence of another person makes the person less attractive as a target. Guardianship can also be provided through physical means, such as a home that has a burglar alarm or a person who carries a weapon for self-protection. A home with a burglar alarm and a person who carries a weapon are certainly less attractive crime targets! When these three elements—motivated offenders, suitable targets, and lack of capable guardianship—coalesce in time and space, victimization is likely to occur.

When Cohen and Felson (1979) originally developed their theory, they focused on predatory crimes—those that required a target and offender to have contact. They originally were interested in explaining changes in rates of these types of crime over time. In doing so, they argued that people’s routines had shifted since World War II, taking them away from home and making their homes attractive targets. At the same time, people began spending more time outside of the home, in leisure activities and going to and from work and school. As people spent more time interacting with others, they were more likely to come into contact with motivated offenders. Capable guardianship was unlikely to be present; thus, the risk of criminal victimization increased. They also linked the increase in crime to the production of durable goods. Electronics began to be produced in sizes that were portable, making them easier to steal. Similarly, cars and other expensive items that could be stolen, reused, and resold became targets. As Cohen and Felson saw it, prosperity of a society could produce an increase in criminal victimization rather than a decline! Also important, they linked victimization to everyday activities rather than social ills, such as poverty.

Michael Hindelang, Michael Gottfredson, and James Garofalo’s lifestyles theory (1978) is a close relative of routine activities theory. They posited that certain lifestyles or behaviors place people in situations in which victimization is likely to occur. Your lifestyle, such as going to bars or working late at night in relative seclusion, places you at more of a risk of being a crime victim. Although the authors of lifestyles theory did not specify how opportunity connects to risk as clearly as did the authors of routine activities theory, at its heart, the theory closely resembles it and its propositions. As a person comes into contact—via lifestyle and behavior—with potential offenders, he or she is likely creating opportunities for crime victimization to occur. The lifestyle factors identified by Hindelang and his colleagues that create opportunities for victimization are people with whom one associates, working outside of the home, and engaging in leisure activities. In this way, a person who associates with criminals; who works outside of the home; and who participates in activities, particularly at night, away from home and with nonfamily members, is a more likely target for personal victimization than others. Hindelang et al. further delineated why victimization risk is higher for some people than others using the principle of homogamy. According to this principle, the more frequently a person comes into contact with those in demographic groups with likely offenders, the more likely it is the person will be victimized. This frequency may be a function of demographics or lifestyle. For example, males are more likely to be criminal offenders than females. Males, then, are at greater risk for victimization if they spend more time with other males. Today, researchers largely treat routine activities theory and lifestyles theory interchangeably, and often refer to them as the routine activities and lifestyle theory perspectives.

One of the reasons that routine activities and lifestyles theory have been the prevailing theories of victimization for over 30 years is because of the wide empirical support researchers have found when testing them. It has been shown that a person’s routine activities and lifestyle impact the risk of being sexually victimized (Cass, 2007; Fisher et al., 2010b; Mustaine & Tewksbury, 1999, 2007; M. D. Schwartz & Pitts, 1995). This perspective has also been used to explain auto theft (Rice & Smith, 2002), stalking (Mustaine & Tewksbury, 1999), cybercrime victimization (T. J. Holt & Bossler, 2009), adolescent violent victimization (Lauritsen, Laub, & Sampson, 1992), theft (Mustaine & Tewksbury, 1998), victimization at work (D. R. Lynch, 1997), and street robbery (Groff, 2007).

### Structural Causes of Victimization

We have already discussed how certain individuals are more at risk of becoming a victim of crime than others. So far, we have tied this risk to factors related to the person. Where that person lives and spends time, however, may also place him or her at risk of victimization. Indeed, you are probably not surprised to learn that certain
areas have higher rates of victimization than others. Some areas are so crime-prone that they are considered to be “hot spots” for crime. First identified by Lawrence and associates (Sherman, Gartin, & Buerger, 1989), hot spots are areas that have a concentrated amount of crime. He found through examining police call data in Minneapolis that only 3 percent of all locations made up most calls to the police. If a person lived in or frequented a hot spot, he would be putting himself in danger. The features of these hot spots and other high-risk areas may create opportunities for victimization that, independent of a person’s lifestyle or demographic characteristics, enhance one’s chances of being victimized.

What is it about certain areas that make them prone to victimization? A body of recent research has identified many features, particularly of neighborhoods (notice we are not discussing hot spots specifically). One factor that is related to victimization is family structure. Robert Sampson (1985a) in his seminal piece on neighborhoods and crime found that neighborhoods that have a large percentage of female-headed households have higher rates of theft and violent victimization. He also found that structural density, as measured by the percentage of units in structures of 5 or more units, is positively related to victimization. Residential mobility, or the percentage of persons 5 and older living in a different house from 5 years before, also predicted victimization.

Beyond finding that the structure of a neighborhood influences victimization rates for that area, it has also been shown that neighborhood features influence personal risk. In this way, living in a neighborhood that is disadvantaged places individuals at risk of being victimized, even if they do not have risky lifestyles or other characteristics related to victimization (S. Browning & Erickson, 2009). For example, neighborhood disadvantage and neighborhood residential instability are related to experiencing violent victimization at the hands of an intimate partner (Benson, Fox, DeMaris, & Van Wyk, 2003). Using the notions of collective efficacy, it makes sense that neighborhoods that are disadvantaged are less able to mobilize effective sources of informal social control (Sampson, Raudenbush, & Earls, 1997). Informal social controls are often used as mechanisms to maintain order, stability, and safety in neighborhoods. When communities do not have strong informal mechanisms in place, violence and other deviancy is likely to abound. Such communities are less safe; hence, its residents are more likely to be victimized than residents of more socially organized areas.

### Caring for the Victim

Thus far we have discussed the extent to which persons are victimized, the costs they incur, and the possible reasons for their victimization. Another important consideration is the rights and remedies that are available to victims.

### Victims’ Rights

Once essentially ignored by the criminal justice system and the law, victims are now granted a range of rights. These rights have been given to victims through legislation and, in 32 states, through victims’ rights amendments to state constitutions (National Center for Victims of Crime, 2009). The first such law that guaranteed victims’ rights and protections was passed in Wisconsin in 1979; now, every U.S. state has at least some form of victims’ rights legislation (R. C. Davis & Mulford, 2008). Despite each state having laws that afford victims’ rights, the states differ according to whom the law applies to, when the rights begin, what rights victims have, and how the rights can be enforced. What they have in common, however, is the goal of victims’ rights—to enhance victim privacy, protection, and participation (Garvin, 2010).
Slightly less than half of states give all victims rights (Howley & Dorris, 2007). In all states, the right to compensation, notification of rights, notification of court appearances, and ability to submit victim impact statements before sentencing is granted to at least some classes of victims (Dees, 1999). Other common rights given to victims in the majority of states are the right to restitution, to be treated with dignity and respect, to attend court and sentencing hearings, and to consult with court personnel before plea bargains are offered or defendants released from custody (Davis & Mulford, 2008). Other rights extended to victims are the right to protection and the right to a speedy trial. Importantly, some states explicitly protect victims’ jobs while they exercise the rights they have to attend and participate in the criminal justice system. These protections may include having the prosecutor intervene on behalf of the victim with the employer or prohibiting employers from penalizing or firing a victim from taking time off from work to participate (National Center for Victims of Crime, 2009). See Table 4.1 for a description of common rights provided to crime victims.

**Victim Remedies and Services**

In addition to these common rights, victims are also provided a range of services to help them recover financially and psychologically and to navigate the criminal justice system.

**Victim Compensation**

One way that victims can receive financial compensation for their economic losses is through state-run victim compensation programs. First begun in 1965 in California, victim compensation programs now...
operate in every state. Money for compensation comes from a variety of sources. A large portion of funding comes from criminals themselves—fees and fines are charged to people who are convicted of criminal offenses. These fees are attached to the normal court fees that offenders are expected to pay. In addition, the Victim of Crime Act of 1984 (VOCA) authorized funding for state compensation and assistance programs. Today, the VOCA Crime Victims Fund provides over $700 million annually to states to assist victims, and constitutes about one third of each program’s funding (National Association of Crime Victim Compensation Boards, 2009). Not only did VOCA increase funding for state programs, but it also required states to cover all U.S. citizens victimized within the state’s borders, regardless of the victim’s residency. In addition, it required that states provide mental health counseling and that victims of domestic violence as well as drunk driving be covered.

Not all victims, however, are eligible for compensation from the crime victims’ fund. Only victims of rape, assault, child sexual abuse, drunk driving, domestic violence, and homicide are eligible, since these crimes are known to create an undue hardship on victims (L. Klein, 2010). In addition to the type of victimization, in order to be eligible, victims

- Must report the victimization promptly to law enforcement; usually within 72 hours of the victimization unless “good cause” can be shown, such as being a child or incarcerated or otherwise incapacitated.
- Must cooperate with law enforcement and prosecutors in the investigation and prosecution of the case.
- Must submit application for compensation within a specified time, generally 1 year from the date of the crime, that includes evidence of expenses.
- Must show that costs have not been compensated from other sources such as insurance or other programs.
- Must not have participated in criminal conduct or significant misconduct that caused or contributed to the victimization.

Victims can be compensated for a wide variety of expenses including medical care costs, mental health treatment costs, funeral costs, and lost wages. Some programs have expanded coverage to also include crime scene cleanup, transportation costs to receive treatment, moving expenses, housekeeping costs, and child care costs (L. Klein, 2010). Other expenses for which victims might be compensated include the replacement or repair of eyeglasses or corrective lenses, dental care, prosthetic devices, and forensic sexual assault exams. Note that property damage and loss are not compensable expenses (Office for Victims of Crime, 2010), and only three states currently pay for pain and suffering (L. Klein, 2010). States have caps in place that limit the amount of money that a crime victim may receive from the crime victims’ fund, generally ranging from $10,000 to $25,000 per incident.

Although compensation can clearly provide a benefit for victims, there are some problems with current compensation programs. One problem is that only a small portion of victims who are eligible for compensation actually apply for monies from these funds. The programs also do not seem to encourage participation in the criminal justice system. Moreover, there is little evidence that persons who receive compensation are any more satisfied than others (Elias, 1986), or that they are more likely to participate in the criminal justice process (L. Klein, 2010).

Victim Impact Statements

As previously discussed, the criminal trial involves two parties in an adversarial system that reflects that a crime is a harm against the state. As such, victims have seldom played more than the role of witness in a criminal trial. Not until the 1970s were victims granted rights that guaranteed them at least some voice in the criminal trial process. One of these rights was first adopted in 1976 in Fresno, California, and it gave the victim an opportunity to address the court through a victim impact statement (VIS). The VIS can be submitted by direct victims and by those who are indirectly impacted by crime, such as family members. The VIS is either submitted in writing or presented orally (victim allocution).

In the VIS, the harm that was caused is typically detailed, with psychological, economic, social, as well as physical effects being discussed. Depending on the jurisdiction, the victim or others presenting a VIS may also provide a recommendation as to what the sentence should be for the offender. Not only may the victim be allowed to enter a VIS at sentencing, but most states also allow for the victim to make a VIS at parole hearings. In some cases, the original VIS is included in the offender’s file and will be considered during the parole process. In others, the victim is allowed to update the original VIS and to include additional information that may be pertinent to the parole board. Less common, the victim may be allowed to make a VIS during bail
hearings, pretrial release hearings, and plea bargaining hearings (National Center for Victims of Crime, 1999). Importantly, regardless of the victim’s wishes, the VIS is used as information and may or may not impact the court’s decision. As noted by the Minnesota Court of Appeals in State v. Johnson (1993), although the victim’s wishes are important, they are not the only consideration or determinant in the prosecutor’s decision of whether to bring a case to trial.

Victim/Witness Assistance Programs

Victim/Witness Assistance Programs (VWAPs) provide victims with assistance as they navigate the criminal justice system. These programs are designed to ensure that victims know their rights and have the resources necessary to exercise those rights. At its heart, however, is a goal to increase victim and witness participation in the criminal justice process, particularly by being witnesses, with the notion that victims who have criminal justice personnel assisting them will be more likely to willingly participate in and be satisfied with their experience.

These programs first began in the 1970s, with the first program being established in St. Louis, Missouri, by Carol Vittert (Davies, 2010). Although this was not a government-sponsored program, Vittert and her friends would visit victims and give them support. Two years later, the first government victim assistance programs were developed in Milwaukee, Wisconsin, and Brooklyn, New York. Not long after, in 1982, President Reagan’s Task Force on Victims of Crime recommended that prosecutors better serve victims. Specifically, the task force noted that prosecutors should work more closely with crime victims and receive their input as their case is processed. It also asserted that victims need protection and that their contribution should be valued—prosecutors should honor scheduled case appearances and return personal property as soon as possible. To this end, VWAPs have been developed, most commonly administered through prosecutors’ offices, but some also run through law enforcement agencies. At the federal level, each U.S. Attorney’s Office has a victim witness coordinator to help victims of federal crimes.

Today, these programs most commonly provide victims with background information regarding the court procedure and their basic rights as crime victims. Notification about court dates and changes to those dates is also made. They also provide information regarding victim compensation and aid victims in applying for compensation if eligible. A victim who wishes to make a victim impact statement can also receive assistance from the VWAP in doing so. Another service offered by a VWAP is that of making sure the victims and witnesses have separate waiting areas in the courthouse so that they have privacy. In some instances, VWAP personnel will attend court proceedings and the trial with the victim and his or her family.

Despite the efforts of VWAPs, research shows that some of these early programs did little to improve victim participation. The Vera Institute of Justice’s Victim/Witness Assistance Project, which ran in the 1970s, provided victims with a wide range of services—day care for children while parents went to court, counseling for victims, assistance with victim compensation, notification of all court dates, and a program that allowed victims to stay at work rather than come to court if their testimony was not needed—with little “success” (S. Herman, 2004). An evaluation of the project showed that victims were no more likely to show up at court. It was not until the Vera Institute developed a new program that used victim advocates to go to court with victims that positive outcomes emerged. This program did in fact have a positive influence on attendance in court (S. Herman, 2004). Few of the programs provide services that have been identified as most critical in the research literature. Instead, VWAPs are largely oriented toward ensuring that witnesses cooperate and participate in court proceedings rather than ensuring that crime victims receive needed services (Jerin, Moriarty, & Gibson, 1996).
Family Justice Centers

Family Justice Centers have recently begun opening throughout the United States to better serve crime victims. Because crime victims often need a variety of services, Family Justice Centers are designed to provide many services in “one stop.” These centers often provide counseling, advocacy, legal services, health care, financial services, housing assistance, employment referrals, and other services in one place (National Center on Domestic and Sexual Violence, 2011). The advantages of doing so are many—victims can receive a plethora of services without having to navigate the maze of health and social service agencies in their jurisdiction. Instead, these services are all offered in one place.

Victim–Offender Mediation Programs

Some victims may not wish to sit in the background and only interact on the periphery of the criminal justice system. Instead, they may wish to have face-to-face meetings with their offender. As a way to allow such a dialogue between victims and offenders, victim–offender mediation programs have sprouted up throughout the United States, with more than 300 such programs in operation today. With the American Bar Association endorsing such programs and what appears to be widespread public support, victim–offender mediation is likely to become commonplace in court in the United States. Victim–offender mediation is already widely used in other countries, with more than 700 programs in operation in Europe (Umbreit & Greenwood, 2000).

Mediation in criminal justice cases most commonly occurs as a diversion from prosecution. This means that if an offender and victim agree and complete mediation, and if the offender completes any requirements set forth in the mediation agreement, then the offender will not be formally prosecuted in the criminal justice system. In this way, offenders receive a clear benefit if they agree to and successfully complete mediation. Mediation can also take place as a condition of probation. For some offenders, if they formally admit guilt and are adjudicated, they may be placed on probation by the judge with the condition that they participate in mediation. In all instances, it is up to the victim to decide whether to participate in victim–offender mediation programs. Most victims who are given the opportunity to participate choose to do so (Umbreit & Greenwood, 2000).

Victim–offender mediation programs are designed to provide victims—usually those of property and minor assaults—a chance to meet with their offenders in a structured environment. The session is led by a third-party mediator whose job it is to facilitate a dialogue through which victims are able to directly address their offender and tell him or her how the crime impacted their lives. The victim may also ask questions of the offender. To achieve the objectives of restorative justice, mediation programs in criminal justice use humanistic mediation, which is dialogue driven rather than settlement driven (Umbreit, 2000). The mediator is there to be impartial and to provide unconditional positive concern and regard for both parties, with minimal interruption. As noted by Umbreit,

humanistic mediation emphasizes healing and peacemaking over problem solving and resolution. The telling and hearing of each other’s stories about the conflict, the opportunity for maximum direct communication with each other, and the importance of honoring silence and the innate wisdom and strength of the participants are all central to humanistic mediation practice. (p. 5)

One tangible product that is often but not always created from victim–offender mediation is a restitution plan for the offender that the victim plays a central role in developing. This agreement becomes enforceable by the court in that, when an offender does not meet its requirements, he or she is held accountable.

What happens after an offender and victim meet? Do offenders and victims both receive a benefit? What about the community? It is important to evaluate programs in terms of effectiveness in meeting their objectives, and victim–offender mediation programs have been assessed in this way. Collectively, this body of research shows that there are many benefits to such programs. For one, participation in victim–offender mediation has been shown to reduce fear and anxiety among crime victims (Umbreit, Coates, & Kalanj, 1994), including PTSD symptoms (Angel, 2005) and desire to seek revenge against or harm offenders (Sherman et al., 2005; Strang, 2004). In addition, both offenders and victims report high levels of satisfaction with the victim–offender mediation process (McGold & Wachtel, 1998; McGarrell, Olives, Crawford, & Kroovand, 2000; see Umbreit & Greenwood, 2000). Victims who meet with their offenders report higher levels of satisfaction than victims of similar crimes who have their cases formally processed in the criminal justice system (Umbreit, 1994a). In addition to satisfaction, research shows that offenders are more likely to complete restitution required through victim–offender mediation (Umbreit et al., 1994). More than 90 percent of restitution agreements from victim–offender mediation programs are completed within 1 year (Victim–Offender Reconciliation Program Information and Resource Center, 2006). Reduction in recidivism rates for offenders has also been found (Nugent & Paddock, 1995; Umbreit, 1994b).
The field of victimology emerged during the mid-1900s. Similar to criminology, victimology is the study of the causes and consequences of victimization and of how the criminal justice system and other social service agencies respond to crime victims.

We know from official data sources and victimization surveys that the victimization rate has been steadily declining since 1993. We also know who faces the greatest risk of being a crime victim. Young, black males have the highest violent victimization rates. We also know that households that are low income and that have a greater number of people living in them are more likely to experience a property victimization than other households.

Once a person is victimized, he or she often experiences a range of consequences. For some victims, there are economic costs associated with the victimization. These economic costs can result from property losses; from money spent on necessary medical or mental health care; from costs associated with losses in productivity or time lost from work, school, or housework; from pain and suffering; from reduced quality of life; and from legal costs. In 2008, the total economic loss from crimes was estimated to be $17,297 billion. Victimization also impacts other entities. In the United States, direct expenditures of the criminal justice system are over $214 billion annually. Insurance companies also pay claims associated with crime—annually these costs top $45 billion (Headaden, 1996). When uninsured individuals are injured from crime and seek medical attention, society must absorb these costs.

Economic costs are not the only ones incurred by crime victims. Many victims experience affective (emotional) responses to victimization. The most common are depression, reductions in self-esteem, and anxiety. More recently, post-traumatic stress disorder (PTSD) has been recognized as a possible outcome of severe trauma, including victimization. PTSD can occur after a person has experienced or witnessed a traumatic event. It is characterized by feelings of fear, helplessness, or horror in response to the event; reexperiences of the trauma over time via flashbacks, nightmares, images, or reliving the event; avoidance of stimuli associated with the traumatic event; numbness of responses; and hyperarousal.

Many victims may blame themselves for their own victimization or experience learned helplessness, whereby they learn that responding to victimization is futile and instead become passive and numb. Another potential cost of victimization is fear. Even persons who have not been victimized may experience fear that it may happen. For example, women and elderly persons generally have higher levels of fear than men and young persons, although their actual victimization risks are low.

Victims also face the real risk of being victimized again after their initial incident. Although most persons who are victimized will not experience another victimization, there is a sizable portion of victims who do, and they are most at risk in the time period immediately following their initial incident. Two competing explanations have been offered to explain this phenomenon: risk heterogeneity and state dependence. According to the risk heterogeneity perspective, characteristics that place an individual at risk, if left unchanged, will continue to keep a victim at risk for subsequent incidents. State dependence, on the other hand, argues that what the victim and offender do and learn during and after an incident is what shapes future risk.

Early explorations in the field of victimology were centered on determining how much a victim contributes to his or her own victimization. In this way, early researchers were interested in victim precipitation—the extent to which victims are responsible for their own victimization. They also studied victim facilitation, which occurs when victims make it easier for an offender to commit a crime. Finally, victim provocation, which occurs when a person incites another person to commit a crime against him, was also examined. Early publications by von Hentig, Mendelsohn, and Shafer involved developing victim typologies based on the degree to which the victim was responsible for his or her own victimization. Empirical studies of victim precipitation were conducted by Wolfgang, who found that 26 percent of all homicides in Philadelphia between 1958 and 1952 were victim precipitated, and Amir, who found that almost 1 in 5 rapes was victim precipitated.

The most widely used theories to explain victimization are routine activities and lifestyles theory. According to routine activities theory, when a person’s daily routine activities bring him or her into contact with motivated offenders, without capable guardianship, victimization risk is high. Cohen and Felson argued that it is the coalescence of time and space of motivated offenders, suitable targets, and no capable guardianship that predicts victimization. Hindelang, Gottfredson, and Garofalo’s lifestyles theory is closely related to routine activities theory. According to this theory, it is a person’s lifestyle that shapes victimization risk. Lifestyles that involve spending time outside of the home, especially at night away from the family, are risky in that they put people in contact with potential offenders. They further argued that the more you come into contact with persons in demographic groups of likely offenders, the more chances you have of becoming victimized.
INTRODUCTION TO CRIMINOLOGY

Others have offered that the characteristics of places make certain areas ripe for victimization. Some areas, known as “hot spots,” are particularly crime prone. To understand why some areas have high rates of victimization while others do not, researchers have examined their features. Specifically, Sampson argued that certain features of neighborhoods impact their risk: family structure, structural density, and residential mobility.

Given the interest in crime victims by researchers and practitioners, it is probably not a surprise to learn that victims now have many rights. Commonly, victims have the right to compensation, the right to be notified, the right to attend court hearings, and the right to submit a victim impact statement (VIS). Some states also provide victims with the right to restitution, the right to be treated with dignity and respect, the right to consult with court personnel before bond hearings and plea bargaining decisions, the right to be protected, and the right to a speedy trial (R. C. Davis & Mulford, 2008).

Victim compensation is financial payment to victims administered through the state. Often, these funds are paid through charges attached to court fees along with Victim of Crime Act funding from the federal government. To be eligible for compensation, in many states victims must report the incident to the police in a timely fashion, must cooperate with criminal justice personnel in the investigation and prosecution process, must submit an application within a specified time, must document actual costs and show that these costs have not been paid from other sources, and must not have participated in criminal conduct that contributed to the victimization.

As noted above, victims (and those indirectly impacted by the crime) may also have the right to make a victim impact statement, which is written or given orally. The VIS details the effects of being victimized and often includes the victim’s recommendation for sentence or release.

Many of the rights that victims have are exercised through their work with victim-witness assistance programs (VWAPs). VWAPs are designed to assist victims in knowing their rights and making sure they have the ability to exercise these rights. Often administered through prosecutor’s offices, VWAPs most commonly provide victims with information about court processes and their basic rights as crime victims. Newer programs where victims can receive a range of services in one place have also developed. These Family Justice Centers provide counseling, advocacy, legal services, health care, financial services, housing assistance, employment referrals, and other services in one place.

Some programs provided to victims allow them to play a more direct role in the criminal justice process. Victim–offender mediation programs are one such service. These programs involve face-to-face meetings between the victim and offender with a neutral, third-party mediator. During the mediation session, the victim is allowed to tell the offender how the victimization impacted his or her life and to ask the offender questions. Similarly, the offender is provided an opportunity to apologize and to explain his or her behavior. Sometimes mediation results in agreed-upon outcomes for the offender, such as restitution to be paid to the victim, that are enforceable by the court.

Criminology on the Web
Log on to the Web-based student study site at www.sagepub.com/haganintrocrim8e for author-created podcasts, eFlashcards, quizzes, and more.
REVIEW QUESTIONS

1. Who is the “typical” crime victim? Given the characteristics of the typical crime victim, why do you think these persons are more at risk than others of being victimized?

2. Have you been the victim of a crime? Has anyone you know been a victim of a crime? If so, think about the costs associated with the victimization. Had you considered all of these costs before? How did you or the person deal with the costs of being victimized? How should the criminal justice system deal with victim costs?

3. Given what you know about the UCR and the NCVS, which do you think is a more accurate measure of crime victimization? Why?

4. Using routine activities and lifestyles theory, evaluate your own risk of becoming a crime victim. What measures do you already take to avoid victimization? What don’t you do, but could? Why do you not do these things? Is it fair to ask victims to change their habits and behavior to reduce victimization? Why or why not?

5. What other factors besides routine activities and lifestyles do you think increase victimization risk? Why would these factors increase victimization?

6. What do you think is the most important right given to crime victims? Why?

7. Investigate the rights given to crime victims in your home state. Is it clear what rights are given to victims? Who is responsible for notifying victims of their rights? What remedy do victims have in your home state if their rights are not being met?

WEB SOURCES

British Crime Survey

Bureau of Justice Statistics
http://bjs.ojp.usdoj.gov/

National Association of Crime Victim Compensation Boards
http://www.nacvcb.org/index.asp?sid=1

The National Center for Victims of Crime
http://www.ncvc.org/ncvc/Main.aspx

Office for Victims of Crime
http://www.ojp.usdoj.gov/ovc/

Victim Law
http://www.victimlaw.info/victimlaw/

Victim Offender Mediation Association
http://www.voma.org/

WEB EXERCISES

1. Compare and contrast the “typical” victim and victimization incident according to findings from the National Crime Victimization Survey and the British Crime Survey. What can account for the similarities? What can account for the differences?

2. Do an Internet search for, and use this book to determine, the right that you think is most important for crime victims to have. What recent case law has dealt with victims attempting to exercise this right? What challenges do you think victims face in trying to exercise this right? What resources are available to them?

3. What is restorative justice? How does victim–offender mediation fit within the notions of restorative justice? Do other victim services fit the goals of restoration? Which ones? Why?

4. Pick a specific type of crime victimization and identify the following: (1) what extent of this type of victimization occurs, (2) who is the “typical” victim, (3) what resources are available for these types of victims, (4) what is unique about the victim experience for this type of victimization.

SELECTED READINGS


In this chapter, the authors provide a nice overview of repeat victimization. They cover the extent to which people are repeatedly victimized, the main theoretical explanations, and the implications for crime prevention. They also provide results from their own empirical investigation.


In this article, Clarke posits that crime prevention can be effective through target hardening and by paying attention to features of the environment.


This text includes concise chapters that cover the theories relevant to victimization, the measurement of victimization, victim rights,
and a variety of types of victimization including terrorism, human trafficking, sexual victimization, and school victimization. It also includes edited articles that highlight important research connected to concepts in each chapter.


This edited volume features 19 readings covering a variety of types of victimizations as well as the responses that victims receive from the criminal justice system and others.


In this book, Ferraro discusses definitional and measurement issues within the fear of crime literature. Also covered is perceived risk and how females and elderly persons are more fearful than their risk levels indicate they should be.


Gerkin investigates whether victim–offender mediation programs are truly restorative, given the roles that each party plays. He addresses the barriers to successful programs through observing victim–offender mediations and examining agreements reached.


Given the overlap of victims and offenders, Schreck uses the general theory of crime to explain why some people face elevated risks of victimization. He provides a justification for the theoretical application and an empirical test.


Sebold’s memoir discusses her rape that she experienced as a college student and how she coped in the immediate aftermath as she navigated the criminal justice system. She also discusses the short- and long-term impacts of her victimization.


With a special focus on the legal system, the authors investigate the rights that crime victims have and remedies available to them. This book is an excellent resource for legislation and court cases to understand how victim rights have been granted and how the judiciary has interpreted these rights.