CHILD ABUSE AMONG TARRANT COUNTY PROBATIONERS

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Abstract

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Child abuse occurs throughout every city, in every state, in the United States. Child abuse occurs in many different forms, including but not limited to: physical abuse, emotional abuse, sexual abuse, medical neglect, psychological abuse and neglect. For many children child abuse never gets reported and children have a lifetime to cope with the effects of the abuse without consequence to the abuser.

The current study explores probationers who report to the Tarrant County Probation office in Tarrant County Texas who have been convicted of or received deferred adjudication for committing an offense against a child in the State of Texas and their respective childhoods.

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Chapter 1

Introduction

According to The National Child Abuse and Neglect Data System (NCANDS), approximately 903,000 children were victims of abuse and neglect during 2001. Based on a victim rate of 12.1 per 1,000 children, an estimated 899,000 children were found to be victims in the 50 states, the District of Columbia, and Puerto Rico for 2005. For Federal Fiscal Year (FFY) 2009, a nationally estimated 763,000 duplicate and 702,000 unique number of children were victims of maltreatment, including the death of more than 1,500 children (Paxson & Haskins 2009).

There are many different ways a person can commit child abuse. Examples of child abuse include: physical abuse, emotional abuse, sexual abuse, medical neglect, psychological abuse, and neglect. Friedman (1990), notes that most states define child sexual abuse as nonconsensual physical contact with a minor for the purpose of sexual gratification. More specific, in the State of Texas, the definition of sexual assault of a child is: Sexual Assault as defined by the Texas Penal Code section 22.011 (2) intentionally or knowingly: (A) causes the penetration of the anus or sexual organ of a child by any means; (B) causes the penetration of the mouth of a child by the sexual organ of the actor; (C) causes the sexual organ of a child to contact or penetrate the mouth, anus, or sexual organ of another person, including the actor; (D) causes the anus of a child to contact the mouth, anus, or sexual organ of another person, including the actor; or (E) causes the mouth of a child to contact the anus or sexual organ of another person, including the actor. In (c) section: (1) "Child" means a person younger than 17 years of age.

Sexual assault of a child can affect who that child becomes and how they will act towards others. In a study of 72 children who engaged in sexual misconduct with other children, Gray, Busconi, Houchens, &Pithers (1997) determined that 95% of the children for whom maltreatment data could be collected had been sexually abused. In addition, 48% had suffered physical abuse. Children are constantly going through a growing and developmental process which is affected by how they are

raised and their individual life experiences. Sexual assault of a child can affect the child's developmental process in a negative way.

Paxson and Haskins (2009) state that, a Federal Centers for Disease Control and Prevention (CDC) report issued in January 2008 offers five categories and definitions of maltreatment. Physical abuse is "the intentional use of physical force against a child that results in, or has the potential to result in, physical injury." Whereas, injury to a child defined by the Texas Penal Code section 22.04, is, (a) A person commits an offense if he intentionally, knowingly, recklessly, or with criminal negligence, by act or intentionally, knowingly, or recklessly by omission, causes to a child, elderly individual, or disabled individual: (1) serious bodily injury; (2) serious mental deficiency, impairment, or injury; or (3) bodily injury. (c) In this section: (1) "Child" means a person 14 years of age or younger. Physical abuse is the second most common form of abuse, only second to neglect. Although it is the second most common form of abuse, from 1995 to 2005, there was a drop in the rate of abuse, as reported by Wulczyn (2009). Furthermore, Wulczyn (2009) found rates of physical abuse, the second most common type of maltreatment, dropped from 3.6 per thousand in 1995 to 2.1 per thousand in 2005.

The U.S. Department of Health and Human Services reports that; in 2008, U.S. state and local child protective services (CPS) received 3.3 million reports of children being abused or neglected. Additionally, CPS estimated that 772,000 (10.3 per 1,000) of children were victims of maltreatment. Seventy-one percent of the children were classified as victims of child neglect; 16 percent as victims of physical abuse; 9 percent as victims of sexual abuse; and 7 percent as victims of emotional abuse. Additionally, in 2008, an estimated 1,740 children ages 0 to 17 died from abuse and neglect (U.S. Department of Health and Human Services). Based on the unique number of victims, 702,000, reported by NCANDS as abused in 2009, an estimated 78 percent suffered neglect, an estimated 18 percent were physically abused, an estimated 10 percent were sexually abused, an estimated 8 percent were emotionally or psychologically maltreated, and an estimated 2 percent were

medically neglected. These numbers indicate the extent of the problem of child abuse and the many different forms of child abuse exhibited in the United States today.

Although there are several different forms of child abuse, this paper focuses on physical and sexual abuse as it relates to the definitions in the Texas Penal Code. These offenses include Injury to a Child, Indecency with a Child, Sexual Assault of a Child, Aggravated Sexual Assault of a Child, and Aggravated Assault and Solicitation of a minor. (For full definitions of each offense refer to Appendix A). As part of the general discussion, prevalence, and relevance of child abuse, the history of child abuse statutes and the effects on a child's growth and developmental stages as they relate to abuse will be explored. Furthermore, research regarding the relationship between child abuse and juvenile delinquency, race, poverty, gender and age, domestic violence, and alcohol abuse will be presented. The purpose of this research is to examine the relationship between offenders who have been convicted of, or received deferred adjudication, for committing crimes against children and their childhood abuse experiences. Although research has been looked at the relationship between criminal offenders and child abuse, generally, the current research fills a gap left in the literature by specifically exploring types of offenses and types of abuse.

Chapter 2

Literature Review

The researcher will explain the history of child abuse in the United States. The researcher will then break down recent statistics on child abuse as it relates to race, poverty and gender. Furthermore, the researcher will look at how childhood development is effected by abuse. Also, the researcher will look at child abuse and how it relates to juvenile delinquency, alcohol use and domestic violence. Finally, the researcher will look at the reoccurrence of child abuse and those offenders who were abused as children.

2.1 History of Child Abuse Statute in the United States

Although children have been punished in the United States from the beginning of the country's origin, child abuse as opposed to discipline, was not recognized as a problem until the late 1800's. Society's first look at child abuse was decades before child abuse, as a medical definition, was revisited in the mid-1900s. The historical narrative of child abuse has two fundamental moments—the first, in 1872, was the fabled case of Mary Ellen Wilson who is said to have inspired the founding of the first Society for the Prevention of Cruelty to Children (SPCC); the second, in 1962, when Dr. C. Henry Kempe wrote a landmark article defining the "battered child syndrome," publicly exposing what doctors had long discussed in whispers, and inspiring America to rediscover child abuse after a long period of dormancy (Shull, 1999).

In 1874, the case of Mary Ellen Wilson inspired a crusade for the protection of children.

Mary Ellen was a nine-year-old orphan who lived with the Connolly family, who frequently beat and berated her (Hollenbeck, 2001). Although there was no organization that helped battered children, Mary Ellen Wilson was eventually removed from the home and Mrs. Connelly was charged with assault and battery. Public outrage over Mary Ellen's case prompted the organization of the New York Society for the Prevention of Cruelty to Children in 1874. In 1875, the State of New York enacted legislation "that authorized cruelty societies to file complaints for the violation of any laws affecting children and required law enforcement and court officials to aid agents of the societies in the

enforcement of these laws," thus creating the first statutory child protective services system in the United States (Hollenbeck, 2001). Although child protective services did not help to stop children from enduring the original abuse a child may endure, the services were created to remove children from homes and place them in safe environments to prevent further abuse.

While there were several efforts made over the next few decades to help battered children, it was not until the mid 1960s that the medical field began to truly recognize child abuse. In 1961, Dr. C. Henry Kempe described the "battered child syndrome"... a clinical condition in young children who have received serious physical abuse, generally from a parent or foster parent (Hollenbeck, 2001). Evidence of battered child syndrome is used to make the logical inference that only someone who is regularly caring for the child would have occasion to inflict these types of injuries, as an isolated act by a stranger would not result in a pattern of successive injuries over an extended period of time (Estelle v McGuire 112 S. Ct 475 1991). Doctors began to use "battered child syndrome" to diagnose children who had the mark of abuse acquired over time. This was one of the first steps taken by doctors to diagnose children who have been abused.

It took nearly another decade, before most states, and the federal government created statutes, to help abused children. Hollenbeck (2001) stated, in 1974, the federal government served as a catalyst in the further development of child protection systems, including child abuse registries, by passing the Child Abuse Prevention and Treatment Act (CAPTA). CAPTA provides funding to states that comply with its specifications regarding services to abused and neglected children. To be in compliance, states must provide a statewide program to report abuse, investigate abuse and provide for a safe environment for the abused to be placed. Trost (1998) reported that, all fifty states, the District of Columbia, American Samoa, Guam, Puerto Rico, and the U.S. Virgin Islands have reporting laws. Although state laws differ somewhat from other states laws, substantial uniformity in format and in overall effect now exists due at least in part to CAPTA's passage.

There are many reasons why children of abuse fail to report abuse. A few of these reasons include: children are too young to report abuse, children are too scared to report abuse, or children

believe the abuse is a normal part of everyday life. Therefore, CAPTA provided for mandatory reporting laws to help save children's lives by getting them out of the abusive situation and into a healthy, safe environment. Although the mandatory reporters can vary state to state, some of the main reporters are: medical examiners, law enforcement officers, child care providers, mental health professionals, teachers and social workers.

Despite the creation of mandatory reporting laws, professionals who come into contact with children are often reluctant to report suspected child abuse (Dombrowski, Ahia, & McQuillan, 2003; Kenny, 2001; Reiniger, Robison, & McHugh, 1995; Shoop & Firestone, 1988). There are many reasons for this reluctance, including misunderstanding of the reporting laws, fear of making an inaccurate report, a poor impression of child protective services, fear that reporting will exacerbate an already tenuous situation, fear of legal retribution or retaliation, belief that "proof" is needed before a report should be made, and lack of understanding of what contributes to maltreatment (Hinson & Fossey, 2000; Levin, 1983; Shor, 1997).

In 1996, CAPTA was amended. One of the main changes to the CAPTA amendment is the "Good Faith" Immunity addition. requiring that in order to receive funding from the federal government, states must have some form of immunity for mandatory reports of child abuse. Trost (1998) stated that although federal statute does not require a certain degree of immunity, the majority of states have implemented provisions for "good faith" reporting. Additionally, a few states grant mandatory reporters with absolute immunity. Trost (1998) found that regardless of how the courts have interpreted good faith, they have generally found defendants' behavior to be within the necessary mandatory reporting parameters. However, the assumption underlying the "good faith" language in CAPTA is that too much reporting is occurring. The new language in CAPTA is likely to persuade state courts that they have been providing too much immunity for doctors and other reporters.

For pediatricians and emergency room physicians in particular, the responsibility to report is already an expensive burden. Currently, most physicians who report know that they have statutory immunity for reporting, but they also know that such immunity does not preclude lawsuits which they must defend. Defending these suits is time-consuming, disruptive, and emotionally draining. Furthermore, if physicians

and hospitals face increased doubt that courts would dispose of such suits on summary judgment, they will be much more likely to limit their reporting to injuries they know are abuse-related, rather than reporting mere suspicions (Trost, 1998).

Removing the presumption of good faith would shift the burden of proof to defendants, essentially forcing them to go to trial on the issue of good faith; therefore, the policy shift may discourage courts from continuing to recognize negligent reporting as falling under the purview of "good faith" (Trost, 1998). The changes in the "good faith" exceptions in the statute would then allow for less false reporting of child abuse.

The second change in the amendment is the new emphasis on assessment. Trost (1998) states, the CAPTA amendments' new emphasis on "assessment" reflected criticism that mandated reporters and social workers are inadequately trained to recognize child abuse, and that CPS agencies were required to investigate every report they receive. In theory, if the numbers of erroneous reports are reduced through training to increase social workers' ability to distinguish between "false" and "true" reports, then the available financial resources will better help the children and families who really need it (Trost 1998). With an emphasis on assessment, it was anticipated that there would be fewer false reports and therefore, more time to focus on true cases of child abuse. With better education for the mandatory reports, it is possible they will become more confident in their abilities to recognize and report child abuse.

Finally, the last two changes described by Trost (1998) included changes in terminology, where "child and family protection" replaces the term "child protection". Additionally, the term "family" is inserted after the term "child" everywhere that "child" is listed and while enhancing the interests of "families," that is parents, the Amendment also provide for "expedited termination" of parental rights-but only in extreme and rare circumstances. Most recently, the Child Abuse Prevention and Treatment Act was re-authorized in 2010.

2.2 Race, Poverty and Gender and Child Abuse

Rates of child abuse vary with the children's' racial/ethnic background. The National Child Abuse and Neglect Data System (NCANDS) in 2008 reported African-American children, American

Indian or Alaska Native children, and children of multiple races had the highest rates of victimization at 16.6, 13.9, and 13.8 per 1,000 children of the same race or ethnicity, respectively. Hispanic children and white children had rates of 9.8 and 8.6 per 1,000 children of the same race or ethnicity, respectively. Asian children had the lowest rate of 2.4 per 1,000 children of the same race or ethnicity. Nearly one-half of all child abuse victims were White (45.1%), one-fifth (21.9%) were African-American, and one-fifth (20.8%) were Hispanic.

Overall, the rate of maltreatment among black children in 2006 (19.8 per thousand) was nearly twice the rate for white children (10.7 per thousand), which is equivalent to a disparity rate of 1.85 (19.8 divided by 10.7). At the state level, maltreatment rates in 2006 were higher for blacks than for whites in all but two states (Wulczyn, 2009). Further, Black children are 51 percent more likely to be removed from their home due to child maltreatment than are white children (Freisthler, Bruce, & Needell, 2007 from the U.S. Department of Health and Human Services [HHS], 2004).

Death from child abuse occurs across racial/ethnic boundaries but follows similar disproportionalities as rates of abuse generally. In 2008, it was reported that 39 percent of deaths were reportedly non-Hispanic white children, whereas, 30 percent of deaths were African-American children and 16 percent of deaths were Hispanic children (U.S. Department of Health and Human Services).

Furthermore in black families, Schuck (2005) found, the cumulative effects model was more strongly related to child abuse and neglect. The cumulative effects model looks at all the factors in a child's life and how they accumulate over time to affect the outcome of poverty, neglect and abuse of their future children. Higher child maltreatment reporting rates for Black children were associated with more black female-headed families in poverty. Additionally, the victimization rate for Black children is significantly higher than the victimization rate for White children, and the burdens of poverty and concentrated poverty are disproportionately experienced by Black families and Black female-headed families (Schuck, 2005). In their study, Freisthler, Bruce, and Needell, (2007) found that, the neighborhood impoverishment variables of female-headed families, poverty, and

unemployment was positively related to rates of maltreatment among Hispanic children. For White children, the structural factors related to poverty; child care burden (percentage of elderly residents and ratio of children to adults) and racial and ethnic composition (percentage of Hispanics); were positively associated with neighborhood rates of abuse and neglect.

Poverty occurs in many parts of the United States and has been a problem for many years. According to McCurdy and Daro (1994), in an annual survey, state child welfare officials reported that the recent loss of jobs was the most causative element in the increase in child abuse reports across the country in 1992. Furthermore, Hay and Jones (1994) state, poverty can directly increase the chance for neglect due to lack of money for food and shelter. Poverty may have indirect effects that increase the likelihood of other problems that are considered to be related to maltreatment, or that at least predict poor parenting outcomes. These indirect effects include increased parental stress, social isolation and residence in communities with limited resources.

National Child Abuse and Neglect Data System (NCANDS) in 2008 reported, victimization was split almost evenly between the sexes; 48.3 percent of victims were boys and 51.3 percent of the victims were girls. Additionally, NCANDS found, the rate of child victimization for boys in the age group of birth to one year was 21.8 per 1,000 male children of the same age group. The child victimization rate for girls in the age group of birth to 1 year was 21.3 per 1,000 female children of the same age group. The victimization rate for children in the age group of 4–7 years was 10.9 per 1,000 for both boys and girls. However, Finkelhor, Hotaling, Lewis, and Smith (1990) conducted a national survey of 2,626 adults of at least 18 years of age and found 27 percent of the women and 16 percent of the men reported at least one childhood sexual abuse experience. Abuse by strangers was more prevalent in boys (40%) than girls (21%), and abuse by family members was more likely with girls (29%) than boys (11%). Therefore, females had a higher rate of being sexually abused by a known offender and boys had a higher rate of being abused by a stranger. However, girls had a higher overall rate of being sexually abused than boys.

2.3 Effects on childhood development because of abuse

A child transitions through many developmental stages from birth to adulthood. A child starts out in life unable to even hold their head up, let alone crawl, walk, talk or understand concepts in life. A child must be taught how to perform these basic life tasks by the people closest to them in early life. Competence in working through these stages effect the way a child will grow, learn, and develop into a functional adult. At each developmental stage, parents' abilities to attend to their child and to guide and support their child's negotiation of new developmental tasks are essential. When parents physically, emotionally, or sexually abuse their children, the parents' salience as a source of protection and support certainly is diminished (Margolin, & Gordis, 2000). Therefore, Margolin and Gordis (2000) report, violence initially may result in primary effects, such as anxiety, depression, or PTSD symptoms, which cause secondary reactions by disrupting children's progression through ageappropriate developmental tasks. For example, exposure to violence in young children can result in regressive symptoms, such as increased bedwetting, decreased verbalization, or separation anxiety (Osofsky, 1995). Furthermore, Wulczyn (2009) states, in early childhood, maltreatment can impair brain development and regulatory functioning; later in childhood, maltreatment-related problems such as poor school performance, increased disruptive behaviors, and depression emerge; once maltreatment victims reach adulthood, they are more likely to abuse substances. If a child is not raised in a good environment, rich with learning proper behaviors and ways about life, then it is possible the will have a hard time learning to be a functional adult. Finally, Gratz, Paulson, Jakupcak, and Tull (2009) report that theoretical literature suggests that the experience of maltreatment during childhood interferes with the development of adaptive emotion regulation, exposing children to extreme emotional demands while simultaneously failing to teach them how to regulate emotional arousal, control their behaviors in the context of emotional arousal, and/or tolerate emotional distress. Children who only see violence in life, and violence as a solution to every problem with the adults in their life; will quite possibly believe violence is the only solution to their problems.

Although abuse can occur at all ages, there are certain ages when children are more likely to experience abuse. In 2008 the National Child Abuse and Neglect Data System (NCANDS) reported that, nearly one-third (32.6%) of all victims of maltreatment were younger than 4 years of age. An additional 23.6 percent were in the age group 4–7 years and 18.9 percent were in the age group 8–11 years. In accordance with NCANDS data, Wulczyn (2009) found, the rate of maltreatment by age shows that infants, with an overall maltreatment rate of twenty-four per thousand, still face the greatest risk. They are 1.8 times more likely to be maltreated than one to three-year-olds, the group with the next highest maltreatment rate. Infant victimization rates exceed twenty per thousand in thirty states. The rate of maltreatment is highest for infants in all but two states. In short, few trends in maltreatment are as stable and clear as the link between age and maltreatment risk (Wulczyn 2009).

There are many possible reasons that infants have a higher rate for being abused. Friedrich and Boriskin (1976) implicated certain infant and early childhood characteristics as possible contributors to abuse. These include such factors as prematurity, low birth weight, difficult infant temperament, and early mother-infant separation. It was hypothesized that these variables interfered with the formation of secure mother-infant attachment, and/or augmented stress in the family, thus resulting in an increased prospect for abuse. Additionally, infants cannot defend themselves the same as older children. For these reasons it is intuitive that the youngest children had the highest rate of victimization, and overall, the victimization rates decreased for older age groups (NCANDS 2008).

2.4 Child Abuse and Death

Every year there are hundreds of children who die from abuse and neglect. In 2008, the U.S. Department of Health and Human Services found, in 2008, an estimated 1,740 children ages 0 to 17 died from abuse and neglect. This is compared to an estimated 1,760 children nationally, who died from abuse or neglect in 2007 and 1,530 children who died from abuse or neglect in 2006.

Additionally, the U.S. Department of Health and Human Services found that in 2007, more than 40 percent (42.2%) of all fatalities were children younger than one year. Additionally, 16.5 percent were children age one year, 10.7 percent were children age two years and 6.3 percent were children age

three years. Therefore, 75.7 percent were younger than four years old. Nearly 13 percent (12.9%) were between the ages of 4-7 years, thus indicating that the majority of children who die from child abuse or neglect are young children. In 2008, 80 percent of deaths occurred among children younger than age four; 10 percent among 4-7 year-olds; 4 percent among 8-11 year-olds; 4 percent among 12-15 year-olds; and 2 percent among 16-17 year-olds (U.S. Department of Health and Human Services).

2.5 Child Abuse and Juvenile Delinquency

The connection between juvenile delinquency and child abuse has been studied throughout the years and increasingly in the past few decades. The existence of a relationship between child abuse, juvenile delinquency, and adult crime is so well accepted by professionals and lay people that it is considered common knowledge (Schwartz, Rendon, & Chang-Ming, 1994). As reported by Schwartz, Rendon, and Chang-Ming (1994), in 1983, the U.S. Senate held hearings on the relationship between child abuse, juvenile delinquency, and adult criminal behavior. A subcommittee chaired by Senator Arlen Spector (R-PA) heard various witnesses testify to the existence of the maltreatment/delinquency relationship, but the Senator's own opening remarks indicate that he was already convinced that a relationship existed between abuse and delinquency, "Whether or not these abused and neglected children remain with their parents," the senator said, "they have greater likelihood of becoming juvenile delinquents and adult criminals than other children" (Subcommittee on Juvenile Justice, 1984, p. 1).

Research supportive of the relationship between juvenile delinquency and child abuse includes the pathway from childhood victimization of parental violence to adult offending and incarceration. In a study conducted by Hosser, Raddatz, and Windzio (2007), more than 20 percent of interviewees reported maltreatment by their parents during childhood, which is twice as high as the rate of the general population. Additionally, around 24 percent said that as a child they had received serious physical punishment. Widom's (1998) prospective data reveal that children with a documented history of childhood abuse and neglect, compared to non-abused children from the same neighborhood and born at the same time, are at a two times greater risk for arrest for a violent crime,

and are also at greater risk for earlier and more chronic involvement in criminal behavior.

Furthermore, Kaufman and Ziglar (1987) found a six-fold increase in adult abuse rates for those who had been abused. That is, approximately 30 percent of those persons who as children are physically abused, sexually abused, or severely neglected later maltreat their own children, compared to the 5 percent abuse rates in the general population. Finally, Dembo, Williams, Wothke, Schmeidler, and Brown (1992) found that there is a suggestion in the data that physical abuse is more important in understanding theft crime and index offending among black males, whereas sexual victimization is a more important factor in participation in drug sales among white males. Although the type of crime committed by the offender later in their adolescent life may vary, many researchers have found these offenders were abused or neglected as children.

Contrary to the research that has found a correlation between child abuse and juvenile delinquency, some argue there is a weak, if any, correlation between child abuse, juvenile delinquency and becoming an offender as an adult. Schwartz, Rendon, and Chang-Ming (1994) stated that the claim that child maltreatment is the leading cause of delinquency--including violent juvenile crime--cannot be substantiated by available evidence. The vast majority of the studies on this topic are too seriously flawed to be of significant policy value. The few rigorous studies that have been completed are either inconclusive or suggest a weak connection at best. Furthermore, Holmes (1977) reported that the majority of the studies on this topic were so poorly designed that no generalizations should be made from their findings. In agreement, Holmes and Doerner (1987) concluded that research, because of methodological flaws, could not provide empirical evidence of a relationship. Zingraff, Leiter, Myers, and Johnsen (1993, as cited by Schwartz, Redon, & Chang-Ming, 1994) claim that the relationship between maltreatment and delinquency has been overstated in the literature, and that the majority of studies were too seriously flawed to be conclusive or of any real policy or programmatic value mixed findings, inconclusive results, and poorly performed studies have led to the notion that no conclusive statement can be made about the correlation between child abuse and juvenile delinquency.

2.6 Alcohol and Child Abuse

As research has shown, being under the influence of alcohol affects behavior in a number of negative ways, including propensity to commit child abuse. Freisthler, Midanik, and Gruenewald (2004) found the number of alcohol outlets per 1,000 of population was positively related to rates of substantiated physical abuse. These findings are consistent with the theory that parents' "routine activities" may place them in situations that increase the probability they will commit child physical abuse or neglect. Parents living in neighborhoods with greater concentrations of outlets may be purchasing alcohol and drinking in the home, leading to greater occurrences of child physical abuse (Freisthler, Midanik, & Gruenewald, 2004). Also, DiLauro (2004) reported, according to the National Center on Addiction and Substance Abuse (as cited in Children's Bureau, 1999), children were three times more likely to be abused and four times more likely to be neglected if they had parents who were substance abusers. It has also been reported that 50 to 80 percent of all child protective services child abuse cases involve some level of parental substance abuse (National Center on Addiction and Substance Abuse, 1999, as cited in Children's Bureau, 1999).

2.7 Domestic Violence and Child Abuse

There appears to be a co-occurrence of domestic violence and child abuse. A nationwide study by Straus, Gelles and Steinmetz (1980) found that the highest rates of child abuse occurred in families with frequent domestic violence. In addition, approximately 77 percent of children from violent families had been abused at some time (Straus, Gelles, & Steinmetz, 1980). In a study performed by DiLauro (2004), thirteen perpetrators (9.3%) were domestic violence abusers and 44 (31.4%) were domestic violence victims. Twenty-nine (20.7%) were both domestic violence abusers and victims. Overall, 86 of the cases (61.4%) had domestic violence in the household, as opposed to 54 of the cases (38.6%), in which there was no mention of any domestic violence occurring. In many situations where domestic violence is occurring, child maltreatment is also occurring, in the same household. Also, children in domestically violent families are at substantially elevated risk for

physical child abuse compared with children in homes without domestic violence (Jouriles, McDonald, Smith Slep, Heyman, & Garrido, 2008).

Children who were subject to maltreatment may learn that violence is the answer to problems in the household. This can lead to the once abused child becoming the abuser in his/her adult relationships. Gratz, Paulson, Jakupcak, and Tull (2009) found that emotion dysregulation was positively associated with the perpetration of intimate partner abuse among men and fully mediated the relationship between childhood maltreatment and the frequency of intimate partner abuse. As such, results provide preliminary empirical evidence that men's violent behavior in the context of an interpersonal relationship may function to regulate unwanted and/or overwhelming emotions associated with adverse childhood experiences (Gratz, Paulson, Jakupcak, & Tull, 2009). Furthermore, Heyman and Smith Slep (2002) found support for the general cycle-of-violence hypothesis that family-of-origin violence increases the risk for adulthood family violence. However, the most typical outcome for individuals exposed to violence in their families of origin is to be nonviolent in their adult families. This is the case for both men and women, regardless of whether their exposure was to parent-child violence, inter-parental violence, or both (Heyman & Smith Slep, 2002). Therefore, although most individuals who are exposed to violence do not become violent in adulthood, there is an increased risk for a child who experiences violence as a child, to become violent as an adult.

One of the major causes of death in infants, in the form of physical abuse, is Shaken Baby Syndrome (SBS/S-IS). Isser (2006) found Shaken Baby Syndrome has been widely accepted as the basis for charges of child abuse or homicide and many caretakers and parents have been convicted of violently shaking their babies to death. Additionally, the victims of SBS/S-IS are rarely older than two years of age, with most less than six months old.

2.8 Recurrence of Child Abuse

Wulczyn (2009) found the risk of re-victimization recurrence for children placed in foster care drops because foster care is a protective environment (even though maltreatment also occurs in

foster homes). Recurrence following reunification from foster care is of particular importance because it provides a way to judge whether the decision to reunify was correct. Another issue is the interval between recurring reports (or victimization as the case may be). Over the life course, recurrence involving any given children can happen at any time. Reoccurrence most often occurs within two years, but children are at risk for substantially longer (Wulczyn, 2009). In a study performed by DiLauro (2004), fifteen (10.7%) of the perpetrators had previous Division of Youth and Family Services (DYFS) involvement due to allegations of physical abuse, forty-nine (35.0%) for neglect and twenty-seven (19.3%) for both physical abuse and neglect. Forty-nine of the perpetrators (35.0%) had no previous DYFS involvement.

National Child Abuse and Neglect Data System (NCANDS) in 2008 reported three-quarters of victims (75.0%) had no history of prior abuse. Furthermore, data from 2004-2007, as reported by NCANDS, revealed similar findings that nearly three-quarters of victims had no prior history. Therefore, from 2004 to 2008 only twenty-five percent had a history of priors.

2.9 Offender

According to the U.S. Department of Health and Human Services, (2000), a "Mother only" was reported as the perpetrator for 40.0 percent of child victims of abuse. Furthermore, a "Mother Only" was most commonly found to be responsible for neglect (46.9% of victims) and for physical abuse (32.1% of victims). In 2007, more than one-quarter (27.1%) of fatalities were perpetrated by the mother acting alone and nearly 39 percent (38.7%) of victims were maltreated by their mother acting alone. Finally, in 2009 nearly two-fifths of victims were maltreated by their mother acting alone, and more than one-quarter (27.3%) of fatalities were perpetrated by the child's mother acting alone (U.S. Department of Health and Human Services, 2009). In general the mother committed a higher percentage of offenses against a child, than a father, alone, with the exception of sexual assault.

According to the U.S. Department of Health and Human Services, (2000) a "Father Only" accounted for 16.6 percent of victims. Additionally, "Father Only" and "Other Relatives" were responsible for 21.5 percent and 19.4 percent of sexual abuse victims, respectively. In 2007, nearly 18

percent (17.9%) of victims were maltreated by their father acting alone. Finally, in 2009, one-fifth of victims were maltreated by their father acting alone (U.S. Department of Health and Human Services, 2009).

According to the U.S. Department of Health and Human Services, in 2000 "Both Parents" accounted for 18.7 percent of victims. In 2007, nearly 17 percent (16.8%) were maltreated by both parents. In 2009, eighteen percent (18.0%) of victims were maltreated by both parents and more than one-fifth (22.5%) of child fatalities were caused by both parents (U.S. Department of Health and Human Services, 2009).

In 2000, at least one parent was the perpetrator for 83.3 percent of victims, according to the U.S. Department of Health and Human Services. Furthermore, almost 90 percent (89.4%) of neglect victims, 81.5 percent of physical abuse victims, and 45.3 percent of sexual abuse victims, were abused by their parents. In 2007, child fatalities with unknown perpetrators accounted for 16.4 percent and nearly 70 percent (69.9%) of child fatalities were caused by one or more parents. Finally, in 2009, three-quarters (75.8%) of child fatalities were caused by one or more parent. However, child fatalities with unknown perpetrator relationship data accounted for 8.7 percent (U.S. Department of Health and Human Services, 2009). In conclusion, with the exception of sexual assault offense, more often than not, one or more of the child's parents commits the offense against the child.

2.10 Offenders Abused as Children

There have been studies done on offenders whom were abused as children. Many of these studies look at offenders who have committed any number of criminal acts. In a study performed by DiLauro (2004), he found that eighty-two perpetrators (58.6%) were maltreated as children, and 58 (41.4%) were not identified as being maltreated. However, the types of crimes the offenders were convicted over were not established in the article. There have been a few studies in the past that have linked childhood abuse to the offense the offender committed as an adult. However, the study found that more than fifty percent of the perpetrators were abused as children. This is a high amount of the perpetrators who were victims of a crime and later became criminals themselves.

Graham (1996) found that 70% of his survey respondents reported sexual victimization as a child. Felson and Lane (2009) quoted Windom's 1989 study of 908 children, "a multivariate analysis showed that physical abuse, neglect and sexual abuse were all associated with arrests for violent offenses as adults, although the effect for sexual abuse was not statistically significant" (pg 491). Felson and Lane (2009) found that "sexual abuse has extremely strong associations with sexual offenses, particularly sexual offenses against children, but it is only weakly associated with violent offenses that do not involve sexual activity" (pg. 498). However, "physical abuse is just as strongly associated with robbery and sexual assaults on adults as it is with assaultive violence. It is no more strongly related to the offenders' assaultive violence against their children then other types of assaults" (Felson and Lane, 2009 pg 498). Therefore, there have been studies that have linked childhood abuse to committing violent offenses as an adult. These studies revealed an association between being abused as a child and committing offense as an adult. The studies found strong associations when it comes to a sexual offense committed and the perpetrator being abused sexually as a child. Therefore, there is a correlation between an offender being abused as a child and the offender committing an offense as an adult.

2.11 Researchers Hypothesis

Research shows a disproportionate number of offenders have been victims of child abuse compared to the general population. However there is little research that focuses on the offense committed by an adult in relation to the abuse they experienced as a child. The current research hopes to fill in this gap. The researcher will specifically study offenders who have been convicted of or received deferred adjudication for committing crimes against children (as defined in Appendix A) in the State of Texas and are currently reporting to the Tarrant County Probation office. The researcher will survey these individuals in order to find a possible correlation between the offenders being convicted of crimes committed against a child and the relationship with their respective childhood. Although general research has been done with offenders who have committed any crime, the researcher will narrow this field of offenders down to only those who have committed crimes against

children, in Texas. The survey will consist of thirty-nine questions and then data analysis will be performed on the findings. The benefit to the new research will be narrowing down specifically if there is a correlation between offenders who committed the same crimes against children as were committed against themselves as children. Therefore, offenders who commit a physical or sexual offense against a child were abused as a child in the same manner, physically or sexually, as they offense they commit.

Chapter 3

Research Methodology

3.1 Institutional Review Board

A request to conduct research was submitted to the Institutional Review Board through the Office of Research Compliance at the University of Texas at Arlington in September of 2012. Included with the protocol was a survey aimed at examining a possible correlation between offenders in the State of Texas reporting to Tarrant County Probation office for offenses against a child and their respective childhood experience. Changes to the protocol were conducted as requested by the Institutional Review Board and final approval to conduct research was awarded in October of 2012.

3.2 Survey Instrument

The survey consists of a total of thirty-nine questions. There are nine demographic questions, five questions pertaining to participants' current conviction or deferred adjudication status and twenty-five questions pertaining to their respective childhoods (see Appendix B). The survey was designed to examine a possible correlation between offenders reporting to the Tarrant County Probation office whose current offense was committed against a child in the State of Texas and their respective childhood experiences. Written consent to administer the surveys was obtained from the Tarrant County Probation office and was submitted to the Institutional Review Board. The survey was completed voluntarily and anonymously.

An informed consent form as well as a brief description of the research was provided to each probationer. The survey was voluntary and the participants were assured that they could discontinue their participation at any time without consequence. Participants were not asked to sign consent forms to ensure total anonymity and were asked not to identify themselves in any way.

The nine demographic questions consisted of gender, racial/ethnic background, marital status, age, level of completed education, who the offender resided with during his/her childhood, at what age they began living with someone other than biological parents, what city/state they were born in and what city/state were they raised in until 17 years of age. There were then five questions

pertaining to their current and past criminal history, as it relates to convictions or deferred adjudication of an offense committed against a child. Finally, there were twenty-five questions that referred to the offender's own childhood and offenses that may/or may not have been committed against them. The survey consisted of two types of questioning: closed and open-ended.

Sixty-five surveys were distributed at the Tarrant County Probation office to probationers, by the researcher. These surveys also included the informed consent and letter to the probationer explaining the nature of the research. Surveys were distributed in October of 2012 after receiving permission from the Institutional Review Board at the University of Texas at Arlington. The probationers were instructed to read the informed consent and research letter prior to filling out the survey.

3.3 Sampling and Sample Size

The study was based on a population of probationers who are currently reporting to the Tarrant County Probation office for crimes committed against a child in the State of Texas. The researcher went to the Tarrant County Probation office and requested that the probationers, who met the qualifications of the study, take the survey. The survey was voluntary and the probationers had the opportunity to stop filling out the survey at any point during the process. A total of sixty-five surveys were administered to the probationers. Of the sixty-five probationers that reported during the time the researcher was at the probation office, all sixty-five agreed to take the survey. All surveys were distributed in October of 2012.

A higher number of males completed the survey compared to female probationers, with sixty-two of the surveys competed by males and three surveys completed by females. Of the probationers who completed the surveys, sixty-three percent were Caucasian, seven percent were Black, fifteen percent were Hispanic, six percent were Asian, three percent were Native American and three percent classified as Other. Because of the low number of female participants, comparisons based on gender could not be made.

3.4 Dependent and Independent Variables

The dependent variable in this study was the offense committed against a child by the probationer for which he/she was either convicted of or received deferred adjudication for. The independent variable in the study was the probationer's childhood experiences. The control variables included racial/ethnic background, marital status, level of education, who the probationer resided with growing up and where they were raised.

3.5 Timeline

The target date for gathering data was October of 2012. Permission to access the sample from the Institutional Review Board and the Tarrant County Probation office began in September of 2012 and was obtained in October of 2012. Data gathering was completed in October of 2012. Coding and analysis was completed by the end of November 2012.

3.6. Design Analysis

A cross-sectional survey design was used. The probationers were given a survey to complete following a conviction or deferred adjudication received for a crime committed against a child.

Analyses were conducted using survey responses in an effort to determine a possible relationship between the crime committed against a child and the probationers' respective childhood.

The surveys were coded in IBM SPSS Statistics Data Editor. Frequencies, cross-tabulations and T-tables were used to analyze the data. Pearson's r was used to determine correlations between the different variables.

Chapter 4 shows the analysis and findings of the survey research. Chapter 5 will offer an interpretation of the survey results, new policy implications, limitations on the current research and avenues for future research.

Chapter 4

Analysis

In section 4.1 the researcher will present analyses of the demographic data.

Section 4.2 offers an explanation of offenses committed against a child as defined by the State of Texas. The researcher will then analyze the offense committed by the probationers. One limitation to the research study is that none of the probationers have a prior conviction of an offense against a child; therefore, there can be no analysis of the probationers between their current convictions and previous convictions.

Probationers' childhood experiences will be analyzed in section 4.3.

4.1 Demographics

Table 4.1.1 shows that, of the probationers who completed the survey, approximately ninety-five percent were male respondents and approximately five percent were female respondents. The total number of respondents was sixty-five. Due to the low number of female respondents, no comparisons can be made regarding gender. The racial and ethnic backgrounds of the respondents are as follows, the majority of respondents were "Caucasian" (63%), followed by "Hispanic" (15%), "Black" (8%), "Asian" (6%), "Native American" (3%), and "Other" (3%). There was one female respondent who did not respond to the question of racial/ethnic background.

4.1 Gender and Racial/Ethnic Background

	Male	Female
Caucasian	39	2
Black	5	
Hispanic	10	
Asian	4	
Native American	2	
Other	2	

4.2 Probationers' Criminal History

Table 4.2.1 shows the offense for which the respondent was convicted or received deferred adjudication. Approximately twenty-two percent of respondents were convicted of or received deferred adjudication for committing injury to a child. Approximately twenty-eight percent of respondents were convicted of or received deferred adjudication for indecency with a child. Approximately five percent of respondents were convicted of or received deferred adjudication for aggravated assault against a child. Approximately nineteen percent of respondents were convicted of or received deferred adjudication for sexual assault of a child; whereas, approximately eight percent of respondents were convicted of or received deferred adjudication for aggravated sexual assault of a child. Finally, approximately seventeen percent of respondents were convicted of or received deferred adjudication for online solicitation of a minor. The definitions of the offense committed against a child, in the State of Texas, can be found in Appendix A. There were two respondents who did not state which offense they were convicted of or received deferred adjudication for.

4.2 Offense of Conviction or Deferred Adjudication

Offense Convicted of/Received Deferred Adjudication for	Percentage	Frequency	
Injury to a Child	22	14	
Indecency with a Child	28	18	
Aggravated Assault of a Child	5	3	
Sexual Assault of a Child	19	12	
Aggravated Sexual Assault of a Child	8	5	
Online Solicitation of a Minor	17	11	

^{*}Totals may exceed or be lower than 100 percent due to rounding

As is indicated in Table 4.2.2, approximately twenty percent of respondents committed their offense against a stranger. However, approximately forty-two percent of respondents committed their offense against a family member. Finally, approximately thirty-four percent of the respondents

reported to have committed their offense against a known non-family member. Only sixty-two of the respondents identified if their victims were a stranger, family member or known non-family member.

4.3 Identified Victims

Victim	Percentage	Frequency	
Stranger	20	13	
Family Member	42	27	
Known Non-Family Member	34	22	

^{*}Totals may exceed or be lower than 100 percent due to rounding

4.3 Probationer's Respective Childhoods

Data was next analyzed using cross-tabulation to determine how many respondents were abused prior to the age of 17, in what manner they were abused and what offense they committed. Twenty-five respondents reported being abused as a child, either physically or sexually. This is approximately thirty-eight percent of the respondents.

Table 4.3.1 shows the number of respondents who were physically and/or sexually abused by a family member, a known non-family member or a stranger, prior to the age of 17. The researcher found that there were twenty-two respondents who reported being physically and/or sexually abused by a family member. The researcher also found that sixteen of the respondents reported being physically and/or sexually assaulted by a known non-family member. Finally, the researcher found that six of the respondents reported being physically and/or sexually abused by a stranger. Of the twenty-two respondents who reported being abused by a family member, ten of them committed an offense against a family member. Furthermore, eight of the sixteen offenders who were abused by a known non-family member committed an offense against a known non-family member. Most notably, however, none of the six individuals who were abused by a stranger committed an offense against a stranger.

4.4 Frequency and Percent of Respondents Who Were Abused

	•	ber	Sexual Abused Famil Membe Prior	by y er	Physica Abused Known Non-Fa Prior 1	by n mily	Sexual Abuse Knov Non-Fa Prior	d by vn amily	Physica Abused Strang Prior 1	l by ger	Sexual Abused Stran Prior	l by ger
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Freq	11	54	11	52	4	57	12	50	3	60	3	60
Percent	17	83	17	80	6	89	19	77	5	92	7	92

^{*}Totals may exceed or be lower than 100 percent due to rounding

Additionally, of the sixty-five respondents, seventeen (26%) committed an offense of physical abuse (injury to a child or aggravated assault of a child) (refer to Table 4.2.1). There were fifteen respondents (23%) who reported being physically abused. Of the fifteen respondents who reported being physically abused, five of the respondents committed physical abuse against a child. Therefore, twenty-nine percent of the respondents who committed physical abuse were physically abused as children.

4.5 Offense Committed by Respondent and Physical Abuse

		Physically Abused by Family Member Prior 17		Physically Abused by Known Non-Family Prior 17		Physically Abused by Stranger Prior 17		
		Yes	No	Yes	No	Yes	No	
	Injury to a Child	2	12	2	12	1	13	
	Indecency with a Child	3	15	1	15	1	15	
	Aggravated Assault of a Child	1	2	0	2	0	3	
What Offense were	Sexual Assault	3	9	0	11	0	11	
you convicted of or received deferred adjudication for?	Aggravated Sexual Assault of a Child	0	5	1	4	1	4	
	Online Solicitation of a Minor	2	9	0	11	0	11	

Furthermore, of the sixty-five respondents forty-six (71%) committed an offense of sexual abuse (indecency with a child, sexual assault of a child, aggravated sexual assault of a child or online solicitation of a minor) (refer to table 4.2.1). There were twenty-two (34%) respondents who reported being sexually abused. Therefore, thirty-four percent of the respondents were sexually abused as a child. Of the twenty-two respondents who reported being sexually abused, thirteen of those respondents (28%) committed an offense of sexual abuse against a child were, themselves, sexually abused as children.

4.6 Offense Committed by Respondent and Sexual Abuse

		Sexually Abused by Family Member Prior 17		Sexually Abused by Known Non-Family Prior 17		Sexually Abused by Stranger Prior 17		
		Yes	No	Yes	No	Yes	No	
	Injury to a Child	4	10	4	9	1	13	
	Indecency with a Child	2	15	4	12	1	15	
	Aggravated Assault of a Child	0	3	1	2	0	3	
What Offense	Sexual Assault	3	9	2	9	0	11	
were you convicted of or received deferred adjudication for?	Aggravated Sexual Assault of a Child	1	4	0	5	1	4	
	Online Solicitation of a Minor	0	10	1	10	0	11	

Twenty-five respondents reported being abused either physically, sexually or both physically and sexually, prior to the age of 17. There were a total of forty-three reports of abuse from the twenty-five respondents who reported being abused. The respondents recalled the age they were first abused in thirty-five of the forty-three incidents of original abuse.

4.7 Age of First Abuse

Age	Age First Physically Abused	Age First Sexually Abused	
3	-	1	
4	1	2	
5	1	1	
6	3	5	
7	2	-	
8	1	-	
9	1	2	
10	-	2	
11	1	2	
12	1	2	
13	-	1	
14	1	2	
16	1	1	
17	-	1	

Also, the researcher found that there were forty-three reports of abuse (physical and sexual) committed against the respondents prior to them turning 17 years old. Of these forty-three reports of violence, the police only responded to the residence of the respondents to make a report of the violence against them four times. Of the forty-three reports of abuse, there were only two respondents who stated child protective services had investigated the abuse, against them. Additionally, of the forty-three reports of abuse, there were only two reports of the abuser being charged with a crime committed against a respondent. Finally, of the forty-three reports of abuse, only one respondent reported their abuser being convicted of a crime committed against the respondent as a child.

Analysis was undertaken to determine a possible relationship between abuse suffered as a child and offense committed as an adult. Data were analyzed using Pearson's r. The only significant correlations were between the offender being either physically or sexually abused by a stranger and

the offender committing the offense of aggravated sexual assault. There were no other significant correlations found between the offender being abused as a child and the offense they committed against a child.

In chapter 5, the researcher will discuss the results, identify research limitations and offer future policy implications.

Table 4.8 Correlations of Childhood Abuse and Offense of Conviction/Deferred Adjudication

	Q1.	Q2.	Q3.	Q4.	Q5.	Q6.	Q7.	Q8.	Q9.	Q10.	Q11.	Q12.
Q	1	.318**		.245*				.156	.172	.149	.060	.060
1.		.009	.365	.048	.234	.061	.771	.221	.181	.248	.642	.642
•	.318*	* 1		289	175		.004	.091	.014	065	032	032
2.	.009		.285	.019	.159	.026	.973	.477	.913	.616	.803	.803
Q	.113	134	1	103	062	098	096	.103	.048	080	.050	.050
3.	.365	.285		.411	.618	.436	.446	.423	.711	.538	.697	.697
О	.245*	289*	103	1	135	211	102	096	.122	.014	.103	.103
		.019	.411		.280	.089	.417		.345	.915	.423	.423
n	149	175	- 062	- 135	1	128	130	020	163	.145	210	210
		.159		.280		.306	.301	.879	.205	.261	.098	.098
\cap	.232	274*	- 008	211	- 128	1	- 015	.200	.122	.121	.103	.103
-	.061	.026		.089	.306	1	.905	.116	.345	.350	.423	.423
_	027	.004	006	102	120	015	1	CO11	**115	.007	097	097
	037 .771		.446	102 .417	.301	.905	1	.000	.373	.956	097 .449	097 .449
_	150	001	102	006	020	200	CO 1 1		0.60	000	104	105
	.156 .221	.091 .477	.103 .423	096 .453	020 .879	.200 .116	.000	* 1	.060 .650	.000 1.000	.104 .425	.105 .415
-	.172 .181	.014 .913		.122 .345	163 .205	.122 .345	115 .373	.060 .650	1	.369**	.859* .000	** .552** .000
٠.	.101	.713	./11	.545	.203							
	.149	065 .616		.014 .915	.145 .261	.121 .350	.007	.000 1.000	.369** .003	1	.270* .034	· .269* .036
10.	.240	.010	.556	.913	.201	.550	.930	1.000	.003		.034	.030
		032	.050	.103		.103	097	.104	.859**		1	
11.	.642	.803	.697	.423	.098	.423	.449	.425	.000	.034		.000
		032	.050	.103		.103	097	.105	.552**			** 1
12.	.642	.803	.697	.423	.098	.423	.449	.415	.000	.036	000	

^{**.} Correlation is significant at the 0.01 level (2-tailed)

^{*.} Correlation is significant at the 0.05 level (2-tailed)

Chapter 5

Conclusions

5.1 Results and Implications

The researcher surveyed individuals reporting to the Tarrant County Probation office who committed an offense against a child in the State of Texas to determine if there was a correlation between the offense they committed and their respective childhoods. Repondents claimed forty-three reports of abuse against them (physical and sexual combined) prior to the respondents turning seventeen years old. Although there were forty- three reports of abuse against the respondents, some of the respondents reported more than one type of abuse. The respondents only reported four times in which the police responded to their residence for acts of abuse against them and only two of the respondents reported child protective services getting involved in investigating acts of abuse against them. Additionally, of the forty-three reports of abuse, only one respondent reported their abuser convicted of a crime committed against the respondent. Therefore, there was little or no investigation or intervention by the police or child protective services in most instances of the respondents being abused as children.

The National Child Abuse and Neglect Data System (NCANDS) reported in 2008 that approximately forty-five percent of all child abuse victims were "White", twenty-two percent were "African-American", and approximately twenty-one percent were "Hispanic". The current study revealed a slightly higher percentage of "Caucasian" respondents (63%), compared to the national average of child abuse victims. However, fewer respondents were both "Black"(8%), and "Hispanic" (15%), than the national percentages of child abuse victims. One factor that could result in this disparity is the number of race/ethnicity categories available to the respondent. Whereas numerous choices were offered in the survey, the national data is taken from law enforcement and child protective services information which may only break down racial and ethnic background into fewer categories.

According to the National Child Abuse and Neglect Data System (NCANDS), in 2008 there were 702,000 children who were reported victims of child maltreatment. Of those 702,000 NCANDS reported that nearly one-third (32.6%) of all victims of maltreatment were younger than 4 years old. An additional 23.6 percent were in the age group 4–7 years and 18.9 percent were in the age group 8–11 years. The current study revealed thirty-five reports of abuse where respondents recalled the age of first abuse. Only one respondent reported abuse younger then the age of four. Fifteen of the respondents (43%) reported they were first abused between the ages 4-7. Further, nine respondents (26%) reported they were abused between the ages 8-11 years old. (Refer to Table 4.3.4). NCANDS did not report the percent of victims between the ages of 12-17 years old. However, ten of the respondents in the current research recalled their first instance of abuse between the ages of 12-17; this is approximately twenty-nine percent.

Age at first instance of abuse as reported in the current research is not supportive of national data. The most significant difference is the percent of children abused nationally prior to the age of four is significantly higher than the percent of children who reported being abused under four years of age in the current research. One reason for this difference could be related to the reporting system.

The researcher relied solely on the respondent's memory of their initial abuse; however, NCANDS takes their data from law enforcement reports as well as reports to child protective services.

Therefore, reports can be made to both these agencies younger than four by individuals other than the child victim, themselves. In turn, NCANDS does not rely strictly on the memory of the abused child.

There were sixty-five respondents who took the surveys; of these sixty-five, twenty-five of them reported being abused as children (38%), either physically or sexually. In a study conducted by Hosser, Raddatz, and Windzio (2007), more than 20 percent of interviewees reported maltreatment by their parents during childhood, which is twice as high as the rate of the general population. The study was conducted with incarcerated men who were between the ages of 14 and 24. However, in a study of the records of parents and caregivers who were referred to the New Jersey Division of Youth and Family Services for psychological evaluations, performed by DiLauro (2004), eighty-two perpetrators

(58.6%) were maltreated as children, and 58 (41.4%) were not identified as being maltreated. The results of the current study are in line with previous research. These findings are higher than those of the incarcerated sample in Hosser et al. but lower than the parental/caregiver evaluations in DiLauro..

Also, the U.S. Department of Health and Human Services reported, via (NCANDS), a nationally estimated 763,000 duplicate and 702,000 unique number of children were found to be victims of child maltreatment in the (FFY) 2009. Based on the unique number of victims, an estimated 18 percent were physically abused, and an estimated 10 percent were sexually abused. In 2010, the US Department of Health and Human Services reported that approximately 695,000 children were victims of some form of maltreatment; of these, more than 17% were physically abused and just under 10% were sexually abused. Of the sixty-five respondents in the current research, twenty-three percent reported being physically abused as a child and thirty-four percent reported being sexually abused. Although the national data reported a higher rate of physical abuse than sexual abuse, the survey revealed more respondents to have been sexually abused than physically abused. The percentage of sexual abuse reported by the respondents is notably higher than the percentage reported to NCANDS.

Of the sixty-five respondents who took the survey, seventeen committed an offense of physical abuse (injury to a child or aggravated assault of a child). Therefore, twenty-six percent of the respondents committed an offense of physical abuse. Additionally, of the sixty-five respondents, forty-six committed an offense of sexual abuse (indecency with a child, sexual assault of a child, aggravated sexual assault of a child or online solicitation of a minor); therefore, seventy-one percent of respondents committed an offense of sexual abuse. There were two respondents who did not report what type of offense they committed. Of the sixty-five respondents, fifteen of them reported being physically abused as a child and five of those fifteen committed physical abuse against a child. Therefore, only thirty-three percent of the respondents who were physically abused as children, committed physical abuse against a child. Of the sixty-five respondents, twenty-two of them reported

being sexually abused as a child and of those twenty-two; thirteen committed a form of sexual abuse. Therefore, fifty-nine percent of the respondents who committed a sexual offense were sexually abused as children.

In prior research studies, there has been evidence that sexual abuse has strong correlations with sexual offenses. In a study by Felson and Lane (2009), they found that "sexual abuse has extremely strong associations with sexual offenses, particularly sexual offenses against children" (pg. 498). Additionally, Graham (1996) found that 70% of his respondents reported sexual victimization as a child. Although the current research revealed 59% of respondents who were sexually abused as a child committed a sexual offense of a child, this did not prove to be significant. The researcher found that seventy-one percent of the respondents had committed a form of sexual abuse; whereas, only thirty-nine percent of the respondents reported being sexually assaulted as a child. Additionally, of the twenty-two respondents who reported being sexually abused as a child only thirteen of them had committed a form of sexual abuse against a child. Therefore, sixty-one percent of the respondents were not sexually abused prior to committing an offense of sexual abuse against a child. The researcher found no statistically significant correlations between being sexually assault as a child and committing a sexual abuse offense against a child.

On the other hand, Felson and Lane (2009) found that it [sexual abuse] is only weakly associated with violent offenses that do not involve sexual activity" (pg. 498). The researcher found that forty-one percent of the respondents who reported being sexually abused as a child committed physical abuse against a child. There was no statistical significance between being sexually abused as a child and committing sexual abuse against a child. Also, the researcher found that twenty-six percent of the respondents committed an offense of physical abuse. Therefore, the researcher did not find evidence that being physically abused as a child correlates with committing physical abuse of a child. The researcher found that only thirty-three percent of the respondents who were physically abused as children, committed physical abuse against a child. Therefore, twenty-nine percent of the

respondents who were physically abused committed an offense of physical abuse. Additionally, the researcher found that fifty-nine percent of respondents who were sexually abused as children, committed sexual abuse against a child. Therefore, twenty-eight percent of the respondents who were sexually abused committed an offense of sexual abuse.

There was a moderate, positive correlation between the offender being sexually assaulted by a family member prior to the age of 17 and committing the offense of online solicitation of a minor. There was also a moderate, negative correlation between being, either physically or sexually, abused by a stranger and committing the offense of aggravated sexual assault of a child. Therefore, respondents who reported being abused as a child, by a stranger, were less likely to commit the offense of aggravated sexual assault. This was statistically significant at the 0.10 level. However, the researcher did not find a strong correlation between the offender being abused as a child and the offense they committed. Specifically, the researcher did not find a strong correlation between the offenders committing the same offense as abuse endured as a child. Offenders who were abused as children were no more likely to commit an offense against a child in the same manner they were abused as a child.

5.2 Study Limitations

One limitation to the research is the response rate of only three females. The lack of a larger sample of females prevented statistical analysis by gender. Additionally, the survey was limited to the sampling of probationers only at the Tarrant County Probation office in Tarrant County Texas, this study should, in turn, be replicated at other probation offices. The Bureau of Justice Statistics (2010) reported in 2008 there were 4,270,917 individuals on probation in the United States. Then in 2010, there were approximately 4,055,500 adults on probation (Bureau of Justice Statistics, 2011). This makes the population for the study limited to a small sample of the probation population in the United States.

`Furthermore, there are many different definitions of abuse, especially physical abuse. As an individual grows from infant, to child, to adolescent to adult, they are taught by the individuals surrounding them. Everyone has a different upbringing; therefore, taught the meaning of abuse in different manners. One child may be taught that physically striking a child is a form of punishment, regardless of the bruising or marks. Whereas another child may be taught that any form of physical striking is abuse. Because of the differences in how children are raised and taught, there are many different definitions of physical abuse. Not all individuals are taught the criminal definition of abuse. Respondents may regard physical abuse in different manners and in turn, this may skew the statistics on whether or not they consider themselves to have been abused as a child.

Another limitation to the research is the researcher used the Texas Penal Code definitions of physical and sexual assault. These definitions relate specifically to the offense committed by the probationers. However, definitions of physical and sexual assaults, what constitutes a specific offense and the grade and punishment of the offense vary in each state. Therefore, what might allow for an individual to be on probation in Texas, may not allow for that same individual to be on probation in another state.

Finally, there are no probationers who were interviewed that had a prior conviction or served deferred adjudication for a crime committed against a child; therefore, there is no measure as to the respondents respective childhood as it relates to multiple offenses committed against a child.

Additionally, no probationer had a conviction for murdering a child. Therefore the study was limited in its ability to examine a relationship among more violent and chronic offenders and history of childhood abuse.

5.3 Future Studies

Future research should be performed at other probation offices throughout Texas as well as the United States in order to allow for a broader sample. Furthermore, studies should be done with not only first time offenders, but those offenders who have prior convictions for a crime committed against a child. Expanding this study to other probation offices, as well as those offenders who have

prior criminal histories can help broaden the spectrum of knowledge needed to implement policies to help those who have been abused and those who have committed offenses against children.

5.4 Conclusions

In conclusion, this study examined the possible correlations between those respondents who have committed a crime against a child and their respective childhoods. There were forty-three reports of abuse that the respondents reported as being abused themselves as children, although some of the respondents reported more than one type of abuse. There were sixty-five respondents who participated in the survey and thirty-eight percent of those respondents reported being abused as a child. The results indicated, even with the amount of abuse reported, there was no strong correlation between the type of abuse the offender endured during childhood and the offense they committed against a child as an adult.

Appendix A

Definitions

Texas Penal Code

The crimes against children in Texas the researcher will use in this study are defined as follows: injury to a child, indecency with a child, aggravated assault, sexual assault and aggravated sexual assault.

- A. Injury to a child as defined by the Texas Penal Code section 22.04, (a) A person commits an offense if he intentionally, knowingly, recklessly, or with criminal negligence, by act or intentionally, knowingly, or recklessly by omission, causes to a child, elderly individual, or disabled individual: (1) serious bodily injury; (2) serious mental deficiency, impairment, or injury; or (3) bodily injury. (c) In this section: (1) "Child" means a person 14 years of age or younger.
- B. Indecency with a child as defined by the Texas Penal Code is section 21.11 (a) A person commits an offense if, with a child younger than 17 years of age, whether the child is of the same or opposite sex, the person: (1) engages in sexual contact with the child or causes the child to engage in sexual contact; or (2) with intent to arouse or gratify the sexual desire of any person: (A) exposes the person's anus or any part of the person's genitals, knowing the child is present; or (B) causes the child to expose the child's anus or any part of the child's genitals (c) In this section, "sexual contact" means the following acts, if committed with the intent to arouse or gratify the sexual desire of any person: (1) any touching by a person, including touching through clothing, of the anus, breast, or any part of the genitals of a child; or (2) any touching of any part of the body of a child, including touching through clothing, with the anus, breast, or any part of the genitals of a person.
- C. Aggravated Assault as defined by the Texas Penal Code section 22.02 (a) A person commits an offense if the person commits assault as defined in Sec. 22.01 and the person: (1) causes serious bodily injury to another, including the person's spouse; or (2) uses or exhibits a deadly weapon during the commission of the assault.

- D. Sexual Assault as defined by the Texas Penal Code section 22.011 (2) intentionally or knowingly: (A) causes the penetration of the anus or sexual organ of a child by any means; (B) causes the penetration of the mouth of a child by the sexual organ of the actor; (C) causes the sexual organ of a child to contact or penetrate the mouth, anus, or sexual organ of another person, including the actor; (D) causes the anus of a child to contact the mouth, anus, or sexual organ of another person, including the actor; or (E) causes the mouth of a child to contact the anus or sexual organ of another person, including the actor. (c) In this section: (1) "Child" means a person younger than 17 years of age.
- E. Aggravated Sexual Assault as defined by the Texas Penal Code section 22.021, (B) intentionally or knowingly: (i) causes the penetration of the anus or sexual organ of a child by any means; (ii) causes the penetration of the mouth of a child by the sexual organ of the actor; (iii) causes the sexual organ of a child to contact or penetrate the mouth, anus, or sexual organ of another person, including the actor; (iv) causes the anus of a child to contact the mouth, anus, or sexual organ of another person, including the actor; or (v) causes the mouth of a child to contact the anus or sexual organ of another person, including the actor; and (2) if: (A) the person: (i) causes serious bodily injury or attempts to cause the death of the victim or another person in the course of the same criminal episode; (ii) by acts or words places the victim in fear that death, serious bodily injury, or kidnapping will be imminently inflicted on any person; (iii) by acts or words occurring in the presence of the victim threatens to cause the death, serious bodily injury, or kidnapping of any person; (iv) uses or exhibits a deadly weapon in the course of the same criminal episode; (v) acts in concert with another who engages in conduct described by Subdivision (1) directed toward the same victim and occurring during the course of the same criminal episode; or (vi) administers or provides flunitrazepam, otherwise known as rohypnol, gamma hydroxybutyrate, or ketamine to the victim of the offense with the intent of facilitating the commission of the offense; (B) the victim is younger than 14 years of age.

F. Online Solicitation of a Minor as defined by the Texas Penal Code section 33.021, (b) A person who is 17 years of age or older commits an offense if, with the intent to arouse or gratify the sexual desire of any person, the person, over the Internet, by electronic mail or text message or other electronic message service or system, or through a commercial online service, intentionally:(1) communicates in a sexually explicit manner with a minor; or (2) distributes sexually explicit material to a minor, (c) A person commits an offense if the person, over the Internet, by electronic mail or text message or other electronic message service or system, or through a commercial online service, knowingly solicits a minor to meet another person, including the actor, with the intent that the minor will engage in sexual contact, sexual intercourse, or deviate sexual intercourse with the actor or another person.(d) It is not a defense to prosecution under Subsection (c) that:(1) the meeting did not occur;(2) the actor did not intend for the meeting to occur; or(3) the actor was engaged in a fantasy at the time of commission of the offense.(e) It is a defense to prosecution under this section that at the time conduct described by Subsection (b) or (c) was committed:(1) the actor was married to the minor; or (2) the actor was not more than three years older than the minor and the minor consented to the conduct. (f) An offense under Subsection (b) is a felony of the third degree, except that the offense is a felony of the second degree if the minor is younger than 14 years of age or is an individual whom the actor believes to be younger than 14 years of age at the time of the commission of the offense. An offense under Subsection (c) is a felony of the second degree. (g) If conduct that constitutes an offense under this section also constitutes an offense under any other law, the actor may be prosecuted under this section, the other law, or both.

Offenders' Race

The offenders' race will be divided into six categories, consisting of: Caucasian, Black, Hispanic, Asian, Middle Eastern, Native American and Other.

Family Relationships

The offenders family relations will be determined by the family being a two biological parent household, one biological parent household, biological mother with step-father, biological

father with step-mother, any family member other than a biological parent, a foster home or adoptive parents.

Offender/Victim Relations

The offender/victim relations will be divided into three sub-categories. First, known and related too: offender and victim. Second, known and unrelated too: offender and victim. Third, stranger on stranger: offender and victim.

Abuse vs. Maltreatment

In his paper I will interchange the terms abuse and maltreatment as the same meaning, respectively.

Appendix B

Survey Instrument

INFORMED CONSENT

PRINCIPAL INVESTIGATORS (PI)

Alyssa Wadas, Graduate Student University of Texas at Arlington, Alyssa.wadas@mavs.uta.edu

TITLE OF PROJECT

Probationers Convicted of Crimes Against Children and Their Respective Childhoods

INTRODUCTION

You are being asked to participate in a study of individuals on probation convicted of crimes committed against children and your own childhood. Your participation is voluntary. You may refuse to participate at any time with no consequence to you. Please ask questions if there is anything you do not understand.

PURPOSE

This study intends to answer the following question: 1) Were probationers, who were, convicted of crimes against children in Texas, abused as children (prior to age 17) in the same manner as the crime of which they were convicted?

PROCEDURES

You are being asked to answer several questions on a survey. The survey should take approximately ten minutes. The survey will consist of 39 questions regarding you and your past.

DURATION

The study should take approximately 20 minutes total. The survey should take approximately 10 minutes to complete.

NUMBER OF PARTICIPANTS

100 participants in the study.

POSSIBLE BENEFITS

We do not anticipate a direct benefit to you. However, with a better understanding of your past, as related to your current criminal convictions, research can lead to better rehabilitation and/or treatment programs to help prevent recidivation. This study can help identify those who are abused or neglected and in turn commit crimes of abuse against children. With a better understanding of adults who abuse in the same manner that they were once abused, society can start to have a better understanding of how to try and help the abused children from becoming abusers themselves. Additionally, treatment programs can be updated or new programs added that can help to rehabilitate prisoners or treat abused prior to committing an offense.

POSSIBLE RISKS/DISCOMFORTS

This survey will ask you potentially sensitive and uncomfortable information about your past experiences, as a child, and your current convictions, as related to abusive situations. There will be no identifying information asked of you as part of the research, you will remain completely anonymous. The survey was constructed in a straight-forward manner and as minimally intrusive as possible to minimize this likelihood. You can refuse to answer any questions on the survey. Additionally, the researcher will be able to provide you with information on counseling referrals, if you should get upset while participating in the research.

ALTERNATIVE PROCEDURES

You can refuse to participate in this research or quit at any time without consequence.

VOLUNTARY PARTICIPATION

This research has nothing to do with your responsibilities or experiences as related to your probation.

COMPENSATION

No compensation.

VOLUNTARY PARTICIPATION

Participation in this study is strictly voluntary. You have the right to decline participation in any or all study procedures or quit at any time at no consequence.

CONFIDENTIALITY

We will make every effort to ensure that your responses are kept confidential. As such, I am not asking you to provide your name or signature on any documents associated with this study in order to protect your identity. All data collected from this study will be stored by the principal investigator, maintained at The University of Texas at Arlington, for at least five (5) years after the end of this study. The results of this study may be published and/or presented at meetings without naming you as a participant. Additional studies may come from the information you have provided, however, reporting of results will be kept strictly anonymous, and your information will not be linked to you in any way.

Although your rights and privacy will be maintained, the University of Texas Arlington Institutional Review Board (IRB), and the researchers with this study will have access to the study records. Your records will be kept completely confidential according to current legal requirements. They will not be revealed unless required by law, or as noted above. The IRB at UTA has reviewed and approved this study and the information within this consent form. If in the unlikely event it becomes necessary for the Institutional Review Board to review your survey, the University of Texas at Arlington will protect the confidentiality of those records to the extent permitted by law.

CONSENT TO PARTICIPATE

By agreeing to continue with the survey, you confirm that you are 18 years of age or older and have read or had this document read to you. You have been informed about this study\'s purpose, procedures, possible benefits and risks, and you have received a copy of this form. You have been given the opportunity to ask questions before you participate, and you have been told that you can ask other questions at any time.

You voluntarily agree to participate in this study. By continuing with the survey, you are not waiving any of your legal rights. Refusal to participate will involve no penalty or loss of benefits to which you are otherwise entitled. You may discontinue participation at any time without penalty or loss of benefits, to which you are otherwise entitled.

CONTACT FOR QUESTIONS

Alyssa Wadas Graduate Student, University of Texas at Arlington Alyssa.wadas@mavs.uta.edu

Any questions you may have about your rights as a participant or a study-related injury may be directed to the UTA Office of Research Administration; Regulatory Services at 817-272-2105 or regulatory services@uta.edu.

Demographic Information

1.	What is your gender? [] Male
	[] Female
2.	What is your Racial/Ethnic background?
	 [] Caucasian [] Black [] Hispanic [] Asian [] Middle Eastern [] Native American [] Other
3.	What is your marital status?
	 [] Single [] Married with no children [] Married with biological children [] Married with step-children [] Divorced [] Widowed [] Other
4.	Age
5.	Level of completed education.
	 [] No high school [] Some high school [] High school diploma/GED [] Some college [] Associates degree [] Bachelors degree [] Masters degree [] PhD
6.	During the majority of your childhood, who did you live with?
	 [] Both biological parents [] One biological parent [] Biological mother and step-father [] Biological father and step-mother [] Family member other than a biological parent [] Foster home [] Adoptive parents (non-family)

7.	If you grew up in a foster home, with adoptive parents or a step-parent, at what age(s) did you begin to live in the new home?
8.	What city/state were you born in?
9.	What city/state(s) were you raised in from the time you were born until 17 years old?
Questionnaii	re
10.	What offense were you convicted of? [] Injury to child [] Indecency with a child [] Aggravated assault of a child [] Sexual assault of a child [] Aggravated sexual assault of a child
11.	Was your offense committed against a stranger, family member or known non-family member?
12.	As an adult, do you have any previous convictions for committing a crime against a child (excluding your current conviction of which you are serving time)? [] Yes [] No
13.	If you answered yes to question #12, what offense(s) were you previously convicted of? [] Injury to a child [] Indecency with a child [] Aggravated assault of a child [] Sexual assault of a child [] Aggravated sexual assault of a child

14.	As an adult, how many previous convictions do you have for criminal acts against a child?
	[] 0 [] 1-3 [] 4-6 [] 7-9, [] 10+
15.	Were you physically abused by a family member before the age of 17?
	[] Yes [] No
16.	If you answered yes to question #15, how many times were you physically abused by a family member before age 17?
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+
17.	Were you sexually abused by a family member before age 17?
	[] Yes [] No
18.	If you answered yes to question #17, how many times were you sexually abused by a family member before age 17?
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+
19.	Where you physically abused by a known individual, other than a family member?
	[] Yes [] No
20.	If you answered yes to question #19, how many times were you physically abused by a known individual other than a family member before age 17?
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+

21.	Where you sexually abused by a known individual, other than a family member?
	[] Yes [] No
22.	If you answered yes to question #21, how many times were you sexually abused by a known individual other than a family member before age 17?
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+
23.	Were you physically abused by a stranger before age 17?
	[] Yes [] No
24.	If you answered yes to question # 23, how many times were you physically abused by stranger before age 17?
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+
25.	Were you sexually abused by a stranger before age 17?
	[] Yes [] No
26.	If you answered yes to question # 25, how many times were you sexually abused by stranger before age 17?
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+
27.	If you have been physically abused, at what age did you first receive the abuse?
28.	If you have been sexually abused, at what age did you first receive the abuse?

29.	How many times did the police respond to your residence for reports of a criminal act against you?							
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+							
30.	What criminal acts did the police respond for and who committed these acts against you?							
31.	Did Child Protective Services investigate accusations of abuse against you? [] yes [] no [] unknown							
32.	How many times did Child Protective Services respond to your home?							
	[] 0 [] 1-3 [] 4-6 [] 7-9 [] 10+							
33.	Were you removed from your residence by Child Protective Services due to an abusive situation? [] yes [] no							
34.	If you answered yes to question #33, at what age were you removed from your residence and what was the nature of the abusive situation?							

35.	If you answered yes to question #33, where were you placed by Child Protective Services?
	[] back in the same residence [] in foster care [] with another family member [] adoptive parents [] other (explain)
	
36.	If you were abused, was your abuser charged with committing a criminal act against you?
	[] Yes [] No [] Unknown [] Not abused
37.	If you answered yes to question #36, what criminal act was your abuser charged with?
	 [] Injury to child [] Indecency with a child [] Aggravated assault of a child [] Sexual assault of a child [] Aggravated sexual assault of a child
38.	If you were abused, was your abuser convicted of a criminal act against you?
	[] Yes [] No [] Unknown [] Not abused
39.	If you answered yes to question #38, what criminal act was your abuser convicted of?
	 [] Injury to child [] Indecency with a child [] Aggravated assault of a child [] Sexual assault of a child [] Aggravated sexual assault of a child

References

- Bureau of Justice Statistics.(2011). Probation and parole in the United States, 2010.Retrieved 23 November 2012 from http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=2239.
- Dembo, R., Williams, L., Wothke, W., Schmeidler, J., & Brown, C.H. (1992). The role of family factors, physical abuse, and sexual victimization experiences in high-risk youths' alcohol and other drug use and delinquency: a Longitudinal model. *Violence and Victims.Volume*, 7(3), *Pg.* 245-266. Retrieved 6 July 2011 from http://www.questia.com/library/1P3-1468873331/the-role-of-family-factors-physical-abuse-and-sexual.
- Dembo, R., Williams, L., La Voie, L., Berry, E., Getreu, A., Wish, E., Schmeidler, J., & Washburn, M. (1989) Physical abuse, sexual victimization, and illicit drug use: Replication of a structural analysis among a new sample of high-risk youths. *Violence and Victims*, 4(2) pg. 121-138. Retrieved 25 June 2011 from http://www.questia.com/library/1P3-1468565181/physical-abuse-sexual-victimization-and-illicit.
- DiLauro, M.D. (2004). Psychosocial factors associated with types of child maltreatment. *Child Welfare*, 83(1) pg. 69-99. Retrieved 25 June 2011 from http://www.questia.com/library/1P3-687775961/psychosocial-factors-associated-with-types-of-child.
- Doerner, W. G. (1987). Child maltreatment seriousness and juvenile delinquency. *Youth & Society, 19, pg. 197-224*. Retrieved 27 July 2011 from www.questia.com.
- Dombrowski, S.C., Ahia, C.E., &McQuillan, K. (2003). Protecting children through mandated child-abuse reporting. *The Educational Forum*, 67(2), Pg. 119-128. Retrieved 25 July 2011.
- Estelle v McGuire, 122 S. Ct. 475 (1991). Fourteenth Amendment-admitting evidence of Battered Child Syndrome to prove intent. *The Journal of Criminal Law and Criminology* (1993) 83(4) *Pg.* 894-919. JSTOR.

- Felson, R.B., & Lane, K.J. (2009). Social learning, sexual and physical abuse, and adult crime. *Aggressive Behavior*. 35. Pg. 489-501.
- Finkelhor, D., Hotaling, G.T., Lewis, I.A., & Smith C. (1990) Sexual abuse in a national survey of adult men and women: prevalence characteristics and risk factors. *Child Abuse Neglect 14* pg. 19-28. Retrieved 12 July 2011 from www.questia.com.
- Freisthler, B., Midanik, L.T., & Gruenewald, P.J. (2004). Alcohol outlets and child physical abuse and neglect: Applying Routine Activities Theory to the study of child maltreatment. *Journal of Studies on Alcohol*, 65(5), pg. 586-592. Retrieved 12 July 2011 from www.questia.com.
- Freisthler, B., Bruce, E., & Needell, B. (2007). Understanding the geospatial relationship of neighborhood characteristics and rates of maltreatment for black, hispanic and white children. *Social Work.52(1) pg. 7-16*.Retrieved 12 July 2011 from http://www.questia.com/library/1G1-161396383/understanding-the-geospatial-relationship-of-neighborhood.
- Friedrich, W. N., &Boriskin, B. A. (1976). The role of the child in abuse. *American Journal of Orthopsychiatry*, 46, pg. 580-590. Retrieved 12 July 2011 from www.questia.com.
- Friedman, S. R. (1990). What is child sexual abuse? *Journal of Clinical Psychology*, 46, pg. 372-375.

 Retrieved 12 July 2011 from www.questia.com.
- Galaif, E.R., Stein, J.A., Newcomb, M.D., & Bernstein, D.P. (2001). Gender Differences in the Prediction of Problem Alcohol Use in Adulthood: Exploring the Influence of Family Factors and Childhood Maltreatment. *Journal of Studies on Alcohol*, 62(4), pg. 486-493. Retrieved 6 July 2011 from www.questia.com

- Graham, K.R. (1996). The childhood victimization of sex offenders: An underestimated issue.

 International Journal of Offender Therapy and Comparative Criminology. 40(3) pg. 192-203. Retrieved 19 November 2012 from www.questia.com.
- Gratz, K.L. Phd., Paulson, A. Phd., Jakupcak, M. Phd., &Tull, M.T. Phd. (2009). Exploring the relationship between childhood maltreatment and intimate partner abuse: Gender differences in the mediating role of emotion dysregulation. *Violence and Victims*, 24(1) pg. 68-82. Retrieved 12 July 2011 from http://www.questia.com/library/1P3-1647910751/exploring-the-relationship-between-childhood-maltreatment.
- Gray, A., Busconi, A., Houchens, P., &Pithers, W. D. (1997). Children with sexual behavior problems and their caregivers: Demograpics, functioning, and clinical patterns, Sexual Abuse. *A Journal of Research and Treatment, 9(4), 267-290.* Retrieved 12 July 2011 from www.questia.com.
- Hay, T., & Jones, L. (1994). Societal interventions to prevent child abuse and neglect. *Child Welfare*, 73(5), pg. 379-403. Retrieved 6 July 2011 from http://www.questia.com/library/1P3-2758660/societal-interventions-to-prevent-child-abuse-and.
- Heyman, R.E., & Smith Slep, A.M. (2002). Do child abuse and interparental violence lead to adulthood family violence? *Journal of Marriage and Family*, 64(4), pg. 864-870. Retrieved 6 July 2011 from http://www.questia.com/library/1P3-238621621/do-child-abuse-and-interparental-violence-lead-to.
- Hollenbeck, K. (2001). Between a rock and a hard place: Child abuse registries at the intersection of child protection, due process, and equal protection. *Texas Journal of Women and the Law.11(1) pg. 1*.Retrieved 10 July 2011 from http://www.questia.com/library/1P3-127046711/between-a-rock-and-a-hard-place-child-abuse-registries.

- Holmes, M. (1977). Child abuse programs: Practice and theory, pg. 113. Washington, DC: National Institute of Mental Health.
- Hosser, D., Raddatz, S., &Windzio, M. (2007). Child maltreatment, revictimization and violent behavior. Violence and Victims, 22(3), pg. 318-333. Retrieved 25 June 2011 from http://www.questia.com/library/1P3-1286914021/child-maltreatment-revictimization-and-violent-behavior.
- Isser, N.K., & Schwartz, L.L. (2006).Shaken Baby Syndrome. *Journal of Psychiatry & Law, 34(3), pg.* 291.Retrieved 27 July 2011 from http://www.questia.com/library/1P3-1182680111/shaken-baby-syndrome.
- Jouriles, E.N., McDonald, R., Smith Slep, A.M., Heyman, R.E., &Garrido, E. (2008). Child abuse in the context of domestic violence: Prevalence, explanations, and practice implications. Violence and Victims, 23(2), pg. 221-235. Retrieved 25 June 2011 from http://www.questia.com/library/1P3-1498060821/child-abuse-in-the-context-of-domestic-violence-prevalence.
- Kaufman, J., & Ziglar, E. (1987). "Do abused children become abusive parents?" *American Journal of Orthopsychiatry* 57, 186–192. Retrieved 12 July 2011 from www.questia.com.
- Margolin, G., & Gordis, E. (2000). The effects of family and community violence on children. *Annual Review of Psychology. Pg. 445*. Retrieved 8 July 2011 from www.questia.com
- McCurdy, K., & Daro, D. (1994). Current trends in child abuse reporting and fatalities. *Journal of Interpersonal Violence*, 9(1), 75-94. Retrieved 6 July 2011 from questia.com.
- Meyer v. State of Nebraska. 262 U.S. 390 (1923).
- National Child Abuse and Neglect Data System (NCANDS)

 http://www.acf.hhs.gov/programs/cb/stats_research/index.htm#can.Retrieved 25 July 2011.

- Osofsky, J.D. (1995). The effect of exposure to violence on young children.

 *American Psychologist, 50(9), pg. 782-788. Retrieved 12 July 2011.
- Paxson, C., & Haskins, R., (2009). Introducing the issue. *The Future of Children, 19*(2), pg. 3-17. Retrieved 25 June 2011 from http://www.questia.com/library/1G1-200117644/introducing-the-issue.
- Pierce v. Society of Sisters of the Holy Names of Jesus and Mary 268 U.S. 510 (1925)
- Schuck, A.M., (2005). Explaining black-white disparity in maltreatment: Poverty, female-headed families, and urbanization. *Journal of Marriage and Family*, 67(3), pg. 543-551. Retrieved 12 July 2011 from http://www.questia.com/read/1P3-876900501/explaining-black-white-disparity-in-maltreatment.
- Schwartz, M., Rendon, J.A., & Chang-Ming, H (1994). Is child maltreatment a leading Cause of delinquency. *Child Welfare*, 73(5), pg. 639-655. Retrieved 25 June 2011 from http://www.questia.com/library/1P3-2758654/is-child-maltreatment-a-leading-cause-of-delinquency
- Shedlosky, E.C. (2008). Protecting Children from the harmful behavior of adults. *Journal of Criminal Law and Criminology*, 98(1), pg. 299-327. Retrieved 6 July 2011 from http://www.questia.com/library/1G1-179455609/protecting-children-from-the-harmful-behavior-of-adults.
- Shull, J.P. (1999). Emotional and psychological child abuse: Notes on discourse, history, and change. Stanford Law Review, 51(6), pg. 1665-1701. Retrieved 10 July 2011 from http://www.questia.com/library/1G1-55183451/emotional-and-psychological-child-abuse-notes-on.

Singer, M.I., Petchers, M.K., & Hussey, D. (1989). The relationship between sexual abuse and substance abuse among psychiatrically hospitalized adolescents. *Child Abuse & Neglect*, 13(3), pg. 319-325. Retrieved 6 July 2011 from questia.com.

STATE of Connecticut v. Judith SCRUGGS.. No. 17587 (2006).

Straus, M. A., Gelles, R. J., & Steinmetz, S. K. (1980). *Behind closed doors: Violence in the American family* New York: Doubleday/Anchor Books. Retrieved 30 June 2011 from http://www.questia.com/library/96927769/behind-closed-doors-violence-in-the-american-family.

The National Institute of Neurological Disorders and

Stroke.http://www.ninds.nih.gov/disorders/shakenbaby/shakenbaby.htm. retrieved 27 July 2011.

Troxelet vir.v.Granville99-138 (2000).

- Trost, C. T. (1998). Chilling child abuse reporting: Rethinking the CAPTA amendments. *Vanderbilt Law Review*, *51(1)*, *pg. 183-215*. Retrieved 12 July 2011 from http://www.questia.com/library/1P3-27072606/chilling-child-abuse-reporting-rethinking-thecapta.
- US Dept of Health and Human Services, Administration for children and family services, http://www.acf.hhs.gov/programs/cb/stats_research/index.htm#can/.2000, 2007, 2009, 2010.Retrieved 25 July 2011.
- U.S. Department of Health and Human Services, Administration on Children, Youth and Families.
 (2008). Child Maltreatment [Washington, DC: U.S. Government Printing Office, 2010]
 http://www.acf.hhs.gov. taken from http://www.cdc.gov/ViolencePrevention/pdf/CM-DataSheet-a.pdf. Retrieved 25 July 2011.

- Windom, C.S. (1989a). The cycle of violence. Science. 244. Pg. 160-166.
- Widom, C.S., Schuck, A.M., & White, H.R. (2006). An examination of pathways from childhood victimization to violence: The role of early aggression and problematic alcohol use. *Violence and Victims*, 21(6), pg. 675-690.Retrieved 6 July 2011 from http://www.questia.com/library/1P3-1176091171/an-examination-of-pathways-from-childhood-victimization.
- Widom, C.S. (1998). Child victims: Searching for opportunities to break the cycle of violence.

 *Applied & Preventive Psychology, 7(4), pg. 225-234. Retrieved 20 July 2011 from questia.com.
- Wisconsin v. Yoder 406 U.S. 205 (1972).
- Wulczyn, F. (2010). Epidemiological perspectives on maltreatment prevention. *The Future of Children,* 19(2), pg. 39-66. Retrieved 25 June 2011 from http://www.questia.com/library/1G1-216632202/epidemiological-perspectives-on-maltreatment-prevention.
- Zingraff, M.T., Leiter, J., Myers, K.A., &Johnsen, M.C. (1993). Child maltreatment and youthful problem behavior. *Criminology31*, pg. 173-202. Retrieved 25 June 2011 from questia.com.

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