

8-4-2017

The Triple-C Impact: Responding to Childhood Exposure to Crime and Violence

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Recommended Citation

Gilad, Michal, "The Triple-C Impact: Responding to Childhood Exposure to Crime and Violence" (2017). *Faculty Scholarship*. 1857.
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The Triple-C Impact: Responding to Childhood Exposure to Crime and Violence

Michal Gilad

Abstract

The article is the first to take an inclusive look at the monumental problem of crime exposure during childhood, which is estimated to be one of the most damaging and costly public health and public safety problem in our society today. It takes-on the challenging task of ‘naming’ the problem by coining the term *Comprehensive Childhood Crime Impact* or in short the *Triple-C Impact*. Informed by scientific findings, the term embodies the full effect of direct and indirect crime exposure on children due to their unique developmental characteristics, and the spillover effect the problem has on our society as a whole.

Over the past decade mounting scientific evidences demonstrate the devastating effect of crime exposure to child development and life outcomes. Despite the indisputable severity of the problem, it is documented that the majority of children suffering the dire consequences of crime exposure are never identified. Even when identified, only a miniscule minority ever receive services or treatment to facilitate recovery. Until recently it was assumed that the deficiency in identification and service provision was the result of statutory gaps that prohibited eligibility for services from many categories of children exposed to crime, and particularly those affected by indirect exposure. The article presents the results of a unique 50-states survey that examines the root causes of the problem. Unexpectedly, the survey uncovers that the problem does not stem from statutory gaps, as previously assumed, but from deep system failures, access to information challenges, and lack of coordination among governing agencies and organizations.

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Introduction

Since the early 80's, every first year law student in the U.S. was preached on the evolution of legal problems through a process of Naming, Blaming and Claiming.¹ We were taught that the first and most fundamental step in addressing a problem is identifying an experience as injurious and naming it as such. With an entire generation of legal minds that were trained to “name”, is it still possible that one of the most injurious and costly problems in our society has yet to be properly named?

Over the past two decades, a large volume of empirical evidence has accumulated demonstrating the devastatingly harmful effect of direct and indirect childhood exposure to crime and violence.² The documented harm ranges from physical and mental health problems,³ to increased risk for learning disabilities, behavioral problems, repeat victimization,⁴ juvenile delinquency,⁵ adult

¹ William L.F. Felstiner, et al., The Emergence And Transformation Of Disputes: Naming, Blaming, Claiming, 15 *Law & Soc'y Rev.* 631 (1980-1981).

² Frank W. Putnam, The Impact of Trauma on Child Development, 57 *Juvenile and Family Court Journal*, 1 (2006); G. Margolin & E. B. Gordis, The Effects of Family And Community Violence On Children, 51 *Annual Review of Psychology* 445 (2000); Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 66 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; R. Gilbert, et al., Burden and consequences of child maltreatment in high-income countries, 373 *Lancet* 68 (2009); M. Melchior, et al., Why do children from socioeconomically disadvantaged families suffer from poor health when they reach adulthood? A life-course study, 166(8) *American Journal of Epidemiology* 966 (2007).

³ Michael J. S. Weiss & Sheldon H. Wagner, What Explains The Negative Consequences Of Adverse Childhood Experiences On Adult Health? Insights From Cognitive And Neuroscience Research, 14 *Am. J. Prev. Med.* 356 (1998); Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 *Annu. Rev. Psychol.* 445, 459 (2000); Tracie O. Afifi, et al., Population Attributable Fractions Of Psychiatric Disorders And Suicide Ideation And Attempts Associated With Adverse Childhood Experiences, 98(5) *American Journal of Public Health* 946 (2008); Eunju Lee, Heather Larkin and Nina Esaki, Exposure to Community Violence as a New Adverse Childhood Experience Category: Promising Results and Future Considerations, 98 *Families in Society: The Journal of Contemporary Social Services* 69, 69 (2017); Vincent J. Felitti et al., Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study, 14(4) *Am J Prev Med* 245, 251 (1998); Leah K. Gilbert et al., Childhood Adversity and Adult Chronic Disease: An Update from Ten States and the District of Columbia, 48(3) *Am J Prev Med* 345, 346 (2015); The Public Health Management Corporation, Findings From The Philadelphia Urban ACE Survey (Sep. 18, 2013),

<http://www.instituteforsafefamilies.org/philadelphia-urban-ace-study>

⁴ C. S. Widom, S. J. Czaja & M. A. Dutton, Childhood victimization and lifetime revictimization, 32(8) *Child Abuse & Neglect* 785 (2008); J. D. Fargo, Pathways to adult sexual revictimization: direct and indirect behavioral risk factors across the lifespan, 24(11) *Journal of Interpersonal Violence* 1771 (2009); J. E. Barnes, et al., Sexual and physical revictimization among victims of severe childhood sexual abuse, 33(7) *Child Abuse & Neglect* 412 (2009); T. Lindhorst, et al., Mediating pathways explaining psychosocial functioning and revictimization as sequelae of parental violence among adolescent mothers, 79(2) *American Journal of Orthopsychiatry* 181 (2009)

⁵ David Finkelhor, et al., Juvenile Delinquency And Victimization: A Theoretical Typology, 22(12) *Journal of Interpersonal Violence* 1581 (2007); Carolyn Smith & Terence P. Thornberry, The Relationship Between Childhood Maltreatment And Adolescent Involvement In Delinquency, 33 *Criminology* 451 (1995).

criminality⁶ and substance abuse.⁷ In 2012 The Attorney General Task Force on Children Exposed to Violence has declared the problem as “a national crisis and a threat to the health and well-being of our nation’s children and of our country.”⁸ Others have described it as one of the most costly public health and public safety problems in the United States today.⁹

Despite the severity of the problem of childhood exposure to crime and violence and the increased attention given to its various components, thus far there are almost no studies or policy analyses that take an inclusive look at the problem as a whole. Most available studies focus exclusively on one isolated form of exposure.¹⁰ Indirect forms of childhood exposure to crime and their effect are often ignored or narrowly defined. This segmented and compartmentalized approach, that avoids properly defining and “naming” the problem, has prevented us from gaining a true understanding of its full scope, extent, effect and severity. It has also hindered our ability to more accurately estimate the full cost of the problem to the state and to our society. Unsurprisingly, the absence of a comprehensive understanding of the problem diminishes the ability to develop effective systematic solutions that will improve the lives of millions of affected children and will alleviate the harm inflicted upon our society.

Following the long standing methodology of legal problem solving, to initiate a truly inclusive examination of this devastation problem it was necessary to first ‘Name’ it. This article takes on the challenge of the naming process, and coins the term the *Comprehensive Childhood*

⁶ Widom CS. 1998. Child victims: searching for opportunities to break the cycle of violence. *Appl. Prev. Psychol.* 7:225–34

⁷ Dean G. Kilpatrick, et al., Risk Factors For Adolescent Substance Abuse And Dependence: Data From a National Sample, 68 *Journal of Consulting and Clinical Psychology* 19 (2000); Michael Lynch, Consequences of Children’s Exposure to Community Violence, 6(4) *Clinical Child and Family Psychology Review* 265, 267-8 (2003); Mary E. Schwab-Stone, et al. (1995). No Safe Haven: A Study Of Violence Exposure In An Urban Community, 10 *Journal of the American Academy of Child and Adolescent Psychiatry* 1343 (1995); Dwain Fehon, Carlos M. Grilo & Deborah S. Lipschitz, Correlates Of Community Violence Exposure In Hospitalized Adolescents, 42 *Comprehensive Psychiatry* 283 (2001); S. R. Dube, et al., Adverse Childhood Experiences and Personal Alcohol Abuse As An Adult, 27 *Addictive Behaviors* 713 (2002); S. R. Dube, et al., Childhood Abuse, Neglect And Household Dysfunction And The Risk of Illicit Drug Use: The Adverse Childhood Experience Study, 111 *Pediatrics* 564 (2003); R. F. Anda, et al., Adverse Childhood Experiences and Smoking During Adolescence and Adulthood, 282 *Journal of the American Medical Association* 1652 (1999)

⁸ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 36 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

⁹ Frank W. Putnam, The Impact of Trauma on Child Development, 57 *Juvenile and Family Court Journal*, 1, 2 (2006); Erica J. Adams, Justice Policy Institute, *Healing Invisible Wounds: Why Investing in Trauma-Informed Care for Children Makes Sense* 1 (2010).

¹⁰ David Finkelhor et al., Children’s Exposure to Violence: A Comprehensive National Survey, *Juvenile Justice Bulletin* (Oct. 2009), available at: <https://www.ncjrs.gov/pdffiles1/ojjdp/227744.pdf>

Crime Impact or in short the *Triple-C Impact*. The term embodies the full effect of direct and indirect crime exposure on children in all its forms. Informed by scientific findings, it aims to clearly depict the complete interlocking matrix of ways in which children are harmed by crime due to their unique developmental characteristics, and the spillover effect this harm has on our society. The term allows for a common point of reference and a more precise use of terminology, as we examine this injurious phenomenon, and attempt to develop effective responses to the problem.

The objective of this article is to establish the legal and scientific foundations at the base of the Triple-C Impact. From a scientific perspective, the article explores how the distinct developmental differences between children and adults shape the manner and severity in which crime exposure affects children. It also examines the marked short- and long-term injurious effect in store for this vulnerable group due to its discrete characteristics. From a legal perspective the article outlines and analyzes the fascinating results of an original 50-state survey, which examines the statutory gaps in the existing response to the Triple-C Impact. The survey's results paint an invaluable and unexpected picture of the root causes behind the ineptness of existing legal solutions to the problem.

The first section of the article explains the fundamental principles of the Triple-C Impact. It also outlines the substantive differences between children and adults which affect the impact of crime exposure of children. Section II delineates the scope of the Triple-C Impact. It carefully enumerates the categories of crime exposure that were selected to be included under the term, and the empirical evidence that support such inclusion. The third section presents the results of a 50-States survey that examines the statutory responses presently available in the field, and highlights statutory gaps. It also evaluates the strengths and weaknesses of the existing laws and policies, and identifies the root causes of the marked deficiencies in the existing attempts to combat the Triple-C Impact problem. Section IV elaborates on the policy implication of the survey's findings, and the manners in which the findings can be utilized to improve our ability to address the problem. Conclusions follow. Section I: The Principles Behind the Triple-C Impact

It is undisputed that crime is a negative and harmful phenomenon for any community or individual it touches. However, the conceptualization of the Triple-C Impact rests on mounting empirical research demonstrating that there are significant developmental, social, and cultural differences

between children and adults that lead children to be more vulnerable and susceptible to the negative forces of crime.¹¹ In fact, with relations to crime, children are considered to be the most vulnerable group in our society.¹² The effect of crime infiltrates the lives of children from countless different directions. Despite common misperceptions, even when a criminal offence is not committed directly against the body of the child, evidences show that it can leave marks that are acute, and often long-lasting.

The Triple-C Impact hinges on a set of factors that differentiate children from adults. These developmental variances were shown to broaden, amplify and influence the nature of the effect of crime on children when compared to the adult population. First, and most obvious, is that, on average, children are physically smaller and weaker than most adults, and therefore are an easy target for predators. However, it is also vital to remember that children are not merely miniature adults, and many more substantive differentiators are at play.

Second, from a physiological and anatomical perspective, a child's brain is extremely malleable during the early years of life.¹³ As a result, the "literature on central nervous system plasticity suggests that the human brain is dramatically affected by early experience."¹⁴ Exposure to crime and violence during childhood causes heightened levels of stress and overstimulation of certain brain structures, which can lead to chemical imbalance in the child's brain and an abnormal neurological development.¹⁵ One reoccurring finding associated with crime exposure is a

¹¹ David Finkelhor & Kathleen Kendall-Tackett, A Developmental Perspective on the Childhood Impact of Crime, Abuse & Violent Victimization, in D. Cicchetti & S. Toth (Eds.), *Developmental Perspectives on Trauma: Theory, Research, and Intervention* 1-32 (1997).

¹² Patricia Hashima & David Finkelhor, Violent Victimization of Youth Versus Adults in The National Crime Victimization Survey, 14 *Journal of interpersonal Violence* 799 (1999); David Finkelhor et al., Children's Exposure to Violence: A Comprehensive National Survey, in U.S. DEP'T OF JUSTICE, *JUVENILE JUSTICE BULLETIN* (Oct. 2009), available at <http://www.ncjrs.gov/pdffiles1/ojdp/227744.pdf>

¹³ Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 *Annu. Rev. Psychol.* 445, 459 (2000); Bruce Perry, Incubated In Terror: Neurodevelopmental Factors In The "Cycle of Violence", in *Children in a Violent Society* 124 (Joy D. Osofsky ed. 1997)

¹⁴ Michael J. S. Weiss & Sheldon H. Wagner, What Explains The Negative Consequences Of Adverse Childhood Experiences On Adult Health? Insights From Cognitive And Neuroscience Research, 14 *Am. J. Prev. Med.* 356 (1998); Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 *Annu. Rev. Psychol.* 445, 459 (2000).

¹⁵ Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 *Annu. Rev. Psychol.* 445, 459 (2000); Richard J. Loewenstein & Frank W. Putnam (Eds.), *Report Of The American Psychiatric Association Task Force On The Biopsychosocial Consequences Of Childhood Violence* (June 2013), <http://www.researchgate.net/publication/239939460>

disruption in the development of the brain's major stress-regulating systems.¹⁶ The brain's executive functions, such as planning, memory, focusing attention, impulse control, and decision-making were also found to be impaired due to exposure.¹⁷

Third, children are in critical stages of their emotional and cognitive development, their identity is not yet formed, and their personality traits are in transitory stages. As a result, they are considered to be significantly more vulnerable and susceptible to external influences and pressures.¹⁸ They are less mentally stable, and are extremely sensitive to psychological damage.¹⁹ Exposure to crime at this critical state can interrupt the delicate and complex process of maturation and alter its path.²⁰ It may affect the timing of typical developmental trajectories, and disrupt children's progression through age-appropriate developmental tasks.²¹

Furthermore, the underdeveloped cognitive capacity of most children and their emotional sensitivity limit their ability to "appraise and understand violence, to respond to and cope with danger, and to garner environmental resources that offer protection and support."²² It also makes it difficult for them to process and cope with trauma and heal without external assistance.²³ The developmentally-limited ability of young children to verbalize the powerful emotions they are

¹⁶ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 460 (2000);

¹⁷ Dana Charles McCoy, *Early Violence Exposure and Self-Regulatory Development: A Bioecological Systems Perspective*, 56(4) *Human Development* 254 (2013); Ayelet Lahat & Louis A. Schmidt, *Early Violence Exposure and Executive Function: Implications for Psychopathology and Other Cautionary Points*, 56(4) *Human Development* 274 (2013).

¹⁸ Jessica Feierman et al., *The Eighth Amendment Evolves: Defining Cruel And Unusual Punishment Through The Lens Of Childhood And Adolescence*, 15 *University of Pennsylvania Journal of Law and Social Policy* 285, 294-297 (2012).

¹⁹ *Roper v. Simmons*, 543 U.S. 551, 569-70 (2005)

²⁰ Suzanne G. Martin, *Children Exposed to Domestic Violence: Psychological Considerations For Health Care Practitioners*, 16(3) *Holistic Nursing Practice* 7 (2002); Jennifer E. McIntosh, *Thought In The Face Of Violence: A Child's Need*, 26 *Child Abuse and Neglect* 229 (2002); Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 802 (2008).

²¹ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 449 (2000); S. Boney-McCoy & David Finkelhor, *Psychosocial Sequelae Of Violent Victimization In a National Youth Sample*, 63 *J. Consult. Clin. Psychol.* 726 (1995).

²² Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 450 (2000).

²³ Jessica Feierman et al., *The Eighth Amendment Evolves: Defining Cruel And Unusual Punishment Through The Lens Of Childhood And Adolescence*, 15 *University of Pennsylvania Journal of Law and Social Policy* 285, 296 (2012).

experiencing may also aggravate the effect of exposure.²⁴ Victimology experts like Dr. Linda Mills recognize that there is a significant risk that any symptoms caused by crime exposure during these critical developmental stages will become embedded in the individual's core personality structure.²⁵

Fourth, as a factor of their social and psychological immaturity children are dependent on adults for their survival and basic psychological and emotional needs.²⁶ Their dependency status enhances their vulnerability to the harmful effect of forms of indirect crime exposure. They “rely strongly on parent figures to protect them from danger, to make the world predictable and safe as they begin to venture forth, and to guide their responses in ambiguous or threatening situations.”²⁷ Thus, when a caregiver is subjected to victimization, illicit substance abuse, or incarceration, the dependent children are often deprived of the care, support, guidance, and protection essential for their development into healthy, productive members of society.

Moreover, due to their dependency status, children have comparatively little choice over their living environment, and whom they associate with. Research presented in the American Psychological Association Amicus Brief submitted to the US Supreme Court in *Graham v. Florid*²⁸ finds that minors are “dependent on living circumstances of their parents and families and hence are vulnerable to the impact of conditions well beyond their control.”²⁹ Justice Kagan, delivering the opinion of the court in *Miller v. Alabama*, reinforced the fact that minor children have limited control over their own environment, and are usually unable to extricate themselves

²⁴ Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 Child Abuse & Neglect 797, 802 (2008).

²⁵ Linda G. Mills, The Justice of Recovery: How the State Can Heal the Violence of Crime, 57 Hastings L.J. 457, 486 (2005).

²⁶ Elizabeth Scott, The Legal Construction of Childhood, 29 Hofstra U. L. Rev. 541, 546 (2000).

²⁷ Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 Annu. Rev. Psychol. 445, 450 (2000).

²⁸ *Graham v. Florida*, 130 S. Ct. 2011, 2017 (2010),

²⁹ Brief For The American Psychological Association, American Psychiatric Association, National Association Of Social Workers, And Mental Health America As Amici Curiae Supporting Petitioners at 15, *Graham v. Florida*, 130 S. Ct. 2011, 2017 (2010) (Nos. 08-7412, 08-7621), <http://www.apa.org/about/offices/ogc/amicus/graham-v-floridasullivan.pdf>; Alan E. Kazdin, Adolescent Development, Mental Disorders, and Decision Making of Delinquent Youths, in *Youth on Trial* 33, 47 (Thomas Grisso & Robert G. Schwartz eds., 2000). (Although this series of Supreme Court cases, including *Roper*, *Graham* and *Miller*, dealt with juveniles offenders rather than victims, the court and amici's analysis of scientific developmental psychology is useful for an understanding of the special needs of juvenile and their unique characteristics and behavioral traits).

from their surrounding environment, no matter how brutal or dysfunctional it is.³⁰ Hence, children do not have the capabilities or resources to remove themselves from harmful circumstances induced by crime and violence.³¹ Furthermore, they depend on the assistance and initiative of adults to seek help for their rehabilitation and recovery from trauma.

Fifth, children have underdeveloped decision-making capacities. This is due to children's level of cognitive development, immature judgment, and limited life experiences.³² As a result, children tend to exhibit risk taking behavior and low risk aversion utility, particularly during teen years.³³ This could increase their exposure to crime and violence. Additionally, due to these immature decision-making capacities, the law normally charges adults with the task of making important decisions affecting children's lives. However, when parents or caregivers are incapacitated by violence, victimization, or incarceration, their ability to make coherent decisions on behalf of their children, and to fully consider their best interests, is inevitably diminished. This dynamic overexposes children to the harmful effect of crime.

Lastly, children are in the midst of their legal socialization. Tom Tyler and Jeffrey Fagan define Legal Socialization as a process that unfolds during childhood and adolescence, through which children develop an inclination towards compliance with the law and cooperation with legal actors.³⁴ The process is highly affected by children's exposure to crime, and their childhood

³⁰ Miller v. Alabama, 132 S. Ct. 2455 (2012).

³¹ David Finkelhor & Patricia Y. Hashima, The Victimization of Children & Youth: A Comprehensive Overview, in Law and social science perspectives on youth and justice (S.O. White, Ed.) 49, 59-61 (2001).

³² Elizabeth S. Scott & Thomas Grisso, The Evolution of Adolescence: A Developmental Perspective on Juvenile Justice Reform, 88 J. Crim. L. & Criminology 137, 157 (1997). See also: Kim Taylor-Thompson, State of Mind State of Development, 14 Stan. L. & Policy Rev. 143, 150 (2003); Elizabeth Scott, The Legal Construction of Childhood, 29 Hofstra U. L. Rev. 541, 546 (2000).

³³ Elizabeth Scott, The Legal Construction of Childhood, 29 Hofstra U. L. Rev. 541, 546 (2000); Elizabeth S. Scott, N. Dickon Reppucci and Jennifer L. Woolard, Evaluating Adolescent Decision-Making in Legal Contexts, 19 LAW & HUM. BEHAV. 221 (1995). Andrea L. Gless, Adrian Raine & R. A. Schug, The Neural Correlates of Moral Decision-Making in Psychopathy, 14 Molecular Psychiatry 5 (2009); Adrian Raine & Yaling Yang, Neural Foundations To Moral Reasoning And Antisocial Behavior, 1(3) Social Cognitive and Affective Neuroscience 203 (2006). See also Laurence Steinberg & Elizabeth Cauffman, Maturity of Judgement in Adolescence: Psychosocial Factors in Adolescent Decisionmaking, 20 L. & Human Behavior 249 (1996); Lita Furby & Ruth Beyth-Marom, Risk Taking in Adolescence: A Decision-Making Perspective, 12 DEV. REV. 1 (1992); W. Gardner, A Life Span Theory of Risk Taking in ADOLESCENT AND ADULT RISK TAKING: THE 8TH TEXAS SYMPOSIUM ON INTERFACES IN PSYCHOLOGY (N. Bell, ed., 1992); J. Nurmi, How Do Adolescents See Their Future?: A Review of the Development of Future Orientation and Planning, 11 DEV'L. REV. 1 (1991); A.L. Green, Future-Time Perspective in Adolescence: The Present of Things Future Revisited, 15 J. YOUTH & ADOL. 99 (1986).

³⁴ Jeffrey Fagan & Tom R. Tyler, Legal Socialization of Children and Adolescent, 18 Social Justice Research 217, 219-222 (2005). See also: Jeffrey Fagan, et al., Developmental Trajectories of Legal Socialization among

experiences with legal actors, law enforcement, and the justice system.³⁵ Inferring from the research findings of Tyler and Fagan, it is likely that exposure to crime and violence, and the failure of the legal system to protect children from these harmful experiences, interfere with the Legal Socialization process of affected children. Disruption of this fundamental developmental process may explain a proclivity towards criminal behavior and illicit substance abuse in individuals affected by crime during childhood.

This set of fundamental developmental attributes commonly found in minor children overexposes children to the influence of crime, and expands its effect far beyond conventional direct victimization. Insufficient account for these highly-relevant differences between children and adults, and the unique developmental needs associated with these disparities, will inevitably impair the efficacy of any law or policy attempting to address the problem. The coining of the Triple-C Impact stems from an understanding that such marked distinctions necessitate focused attention on children as a unique group in order to develop a profound and accurate understanding of the problem and its possible solutions.

Section II: The Scope of the Triple-C Impact - Categories of Exposure

A significant element of the ‘naming’ process is clearly marking the boundaries and content of the problem. The Triple-C Impact term is designed to encompass the full-range of direct and indirect crime exposures that were found by empirical research to pose substantial short- and long-term harm to children due to the aforementioned unique developmental characteristics. The primary criterion used in the selection of the exact categories of childhood exposure to crime to be incorporated under the Triple-C Impact is the presence of significant empirical evidence to support and demonstrate potential harm to the child, which rises to a level similar to that caused by direct victimization.³⁶

Adolescent Offenders 96 *Journal of Criminal Law and Criminology* 267 (2005).

³⁵ Jeffrey Fagan & Tom R. Tyler, *Legal Socialization of Children and Adolescent*, 18 *Social Justice Research* 217 (2005).

³⁶ Due consideration should be given to the fact that children are not equally affected by crime victimization and trauma. Some children are deeply affected by victimization, whether direct or indirect, while others exhibit high levels of resilience (David Finkelhor, *Developmental Victimology: The comprehensive study of childhood*

Direct victimization is the most conventional and commonly recognized form of crime exposure. It occurs when an act defined by law as a criminal offense is committed against the person of the child itself. Children who experience direct victimization, especially when violent crime is concerned, were shown to exhibit an array of adverse short- and long-term symptoms. The harm endured may vary depending on the type, severity and frequency of the victimization, as well as the child characteristics, such as age, gender, socio-economic status, level of familial support, and the child's emotional capacity.³⁷

Documented symptoms include aggression; developmental and behavioral problems; attention disorders; attachment disorders; delays in educational development; and deficit social adaptation.³⁸

victimization, in R. C. David, et al. (Eds), *Victims of crime* (3rd ed.) 9,12 (2007)). The exact combination of factors that allow some children to develop higher levels of resilience than others is not yet fully understood. However, factors such as age, gender, relationship with the caregiver, personal strengths and vulnerabilities, characteristics of the child's family and community, and the frequency and severity of the victimization, were shown by empirical research to have an effect on children's responses (Betsy Mcalister Groves, et al., *Family Violence Prevention Fund, Identifying and Responding to Domestic Violence: Consensus Recommendations For child and Adolescents Health* 6 (2004), <http://www.futureswithoutviolence.org/userfiles/file/HealthCare/pediatric.pdf>; Anne Petersen, Joshua Joseph, & Monica Feit, *New Directions in Child Abuse and Neglect* 133 (2013)).

³⁷ Betsy Mcalister Groves, et al., *Family Violence Prevention Fund, Identifying and Responding to Domestic Violence: Consensus Recommendations For child and Adolescents Health* 6 (2004), <http://www.futureswithoutviolence.org/userfiles/file/HealthCare/pediatric.pdf>; S. R. Jaffee, et al., Individual, family, and neighborhood factors distinguish resilient from non-resilient maltreated children: a cumulative stressors model, 31(3) *Child Abuse & Neglect* 231 (2007); Anne Petersen, Joshua Joseph, & Monica Feit, *New Directions in Child Abuse and Neglect* 133 (2013); Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 804-5 (2008); Lucy Salcido Carter, Lois A. Weithorn & Richard E. Behrman, *Domestic Violence And Children: Analysis And Recommendations*, 9(3) *The Future of Children* 4 (1999); Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 802-3 (2008).

³⁸ Frank W. Putnam, *The Impact of Trauma on Child Development*, 57 *Juvenile and Family Court Journal*, 1 (2006); G. Margolin & E. B. Gordis, *The Effects of Family And Community Violence On Children*, 51 *Annual Review of Psychology* 445 (2000); Robert L. Listenbee, et al., *Report of the Attorney General's National Task Force on Children Exposed to Violence* 31-32 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; J. G. Hovens, et al., *Impact Of Childhood Life Events And Trauma On The Course Of Depressive And Anxiety Disorders*, 126(3) *Acta Psychiatrica Scandinavica* 198 (2012); Sara Larsson, et al., *High Prevalence Of Childhood Trauma In Patients With Schizophrenia Spectrum And Affective Disorder*, 54(2) *Comprehensive Psychiatry* 123 (2012); Anna Plaza, et al. *Childhood Physical Abuse As A Common Risk Factor For Depression And Thyroid Dysfunction In The Earlier Postpartum*, 200 *Psychiatry Research* 329 (2012); Saaniya Bedi, et al., *Risk For Suicidal Thoughts And Behavior After Childhood Sexual Abuse In Women And Men*, 41(4) *Suicide and Life-Threatening Behavior* 406 (2011); Laura P. Chen, et al., *Sexual Abuse And Lifetime Diagnosis Of Psychiatric Disorders: Systematic Review And Meta-Analysis*, 85(7) *Mayo Clinic Proceedings* 618 (2010); Tracie O. Afifi, et al., *Population Attributable Fractions Of Psychiatric Disorders And Suicide Ideation And Attempts Associated With Adverse Childhood Experiences*, 98(5) *American Journal of Public Health* 946 (2008); Sarah Jonas, et al., *Sexual Abuse And Psychiatric Disorder In England: Results From The 2007 Adult Psychiatric Morbidity Survey*, 41(4) *Psychological Medicine* 709 (2011); Luisa Sugaya, et al., *Child Physical Abuse And Adult Mental Health: A National Study*, 25(4) *Journal of Traumatic Stress* 384 (2012); Scott E. Hadland, et al., *Suicide And History Of Childhood*

These children also suffer from increased risk for repeat victimization, mental health problems, and greater likelihood to engage in criminal activity.³⁹ They are more inclined to practice risk behaviors, including alcoholism, drug abuse, smoking, suicide attempts, sexually promiscuous behavior, and unintended pregnancies.⁴⁰ A strong link between childhood victimization and life

Trauma Among Street Youth, 136(3) *Journal of Affective Disorders* 377 (2012); B. Wanner, et al., Childhood Trajectories Of Anxiousness And Disruptiveness Explain The Association Between Early-Life Adversity And Attempted Suicide, 42(11) *Psychological Medicine* 2373 (2012); Matte Ystgaard, et al., Is There A Specific Relationship Between Childhood Sexual And Physical Abuse And Repeated Suicidal Behavior? 28(8) *Child Abuse & Neglect* 863 (2004); Paul Rohde, et al., Associations Of Child Sexual And Physical Abuse With Obesity And Depression In Middle-Aged Women, 32(9) *Child Abuse & Neglect* 878 (2008); Lena Sanci, et al., Childhood Sexual Abuse And Eating Disorders In Females: Findings From The Victorian Adolescent Health Cohort Study, 162(3) *Archives of Pediatric and Adolescent Medicine* 261 (2008); Jacqueline C. Carter, et al., The Impact Of Childhood Sexual Abuse In Anorexia Nervosa, 30(3) *Child Abuse & Neglect* 257 (2006); Jennie G. Noll, et al., Sleep Disturbances And Childhood Sexual Abuse, 31(5) *Journal of Pediatric Psychology* 469 (2006); Annmarie C. Hulette, Jennifer J. Freyd & Philip A. Fisher, Dissociation In Middle Childhood Among Foster Children With Early Maltreatment Experiences, 35(2) *Child Abuse & Neglect* 123 (2011); Terri L. Messman-Moore, Kate L. Walsh & David Dilillo, Emotion Dysregulation And Risky Sexual Behavior In Revictimization, 34(12) *Child Abuse & Neglect* 967 (2010).

³⁹ Laura Bevilacqua, et al., Interaction Between FKBP5 And Childhood Trauma And Risk Of Aggressive Behavior, 69(1) *Archives of General Psychiatry* 62 (2012); Sunny H. Shin, Daniel P. Miller, & Martin H. Teicher, Exposure To Childhood Neglect And Physical Abuse And Developmental Trajectories Of Heavy Episodic Drinking From Early Adolescence Into Young Adulthood, 127 *Drug and Alcohol Dependence* 31 (2013); Shi Huang, et al., The Long-Term Effects Of Childhood Maltreatment Experiences On Subsequent Illicit Drug Use And Drug-Related Problems In Young Adulthood, 36 *Addictive Behaviors* 95 (2011); Sjoukje Berdina Beike De Boer, et al. Childhood Characteristics Of Adolescent Inpatients With Early-Onset And Adolescent-Onset Disruptive Behavior, 34(3) *Journal of Psychopathology and Behavioral Assessment* 415 (2012); Sophie Boivin, et al., Past Victimization And Dating Violence Perpetration In Adolescence: The Mediating Role Of Emotional Distress And Hostility, 27(4) *Journal of Interpersonal Violence* 662 (2012); Eleni Maneta, et al., Links Between Childhood Physical Abuse And Intimate Partner Aggression: The Mediating Role Of Anger Expression, 27(3) *Violence and Victims* 315 (2012); Deborah J. Jones, et al., Linking Childhood Sexual Abuse And Early Adolescent Risk Behavior: The Intervening Role Of Internalizing And Externalizing Problems, 41(1) *Journal of Abnormal Child Psychology* 139 (2013); Christina S. Meade, et al., Methamphetamine use is associated with childhood sexual abuse and HIV sexual risk behaviors among patrons of alcohol-serving venues in Cape Town, South Africa, 126 *Drug and Alcohol Dependence* 232 (2012); Roberto Maniglio, The Role Of Child Sexual Abuse In The Etiology Of Substance-Related Disorders, 30(3) *Journal of Addictive Disorders* 216 (2011); Bryndis B. Asgeirsdottir, et al., Associations Between Sexual Abuse And Family Conflict/Violence, Self-Injurious Behavior, And Substance Use: The Mediating Role Of Depressed Mood And Anger, 35(3) *Child Abuse & Neglect* 210 (2011); Helen W. Wilson & Cathy S. Widom, Pathways From Childhood Abuse And Neglect To HIV-Risk Sexual Behavior In Middle Adulthood, 79(2) *Journal of Consulting and Clinical Psychology* 236 (2011) Helen W. Wilson & Cathy S. Widom, The Role Of Youth Problem Behaviors In The Path From Child Abuse And Neglect To Prostitution: A Prospective Examination, 20(1) *Journal of Research in Adolescence* 210 (2010); Lynette M. Renner & Stephen D. Whitney, Risk Factors For Unidirectional And Bidirectional Intimate Partner Violence Among Young Adults, 36(1) *Child Abuse & Neglect* 40 (2012).

⁴⁰ S. R. Dube, et al., Adverse Childhood Experiences and Personal Alcohol Abuse As An Adult, 27 *Addictive Behaviors* 713 (2002); S. R. Dube, et al., Childhood Abuse, Neglect And Household Dysfunction And The Risk of Illicit Drug Use: The Adverse Childhood Experience Study, 111 *Pediatrics* 564 (2003); R. F. Anda, et al., Adverse Childhood Experiences and Smoking During Adolescence and Adulthood, 282 *Journal of the American Medical Association* 1652 (1999); S. D. Hillis, et al., The Association Between Adverse Childhood Experiences and Adolescent Pregnancy, Long-Term Psychosocial Outcomes, And Fetal Death, 113 *Pediatrics* 320 (2004); R. F. Anda, et al.; Sunny H. Shin, Daniel P. Miller, & Martin H. Teicher, Exposure To Childhood Neglect And Physical

threatening health conditions, such as cancer, lung, heart, liver and skeletal diseases, sexually transmitted diseases, and obesity, was also established.⁴¹

On the other hand, indirect victimization occurs when a child experiences harm as a result of a criminal act committed against another. Experts in the field assert that “[a]lthough indirect victimization affects adults as well as children, the latter are particularly vulnerable to its effects, due to their dependency on those being victimized.”⁴² In fact, empirical studies demonstrate that differently than adults, indirect victimization affects children in a very similar manner to direct victimization. Science has shown that what may appear to the lay-eye to be “minor” forms of crime exposure, such as witnessing violence without being physically touched, can result in substantial harm.⁴³ The harm caused will vary in a comparable manner to direct victimization, and will be

Abuse And Developmental Trajectories Of Heavy Episodic Drinking From Early Adolescence Into Young Adulthood, 127 *Drug and Alcohol Dependence* 31 (2013); Shi Huang, et al., The Long-Term Effects Of Childhood Maltreatment Experiences On Subsequent Illicit Drug Use And Drug-Related Problems In Young Adulthood, 36 *Addictive Behaviors* 95 (2011); Deborah J. Jones, et al., Linking Childhood Sexual Abuse And Early Adolescent Risk Behavior: The Intervening Role Of Internalizing And Externalizing Problems, 41(1) *Journal of Abnormal Child Psychology* 139 (2013); Christina S. Meade, et al., Methamphetamine use is associated with childhood sexual abuse and HIV sexual risk behaviors among patrons of alcohol-serving venues in Cape Town, South Africa, 126 *Drug and Alcohol Dependence* 232 (2012); Roberto Maniglio, The Role Of Child Sexual Abuse In The Etiology Of Substance-Related Disorders, 30(3) *Journal of Addictive Disorders* 216 (2011); Bryndis B. Asgeirsdottir, et al., Associations Between Sexual Abuse And Family Conflict/Violence, Self-Injurious Behavior, And Substance Use: The Mediating Role Of Depressed Mood And Anger, 35(3) *Child Abuse & Neglect* 210 (2011); Helen W. Wilson & Cathy S. Widom, Pathways From Childhood Abuse And Neglect To HIV-Risk Sexual Behavior In Middle Adulthood, 79(2) *Journal of Consulting and Clinical Psychology* 236 (2011); Helen W. Wilson & Cathy S. Widom, The Role Of Youth Problem Behaviors In The Path From Child Abuse And Neglect To Prostitution: A Prospective Examination, 20(1) *Journal of Research in Adolescence* 210 (2010); C. L. Whitfield, et al., Violent Childhood Experiences and The Risk of Intimate Partner Violence in Adults: Assessment In A Large Health Maintenance Organization, 18 *Journal of Interpersonal Violence* 166 (2003).

⁴¹ Renee Boynton-Jarrett, et al., Child and Adolescent Abuse in Relation To Obesity In Adulthood: The Black Women’s Health Study, 130(2) *Pediatrics* 245 (2012); Alanna D. Hager & Marsha G. Runtz, Physical And Psychological Maltreatment In Childhood and Later Health Problems in Women: An Exploratory Investigation Of The Roles Of Perceived Stress And Coping Strategies, 36(5) *Child Abuse & Neglect* 393 (2012); Natalie Slopen, et al. Childhood Adversity And Cell-Mediated Immunity In Young Adulthood: Does Type and Timing Matter? *Brain, Behavior, and Immunity* (2012); M. L. Paras, et al., Sexual Abuse And Lifetime Diagnosis Of Somatic Disorders: A Systematic Review And Meta-Analysis, 302(5) *Journal of the American Medical Association* 550 (2009); Roberto Maniglio, The Impact of Child Sexual Abuse On Health: A Systematic Review Of Reviews, 29(7) *Clinical Psychology Review* 647 (2009).

⁴² David Finkelhor, *Developmental Victimology: The comprehensive study of childhood victimization*, in R. C. David, et al. (Eds), *Victims of crime* (3rd ed.) 9,12 (2007).

⁴³ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 66 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; I. Harpaz-Rotem, et al., Clinical epidemiology of urban violence: responding to children exposed to violence in ten communities, 22(11) *Journal of Interpersonal Violence* 1479 (2007); W. W. Harris, A. F. Lieberman & S. Marans, In the best interests of society, 48(3–4) *Journal of Child Psychology and Psychiatry and Allied Disciplines* 392 (2007); P. Chauhan & C. S. Widom, Childhood maltreatment and illicit drug use in middle adulthood: the role of neighborhood characteristics, 24(3) *Development and Psychopathology* 723 (2012); C. S. Widom, et al., A

influenced by a similar set of variables pertaining to the crime and the child.⁴⁴ Indirect victimization can result from many different forms of crime exposure during childhood.⁴⁵

A meticulous review of the medical and social science studies in the field has highlighted specific forms of indirect crime exposure that emulate the injurious effect of direct victimization.

Exposure to Family Violence

The most well-known manifestation of indirect crime exposure is witnessing family crime and violence. These are cases where the child witnesses⁴⁶ a crime committed in the home, among family members, but does not suffer direct physical harm as a result of the witnessed crime.

The presence of crime and violence in the home interrupts the sense of safety, security and stability that such an environment is meant to foster in a child.⁴⁷ Such unsettling disruption can create a deep sense of uncertainty and preoccupation with fear,⁴⁸ as well as grief, anger, and shame.⁴⁹ These

prospective investigation of physical health outcomes in abused and neglected children: new findings from a 30-year follow-up, 102(6) *American Journal of Public Health* 1135 (2012); H. W. Wilson & C. S. Widom, Pathways from childhood abuse and neglect to HIV-risk sexual behavior in middle adulthood, 79(2) *Journal of Consulting and Clinical Psychology* 236 (2011); V. Nikulina, C. S. Widom, & S. Czaja, The role of childhood neglect and childhood poverty in predicting mental health, academic achievement and crime in adulthood, 48(3-4) *American Journal of Community Psychology* 309 (2011); J. Currie & C. S. Widom, Long-term consequences of child abuse and neglect on adult economic well-being, 15(2) *Child Maltreatment* 111 (2010); T. Bentley & C. S. Widom, A 30-year follow-up of the effects of child abuse and neglect on obesity in adulthood, 17(10) *Obesity (Silver Spring)* 1900 (2009); H. W. Wilson & C. S. Widom, Does physical abuse, sexual abuse, or neglect in childhood increase the likelihood of same-sex sexual relationships and cohabitation? A prospective 30-year follow-up, 39(1) *Archives of Sexual Behavior* 63 (2010); R. Gilbert, et al., Burden and consequences of child maltreatment in high-income countries, 373 *Lancet* 68 (2009); C. S. Widom, S. J. Czaja & M. A. Dutton, Childhood victimization and lifetime revictimization, 32(8) *Child Abuse & Neglect* 785 (2008).

⁴⁴ Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 804-6 (2008).

⁴⁵ J. D. Ford, Complex adult sequelae of early life exposure to psychological trauma, In *The hidden epidemic: The impact of early life trauma on health and disease* 69-76 (R. A. Lanius, E. Vermetten, & C. Pain Eds., 2010).

⁴⁵ Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 29-30 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; W. W. Harris, A. F. Lieberman & S. Marans In the best interests of society, 48(3-4) *Journal of Child Psychology and Psychiatry and Allied Disciplines* 392 (2007).

⁴⁶ For the purpose of this paper, a child is considered to be a witness to a crime when he or she perceives the criminal incident in one of their senses (sight, hearing, etc.) or observes the aftermath of the crime (injuries, damage to property, etc.).

⁴⁷ Jennifer E. McIntosh, Thought In The Face Of Violence: A Child's Need, 26 *Child Abuse and Neglect* 229 (2002); Suzanne G. Martin, Children Exposed to Domestic Violence: Psychological Considerations For Health Care Practitioners, 16(3) *Holistic Nursing Practice* 7 (2002).

⁴⁸ Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 802-3 (2008).

⁴⁹ Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 32 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; E. M.

children often feel “a sense of terror that they will lose an essential caregiver, such as a battered parent who is severely injured and could be killed.”⁵⁰ To complicate things even further, they also often “fear losing their relationship with a battering parent who may be taken away and incarcerated or even executed.”⁵¹ The developmentally ego-centric thinking of children also frequently leads them to be burdened by “profound guilt”⁵² because they believe that they should have somehow intervened or prevented the violence — or, tragically, that they actually caused the violence.”⁵³ Affected children describe “ambivalent attitudes towards both their parents”, including “fear and empathy” towards the abusing parent, and “compassion coupled with a sense of obligation to protect” the abused.⁵⁴ Experiences of reoccurring sadness, confusion and disappointment are also commonly described.⁵⁵

The presence of crime and violence in the home, particularly when intimate partner violence between mother and father is concerned, can make “each caretaker less available to the child,”

Cummings, et al., Children and Violence: The Role of Children’s Regulation in The Marital Aggression-Child Adjustment Link, 12(1) *Clinical Child and Family Psychology Review* 3 (2009); S. C. Perkins, et al., The Mediating Role of Self-Regulation Between Intrafamilial Violence and Mental Health Adjustment in Incarcerated Male Adolescents, 27(7) *Journal of Interpersonal Violence* 1199 (2012).

⁵⁰ P. T. Davies, et al., (2002). *Child Emotional Security and Interparental Conflict*, 67(3) *Monographs of the Society for Research in Child Development* i–v, vii–viii, 1–115 (2002); A. C. Schermerhorn, E. M. Cummings & P. T. Davies, Children’s Representations of Multiple Family Relationships: Organizational Structure and Development in Early Childhood, 22(1) *Journal of Family Psychology* 89 (2008); E. M. Cummings, et al., Interparental Discord and Child Adjustment: Prospective Investigations of Emotional Security As An Explanatory Mechanism, 77(1) *Child Development* 132 (2006); D. S. Schechter, et al., Distorted Maternal Mental Representations and Atypical Behavior in a Clinical Sample of Violence-Exposed Mothers and Their Toddlers, 9(2) *Journal of Trauma and Dissociation* 123 (2008); A. J. Botsis, et al., Parental loss and family violence as correlates of suicide and violence Risk, 25(2) *Suicide and Life-Threatening Behavior* 253 (1995); T. Gaensbauer, et al., Traumatic loss in a one-year-old girl, 34(4) *Journal of the American Academy of Child & Adolescent Psychiatry* 520 (1995).

⁵¹ E. Beck & S. J. Jones, *Children of The Condemned: Grieving The Loss of a Father to Death Row*, 56(2) *Omega* (Westport) 191 (2007).

⁵² A. Fortin, M. Doucet, & D. Damant, Children’s Appraisals As Mediators of The Relationship Between Domestic Violence and Child Adjustment, 26(3) *Violence and Victimology* 377 (2011); Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 803 (2008).

⁵³ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 32 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; P. T. Davies, E. M. Cummings & M. A. Winter, Pathways Between Profiles of Family Functioning, Child Security in The Interparental Subsystem, and Child Psychological Problems, 16(3) *Development and Psychopathology* 525 (2004).

⁵⁴ Hadass Goldblatt, Strategies of Coping Among Adolescents Experiencing Interparental Violence, 18(2) *Journal of Interpersonal Violence* 532 (2003); Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 802 (2008).

⁵⁵ Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 802 (2008).

with the abuser perceived as “unpredictable and frightening” while the abused parent is distracted by basic issues of safety and survival for themselves and their children.⁵⁶

The Intergenerational Transmission of Violence theory posits that “witnessing and experiencing violence as a child leads to a greater use or tolerance of violence as an adult.”⁵⁷ The child’s ongoing exposure to aggression in their immediate environment can lead to a conceptualization of aggression as a functional and legitimate part of intimate relationship and family dynamics.⁵⁸ Furthermore, children have a developmental need to attach rationale and justification to the batterer’s behavior in order to cope with the traumatic event. If inappropriate or inaccurate rationalization of abusive behavior is not addressed, the child is potentially at risk of adopting anti-social rationales for their own abusive behavior or abuse perpetrated against them.⁵⁹ The theory is thought to explain the heightened risk for either perpetrating or becoming a victim of domestic violence in adulthood observed among children exposed to family violence, thus leading to an inter-generational cycle of violence.⁶⁰ The theory also associates childhood exposure with greater likelihood of involvement in anti-social behavior, peer aggression, bullying and violent crime.⁶¹

⁵⁶ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 451 (2000); Gayla Margolin, *Effects of Domestic Violence On Children*, in *Violence Against Children In The Family And The Community* 57 (Penelope K. Trickett & Cynthia J. Schellenbach, eds., 1998).

⁵⁷ Fred E. Markowitz, *Attitudes And Family Violence: Linking Intergenerational And Cultural Theories*, 16(2) *Journal of Family Violence* 205 (2001); Sandra M. Smith, et al., *The Intergenerational Transmission of Spouse Abuse: A Meta-Analysis*, 62 *Journal of Marriage and the Family* 640 (2000); Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 803 (2008).

⁵⁸ Joy D. Osofsky, *Prevalence Of Children’s Exposure To Domestic Violence And Child Maltreatment: Implications For Prevention And Intervention*, 6(3) *Clinical Child and Family Psychology Review* 161(2003); George W. Holden, *Children Exposed To Domestic Violence And Child Abuse: Terminology And Taxonomy*, 6(3) *Clinical Child and Family Psychological Review* 151(2003); Sandra A. Graham-Bermann & Victoria Brescoll, *Gender, Power And Violence: Assessing The Family Stereotypes Of The Children Of Batterers*, 14(4) *Journal of Family Psychology* 600 (2000).

⁵⁹ Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 803 (2008).

⁶⁰ K. D. O’Leary, K. D., A. M. Smith Slep & S. G. O’Leary, *Multivariate Models of Men’s and Women’s Partner Aggression*, 75(5) *Journal of Consulting and Clinical Psychology* 752 (2007); Christine Wekerle & David A. Wolfe, *Dating Violence In Mid-Adolescence: Theory, Significance, And Emerging Prevention Initiatives*, 19(4) *Clinical Psychological Review* 435 (1999); Alytia A. Levendosky, Alissa C. Huth-Bocks & Michael A. Semel, *Adolescent Peer Relationships And Mental Health Functioning In Families With Domestic Violence*, 31(2) *Journal of Clinical Child Psychology* 206 (2002).

⁶¹ Anna C. Baldry, *Bullying In Schools And Exposure To Domestic Violence*, 27 *Child Abuse & Neglect* 713 (2003); Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 806 (2008); Laurence Steinberg, *Youth Violence: Do Parents And Families Make A Difference?* 2 *National Institute of Justice Journal* 30 (2000).

The Intergenerational Transmission of Violence theory also found support in empirical research. A study by Gelles and Cavanaugh estimated the intergenerational transmission rate to be 30% ($\pm 5\%$).⁶² These findings were supported by a 12-year longitudinal study which “found that young adults who had been exposed to parental violence as children were 189% more likely than those not exposed, to experience violence in their own adult relationships.”⁶³ Research also found a direct relationship between the level of physical and emotional abuse of mothers and children’s belief systems regarding the intrinsic dominance and privilege of men, and the acceptable purpose of violence in family interactions.⁶⁴ Another study of individuals exposed to family violence during childhood has documented self-doubt of their “competency to become non-violent partners” and ambivalence about their ability to control themselves.”⁶⁵

A recent study has examined the effect of childhood exposure to family violence on behavioral issues, including anxiety/depression, social interaction problems, attention problems, delinquency, aggression and externalizing behaviors. The study has found that children witnessing family violence alone had similar behavioral scores as children suffering from direct abuse. This effect is found to be most evident when boys are concerned. The only category in which differences were observed was the delinquency score, where children who witnessed the violence had a significantly higher score than the control group,⁶⁶ but still scored lower than children affected by direct abuse.⁶⁷

The cumulative effect of these factors lead experts in the field to conclude that childhood exposure to family violence “has the potential to induce catastrophic and long-term trauma in the child

⁶² Richard J. Gelles & M. M. Cavanaugh *Violence, Abuse And Neglect In families And Intimate Relationships*, in *Families & change: Coping with stressful events and transitions* 129 (Sharon J. Price, Christine E. Price & Patrick C. McHenry (Eds.), 3rd ed., 2005).

⁶³ Stephanie Holt, Helen Buckley & Sadhbh Whelan, *The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature*, 32 *Child Abuse & Neglect* 797, 805 (2008); Paul R. Amato, *The Consequences Of Divorce For Adults And Children*, 62 *Journal of Marriage and the Family* 1269 (2000).

⁶⁴ Sandra A. Graham-Bermann & Victoria Brescoll, *Gender, Power And Violence: Assessing The Family Stereotypes Of The Children Of Batterers*, 14(4) *Journal of Family Psychology* 600 (2000).

⁶⁵ Hadass Goldblatt, *Strategies of Coping Among Adolescents Experiencing Interparental Violence*, 18(2) *Journal of Interpersonal Violence* 532 (2003).

⁶⁶ The control group was composed of children who were not exposed to any form of family violence either directly or indirectly.

⁶⁷ Yuping Cao, et al., *Effects of Exposure to Domestic Physical Violence on Children’s Behavior: a Chinese Community-based Sample*, 9(2) *Journal of Child & Adolescent Trauma* 127 (2016). (The study was conducted in China, and thus the research sample is composed solely of children of Chinese ethnicity).

witness”⁶⁸ They further warn that the fact that a child does not exhibit distinct symptoms does not necessarily mean that s/he is unaffected by the violence, as the child may still develop physical or emotional symptoms later in life.⁶⁹

Exposure to Community Crime

Even when the child’s home environment is maintained violence-free, the child is not immune from the effect of crime and violence exposure, and may still experience indirect victimization as a result of exposure to community crime. These are cases where the child witnesses criminal activity outside the home, among non-relatives, for example in the neighborhood or the school. Although the child is not directly physically injured, significant harm can result from the traumatic exposure. Negative effect was documented for children who witnessed the violence directly through sight or sound, as well as those who only heard about the violence in retrospect.⁷⁰ This form exposure to crime was found to most frequently affect school-age children and adolescents.⁷¹ Children living in economically impoverished families and communities are also far more likely to be exposed.⁷²

⁶⁸ Hadass Goldblatt, Strategies of Coping Among Adolescents Experiencing Interparental Violence, 18(2) *Journal of Interpersonal Violence* 532 (2003)

⁶⁹ Katherine M. Kitzmann, Et al., Child Witness To Domestic Violence: A Meta-Analytic Review, 71(2) *Journal of Consulting and Clinical Psychology* 339 (2003); Jennifer E. McIntosh, Children Living With Domestic Violence: Research Foundations For Early Intervention, 9(2) *Journal of Family Studies* 219 (2003); Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 *Annu. Rev. Psychol.* 445, 446 (2000); Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 806 (2008).

⁷⁰ Michael Lynch, Consequences of Children’s Exposure to Community Violence, 6(4) *Clinical Child and Family Psychology Review* 265, 267(2003); Dawn K. Wilson, Violence Exposure, Catecholamine Excretion, And Blood Pressure Non-Dipping Status In African-American Male Versus Female Adolescents, 64 *Psychosomatic Medicine* 906 (2002); Patrick T. Sharkey, et al., The Effect of Local Violence on Children’s Attention and Impulse Control, 102(2) *American Journal of Public Health* 2287 (2012); Patrick T. Sharkey, The acute effect of local homicides on children’s cognitive performance, 107(26) *PNAS* 11733 (2010).

⁷¹ Eunju Lee, Heather Larkin and Nina Esaki, Exposure to Community Violence as a New Adverse Childhood Experience Category: Promising Results and Future Considerations, 98 *Families in Society: The Journal of Contemporary Social Services* 69, 69 (2017); Bradley D. Stein, et al., Prevalence Of Child And Adolescent Exposure To Community Violence, 6(4) *Clinical Child and Family Psychology Review* 247 (2003); John E. Richters & Pedro Martinez, The NIMH Community Violence Project: I. Children As Victims Of And Witnesses To Violence, 56 *Psychiatry* 7 (1993).

⁷² C. B. Cunradi, et al., Neighborhood Poverty As A Predictor of Intimate Partner Violence Among White, Black, and Hispanic Couples in The United States: A Multilevel Analysis, 10(5) *Annals of Epidemiology* 297 (2000); L. A. Goodman, et al. (2009), When Crises Collide: How Intimate Partner Violence and Poverty Intersect to Shape Women’s Mental Health and Coping, 10(4) *Trauma Violence Abuse* 306 (2009); L. Corzine & J. Corzine, J., Deadly Connections: Culture, Poverty, and The Direction of Lethal Violence, 69(3) *Social Forces* 55 (1991).

Like the home, the neighborhood and school are considered to be part of the child's primary safe haven.⁷³ Exposure to crime and violence in this environment can cause a loss of its protective and comforting qualities that are necessary for the development of the child's sense of security and trust.⁷⁴ Once deprived of the ability to feel safe in their own schools and neighborhoods, adoption of an attitude of hypervigilance commonly occurs — “never letting their guard down so they will be ready for the next outbreak of violence.”⁷⁵ Such exposure to violence can be interpreted by the child to mean not only that the world is unsafe but also that the child is unworthy of being kept safe, affecting self-esteem and the perception of self-worth.⁷⁶

Exposure to crime in the child's natural environment may lead the child to believe “that violence is “normal” and that relationships are too fragile to trust because one never knows when violence will take the life of a friend or loved one. They may feel compelled to resort to violence to avoid being viewed as weak and being targeted by bullies or other violent community members.⁷⁷ They may turn to gangs or criminal activities due to despair and powerlessness, perpetuating a cycle of violence by inflicting violence on others and becoming targets for further violence or incarceration.”⁷⁸

⁷³ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 449 (2000)

⁷⁴ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 449 (2000).

⁷⁵ M. Janosz, et al., *Are There Detrimental Effects of Witnessing School Violence in Early Adolescence?* 43(6) *Journal of Adolescent Health* 600 (2008); N. Shields, K. Nadasen & L. Pierce, L. (2008). *The Effects of Community Violence on Children in Cape Town, South Africa*, 32(5) *Child Abuse & Neglect* 589 (2008); P. J. Fowler, et al., *Community Violence: A Meta-Analysis On The Effect of Exposure and Mental Health Outcomes of Children and Adolescents*, 21(1) *Development & Psychopathology* 227 (2009); N. M. Malik, *Exposure to Domestic and Community Violence in a Nonrisk Sample: Associations With Child Functioning*, 23(4) *Journal of Interpersonal Violence* 490 (2008); W. Klierer & T. N. Sullivan, *Community Violence Exposure, Threat Appraisal, and Adjustment in Adolescents*, 37(4) *Journal of Clinical Child & Adolescent Psychology* 860 (2008).

⁷⁶ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 458 (2000); Michael Lynch & Dante Cicchetti, *An Ecological Transactional Analysis Of Children And Contexts: The Longitudinal Interplay Among Child Maltreatment, Community Violence, And Children's Symptomatology*, 10 *Dev. Psychopathol* 235 (1998).

⁷⁷ M. Janosz, et al., *Are There Detrimental Effects of Witnessing School Violence in Early Adolescence?* 43(6) *Journal of Adolescent Health* 600 (2008); N. Shields, K. Nadasen & L. Pierce, L. (2008). *The Effects of Community Violence on Children in Cape Town, South Africa*, 32(5) *Child Abuse & Neglect* 589 (2008).

⁷⁸ Robert L. Listenbee, et al., *Report of the Attorney General's National Task Force on Children Exposed to Violence* 33 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; C. A. Taylor, et al., *Cumulative Experiences of Violence Among High-Risk Urban Youth*, 23(11) *Journal of Interpersonal Violence* 1618 (2008).

Living in a community saturated with crime and violence may also negatively affect parents' caretaking due to the parent's own feelings of helplessness, fear, and grief. "Efforts to protect the child may be exhibited in authoritarian and restrictive parenting practices, as well as in certain precautions that may heighten the child's anxiety."⁷⁹ Other parents may yield to the sense of helplessness and will cease any efforts to protect the child.

The Adverse Childhood Experiences (ACE) studies explored the link between a variety of negative events during childhood, including exposure to crime, and a host of health conditions in adulthood. The studies have found a strong link between negative childhood experiences and a broad range of physical and mental health problems and premature death. Exposure to community violence was not included in the original ACE Studies. However, more recent studies have found strong and convincing evidence to suggest that exposure to community violence should be considered a new ACE category. This conclusion is based on the substantial association between this type of exposure and the same set of life threatening health conditions outlined in the ACE studies.⁸⁰ Similar studies have also established a link between exposure to community crime and posttraumatic stress symptoms (PTSD) and chemical imbalances in the brain that affect development and function.⁸¹ Some studies go as far as showing that even community violence that children do not witness in person can negatively affect their attentional abilities and cognitive performance.⁸²

Parental Victimization

⁷⁹ Gayla Margolin and Elana B. Gordis, *The Effects Of Family And Community Violence On Children*, 51 *Annu. Rev. Psychol.* 445, 452 (2000).

⁸⁰ Eunju Lee, Heather Larkin and Nina Esaki, *Exposure to Community Violence as a New Adverse Childhood Experience Category: Promising Results and Future Considerations*, 98 *Families in Society: The Journal of Contemporary Social Services* 69, 69 (2017); David Finkelhor, et al., *A revised inventory of Adverse Childhood Experiences*, 48 *Child Abuse & Neglect* 13 (2015).

⁸¹ Shakira Franco Suglia, et al., *Posttraumatic Stress Symptoms Related to Community Violence and Children's Diurnal Cortisol Response in an Urban Community-Dwelling Sample*, 17 *Int. J. Behav. Med.* 43 (2010); Linda N. Freeman, Hartmut Mokros & Elva O. Poznanski, *Violent Events Reported By Normal Urban School-Aged Children: Characteristics And Depression Correlates*, 32(2) *J Am Acad Child Adolesc Psychiatry* 419 (1993); Pedro Martinez & John E. Richters, *The NIMH Community Violence Project: II. Children's Distress Symptoms Associated With Violence Exposure*, 56(1) *Psychiatry* 22 (1993); James J. Mazza & William M. Reynolds, *Exposure To Violence In Young Innercity Adolescents: Relationships With Suicidal Ideation, Depression, And PTSD Symptomatology*, 27(3) *J Abnorm. Child Psychol.* 203 (1999); Mary Schwab-Stone, et al., *No Safe Haven II: The Effects Of Violence Exposure On Urban Youth*, 38(4) *J Am Acad. Child Adolesc. Psychiatry* 359 (1999).

⁸² Patrick T. Sharkey, et al., *The Effect of Local Violence on Children's Attention and Impulse Control*, 102(2) *American Journal of Public Health* 2287 (2012); Patrick T. Sharkey, *The acute effect of local homicides on children's cognitive performance*, 107(26) *PNAS* 11733 (2010).

When the child's parent is a victim of a violent crime the child is often affected in some way by proxy. Differently than exposure to family crime and violence, children under this category experience harm even though they do not perceive the commission of a crime in their own senses and are not considered witnesses to the crime against the parent. "Simply put, the well-being of a child is inextricably linked to the well-being of the adults in his or her life", and hence if caregivers are victims of violence, this also impacts the children.⁸³ The most extreme scenario of parental victimization is homicide cases, where a child loses a parent or caregiver to crime. The more common cases are of parents who experience violent victimization in childhood or adulthood, and suffer harmful implications as a result, which have a spillover effect to their children.⁸⁴ The effect of parental victimization is found to be most severe when the parent does not receive treatment and services to facilitate recovery.⁸⁵

Victimized parents have an increased probability to suffer from a range of mental health problems, including emotional deficiencies, depression, and low self-esteem. Poorer state of physical health was also found in victimized, in comparison to non-victimized, caregivers.⁸⁶ Some evidences show that victimization may also affect parenting skills and the interaction between parent and child.⁸⁷ Survivors of victimization may have difficulties establishing clear

⁸³ Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 110 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>;

⁸⁴ Jennie G. Noll, et al. The Cumulative Burden Borne By Offspring Whose Mothers Were Sexually Abused As Children: Descriptive Results From A Multigen-Erational Study, 24(3) Journal of Interpersonal Violence 424 (2009); Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 31 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

⁸⁵ Howard Dubowitz, et al., Type and Timing of Mothers' Victimization: Effects on Mothers and Children, 107 Pediatrics 728 (2001); Cindy E. Weisbart, et al., Child and Adult Victimization: Sequelae for Female Caregivers of High-Risk Children, 13(3) Child Maltreatment 235 (2008).

⁸⁶ Cindy E. Weisbart, et al., Child and Adult Victimization: Sequelae for Female Caregivers of High-Risk Children, 13(3) Child Maltreatment 235 (2008).

⁸⁷ Heidi N. Bailey, et al., The Impact Of Childhood Maltreatment History On Parenting: A Comparison Of Maltreatment Types And Assessment Methods, 36(3) Child Abuse & Neglect 236 (2012); Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 32-33 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; P. T. Davies, et al., A Process Analysis of The Transmission of Distress From Interparental Conflict to Parenting: Adult Relationship Security As An Explanatory Mechanism, 45(6) Developmental Psychology 1761 (2009); Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 Child Abuse & Neglect 797, 800-801 (2008).

generational boundaries with their children, may be over permissive as parents, or conversely exhibit restrictive parenting practices, and be more inclined to use harsh physical discipline.⁸⁸

Studies show that when experiencing crime induced trauma, a parent's ability to play a stable, consistent role in the child's life and, therefore, to support the child, may be compromised.⁸⁹ Furthermore, victimization causes parents themselves to be numbed, frightened, and depressed, unable to deal with their own trauma and/or grief, and have difficulty being emotionally available, sensitive, and responsive to their children.⁹⁰ A victimized parent who is depressed or overwhelmed may have difficulty meeting a young child's need for structure, to manage their developmental inability to understand and control their own emotions, thus impacting the child's experience of emotional expression.⁹¹ The quality of attachment between parent and child was also found to be affected.⁹² A victimized parent, particularly in cases of ongoing victimization, may be "living in constant fear, they may deny their children normal

⁸⁸ David DiLillo, Parenting Characteristics of Women Reporting a History of Childhood Sexual Abuse, 8 *Child Maltreatment* 319 (2003); Richard Thompson, Mothers' Violence Victimization and Child Behavior Problems: Examining the Link, 77 *American Journal of Orthopsychiatry* 306 (2007); Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 31 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; Carol Coohey, Battered Mothers Who Physically Abuse Their Children, 9(8) *Journal of Interpersonal Violence* 943 (2004); George W. Holden, Parenting Behaviour And Beliefs Of Battered Women, In *Children Exposed To Marital Violence: Theory, Research, And Applied Issues* (George W. Holden, Robert A. Geffner & Ernest N. Jouriles eds., 1998); Gayla Margolin and Elana B. Gordis, The Effects Of Family And Community Violence On Children, 51 *Annu. Rev. Psychol.* 445, 452 (2000).

⁸⁹ Joy D. Osofsky, The Impact of Violence on Children, 9 *DOMESTIC VIOLENCE AND CHILDREN* 33, 40 (1999); Kihyun Kim, Penelope K. Trickett & Frank W. Putnam, Childhood Experiences Of Sexual Abuse And Later Parenting Practices Among Non-Offending Mothers of Sexually Abused And Comparison Girl, 34(8) *Child Abuse & Neglect* 610 (2010); E. Buchbinder, Motherhood Of Battered Women: The Struggle For Repairing The Past, 23(3) *Clinical Social Work Journal* 307 (2004); Alytia A. Levendosky & S. A. Graham-Bermann, Parenting In Battered Women: The Effects Of Domestic Violence On Women And Their Children, 16(2) *Journal of Family Violence* 171(2001); Jennifer E. McIntosh, Thought In The Face Of Violence: A Child's Need, 26 *Child Abuse and Neglect* 229 (2002).

⁹⁰ Joy D. Osofsky, The Impact of Violence on Children, 9 *DOMESTIC VIOLENCE AND CHILDREN* 33 40-1 (1999); Melanie Marysko, et al., History Of Childhood Abuse Is Accompanied By Increased Dissociation in Young Mothers Five Months Postnatally, 43(2) *Psychopathology* 104 (2010); George W. Holden, Children Exposed To Domestic Violence And Child Abuse: Terminology And Taxonomy, 6(3) *Clinical Child and Family Psychological Review* 151(2003); Alytia A. Levendosky & Sandra A. Graham-Bermann, The Moderating Effects Of Parenting Stress On Children's Adjustment In Woman-Abusing Families, 13(3) *Journal of Family Violence* 383 (1998).

⁹¹ Jeffrey L. Edleson, Children's Witnessing Of Adult Domestic Violence, 14(8) *Journal of Interpersonal Violence* 839 (1999).

⁹² Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 801 (2008); Alytia A. Levendosky, et al., The Impact Of Domestic Violence On The Maternal-Child Relationship And Preschoolage Children's Functioning, 17(3) *Journal of Family Psychology* 275 (2003). See also: Hedy Cleaver, Ira Unell, & Jane Aldgate, Children's Needs—Parenting Capacity, The Impact Of Parental Mental Illness, Problem Alcohol And Drug Use, And Domestic Violence On Children's Development (1999).

developmental transitions and the sense of basic trust and security that is the foundation of healthy emotional development.”⁹³

Due to these factors, parental victimization has considerable detrimental consequences to child development, outcomes, behavior, and the child’s relationship with the parent, even in cases where the child is not aware of, or directly exposed to, the criminal act committed against the parent.

Parental Incarceration

Another form of indirect exposure to crime occurs when a child is separated from a primary caregiver as a result of incarceration. Children are affected by the incarceration of either parent, but they typically experience greater harm when their mother is imprisoned due to the central role a mother often plays in the life of a young child.⁹⁴ Incarceration of a parent normally causes major negative economic, social and psychological consequences to the child, and may have life-long repercussions.

When the incarcerated parent is the primary caregiver, the family’s life is fundamentally disrupted. The child is usually uprooted, and may be separated, not only from the incarcerated parent, but also from his siblings, other relatives, and friends. The child is at risk of being moved frequently among caregivers and even becoming a ward of the state.⁹⁵ Maintaining a close relationship and regular contact with the incarcerated parent overtime is a significant challenge.⁹⁶

When the child is too young to fully understand the reasons for the parent’s “disappearance”, destructive feelings of self-blame and anger can emerge. The remaining caregiver is often unable to find the right way of conveying the information to the child in an age-appropriate manner and

⁹³Alytia A. Levendosky, Shannon M. Lynch, & Sandra A. Graham-Bermann, Mothers’ Perceptions Of The Impact Of Woman Abuse On Their Parenting, 6 *Violence Against Women* 248(2000); Alytia A. Levendosky & Sandra A. Graham-Bermann, Parenting In Battered Women: The Effects Of Domestic Violence On Women And Their Children, 16(2) *Journal of Family Violence* 171(2001)

⁹⁴ Tiffany Conway and Rutledge Q. Hutson, Parental Incarceration: How to Avoid a “Death Sentence” for Families, 41(3-4) *Clearinghouse Review Journal of Poverty Law and Policy* 212, 212 (Jul.-Aug. 2007). Available at: <http://www.clasp.org/admin/site/publications/files/0396.pdf>

⁹⁵ Donna K. Metzler, Neglected by the System: Children of Incarcerated Mothers, 82 *ILL. B.J.* 428, 430 (1994).

⁹⁶ See detailed discussion in: Michal Gilad & Tal Gat, U.S. v. My Mommy: Evaluation of Prison Nurseries as a Solution for Children of Incarcerated Women, 37 *N.Y.U. REV. L. & SOC. CHANGE* 371 (2013), available at: <http://socialchangenyu.files.wordpress.com/2013/05/us-v-my-mommy2.pdf>

to render necessary support. Economic hardship is another likely possibility, due to the added legal expenses involved and the loss of income or social benefits.⁹⁷ The child left behind is also subjected to negative stigma and shame associated with parental incarceration.⁹⁸

Parental incarceration is one of the Adverse Childhood Experiences (ACE) empirically found to have strong impact on adult health status and significant association with multiple risk behaviors and leading causes of premature death.⁹⁹ Additional studies indicate that the separation of a young child from a primary caregiver caused by parental incarceration is linked with a host of adverse symptoms, including impaired ability to sympathize or show concern for others; aggression and anger;¹⁰⁰ developmental and behavioral problems; sleeping, eating, or attention disorders; problems with social adaptation; and manifestation of sexually promiscuous behavior.¹⁰¹

⁹⁷ Donald Braman, *Doing Time On The Outside: Incarceration And Family Life In Urban America* (2004); Nell Bernstein, *All Alone In The World: Children Of The Incarcerated* 109-42 (2005)

⁹⁸ See; Sarah Abramowicz, *Rethinking Parental Incarceration*, 82 U. COLO. L. REV. 793 (2011); Denise Johnston, *Services For Children of Incarcerated Parents*, 50 FAM. CT. REV. 91 (2012); Donna K. Metzler, *Neglected By The System: Children of Incarcerated Mothers*, 82 ILL. B.J. 428 (1994); Julie Poehlmann, *Children of Incarcerated Mothers And Fathers*, 24 WIS. J.L. GENDER & SOC'Y 331 (2009).

⁹⁹ Vincent J. Felitti et al., *Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study*, 14(4) Am J Prev Med 245, 251 (1998); Leah K. Gilbert et al., *Childhood Adversity and Adult Chronic Disease: An Update from Ten States and the District of Columbia*, 48(3) Am J Prev Med 345, 346 (2015).

¹⁰⁰ Christopher Wildeman, *Paternal Incarceration and Children's Physically Aggressive Behaviors: Evidence from the Fragile Families and Child Wellbeing Study*, 89 Soc. Forces 285 (2010)

¹⁰¹ REBECCA PROJECT FOR HUMAN RIGHTS & NATIONAL WOMEN'S LAW CENTER, *supra* note 13, at 13; Jessica Y. Kim, *In-Prison Day Care: A Correctional Alternative for Women Offenders*, 7 CARDOZO WOMEN'S L.J. 221, 228 (2001); Leda M. Pojman, *Cuffed Love: Do Prison Babies Ever Smile?*, 10 BUFF. WOMEN'S L. J. 46, 62 (2002); John J. Sheridan, *Inmates May be Parents, Too*, CORRECTIONS TODAY, Aug. 1996, at 100; Joseph Murray et al., *Children's Antisocial Behavior, Mental Health, Drug Use, and Educational Performance After Parental Incarceration: A Systematic Review and Meta-analysis*, 138 Psychol. Bull. 175 (2012); Sara Wakefield & Christopher Wildeman, *Mass Imprisonment and Racial Disparities in Childhood Behavioral Problems*, 10 Criminology & Pub. Pol'y 793 (2011)

Life outcomes were also found to be affected by parental incarceration, including delays in educational development and achievement;¹⁰² risk for homelessness;¹⁰³ greater likelihood to develop addictions to drugs or alcohol;¹⁰⁴ and to engage in criminal activity.¹⁰⁵ A recent longitudinal study has also found a link between parental incarceration during childhood and social exclusion in adulthood. The variable of social exclusion was composed of personal income, household income, perceived socioeconomic status, and feelings of powerlessness.¹⁰⁶ The study has found that “both maternal and paternal incarceration significantly contribute to young adult social exclusion among offspring in their late twenties to early thirties”¹⁰⁷

Children suffering from parental incarceration are often referred to as the “invisible victims” of crime, as they are forced to bear the consequences of their parent’s criminal behavior and the

¹⁰² Joseph Murray et al., Children's Antisocial Behavior, Mental Health, Drug Use, and Educational Performance After Parental Incarceration: A Systematic Review and Meta-analysis, 138 *Psychol. Bull.* 175 (2012); Holly Foster & John Hagan, Incarceration and Intergenerational Social Exclusion, 54 *Soc. Probs.* 399, 416-17 (2007); Ann M. Stanton, When Mothers Go to Jail 91- 93 (1980); Barbara Bloom & David Steinhart, Nat'l Council on Crime & Delinquency, *Why Punish the Children?* (1993); Joseph Murray & David P. Farrington, The Effects of Parental Imprisonment on Children, 37 *Crime & Just.* 133, 162 (2008); Rucker C. Johnson, Ever-Increasing Levels of Parental Incarceration and the Consequences for Children, in *Do Prisons Make Us Safer? The Benefits and Costs of the Prison Boom* 177, 196 (Steven Raphael & Michael A. Stoll eds., 2009); Ashton D. Trice & JoAnne Brewster, The Effects of Maternal Incarceration on Adolescent Children, 19 *J. Police & Crim. Psychol.* 27, 31 (2004); Holly Foster & John Hagan, Maternal And Paternal Imprisonment And Children’s Social Exclusion In Young Adulthood, 105 *J. Crim. L. & Criminology* 387 (2015).

¹⁰³ Holly Foster & John Hagan, Incarceration and Intergenerational Social Exclusion, 54 *Soc. Probs.* 399, 413 (2007); Christopher Wildeman, Parental Incarceration, Child Homelessness, and the Invisible Consequences of Mass Imprisonment, 651 *Annals. Am. Acad. Pol. & Soc. Sci.* 74, 84-86 (2014).

¹⁰⁴ Joseph Murray et al., Children's Antisocial Behavior, Mental Health, Drug Use, and Educational Performance After Parental Incarceration: A Systematic Review and Meta-analysis, 138 *Psychol. Bull.* 175 (2012); Michael E. Roettger et al., Paternal Incarceration and Trajectories of Marijuana and Other Illegal Drug Use from Adolescence into Young Adulthood: Evidence from Longitudinal Panels of Males and Females in the United States, 106 *Addiction* 121, 126 (2011);

¹⁰⁵ Michael E. Roettger & Raymond R. Swisher, Associations of Fathers' History of Incarceration with Sons' Delinquency and Arrest Among Black, White, and Hispanic Males in the United States, 49 *Criminology* 1109 (2011);

¹⁰⁶ Holly Foster & John Hagan, Maternal And Paternal Imprisonment And Children’s Social Exclusion In Young Adulthood, 105 *J. Crim. L. & Criminology* 387 (2015).

¹⁰⁷ Holly Foster & John Hagan, Maternal And Paternal Imprisonment And Children’s Social Exclusion In Young Adulthood, 105 *J. Crim. L. & Criminology* 387, 387 (2015). (The study also found that educational interventions that increase successful completion of college to be a mediator of the exclusionary effects of maternal and paternal incarceration).

system's inability, or possibly unwillingness, to address their needs and mitigate the displayed harms.

Child Witnesses

An additional category of exposure that was examined for inclusion under the Triple-C Impact sphere was child witnesses, who provide testimony before the criminal justice system (either in court or other law enforcement agencies). Some evidence exists of a possible harm experienced by this category of children, especially when adequate services and support that target the unique developmental needs of this age group is not available.¹⁰⁸

Court testimony is an extremely stressful, frightening and formidable event, especially for a vulnerable young child. The child is placed in the unfamiliar and intimidating environment of a courtroom, and asked to participate in a process that is foreign and perplexing. S/he has to face the defendant, who the child often perceives as a threatening and dangerous figure. The child is required to answer difficult questions in public, and to go through harsh questioning by unsympathetic strangers. The child's truthfulness is repeatedly doubted and questioned throughout the process, which is often perceived as a humiliating experience. Moreover, the child has to repeatedly re-live the traumatic event s/he witnessed through recurring interrogations by law enforcement and in court. When the defendant is known or related to the child witness, further difficulties, including intense guilt and loyalty conflicts, may arise. The multitude of stressors involved in this experience can trigger extreme levels of anxiety and psychological strain, which is often referred to as "Secondary Victimization."¹⁰⁹

¹⁰⁸ Tanya Asim Cooper, *Sacrificing the Child to Convict the Defendant: Secondary Traumatization of Child Witnesses by Prosecutors, Their Inherent Conflict of Interest, and the Need for Child Witness Counsel*, 9 *Cardozo Pub. L. Pol'y & Ethics J.* 239 (2011); Janet Leach Richards, *Protecting the Child Witness in Abuse Cases*, 34 *Family Law Quarterly* 393 (2000); Robert H. Pantell, *Policy Statement: The Child Witness in the Courtroom*, 139(3) *PEDIATRICS* 2017, available at: <http://pediatrics.aappublications.org/content/pediatrics/early/2017/02/16/peds.2016-4008.full.pdf>; Jodi A. Quas & Mariya Sumaroka, *Consequences Of Legal Involvement On Child Victims Of Maltreatment*, in *Children's Testimony: A Handbook of Psychological Research and Forensic Practice* 323 (Michel Lamb, et al., eds. 2012); Jodi A. Quas, et al., *Childhood Sexual Assault Victims: Long Term Outcomes After Testifying In Criminal Court*, 70(2) *Monographs of the Society for Research in Child Development* 1 (2005); Gail S. Goodman, et al., *Testifying In Criminal Court: Emotional Effects On Child Sexual Assault Victims*, 57(5) *Monographs of the Society for Research in Child Development* 1(1992); US Department of Justice, Office of Justice Programs, *Attorney General Guidelines For Victim And Witness Assistance* (2005), available at: www.justice.gov/sites/default/files/olp/docs/ag_guidelines2012.pdf

¹⁰⁹ Tanya Asim Cooper, *Sacrificing the Child to Convict the Defendant: Secondary Traumatization of Child*

Nevertheless, the documented level of harm caused as a result of court testimony does not appear to meet the threshold set by the previously discussed categories in this section. Moreover, there is contrary evidence as to the possible benefits that providing a testimony can generate for the child, and its function in facilitating recovery from crime induced trauma.¹¹⁰ Lastly, court witnessing is a form of crime exposure that very rarely stands alone. Children who provide testimony will normally also fall under one of the other Triple-C categories, and thus will still be covered.

Under these circumstances, it was decided that this category of crime exposure should NOT be included under the Triple-C Impact at this point in time. This decision may change in the future, if new empirical evidence emerges to support a weightier severity of harm that ought to be addressed independently to the other Triple-C Impact categories.

Relying on this comprehensive review of literature, it is determined that the Triple-C Impact concept should focus on 5 categories of childhood crime exposure supported by scientific findings: Direct victimization, witnessing family crime, witnessing community crime, parental victimization, and parental incarceration. We must also remember that the aforementioned categories are not mutually exclusive. It is often the case that children experience poly-victimization, and suffer from multiple forms of direct or indirect crime exposure. Such cumulative exposure was found to further aggravate the harmful impact on the child.¹¹¹ As science evolves and advances in the future, this list may change to adapt to new findings, relying on similar harm-based criteria.

However, it is vital to keep in mind that like any social science, and even medical, research, all the cited studies are affected by a range of limitations and methodical complexities.¹¹² These may be

Witnesses by Prosecutors, Their Inherent Conflict of Interest, and the Need for Child Witness Counsel, 9 *Cardozo Pub. L. Pol'y & Ethics J.* 239 (2011).

¹¹⁰ Robert H. Pantell, Policy Statement: The Child Witness in the Courtroom, 139(3) *PEDIATRICS* 2017, available at: <http://pediatrics.aappublications.org/content/pediatrics/early/2017/02/16/peds.2016-4008.full.pdf>; Jodi A. Quas & Gail S. Goodman, Consequences Of Criminal Court Involvement For Child Victims, 18(3) *Psychol Public Policy Law* 392 (2012).

¹¹¹ David Finkelhor, Richard K. Ormrod & Heather A. Turner, Poly-Victimization: A Neglected Component In Child Victimization Trauma, 31 *Child Abuse & Neglect* 7 (2007); David Finkelhor, et al., Pathways To Poly-Victimization, 14(4) *Child Maltreatment* 316 (2009); Heather A. Turner, Richard K. Ormrod & David Finkelhor, Poly-Victimization in a National Sample of Children and Youth, 38(3) *American Journal of Preventive Medicine* 323 (2010).

¹¹² Some examples for the common limitations and methodological difficulties are described here: Stephanie Holt, Helen Buckley & Sadhbh Whelan, The Impact of Exposure To Domestic Violence On Children And Young People: A Review of The Literature, 32 *Child Abuse & Neglect* 797, 798-9 (2008).

particularly pronounced in this area of study, due to the frequent co-occurrence of childhood exposure to crime with other serious life adversities, and the commonality of experiencing more than one of the Triple-C categories. Yet, while we must always remain conscious and mindful of these constraints and the improbability of absolute accuracy in results, the overwhelming risk to children affected by the Triple-C Impact established in the existing empirical studies outlined above must not be ignored or discounted.

Once the problem is named and its scope and boundaries are better defined, we can proceed to examine the available statutory responses and policy-based solutions, and to assess their sufficiency in addressing the problem.

Section III: Gauging the Gap - Results of a 50-State Survey

A primary factor influencing the level of harm caused by the Triple-C Impact is the manner in which affected children are addressed – identified, managed, and treated.¹¹³ The Attorney General Task Force on Children Exposed to Violence, which covered a few of the Triple-C Impact categories in its final report, has repeatedly emphasized that “[c]hildren exposed to violence can heal if we identify them early and give them specialized services, evidence-based treatment, and proper care and support¹¹⁴.... Without services or treatment, even children who appear resilient and seem to recover from exposure to violence still bear emotional scars that may lead them to

¹¹³ S. J. Ko, et al., Creating trauma-informed systems: Child welfare, education, first responders, health care, juvenile justice, 39(4) *Professional Psychology: Research and Practice* 396 (2008); J. A. Cohen, A. P. Mannarino & S. Iyengar, Community treatment of posttraumatic stress disorder for children exposed to intimate partner violence: a randomized controlled trial, 165(1) *Archives of Pediatric and Adolescent Medicine* 16 (2011); Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 66 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; C. S. Widom, S. J. Czaja & M. A. Dutton, Childhood victimization and lifetime revictimization, 32(8) *Child Abuse & Neglect* 785 (2008); Loeb, T. B., et al.; Associations between child sexual abuse and negative sexual experiences and revictimization among women: Does measuring severity matter? 35(11) *Child Abuse & Neglect* 946 (2011); S. E. Ullman, C. J. Najdowski & H. H. Filipas, Child sexual abuse, post-traumatic stress disorder, and substance use: predictors of revictimization in adult sexual assault survivors, 18(4) *Journal of Child Sexual Abuse* 367 (2009); T. Lindhorst, et al., Mediating pathways explaining psychosocial functioning and revictimization as sequelae of parental violence among adolescent mothers, 79(2) *American Journal of Orthopsychiatry* 181 (2009); J. D. Fargo, Pathways to adult sexual revictimization: direct and indirect behavioral risk factors across the lifespan, 24(11) *Journal of Interpersonal Violence* 1771 (2009); J. E. Barnes, et al., Sexual and physical revictimization among victims of severe childhood sexual abuse, 33(7) *Child Abuse & Neglect* 412 (2009).

¹¹⁴ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 5 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

experience these same health and psychological problems years or decades later.”¹¹⁵ Furthermore, the mere lack of response can further compound the caused harm by fostering a sense of isolation and betrayal, as the child acknowledges that “no one takes notice or offers protection, justice, support, or help.”¹¹⁶

Yet, it is well documented that despite the strong association between exposure to violence and harm to the child, Triple-C affected children are habitually ignored.¹¹⁷ The Task Force has recognized that few of the children affected by crime exposure are effectively identified.¹¹⁸ Furthermore, “[t]he majority of children in our country who are identified as having been exposed to violence never receive services or treatment that effectively help them to stabilize themselves, regain their normal developmental trajectory, restore their safety, and heal their social and emotional wounds.”¹¹⁹

Exposed children are considered “the “silent” or “hidden” victims of violence because their presence is often overlooked by the parents/caregivers or goes unknown by observers and professionals.”¹²⁰ Even in criminal cases that are reviewed by a multitude of professionals and

¹¹⁵ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 12 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹¹⁶ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 30 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹¹⁷ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 65 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; U.S. Department of Health and Human Services Administration for Children and Families Children’s Bureau, Child Maltreatment 2010 (2010), <http://archive.acf.hhs.gov/programs/cb/pubs/cm10/cm10.pdf>; U.S. Health Resources and Services Administration. Child Health USA 2011 (2011), <http://mchb.hrsa.gov/chusa11/more/downloads/pdf/c11.pdf>; C. Ghosh Ippen, et al., Traumatic and stressful events in early childhood: can treatment help those at highest risk? , 35(7) Child Abuse & Neglect 504 (2011); J. A. Cohen, A. P. Mannarino & S. Iyengar, Community treatment of posttraumatic stress disorder for children exposed to intimate partner violence: a randomized controlled trial, 165(1) Archives of Pediatric and Adolescent Medicine 16 (2011); R. Wells, et al., Health service access across racial/ethnic groups of children in the child welfare system, 33(5) Child Abuse & Neglect 282 (2009); D. J. Kolko, et al., Community treatment of child sexual abuse: a survey of practitioners in the National Child Traumatic Stress Network, 36(1) Administration and Policy in Mental Health 37 (2009); J. A. Fairbank & D. W. Fairbank, Epidemiology of child traumatic stress, 11(4) Current Psychiatry Reports 289 (2009); P. T. Yanos, S. J. Czaja & C. S. Widom, A prospective examination of service use by abused and neglected children followed up into adulthood, 61(8) Psychiatric Services 796 (2010).

¹¹⁸ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 83 & 172 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; See also: David Finkelhor et al., Children’s Exposure to Violence: A Comprehensive National Survey, Juvenile Justice Bulletin 9 (Oct. 2009), available at: <https://www.ncjrs.gov/pdffiles1/ojdp/227744.pdf>

¹¹⁹ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 12 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹²⁰ The National Child Traumatic Stress Network (NCTSN), Identifying Children Affected by Domestic Violence, <http://www.nctsn.org/content/identifying-children-affected-domestic-violence>

service providers, including judges, law enforcement agents, prosecutors, and case workers, the situation of the children affected by the Triple-C Impact is often overlooked, and few of the professionals involved inquire about the affected children in their caseload.¹²¹

Studies show that professionals and service providers frequently fail to recognize the connection between exposure to crime and harm to children, and responding agencies and institutions do not have proper protocols and procedures in place to address these children.¹²² These findings were also supported by our survey results, where less than a handful of jurisdictions have reported having specific policies or protocols aimed to facilitate identification of affected children. Even when such protocols were available, they focused exclusively on children exposed to family violence, and did not cover any of the remaining Triple-C Impact categories.¹²³

Accordingly, in order to truly comprehend the problem before us, it is vital to primarily understand what is missing from our existing response to the problem. Thus far, no study has attempted to empirically map the existing statutory availability in this field, and there is no systematic knowledge on the manner in which state laws and policies address children affected by the Triple-C Impact.

Based on theories presented in the literature and policy reports, it was originally hypothesized that the deficiencies in effective response stem from statutory lacunas, narrow statutory definitions and

¹²¹ Susan Schechter & Jeffrey L. Eldelson, Open Society Institute's Center on Crime, Communities & Culture, *Domestic Violence & Children: Creating A Public Response 3* (2000); The National Child Traumatic Stress Network (NCTSN), *Identifying Children Affected by Domestic Violence*, <http://www.nctsn.org/content/identifying-children-affected-domestic-violence>; Robert L. Listenbee, et al., *Report of the Attorney General's National Task Force on Children Exposed to Violence 70* (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹²² For example, a study of pediatric response to child exposure to domestic violence revealed that only 4.2% of the surveyed pediatric emergency departments have a protocol in place for responding to such cases.¹²² Another study conducted by the American Prosecutors Research Institute has found that less than half of the prosecution offices responding to the study survey were aware of protocols directing law enforcement officers to ask about child victims or witnesses when investigating domestic violence reports. Susan Schechter & Jeffrey L. Eldelson, Open Society Institute's Center on Crime, Communities & Culture, *Domestic Violence & Children: Creating A Public Response 7* (2000); Debra Whitcomb, *Children and Domestic Violence: The Prosecutor's Response* (2004), <https://www.ncjrs.gov/pdffiles1/nij/199721.pdf>; R. J. Wright, et al., *Response of Battered Mothers in the Pediatric Emergency Department: A Call For Interdisciplinary Approach to Family Violence*, 99 *Pediatrics* 186 (1997).

¹²³ Full survey results are archived with the author.

restrictive eligibility criteria that exclude access to services and resources from many categories of exposed children.¹²⁴

To fill the gap, gain an understanding of the root causes of the problem, and test the aforementioned hypothesis, a comprehensive 50-state survey was designed. The survey gathered data on statutory eligibility criteria for therapeutic services and resources for children directly and indirectly exposed to crime in each of the 50 states and the District of Columbia. It addressed all five categories of the Triple-C Impact: direct child victims;¹²⁵ children exposed to family violence;¹²⁶ children exposed to community violence;¹²⁷ children with a victimized parent;¹²⁸ children affected by parental incarceration.¹²⁹ The survey aimed to answer fundamental questions such as: What resources are statutorily available on the state level? Which state agencies are charged with responding to affected children? Are there mechanisms to identify affected children? Which categories of children are statutorily eligible for services and resources?

The survey was conducted through email questionnaires¹³⁰ that were sent to broad range of state agencies (e.g. victim compensation agency; victim assistance office; state police; state and district attorney office; department of children & family services; department of human services; department of corrections; etc.),¹³¹ as well as nongovernmental organization that serve children affected by crime. Responses were obtained from 50 out of the 51 jurisdictions, which amounts to a 98% response rate. Only the State of Maryland has refused to provide information per our survey

¹²⁴ Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; Susan Schechter & Jeffrey L. Eldelson, Open Society Institute's Center on Crime, Communities & Culture, Domestic Violence & Children: Creating A Public Response 3 (2000); The National Child Traumatic Stress Network (NCTSN), Identifying Children Affected by Domestic Violence, <http://www.nctsn.org/content/identifying-children-affected-domestic-violence>.

Children who had a crime committed against their own person.
not physically harmed themselves (most common are cases of domestic violence or inter-familial sexual abuse).
direct victims and were not physically harmed.

Children with a parent or a primary caregiver who was a victim of a violent crime, where the child was not a witness to the crime, but was affected in some way by proxy.

¹²⁹ Children with a parent or primary caregiver who is incarcerated in a county, state or federal correctional facility.

¹³⁰ Phone interviews and follow-ups were also conducted as needed to supplement electronic correspondence.

¹³¹ Although some references were made, the survey did not directly cover services provided by the general public school and public health system or through medical insurance. It also did not cover services by Child Protective Services, which are exclusive for children facing risk from a caregiver, rather than the general population of children.

questionnaire.¹³² All state responses were cross-referenced, and verified against the governing statutes, administrative rules, case law, agency guidelines and internal policies. The results were logged in descriptive form and then translated into numerical data and analyzed.¹³³

We created the Triple-C Impact Index (TCII), which measures the degree of state response to the problem. The Index assigns each state a score between 0-6,¹³⁴ depending on the number of Triple-C Impact categories that were reported to be officially recognized by state law, and statutorily eligible for therapeutic services or compensation. It should be clarified that only services and resources that are clearly mandated by law, and target the specific population of children affected by each of the Triple-C Impact categories were included in the survey. Some additional services may be available by grass root and civil society organizations or privately under medical insurance of Medicaid\Medicare\CHIP coverage. Child Protective Services also provide some services to eligible children, but those are restricted only to children who face danger from their caregivers, rather than the entire group of affected children, and thus are excluded from the survey. In several states some counseling services are available through the public school system, but these do not specifically target Triple-C Impact Children, and are often sporadically available, depending on the budget and discretion of each school district in the state.¹³⁵

The survey's outcomes were insightful and surprising. It largely disproved the original hypothesis, and directed attention to flaws in inter-agency coordination, extensive access to information gaps, ineffective utilization of resources, and insufficient account for the distinct needs of minor children. These crucial findings shine a bright light on potential solutions to the problems, and

¹³² Interview with D. Scott Beard, Executive Director, Criminal Injuries Compensation Board, Department of Public Safety and Correctional Service (March 8, 2017) (on file with the author).

¹³³ Under each category a state could be scored either 1 or 0. 0 was logged when no eligibility for therapeutic was available in any form. 1 was logged when some degree of eligibility to therapeutic services or resources was available. The states were given the "benefit of the doubt" and received a 1 score even when available services were minimal and eligibility criteria was limited and restricting. Each state received a total score between 0-6 accordingly.

¹³⁴ The Index covers the 5 Triple-C Impact Categories (Direct victimization – existence of a specific Child Victims act or provision; exposure to family crime; exposure to community crime; parental victimization; parental incarceration). A 6th point is awarded if the state collects statistical data on the parental status of inmates under the custody of the state's department of corrections.

¹³⁵ In one case school based services were statutorily mandated to all school districts in the state, and eligibility criteria relied on the status of the child as affected by different categories of crime exposure. In this case the services and resources provided were included in the survey.

inform us on effective paths towards improving the way we address children suffering from the Triple-C Impact.

Steps in the Right Direction:

Despite the original hypothesis that children under most of the Triple-C Impact categories are not formally recognized by law, and thus are ineligible to receive services to facilitate their recovery, the survey has painted a very different image. Encouragingly, it revealed a high prevalence of statutory recognition of most of the Triple-C Impact categories among states, with the marked exception of children affected by parental incarceration. It also found that many state laws, as well as agency guidelines, mandate eligibility for services and resources for exposed children.

Based on the states' responses, the average state TCII score was 2.5, indicating that most states recognized 2-3 of the Triple-C Impact Categories. Encouragingly, only one state, the state of Indiana, was awarded a TCII score of 0, for failing to provide any statutory recognition to all of the surveyed categories. No state has reported recognition of all the Triple-C Impact categories. The highest TCII score in the dataset was awarded to the State of New York for recognizing 5 of the 6 surveyed categories, excluding eligibility for services only for children affected by parental incarceration.¹³⁶

Among responding states, 45 (88.2%) have reported that children exposed to family crime are formally recognized and are statutorily eligible for counseling services, compensation or reimbursement. Only 5 states (9.8%) explicitly excluded eligibility for this group of children.¹³⁷ Thirty-one of the responding states (60.8%) recognized eligibility of children with a victimized parent, even when the child was not a witness to the criminal act. Twenty-two states (43.1%) had laws authorizing services and resources to children exposed to community crime.¹³⁸

On the contrary, consistently excluded were children affected by parental incarceration, with only 1 state, the state of Vermont, reporting the availability of any statutory recourse to this group of vulnerable children.¹³⁹ Furthermore, it was discovered that the majority of states (58.8%) do not

¹³⁶ A full summary table of state scores is available in the Appendix.

¹³⁷ Hawaii, Indiana, North Carolina, Rhode Island, and Wisconsin.

¹³⁸ Complete Survey data is archived with the author.

¹³⁹ It should be noted that in the state of Vermont therapeutic services to children with incarcerated parents are provided through the general behavioral health parity system, rather than a dedicated policy that specifically targets

collect any systematic data on the parental status of inmates in correctional facilities, and therefore have no ability to identify or track children affected by parental incarceration.¹⁴⁰

State responses also reflected high levels of awareness to the issue of children indirectly exposed to crime and the short- and long-term harm they endure. This was especially evident in responses provided by State Victim Compensation agents. The survey results indicate that these agents make ongoing efforts to stretch the resources available to them and provide broad and inclusive interpretations to the governing laws, in order to grant assistance to as many affected children as possible.

Survey responses repeatedly included statements, such as the one provided by the Alaska Violent Crime Compensation Board, maintaining that “[t]he Board takes the view that if there is domestic violence in the home, the child will be affected whether or not they are eye witnesses to an actual physical altercation. So counseling would almost always be considered.”¹⁴¹ In one case, a statutory provision was broadly interpreted in a manner that can even be presumed to exceed the legislature’s reasonable intent. In this case, a provision that explicitly provides compensation to relatives of “sexual assault victims” who require “counseling in order to better assist the victim in his recovery,”¹⁴² was expanded through broad interpretation of the State Crime Victim Compensation Program to apply to relatives of victims of any crime.¹⁴³

These unexpected outcomes shed a positive light on the approach of key players in the system to the needs of children affected by the Triple-C Impact. The results clearly show that for most Triple-C categories, the cause for the existing ineffective state response to affected children is not the lack of statutory eligibility or narrow legal definitions. Consequently, the results significantly alter our perception of the problem’s framework, and mandate us to proceed with the quest for the actual causes elsewhere.

this group of children. However, having an incarcerated parent is a factor that is explicitly considered as part of the eligibility assessment. Thus, we considered Vermont as having statutory eligibility for services for children affected by parental incarceration. (Interview with Kim Bushey, Program Services Director, Vermont Department of Corrections (March 25, 2016) (on file with author)).

¹⁴⁰ Complete Survey data is archived with the author.

¹⁴¹ Interview with Katherine Hudson, Executive Director, Alaska Violent Crimes Compensation Board (January 20, 2016)(on file with author).

¹⁴² MO. REV. STAT. § 595.020.1(2)(a) (Supp. 1993).

¹⁴³ Interview with Susan Sudduth, MO Crime Victims` Compensation Program (April 12, 2016)(on file with author).

Room for Improvement:

Despite the positive highlights, the survey also uncovered a multitude of deficiencies and limitations. These findings provide indispensable directives in our search for the core of the problem.

Most evidently, the survey results reveal an unwarranted degree of disparity and inconsistency among, and even within, states when policies addressing the Triple-C Impact are concerned. Utter differences were detected in the terminology used, the scope of the definitions provided, the agencies assigned to address each category of affected children, the level of accessibility to existing services, and the amount of information publicly available. On the national level, no methodical attempts for standardization, model policies, or guidelines for “best practices” in order to assure a minimum level of care were identified.

This lack of consistency and uniformity presents several fundamental challenges. From a research perspective, the use of inconsistent terminology and definitions makes it extremely difficult to investigate the Triple-C Impact problem in its entirety, to evaluate existing findings, gain a coherent understanding of the full scope of the problem, and gauge its social cost and effect.¹⁴⁴ These constraints and limitations in the ability to conduct high-quality and reliable empirical studies are not confined to the academic arena, but directly affect our ability to devise effectual evidence-based solutions to the problem. Moreover, alongside the more academic-oriented challenges, substantial practical difficulties also emerge.

From the state’s view point, any effort to devise a coordinated inter-agency response to the problem requires fluent communication amongst all the governmental and non-governmental stakeholders involved. When these bodies do not “speak the same language” in terms of the terminology used, division of labor, scope of responsibility and the expected standard of service and care, such efforts are doomed for failure. It also makes it nearly impossible to share information, develop inter-state collaborations, and benefit from experiences and lessons learned in other states. The survey presents strong evidence of this absence in coordination between the various agencies, organizations and service providers in the field. In fact, it depicts a picture of a system in which

¹⁴⁴ On the issue of inconsistency in terminology see also: David Finkelhor, Prevalence Of Child Victimization, Abuse, Crime, And Violence Exposure, in *Violence Against Women and Children: Mapping The Terrains* (J.W White, et al. Eds.) 9, 9-13 (2011).

each player on the field rarely knows what the other is doing, let alone working together towards their common goal of assisting impacted children.

One strong evidence of the uncoordinated efforts and deficiencies in communication among relevant stakeholders charged with responding to the Triple-C Impact problem, are gaps in knowledge among such key players. The survey uncovered numerous examples all across the nation where resources were statutorily available to affected children, but were not known to service providers and advocates who serve these groups of children, or even to government agencies entrusted with serving the relevant populations.

In the state of Kentucky for example, a representative of the Victim Compensation Board has reported that pending documentation of medical practitioner indicating the child has been emotionally injured in relations to a crime, s\he will be considered for compensation and therapeutic services in cases of exposure to family crime, exposure to community crime, and parental victimization.¹⁴⁵ On the contrary, a representative of a non-governmental youth advocacy organization in the state, serving children affected by the Triple-C Impact, has responded that children under all three of the abovementioned categories “are not considered "victims of crime" and are not eligible for services\compensation.”¹⁴⁶

Similar trends were also detected among governmental agencies. In Nebraska, while a representative of the Victim Reparation Program confirmed that “children who witness family crime are eligible for compensation,”¹⁴⁷ a Victim Specialist with the office of the State Attorney General has stated that she is “not familiar with any specific statutes or policies that provide for specific programming or services to children exposed to violence in their home”.¹⁴⁸ Similarly, in the state of Virginia the Director of the state Criminal Injuries Compensation Fund reported that “for counseling purposes, minor child witnesses of violence involving a caretaker are considered

¹⁴⁵ Interview with Lindsay Crawford, Policy Advisor / Interim SAEP Coordinator, Kentucky Crime Victims Compensation Board (February 3-4, 2016)(on file with author).

¹⁴⁶ Interview with Shannon Moody, Policy Director, Kentucky Youth Advocates (February 1-2, 2016)(on file with author).

¹⁴⁷ Interview with Sher Schrader, Crime Victims’ Reparations Program, Nebraska Commission on Law Enforcement & Criminal Justice (February 5, 2016)(on file with author).

¹⁴⁸ Interview with Patricia L. Sattler, MSW, Victim/Witness Specialist, Nebraska Department of Justice, Attorney General Doug Peterson (February 10, 2016)(on file with author).

to be a primary victim” and therefore eligible for services.¹⁴⁹ Conversely, the Crime Victim Programs Manager at the Virginia Department of Justice has asserted that “[a]s far as statutes or guidelines around eligibility for services to child witnesses to domestic violence, there are none”.¹⁵⁰

This state of affairs is particularly alarming in light of the fact that beyond the reasonable expectation that government agencies will work together in a cooperative and coordinated manner towards their common goals, non-governmental organizations and service providers who receive funds under the Victims of Crime Act (VOCA) are mandated to assist and inform their clients of eligibilities for victim compensation benefits.¹⁵¹ These statutory obligations are unlikely to be fulfilled if relevant governmental agencies as well as funded service providers are not trained, educated and periodically informed on the rights and eligibilities of each and every category of impacted children.

The urgent need for inter-agency coordinated efforts to combat the problem is also highlighted in the Attorney General Task Force report. Although the Task Force did not empirically test the issue, it clearly stated that “[c]hild-serving professionals from all disciplines and law enforcement professionals should partner to provide protection and help in recovery and healing for children exposed to violence.”¹⁵² When addressing the appointed members of the Task Force, Attorney General Eric Holder further added that “[i]f we work together, across professional disciplines... we will be able to prevent this violence when possible, identify it when it does occur, and provide support that helps children heal so that they can grow into healthy adults.”¹⁵³ Throughout the report an emphasis is put on the vital importance of developing a coordinated response across all phases of the process, from identification to recovery.

¹⁴⁹ Interview with Jack Ritchie, Director, Virginia Criminal Injuries Compensation Fund (March 9-10, 2016)(on file with author);

¹⁵⁰ Interview with Kassandra (Kay) Bullock, Victims Services Manager, Virginia Department of Criminal Justice Services (March 8, 2016)(on file with author).

¹⁵¹ 42 USC 10603 (b)(1)(E); Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (Feb. 25, 2016) (on file with author).

¹⁵² Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 19 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁵³ Eric H. Holder, Jr., U.S. Attorney General, Letter of the Attorney General to members of the National Task Force on Children Exposed to Violence (Dec. 20, 2012).

Lastly, most concerning of all are the challenges that emerge on the side of children affected by the Triple-C Impact and their families. For parents or guardians seeking resources and assistance for their children, the lack of systemic coordination, uniformity and commonly used terminology poses a colossal hurdle in the ability to identify and access available services and potential resources. Such challenges are severely exacerbated by several related issues illuminated by the survey's results.

Although the survey has detected relative high prevalence of statutory provisions addressing children under most categories of the Triple-C Impact across the nation, very few of these provisions are specifically targeted towards children and their unique developmental needs. Most address the general adult population, with children included as an afterthought and without any account for the relevant differences between adults and minor children outlined in Section I. Only 12 states (23.5%) have reported having a dedicated child victims act or provision. Six additional states (11.7%) reported the availability of a statutory provision with child specific elements for at least one of the Triple-C categories.¹⁵⁴ Absent such developmentally-oriented accommodations, available policies are inevitably expected to have diminished efficacy.

Additionally, the vast majority (if not all) of the identified services and resources require for the child's parent or guardian to take initiative and actively seek and apply for the service. None of the responding states has reported the existence of an effective referral system designed to identify children affected by the Triple-C Impact and to refer them to therapeutic services, for any of the categories of children included in the survey.¹⁵⁵ Only one state (Rhode Island) has reported a systematic mechanism for identification and tracking of children exposed to family crime. However, this identification method does not appear to be linked to a referral mechanism. It was also not extended to children under any of the other Triple-C Impact categories.¹⁵⁶

This appears to be a complicated system-design issue. While many of the statutorily mandated opportunities for counseling services for the relevant categories of children are provided through reimbursement by the states' Victims' Compensation programs, such programs are not adequately

¹⁵⁴ Complete Survey data is archived with the author.

¹⁵⁵ Complete Survey data is archived with the author.

¹⁵⁶ Interview with Deborah DeBare, Executive Director of the RI Coalition Against Domestic Violence (March 22, 2016)(on file with author).

equipped to provide effective recourse to the problem. Compensation programs are severely underfunded, and allocated with only a negligent slice of the federal VOCA funds (only 7% of the total VOCA budget, amounting to \$133M in 2017 for all states and territories combined).¹⁵⁷ The application process is long, and tedious, and programs in most states do not have the capacity to process large volumes on applications. Most importantly, by design, compensation agents do not have direct access to affected children, and thus do not have the capabilities or resources to pursue effective outreach. Without the presence of an intermediary “on the ground,” with regular access to affected children, that can initiate identification and referral efforts, such programs remain exclusively dependent on victim\guardian initiative to take any course of action on behalf of the children and their families.¹⁵⁸

At the same time, 93% or \$1.8 billion¹⁵⁹ of the federal VOCA budget, is allocated as grants to Victim Assistance Programs. The act prioritizes funds to services dedicated to child victims.¹⁶⁰ In theory, the act permits the use of the grants to support a variety of local services and programs, including services to “secondary victims” such as children affected by crime exposure. Yet, eligibility criteria for the funded programs do not seem to be regulated by any overarching policies (either by law or internal protocols). No state has reported protocols that assure that funds are distributed to all affected categories of children. All states who provided information on this issue in our survey have stated that eligibility criteria depend on each individual program and case-by-case examination.¹⁶¹ No state could provide information about specific programs\services that accommodate the different categories of children affected by the Triple-C Impact. Publicly available lists of VOCA funded programs in each state include only very general information, and do not specify whether eligibility criteria cover “secondary victims”. Under these circumstances,

¹⁵⁷ Office of Victims of Crime (OVC) Formula Chart 2017 Crime Victims Fund Allocation: Compensation, <https://ojp.gov/ovc/grants/Crime-Victims-Fund-Compensation-Allocations-2017.pdf>

Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (June 27, 2017) (on file with author).

¹⁵⁸ Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (Feb. 25, 2016) (on file with author).

¹⁵⁹ Office of Victims of Crime (OVC) Formula Chart 2017 Crime Victims Fund Allocation: Assistance, <https://ojp.gov/ovc/grants/Crime-Victims-Fund-Assistance-Allocations-2017.pdf>

Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (June 27, 2017) (on file with author).

¹⁶⁰ The specific words of the Act prioritize funds for child abuse prevention and treatment, but some broader interpretations for the term “child abuse” are available (42 U.S. Code § 10603(a)(2)(A)).

¹⁶¹ Complete Survey data is archived with the author.

although relevant services may be available, accessibility is hindered by the deficiencies in regulation and the distribution of information to the public. Thus, increased burden falls on the underfunded and unequipped Victim Compensation programs.

To add insult to injury, the process of conducting the survey has unearthed an abundance of technical difficulties that obscure the access to the information required in order to obtain available services and resources. We repeatedly encountered difficulties in identifying the agency responsible for provision of services for each of the surveyed categories, and locating the specific officials within the agencies who hold the relevant information. Lack of transparency of contact information for relevant public servants (phone numbers, email addresses) was also a reoccurrence in many states. The lack of transparency in contact information of government agents was justified by some as a security measure, to protect agents from threats.¹⁶² While the physical safety of government agents is of vital importance, the safety measures enforced should not be ones that compromise the level of service and accessibility provided to vulnerable populations, especially when the means of contact are not face-to-face (i.e. phone or email). Furthermore, even once the required contact information was obtained, we often experienced lack of responsiveness from the side of relevant state officials.¹⁶³ Phone contact frequently proved to be futile, as the caller seeking information is transferred from one person to another until reaching a dead-end (usually a voicemail full to capacity). Once again, the most notable difficulties were experienced in the collection of data on children affected by parental incarceration, where in some states up to 5 different agencies had to be contacted in order to obtain and confirm the needed information. Due to such access to information barriers, the compilation of the survey data took over a full year of persistent and repeated attempts.

Imagine a child in desperate need for assistance to overcome trauma in this environment. The child must depend almost solely on a lay parent with no professional skills, and often with only minimal

¹⁶² Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (June. 28, 2017) (on file with author).¹⁶³ It should be duly noted that there were also many states in which state officials were extremely responsive and cooperative, provided a wealth of helpful information, and assisted in locating additional sources of information

¹⁶³ It should be duly noted that there were also many states in which state officials were extremely responsive and cooperative, provided a wealth of helpful information, and assisted in locating additional sources of information

education and resources,¹⁶⁴ to go through the daunting journey through the thorny terrains of the system. The parent will first have to gain awareness and understanding that the child is in need of external assistance in relations to his\her exposure to crime. Then, the parent will require some level of cognizance that some form of assistance that suits the child’s needs is available out there. Once the needed service is found, the parent will have to verify whether their child meets the varying and unpredictable eligibility criteria. To do that, the parent will have to uncover which agency in their state or municipality is charged with provision of the needed service. Undeterred by many shutting doors all around, the parent will have to spot the specific individual within the agency that processes the coveted information sought. They then must proceed on a quest to find out how to contact this individual, who although is entrusted to serve the public, their contact information is likely to be buried under layers of bureaucracy and pretty internet websites that contain very little substance. What are the odds of that vulnerable child, despite the parent’s best intentions, to obtain this vital assistance that will help them find the path towards recovery?

The suspicions that the aforementioned cumulative systemic flaws impact utilization of the available services and resources were substantiated by the astonishingly low claim rates the survey revealed. It should be disclaimed that the reporting systems of most states do not allow for a breakdown of data according to the categories of our survey.¹⁶⁵ As a result, the numbers obtained are either from states with more sophisticated data systems, or those who agreed to hand-count the cases for the benefit of the survey. Claim rate data was provided by only 10 states, and only for part of the surveyed categories. Thus, the available figures should be considered anecdotal, and although telling and indicative, cannot be construed as conclusive evidence.

State	Category	Claims in 2015
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¹⁶⁴ C. B. Cunradi, et al., Neighborhood Poverty As A Predictor of Intimate Partner Violence Among White, Black, and Hispanic Couples in The United States: A Multilevel Analysis, 10(5) *Annals of Epidemiology* 297 (2000); L. A. Goodman, et al. (2009), When Crises Collide: How Intimate Partner Violence and Poverty Intersect to Shape Women’s Mental Health and Coping, 10(4) *Trauma Violence Abuse* 306 (2009); L. Corzine & J. Corzine, J., *Deadly Connections: Culture, Poverty, and The Direction of Lethal Violence*, 69(3) *Social Forces* 55 (1991); Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 33 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf> (Although no community is untouched, the epidemic of children’s exposure to violence does not play out evenly across the country. Children living in poverty are far more likely to be exposed to violence and psychological trauma, both at home and in the surrounding community. Compounding the problem, economically impoverished families and communities typically lack the resources needed to protect children).

¹⁶⁵ Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (Feb. 25, 2016) (on file with author).

Arizona	Exposure to family Crime	35
California	Exposure to Community Crime	35
Iowa	Exposure to family Crime	21
Kentucky	Exposure to family Crime	0
	Exposure to Community Crime	0
	Parental Victimization	0
Maine	Exposure to family Crime	0
Montana	Exposure to family Crime	15
	Exposure to Community Crime	0
Nebraska	Exposure to family Crime	1
	Exposure to Community Crime	0
Nevada	Exposure to family Crime	0
West Virginia ¹⁶⁶	Exposure to Community Crime	0
Virginia	Exposure to family Crime	0

These numbers are particularly astounding considering the fact that nearly half of the minor children living in the United States today are estimated by empirical studies to be affected by the Triple-C Impact in one form or another each year.¹⁶⁷ There could be many, more benign, reasons for low claim rates. The affected child of parent may not deem the harm significant. Some are able to obtain services elsewhere through medical insurance, urgent care or child protective services. Others are disinterested in obtaining assistance from government agencies due to negative past experiences or general distrust common in marginalized communities.¹⁶⁸ Yet, one can only wonder

¹⁶⁶ In the case of West Virginia, there are 0 claims for exposure to community violence documented in the history of the state's Victim Compensation Program despite the fact that the governing statute theoretically permits eligibility for compensation for children under this category. (Interview with Becky O'Fiesh, Chief Deputy Clerk, West Virginia Crime Victim Compensation Fund (March. 12, 2017) (on file with author))

¹⁶⁷ Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 3 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁶⁸ These are some factors that explain general low claim rate for victim compensation assistance, which are estimated to steadily stand at approximately 10% in most states (Interview with Dan Eddy, Executive Director of the National Association of Crime Victim Compensation Boards (June. 28, 2017) (on file with author)). ¹⁶⁹ Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence viii (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

whether these persistent and reoccurring system design flaws and administrative roadblocks are not entirely coincidental, and may be the manifestation of political forces aiming to disincentivize the utilization of resources in order to generate some level of short-term fiscal savings. Unfortunately, an evidence-based examination of the problem indicates that such short-term savings are likely to result in epic long-term costs borne by tax-payers and society.

Section IV: Policy Implications

The presented survey offers the first-ever attempt for accurate national-scale mapping of the policies and resources at the disposal of Triple-C Impacted children. As such, it provides a unique perspective on the macro and micro-level, which can serve as an invaluable tool for any attempt to enhance our response to the Triple-C Impact national crisis, for the benefit of both the affected children and society as a whole.

First, survey results can serve as a resource in the hands of service providers and policy makers in the field, at the state and national levels. It allows access to methodically compiled knowledge as to the existence of services for each category of affected children under each jurisdiction, the exact scope of eligibility, the government agency charged with distribution of resources and eligibility assessment, and accurate references to the governing laws and policies. This information can be used to improve and maximize the ability of service providers and advocates to assist affected children, and enhance their referral capabilities. It may also assist in inter-agency collaboration and coordination, as each agency can gain a better understanding of what the others are doing. On the policy level, the information the survey provides illuminates existing gaps that require attention when devising policy amendments and legislative proposals. It can also facilitate inter-state collaborations and provide opportunities to learn from experiences already gained in states where more elaborate child-specific policies and more inclusive eligibility criteria are practiced.

Second, the findings can direct our efforts towards devising responses to the problem in a more effective and targeted manner. The original hypothesis assumed that the core of problem lies in statutory lacunas that prevent formal recognition for many categories of affected children, and restricts eligibility criteria. This underlying assumption would have directed efforts towards legislative initiatives to assure recognition to all Triple-C Impact categories, expansion of statutory

definitions, and channeling fiscal resources and grants to fill the identified gaps. An analysis of the survey results demonstrates that such solutions may not target the essence of the problem, and hence are unlikely to breed effective results.

A careful analysis of the survey data leads to the conclusion that the heart of the problem lies in lack of cooperation and coordination between stakeholders in the field, significant gaps in knowledge among key players, and technical difficulties and flaws in system design that impede access to information and resources. Following these critical leads, a more effective strategy may be to focus on developing mechanisms for fluent communication among the key players in the field; encourage and foster inter-agency collaborations; devise best practices that will promote standardization and coherent use of terminology across the board; establish identification systems that will alleviate the dependence on parental initiative; correct the technical difficulties obscuring access to services; and devise new methods to improve the accessibility of the readily available policies and services. Such actions must also be accompanied by efforts to assure that the capacity of the existing system can accommodate the expected increase in claim rates and rise in service utilization.

Distinguished by the survey results is the category of children affected by parental incarceration. For this particular category of children, the original hypothesis of impeding statutory gaps was found to bear truth. Consequently, for this category, addressing the statutory lacuna and filling the identified gaps in state laws and statutory distribution of funds through legislative actions may be the most applicable course of action towards the desirable outcome.

Taking such evidence-based route, relying on survey findings, allows us to custom-fit the solution to the specific nature and characteristics of the problem at hand in a manner that is expected to produce more constructive and efficient outcomes.

Section V: Why Crime?

Reading through this article must beg the question, what is so special about crime? It is intuitive to assert that childhood is a vulnerable period in the life of an individual. This vulnerability overexposes children not only to harm induced by crime, but also to that resulted from many other

life adversities, such as poverty, familial instability, natural disasters, illnesses, and many others. Why should we isolate and focus on the negative effect of crime on the child?

Although all these above listed weighty social problems have the potential to be highly damaging to children, and justify prioritized attention and action, there are several factors that differentiate crime from the others.

The scale and prevalence of the problem is a factor that can no longer be ignored. While the aforementioned compartmentalized examination of the problem thus far prevented us from gaining accurate measures of the problem, existing indicators provide a strong sense of its mammoth magnitude. As Determined by the Attorney General Task Force, the problem is “not limited to one community or one group of children. It occurs among all ethnic and racial groups; in urban, suburban, and rural areas; in gated communities and on tribal lands.”¹⁶⁹ Existing data shows that approximately 2 out of every 3 children are affected. “Of the 76 million children currently residing in the United States, an estimated 46 million” can expect to have their lives touched by violence and crime this year.”¹⁷⁰ One in every 10 children in the US experience more than one type of crime exposure, and thus considered Poly-victims.¹⁷¹ These astonishing numbers include only children

¹⁶⁹ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence viii (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁷⁰ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 3 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; see also: David Finkelhor et al., Children’s Exposure to Violence: A Comprehensive National Survey, *Juvenile Justice Bulletin* (Oct. 2009), available at: <https://www.ncjrs.gov/pdffiles1/ojdp/227744.pdf>; David Finkelhor, et al., Prevalence of Childhood Exposure to Violence, Crime and Abuse: Results From the National Survey of Children’s Exposure to Violence, 169 *JAMA Pediatrics* 746 (2015); David Finkelhor, et al., Trends In Childhood Violence and Abuse Exposure: Evidence From Two National Surveys. 164(3) *Archives of Pediatric and Adolescent Medicine* 238 (2010); David Finkelhor, et al., Violence, Crime, and Abuse Exposure in a National Sample of Children and Youth: An Update, 167 *JAMA Pediatrics* 614 (2013); David Finkelhor, Prevalence of Child Victimization, Abuse, Crime and Violence Exposure, in *Violence Against Women and Children: Mapping The Terrains* (J.W White, et al. Eds.) 9, 9-13 (2011).

¹⁷¹ Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 5 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; Heather A. Turner, Richard K. Ormrod & David Finkelhor, Poly-Victimization in a National Sample of Children and Youth, 38(3) *American Journal of Preventive Medicine* 323 (2010).

¹⁷² Erica J. Adams, Justice Policy Institute, *Healing Invisible Wounds: Why Investing in Trauma-Informed Care for Children Makes Sense* 1 (2010); S. J. Ko, et al., Creating trauma-informed systems: Child welfare, education, first responders, health care, juvenile justice, 39(4) *Professional Psychology: Research and Practice* 396 (2008); J. A. Cohen, A. P. Mannarino & S. Iyengar, Community treatment of posttraumatic stress disorder for children exposed to intimate partner violence: a randomized controlled trial, 165(1) *Archives of Pediatric and Adolescent Medicine* 16 (2011); Robert L. Listenbee, et al., Report of the Attorney General’s National Task Force on Children Exposed to Violence 90 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; L. Pilnik & J. Kendall, *Safe Start Center Series on Children Exposed to Violence*, Victimization and trauma experienced by

affected by direct victimization, exposure to family crime and exposure to community crime. They do not include children with victimized caregivers and those affected by parental incarceration, who are also included in this study under the Triple-C Impact.

Studies in the field of medicine and social science provide strong and convincing evidence to the harm inflicted on children affected by crime exposure. Although almost no studies encompass all the Triple-C categories, existing research provide ample evidence, outlined in this article, as to the strong correlation between crime exposure and a broad range of injurious symptoms. It also provides insightful explanation about the physical and psychological mechanisms and processes behind the caused harm. This invaluable information and data is largely ignored by policy makers in the criminal justice arena, and is not sufficiently accounted for in order to improve the efficacy of devised solutions. In fact, in this specific field there is strong evidence to show that there are very effective tools that if applied correctly can significantly alleviate the damaging effect of childhood crime exposure.¹⁷² The wealth of informative evidence coupled with the availability of effective resources in this field provides a unique opportunity to make a significant difference with positive outcomes.

children and youth: Implications for legal advocates (Sep. 2012), http://www.ojdp.gov/programs/safestart/IB7_VictimizationTrauma_LegalAdvocates.pdf; C. Ghosh Ippen, et al., Traumatic and stressful events in early childhood: can treatment help those at highest risk? *35(7) Child Abuse & Neglect* 504 (2011); A. L. Lieberman, C. Ghosh Ippen & S. Marans, Psychodynamic therapy for child trauma, in *Effective treatments for PTSD* 370–387 (E. B. Foa, et al. (Eds.), 2009); P. Van Horn & A. Lieberman, Using dyadic therapies to treat traumatized children, in *Treating traumatized children* 210–224 (D. Brom, R. Pat-Horenzcyk, & J. D. Ford (Eds.), 2008).

¹⁷² Erica J. Adams, Justice Policy Institute, *Healing Invisible Wounds: Why Investing in Trauma-Informed Care for Children Makes Sense* 1 (2010); S. J. Ko, et al., Creating trauma-informed systems: Child welfare, education, first responders, health care, juvenile justice, *39(4) Professional Psychology: Research and Practice* 396 (2008); J. A. Cohen, A. P. Mannarino & S. Iyengar, Community treatment of posttraumatic stress disorder for children exposed to intimate partner violence: a randomized controlled trial, *165(1) Archives of Pediatric and Adolescent Medicine* 16 (2011); Robert L. Listenbee, et al., Report of the Attorney General's National Task Force on Children Exposed to Violence 90 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>; L. Pilnik & J. Kendall, *Safe Start Center Series on Children Exposed to Violence*, Victimization and trauma experienced by children and youth: Implications for legal advocates (Sep. 2012), http://www.ojdp.gov/programs/safestart/IB7_VictimizationTrauma_LegalAdvocates.pdf; C. Ghosh Ippen, et al., Traumatic and stressful events in early childhood: can treatment help those at highest risk? *35(7) Child Abuse & Neglect* 504 (2011); A. L. Lieberman, C. Ghosh Ippen & S. Marans, Psychodynamic therapy for child trauma, in *Effective treatments for PTSD* 370–387 (E. B. Foa, et al. (Eds.), 2009); P. Van Horn & A. Lieberman, Using dyadic therapies to treat traumatized children, in *Treating traumatized children* 210–224 (D. Brom, R. Pat-Horenzcyk, & J. D. Ford (Eds.), 2008).

Another strong data-point in this field is the massive cost of the problem to the state and our society in general. Again, the lack on inclusive examination of the Triple-C Impact problem in its entirety thus far prevents us from gouging the full cost of the problem. Nevertheless, the existing partial estimates are already overwhelming¹⁷³ The Attorney General Task Force report has described the financial costs of the problem as “astronomical”.¹⁷⁴ It acknowledged the financial burden it put on public systems, including child welfare, social services, law enforcement, juvenile justice, and, in particular, education.¹⁷⁵ This is combined with the staggering loss of productivity over children’s lifetimes.¹⁷⁶ To provide a sense of the magnitude of the sums involved, the annual costs of the public health system alone are estimated to range from \$333 billion to \$750 billion. One study estimates the annual national costs of only direct victimization at \$94,076,882,529.¹⁷⁷ Another study evaluated the lifetime costs per-child to be \$210,012-\$1,258,800 (in 2010 dollars).¹⁷⁸ Thus, effective resolution of the problem provides an almost unparalleled opportunity for savings in fiscal and social costs.

Lastly, governments are considered to have unique obligations towards their citizens when crime is concerned, in comparison to other social issues. This is particularly significant in the case of the

¹⁷³ Erica J. Adams, Justice Policy Institute, *Healing Invisible Wounds: Why Investing in Trauma-Informed Care for Children Makes Sense* 1 (2010); Xiangming Fang, *The Economic Burden of Child Maltreatment In The United States and Implications For Prevention*, 36 *Child Abuse & Neglect* 156 (2012); Suzette Fromm, *Total Estimated Cost of Child Abuse & Neglect In The United States: Statistical Evidence* (2001), http://www.issuelab.org/resource/total_estimated_cost_of_child_abuse_neglect_in_the_united_states_statistical_evidence; Kathryn E. McCollistera, Michael T. Frenchb, & Hai Fang, *The Cost of Crime to Society: New Crime-Specific Estimates for Policy and Program Evaluation*, 108 *Drug Alcohol Depend.* 98 (2010); Theresa Dolezal, et al., *Academy on Violence and Abuse, Hidden Costs in Health Care: The Economic Impact of Violence and Abuse* (2009);

Patrick Sidmore, Alaska Mental Health Board and the Advisory Board on Alcoholism and Drug Abuse, *Economic Costs of Adverse Childhood Experiences in Alaska: The Price of Not Intervening Before Trauma Occurs*, <http://dhss.alaska.gov/abada/ace-ak/Documents/ACEsEconomicCosts-AK.pdf>¹⁷⁴ Robert L. Listenbee, et al., *Report of the Attorney General’s National Task Force on Children Exposed to Violence* 5 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁷⁴ Robert L. Listenbee, et al., *Report of the Attorney General’s National Task Force on Children Exposed to Violence* 5 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁷⁵ Robert L. Listenbee, et al., *Report of the Attorney General’s National Task Force on Children Exposed to Violence* 5 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁷⁶ Robert L. Listenbee, et al., *Report of the Attorney General’s National Task Force on Children Exposed to Violence* 5 (Dec. 20, 2012), available at: <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>

¹⁷⁷ Suzette Fromm, *Total Estimated Cost of Child Abuse & Neglect In The United States: Statistical Evidence* (2001),

http://www.issuelab.org/resource/total_estimated_cost_of_child_abuse_neglect_in_the_united_states_statistical_evidence

¹⁷⁸ Xiangming Fang, *The Economic Burden of Child Maltreatment In The United States and Implications For Prevention*, 36 *Child Abuse & Neglect* 156 (2012).

US libertarian and capitalist-oriented political system, where the state has very limited responsibilities towards the individual, in comparison to more socialist and welfare-based political systems. The emphasis on government responsibilities in the criminal justice arena can be traced to the philosophical conceptualization of the state and its sovereignty, which was fundamentally based on the state's obligation to physically protect its constituents. Since the time of Thomas Hobbes and Jean-Jacques Rousseau, this obligation to protect was associated with the government's responsibility to operate the criminal justice system and protect constituents from harmful criminal activity.¹⁷⁹ From this responsibility to protect also stems the role of the state as the prosecutor, representing the people, in most criminal proceedings. Although the issue of government's responsibility towards its citizens is a highly complex and controversial one, we can identify fundamental principles that establish heightened state responsibilities in the area of protection of the citizens from crime induced harms, as the ones discussed in this article.

The critical combination of level of harm, extensive prevalence and scale, massive financial burden, availability of evidence-based effective remedies, and the heightened state obligations in this field, calls for urgent attention to this issue and provide an unparalleled opportunity for effective positive change.

Conclusions

Following the fundamental principles of the evolution of legal problems, this article takes the first step and names a "new" problem. Such a seemingly simple and technical task of assigning a title to a problem may at first glance appear minor and mundane. However, the effect goes much deeper than the title. Naming a problem helps conceptualize a reoccurring phenomenon as problematic and injurious and shine a spotlight on its existence and the harm it inflicts, so it can no longer be ignored. It provides a point of reference that enables us to raise awareness, initiate public discussion, and make coordinated and cohesive efforts to address the problem – the same type of efforts that are so direly missing when the Triple-C Impact is concerned.

¹⁷⁹ Thomas Hobbes, *Leviathan* (Edwin Curley ed.) 144 (1994); Jean-Jacques Rousseau, *The Social Contract*, 166 (trans. and ed. Donald A. Cress. Hackett Publishing Company, Inc., 2011).¹⁸⁰ See for example Linda G. Mills, *The Justice of Recovery: How the State Can Heal the Violence of Crime*, 57

The naming process also facilitates in defining the scope and boundaries of the problem. In the case of the Triple-C Impact, it allowed us to cluster together a group of adverse elements that were previously looked at in isolation, so we can see the inseparable common grounds and inter-connections that tie them together cohesively into one integral problem. Only once this inclusive perspective is developed through the naming process, the true extent of the problem can be understood, its root causes identified, and its full effect realized.

Coining the Triple-C Impact terminology highlights a paramount problem that affects millions of children all around us. It maims the bodies, souls and spirits of those who we ought to protect most. But its effect goes far beyond the individual children it touches. With millions of children across the nation untreated and hampered from conducting a healthy and productive lifestyle, and with heightened risk for substance abuse, criminal behavior, and repeat victimization, community safety is inevitably compromised, and public funds are unnecessarily burdened.¹⁸⁰ Thus, none of us is spared from its violent claws.

This article takes the first step in providing a realistic conceptualization of the problem, integrating legal tools with scientific findings. By mapping the existing gaps in the system, and pinpointing the underlying causes of the prevailing deficiencies, the study provides initial directions to possible solutions to the problem and gives us an invaluable opportunity to take action that will improve outcomes for millions of children across the nation, and our society as a whole. The next step to be undertaken in the path towards an effective response is an economic analysis that will evaluate the aggregate costs of the Triple-C Impact problem to the state and to our society. Relying on these two pillars, an operative and financially sound action plan can be developed to alleviate the devastating harms caused by this sweeping problem.

¹⁸⁰ See for example Linda G. Mills, *The Justice of Recovery: How the State Can Heal the Violence of Crime*, 57 *Hastings L.J.* 457, 481-6 (2005); Frank W. Putnam, *The Impact of Trauma on Child Development*, 57 *Juvenile and Family Court Journal*, 1, 2 (2006); Erica J. Adams, *Justice Policy Institute, Healing Invisible Wounds: Why Investing in Trauma-Informed Care for Children Makes Sense* 1 (2010).