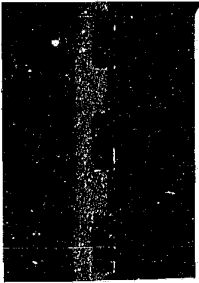
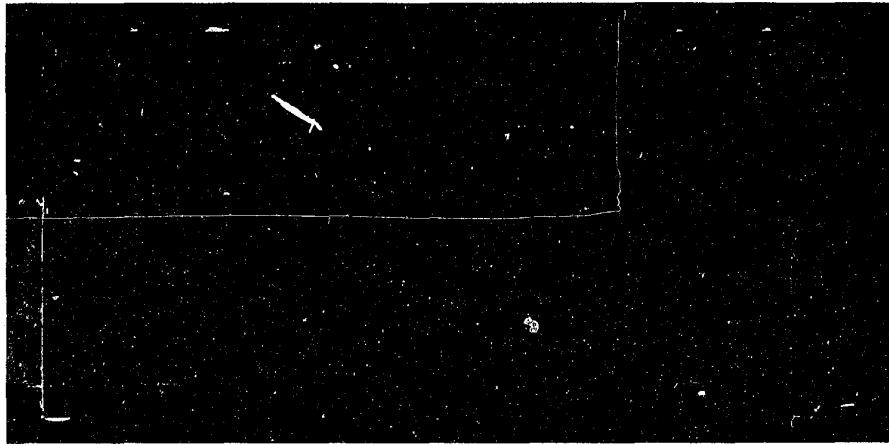




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## **Police and Civilian Help for Crime Victims: Can It Make A Difference?**

### **Executive Summary**

Arthur J. Lurigio, Ph.D.  
Department of Criminal Justice  
Loyola University  
Center for Urban Affairs and Policy Research  
Northwestern University

and

Dennis P. Rosenbaum, Ph.D.  
Department of Criminal Justice  
Center for Research in Law and Justice  
University of Illinois at Chicago

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## Abstract

The Detroit Police-Victims Project was designed to test the impact of police and civilian interventions on the psychological adjustment, attitudes, and behaviors of crime victims, including their willingness to work with the criminal justice system. The project also examined the adverse emotional consequences of victimization on the so-called "forgotten victims" of residential burglary, personal robbery, and non-sexual assault.

Two experimental designs were employed to overcome the major limitations of prior studies. In the first experiment, police recruits were assigned randomly to a special victim sensitivity training program. The results showed that the program was very successful in changing officers' beliefs about crime victims and their behavioral intentions relating to the treatment of crime victims at the scene. However, some of the favorable effects on police officers dissipated over time. In addition, the police training had few measurable effects on victim's psychological and behavioral responses to crime. Encounters with trained police did, however, have an effect that was qualified by age: Older victims reported less severe reactions to victimization after their interactions with trained police officers.

In the second experiment, victims were assigned randomly to receive a home visit from trained civilian volunteers who were prepared to offer counseling, support, and referrals for social services. The civilian program was expected to supplement the police intervention by demonstrating concern for victim's plight, reducing victim self-blame, encouraging crime prevention behaviors, and helping victims to access community service. The intervention had several positive effects. Victims who received a home visit from a trained civilian volunteer were less likely to blame themselves for the incident, less likely to report problems getting along with family and friends, and more likely to report satisfaction with police services. Similar to the police intervention, civilian home visits had more favorable effects on older victims.

Finally, samples of victims and nonvictims in Detroit were compared on a variety of outcome variables to estimate the adverse effects of victimization. Crime victims were more likely than nonvictims to report vulnerability and fear of crime as well as a wide range of distress symptoms. Although victims were more likely to engage in protective behaviors, they were less likely to believe that their behavior would be effective in helping to avoid future victimization.

The policy implications of the Detroit Police-Victims Project are discussed, including the need for broader organizational reform and refresher training programs within police agencies to reduce the chances that program effects will dissipate over time. The potential for utilizing community volunteers is also discussed.

## **I. Introduction**

### **A. The Extent of Criminal Victimization**

For more than 20 years, crime has been a major social problem in the United States. In her introduction to the final report of the President's Task Force on Victims of Crime, Herrington states that, "Every citizen of this country is more impoverished, less free, more fearful, and less safe because of the ever-present threat of criminals" (President's Task Force on Victims of Crime, 1982).

Approximately one-in-four American households was victimized in 1989 by at least one crime of violence or theft, amounting to more than 34 million total victimizations. The average American is more likely to become a victim of violent crime than a victim of an automobile accident (Bureau of Justice Statistics, 1990). Moreover, five of every six young persons living in the United States today will be victimized by violent crime (either completed or attempted) at least once during their lifetimes (Koppel, 1987; Laub, 1990).

### **B. The Impact of Criminal Victimization**

*Financial loss and physical injury.* Victims of crime often suffer significant loss or injury. Financial losses from personal and property crime exceeded 13 billion dollars in 1986 (Bureau of Justice Statistics, 1988) -- a modest estimate that excludes important categories such as mental health costs (Cohen, 1988). The most common economic hardships stemming from crime include property destruction, loss of cash and income, lost time from work, security costs, and medical expenses. A disproportionate share of these costs were incurred as a result of burglary, larceny, motor vehicle theft, and robbery. One-in-four victims of violent crime spent \$375 or more on medical expenses (Shenk & Klaus, 1984).

Overall, only 36 percent of losses or expenses are recovered or reimbursed within six months of victimization (Bureau of Justice Statistics, 1988).

The physically injurious consequences of crime range from minor abrasions, to crippling paralysis, to death. Each year in America, an average of 18,000 persons are homicide victims, and more than 2 million are injured in rapes, robberies, and assaults. Nearly one of every three victims of violent crime suffers bodily harm. In addition, 15 percent of them require medical attention and 10 percent need hospital care (Bureau of Justice Statistics, 1987). Rape victims are more likely than any other type of crime victim to receive treatment in a hospital emergency room. Female and lower income victims are more likely to be injured during a crime, while blacks are more likely to seek medical care for crime-related injuries (Bureau of Justice Statistics, 1988; Laub, 1990).

*Emotional impact.* Crime may have profound psychological repercussions (Burgess & Holmstrom, 1979; Fisher & Wertz, 1979; Frederick, 1980; Kahn, 1984; Lurigio & Davis, 1991). Studies show that the emotional concomitants of serious crime can be more disruptive than the loss of property or personal injury (Bard & Sangrey, 1979; Symonds, 1976). Rape is particularly traumatic (Katz & Mazur, 1979; Gordon & Riger, 1989; Resick, 1990), and can have devastating and often lifelong effects (e.g., Atkeson, Calhoun, Resick & Ellis, 1982; Burgess & Holmstrom, 1974a; Burt & Katz, 1985; Calhoun & Atkeson, 1982; Katz & Mazur, 1979; Norris & Feldman-Summers, 1981; Symonds, 1980). Some of the most prominent and debilitating reactions to sexual assault are fear and anxiety (Kilpatrick, Resick & Veronen, 1981; Kilpatrick & Veronen, 1983; Kilpatrick, Veronen & Resick, 1979), suicidal ideation (Kilpatrick, Best, Veronen, Amick, Villepontoux & Ruff, 1985a), sexual dysfunction (Becker, Abel & Skinner, 1979; Becker & Skinner, 1983; Becker, Skinner, Abel, Howell & Bruce, 1982), diminished self-esteem (Kilpatrick & Veronen, 1984), depression (Frank & Stewart,

1984; Frank, Turner & Duffy, 1979), persistent somatic complaints (Veronen, Kilpatrick & Resick, 1979), and drug abuse (Burnam, Stein, Golding, Siegal, Sorenson, Forsythe & Telles, 1988). Reactions to rape can persist for months and even years (Kilpatrick & Veronen, 1983).

Evidence is mounting that victims of other serious crimes also may suffer adverse psychological consequences. In earlier studies, Knudten, Meade, Knudten, and Doerner (1976) and Ziegenhagen (1974) reported that a variety of crime victims other than rape victims, exhibited disturbing symptoms, such as nightmares, insomnia, and anxiety. Syvrud (1967) and Bourque, Brumback, Krug, and Richardson (1978) demonstrated that a sizeable minority of robbery victims were in a state of crisis, which involved feelings of shock, fear, confusion, and helplessness. Davis and Lurigio (1991) revealed that burglary, robbery, and non-sexual assault victims, when compared to standardized norms, reported greater levels of distress and symptomology (e.g., negative affect, intrusive thoughts, psychiatric symptoms).

Similarly, a study of the prevalence of criminal victimization and its effects indicated that substantial numbers of non-sexual assault, burglary, and robbery victims developed post-traumatic stress disorder (Kilpatrick, Saunders, Veronen, Best & Von, 1987). An investigation by Hough (1985) showed that, overall, more than half of a sample of burglary victims suffered fear, loss of confidence, sleep difficulties, and depression. Maguire (1980) and Waller and Okihiro (1978) also found that burglary victims suffered long-term psychological impact. In addition, the work of Cohn (1974), Horowitz (1976), and Krupnick (1980) supports that non-rape victims of serious crime often experience disabling psychological responses (see also Leymann, 1985).

Clinical research suggests that crime victims proceed through a series of stages on the path toward psychological recovery (Bard & Sangrey, 1979;



Burgess & Holmstrom, 1974; Sutherland & Scherl, 1970). Bard and Sangrey's (1979) three-stage model of readjustment is one of the most widely cited "phase theories." Stage one, the impact phase, occurs immediately after the crime when victims experience traumatization, shock, disbelief, numbness, helplessness, and disorientation. The second stage, referred to as the recoil phase, is characterized by feelings of fear, sadness, and anger. Uncontrollable crying, guilt, and a breakdown in personal relationships are other responses that emerge in phase two. During phase three, the reorganization phase, victims assimilate the experience and begin to resume their normal activities.

While available data have failed to demonstrate that victim recovery proceeds through an invariant and linear progression of discrete phases (see Lurigio & Rosenbaum, in press; Silver & Wortman, 1980), stage theories offer useful frameworks for elucidating the psychological processes following criminal victimization. They are especially helpful in priming researchers and practitioners to recognize that crime victims may be in a crisis state immediately after the episode.

### **C. The Development of Victim Services and Programs**

*The victim movement.* Since the early 1970s, there has been a proliferation of concern and attention directed toward victims of crime -- to the extent that some observers have begun to speak of a "victims' movement." Fueled interest in crime victims has resulted in federal, state, and local actions to increase public awareness of the rights and needs of victims (Skogan, Lurigio, & Davis, 1990). Strong impetus for the "movement" came from the President's Task Force on Victims of Crime (1982), which promoted the expansion and visibility of victim assistance programs (Finn & Lee, 1988). On the heels of the task force report, legislation was enacted in Congress to secure better treatment for crime victims, to

protect crime victims from harassment and threat, and to initiate crime victims' compensation and assistance programs.

Through the establishment of the Crime Victims Fund, the 1984 Federal Victims of Crime Act disburses federal monies to victim compensation and assistance projects throughout the country. The Fund draws its revenues from fines, penalty assessments, and bond forfeitures, and has contributed to nearly 1400 programs as of early 1987 (Finn & Lee, 1988). Priority in funding is given to programs for victims of sexual assault, domestic violence, and child abuse (Davis & Henley, 1990). To supplement federal efforts, several states have passed comprehensive legislation protecting the rights of crime victims (e.g., McGuire, 1987).

Support for crime victims is most dramatic at the grassroots level with the emergence of some 4,000 victim service programs that provide a variety of ameliorative services to crime victims, such as: emergency care, crisis intervention, counseling, victim compensation and restitution, witness protection and other court-related services, public education, and victim advocacy (Finn & Lee, 1988; Norquay & Weiler, 1981). Many of these local victim programs offer clients two or more of the above services and are housed in police departments or prosecutors offices (Schneider & Schneider, 1977; Skogan, Davis, & Lurigio, 1990).

*The "second wound."* Although numerous victim programs are located in criminal justice and law enforcement settings, the system does not always respond adequately to the special demands and challenging problems of crime victims (Young, 1988). Furthermore, the response of criminal justice personnel often has an exacerbatory impact on the symptomology and disturbances of victims (Davis & Henley, 1990). The tendency of victims to experience difficulties in their encounters with the criminal justice system is so prevalent that Symonds (1980)

characterized its effect on victims as the "second wound." Schneider and Schneider (1977) referred to crime victims as the "forgotten persons" of the criminal justice system. Skogan and Wycoff (1987) observe that victims are valued only for their capacity to report crimes and to appear as witnesses. In a seminal article, Ash (1972) documented the high cost of victim cooperation in the prosecutorial process:

In the typical situation the witness will several times be ordered to appear at some designated place, usually a courtroom, but sometimes a prosecutor's office or grand jury room. Several times he will be made to wait tedious, unconscionable long intervals of time in dingy courthouse corridors or in other grim surroundings. Several times he will suffer the discomfort of being ignored by busy officials and the bewilderment and painful anxiety of not knowing what is going on around him or what is going to happen to him....In sum, the experience is dreary, time-wasting, depressing, exhausting, confusing, frustrating, numbing, and seemingly endless (p.390).

Other authors have presented cases demonstrating the general neglect of crime victims by police, prosecutors, and court personnel, including long waits, loss of wages, poor protection against intimidation, mishandling of property, difficult questioning, unnecessary trips to court, and a variety of other inconveniences (Chelimsky, 1981; Knudten et al., 1976; Rosenbaum, 1977; Waller, 1982).

#### **D. The Police Response to Crime Victims**

*Police officers as front-line helpers.* Police officers are the first members of the criminal justice system to interact with crime victims. For most victims, these officers are their sole contact with the system. Although most citizens maintain a favorable opinion of the police *prior* to such contacts, many come away from the encounter dissatisfied (Schneider, Burkhart, & Wilson, 1976; Shapland, Willmore, & Duff, 1985). Having suffered significant loss and degradation at the hands of the criminal, victims are often in dire need of information, reassurance, advice, and

sympathetic understanding. For example, the lack of concrete information about their case is a major factor affecting burglary victims' negative attitudes toward police (Maguire, 1980). Knowing whether an assailant has been apprehended or released on bond can allay victims' fears of repeated attack (Baluss, 1980).

Victims typically are told nothing about available programs and services and are offered sparse advice about coping with practical problems (Elias, 1984; Skogan, Davis, & Lurigio, 1990; Ziegenhagen, 1976). Because follow-up information usually is not provided, victims may lose trust and confidence in the police and become demoralized (Kelly, 1982). According to Burgess and Holmstrom (1975), a number of rape victims in their sample reported that the police were indifferent to their condition and handled the rape in a perfunctory manner. Harrell, Smith, and Cook (1985) revealed that one of the most common complaints lodged by victims was that officers appeared largely unconcerned about their physical or emotional status.

As noted earlier, during the initial period of victimization, individuals may suffer emotional upheaval or trauma. Specialists in the domain of crisis intervention recommend prompt attention and treatment to avert chronic distress and behavioral problems (Aguilera & Messick, 1978). Bard and Sangrey (1979) emphasize that an immediate therapeutic response to crime victims' distress can be critical in initiating the recovery process and obviating the need for subsequent treatment. Bassuk (1980) also underscores the importance of early intervention to overcome victims' short- and long-term difficulties.

Many victims of crime do not solicit professional assistance for their disturbances until long after the fact, and many never seek treatment (Skogan, Davis, & Lurigio, 1990). For example, Krupnick and Horowitz (1981) found that a significant percentage of assault victims sought treatment for the first time after a considerable period of time had lapsed since their victimization. Because of the

delayed onset of symptoms, months or even years may elapse before victims obtain any type of psychological assistance (Resick, 1990). Hence, those who interact with victims soon after the crime must be tapped as important sources of intervention. This highlights the critical position of police as front-line care-givers to crime victims. However, as Bolin (1980) asserts, the nature of police practices and duties are formidable obstacles to effective helping.

*The failure of police.* Police can be unresponsive to crime victims for a number of reasons. Officers have identified themselves traditionally as "crime fighters," not "social workers." They often assume a posture of impersonal detachment in their efforts to compile facts relating to the crime (e.g., filling out forms, searching for evidence, completing incident reports, etc.). Moreover, the daily anxieties, strains, and frustrations of police work demand a certain degree of "functional" non-involvement, while routine patrol procedures require officers to complete the victim contact and return rapidly to the "in service" mode. These kinds of activities clearly are not victim-oriented, and may cast police as indifferent and uncaring. Victims tend to assess police on the time they invest in the contact and the degree to which they are attentive to victims' feelings (Maguire, 1982). Shapland (1984) reports that "caring and supportive attitudes (on the part of police) were the main subject for victim praise." In short, police officers' overriding motivation to maintain a professional demeanor and to be efficient when collecting victim information may interfere with their ability to be compassionate, reassuring, and supportive.

Other reasons for police failure to help crime victims are grounded in officers' perceptions. Police frequently regard victims as grim reminders of their helplessness to prevent crime and protect public safety (Chelimsky, 1981). They are inclined to react to crime victims in an aggressive and self-enhancing manner, including victim blaming and rebuking. For example, police may tell rape victims

their "skirt was too short," or burglary victims that they "should have installed iron bars on their windows." They ask such questions as "Why didn't you scream?" or "Didn't you know this was a bad neighborhood?" Rosenbaum (1977) reported that police more than nonvictim civilians and crime victims tend to blame victims for their plight. He also found that police blaming of victims is associated with less support for victim services.

Findings suggest that victims tend to internalize negative societal beliefs about victimization (Drapkin & Viano, 1974; Symonds, 1980). The deleterious effects of such beliefs are especially evident in the immediate aftermath of the crime when victims are highly susceptible to the influence of others (Bard & Sangrey, 1979; Greenberg, Wilson, & Mills, 1982). Police behavior can be crucial in remediating the severity of victim stress and improving victim recovery. The attitudes of officers are central in forming the victim's interpretation of the event and in determining the risk of subsequent psychological trauma. Thus, how the police react, how they treat the victim, and the seriousness and credence they lend to victims' feelings are greatly important.

Although the criminal justice system and law enforcement in particular has not responded fully to crime victims, it is imperative that they retain a major stake in the development and administration of crime victims programs (Davis & Henley, 1990). Police officers represent a vital link between victims and the criminal justice system; therefore, the successful implementation of victim services may depend ultimately upon the system's first (and often only) contact with the crime victim.

*Police interventions and training.* Police interventions, however, may not be a panacea. Skogan and Wycoff (1987) found, for example, that *follow-up calls* to victims had some negative consequences for Hispanics and Asians with regard to fear, perceptions of crime, and satisfaction with police. Similarly, Rosenbaum and

Bickman (1991) reported a number of unexpected and unfavorable consequences from police intervention. Victims randomly assigned to receive *home visits* by police officers to discuss crime prevention behaviors were significantly more fearful of revictimization, reported less control over victimization, were more upset and angry about the incident, saw the crime as more serious, and were less likely to report full recovery. These two critical studies highlight the dangers of creating and implementing victim service programs without empirically-based program planning and thorough staff training.

According to the President's Task Force on Victims of Crime (1982), police training is required to ensure that law enforcement-based programs will address the needs of victims. Training can be most effective if it prepares officers to (Stein, 1977; Symonds, 1980): a) be immediately sensitive and responsive to victims' emotional crisis; b) encourage victims to express their feelings; c) make interventions that reduce victims' injured pride, self-blame, and self-destructive behavior; d) identify victims requiring subsequent assessment and treatment by mental health professionals; e) empower troubled victims to reduce their sense of helplessness and impotent rage; and f) make well-informed and appropriate referrals to adjunctive service agencies.

A number of existing training programs, framed around crisis intervention models, have advanced the ability of the police to respond to domestic cases of violence and battering, natural disasters, notification of death and injury, and other traumas (Bard, 1974; Dutton, 1981; Hanewicz, 1982). Several varieties of crisis intervention training for law enforcement officers have been elaborated (e.g., Bard, 1976; Cesnik, Puls, & Peirce, 1977; Driscoll, Meyer, & Schanie, 1976; Meerbaum, 1978). Unfortunately, those programs have been limited to rape victims or victims in "crisis," and ignore the vast majority of serious crime victims. These efforts must be developed further or adapted for a greater range of crime victims.

*Beyond police: The role of civilians.* We have argued strongly that the police response to crime victims plays a central role in determining victim recovery. We also recognized that officers' behavior toward crime victims is restricted by situational and professional constraints. Moreover, while apprising victims of available services is a recommended and helpful police response, it does not guarantee that victims will take the initiative to acquire such assistance. Indeed, evidence suggests that victim utilization of services often is marginal (Davis, 1987; Friedman et al., 1982; Knudten et al., 1976; Skogan, Davis, & Lurigio, 1990). Hence, adjunctive approaches must be relied upon to support police officers to address victims' psychological needs.

Paraprofessionals or indigenous, informal helpers have been useful in a variety of clinical and mental health settings (Korchin, 1976), and can be utilized effectively as a source of follow-up or outreach for crime victims. Minimal training is necessary to equip these individuals with the necessary tools to engage in brief crisis counseling. The basic ingredients of this type of outreach include: remedying immediate confusion, listening compassionately, offering emotional support, helping victims cope with the consequences of victimization, and encouraging and assisting victims to obtain additional social services. These responses closely resemble the kinds of interventions police officers can administer, but they cover a much greater depth and breadth of activities. Volunteers have been integrated successfully into victim assistance programs, and have demonstrated the capacity to provide constructive counseling (e.g., Harrell, et al., 1985; Kiresuk & Lund, 1981; Young, 1988). Civilians and police working together may be able to achieve a great deal in promoting the psychological recovery of crime victims.



## **E. Research on Victims and Victim Programs**

Knowledge regarding the effects of criminal victimization and victim services programs is limited (Skogan, Davis, & Lurigio, 1990). Until recently, research on the psychological consequences of crime has been restricted largely to victims of rape. Much less attention has been paid in the literature to the so-called "forgotten victims" of other significant crimes such as burglary, robbery, and non-sexual assault (Davis & Lurigio, 1991). In addition, inadequacies in research designs (e.g., failure to include a comparison or control group of nonvictims) and measurement procedures (e.g., failure to operationalize constructs adequately or to include multiple outcome variables) have sorely limited our understanding of the impact of serious crimes other than rape (Lurigio & Rosenbaum, in press).

Even less is known about the effects of victim services programs. Although there have been some studies of victims' needs (Friedman, Bischoff, Davis, & Person, 1982; Maguire & Corbett, 1987; Roberts, 1987), few experiments have examined the impact of victim assistance programs (Skogan & Wycoff, 1987). According to the NIJ-funded Phase 1 National Assessment of victim/witness programs, typical evaluation designs are not powerful enough to detect program impact or to answer a host of fundamental questions such as: "Are victims and witnesses better off emotionally, or 'healthier' in the long run, for having received assistance?", "Are victims and witnesses now receiving better treatment at the hands of local criminal justice and social service agencies as a consequence of project efforts?" (Cronin & Bourque, 1981, p. 41).

The first large-scale study of victim services in Pima County, Arizona (Harrell, et al., 1985) addressed some of the limitations of prior research, but it too suffered from basic methodological flaws. Specifically, selection bias (i.e., those receiving the treatment were more severely traumatized by the victimization) and the

absence of an equivalent control group of "non-service victims" seriously hampered the investigators' ability to measure program effects.

The American Psychological Association's Task Force on the Victims of Crime and Violence (Kahn, 1984) also lamented the lack of solid evaluative data on crime victim interventions. The Task Force stated emphatically that, "Both those who seek help and those who pay for services deserve interventions for which the efficacy is known or is under systematic study. Little is known about the effectiveness of services currently being offered to victims" (Kahn, 1984, p.100). Davis (1987) compares the paucity of knowledge in the area of crime victim services to that of other fields where crisis intervention techniques are utilized, e.g., suicide prevention, psychiatric treatment, and acute medical care (see Auerback & Kilman, 1978).

#### **F. Overview of the Present Research**

The research described in this report fills important gaps in our knowledge. It examines the usefulness of victim-focused intervention training for police and civilians and the impact of these interventions on crime victim distress and symptomology.

The present research also overcomes the shortcomings of prior studies. This NIJ-funded project provides a randomized field test of the effects of a victim-focused training program for police officers. Police recruits at the Detroit Metropolitan Police Academy were exposed to victim-focused training or a topic unrelated to victims. We hypothesized that specially trained officers would be more sympathetic toward crime victims and more sensitive to victims' needs. Crime victims were then contacted in the field by either a specially trained or untrained police officer to study the impact of the training on victim recovery and victim willingness to participate in the criminal justice process. We hypothesized

that victims contacted by specially trained officers would show better recovery and adjustment to the crime incident.

In addition, the current project includes the training of community volunteers who offered adjunctive services in conjunction with the police program. Crime victims participating in the study were randomly assigned to receive (or not receive) a home visit from a trained civilian volunteer. The purpose of the visit was to allow victims to ventilate their feelings, express their needs and concerns, and learn about available victim programs and services in Detroit. We hypothesized that victims contacted by civilian volunteers also would show better recovery and adjustment to the crime incident.

Finally, the project investigates the adverse psychological sequelae of criminal victimization. Unlike prior research, this study includes a control group of nonvictims, a wide range of outcome measures, and a variety of serious crime victims other than rape victims. We hypothesized that crime victims would report more symptoms and adjustment problems than comparable non-victims.

## II. The Planned Interventions

### A. Victim-Focused Training for Police Officers

*Training objectives.* The training program for police recruits involved a series of lectures, films, readings, and discussions emphasizing the helping and compassionate role of the police. Training sessions were administered over a three day period. The program had three basic objectives: (a) to change police officers' perceptions and misconceptions about the "forgotten victims" of crime, i.e., burglary, robbery, and non-sexual assault victims; (b) to enable officers to be more sensitive and empathic to the needs and problems of crime victims; and (c) to prepare officers to offer emotional and informational support to crime victims.

*Training implementation.* Training sessions were scheduled just prior to recruits' graduation from the Detroit Police Academy. At this stage in the training program, recruits had already met the department and state requirements for graduation. Hence, we avoided unnecessary attrition by conducting the experimental training at the end of the sixteen-week program. Scheduling the victim-witness training last also minimized the possibility of control group contamination.

*Training curriculum.* The training curriculum consisted of five modules. Each began with a face-sheet that specified module objectives, criterion measures to determine when the objectives had been achieved (i.e., what the participants should be able to do at the completion of the module), resource materials to illustrate module material (e.g., packets of relevant readings), and adjunctive training aids to assist in the presentation of the curriculum (e.g., flip-charts and audio-visual materials).

The first module introduced the training program. Recruits were told that the theme of the training was "restoration," and that responding patrol officers can help

victims because of four basic conditions. First, the *immediacy* of the police response allows them to exert a stabilizing influence over traumatized victims. Second, the 24-hour *availability* of their services dictates that immediate crises are within the purview of the police. Third, the police's intrinsic *authority* prompts victims to see responding officers as compassionate parental figures in crisis situations. Fourth, the public's perception of police *objectivity* can help victims regain a sense of control and self-efficacy. In addition, trainees were taught that being a skillful interviewer was not only critical in offering support to victims but also in investigating the crime. The goals of the victim-focused training were enumerated at the end of module one.

The second module helped recruits to understand the inter-relationships between law enforcement, victim needs, and victim services. The instructors began by explaining and illustrating the types of victims' injuries (i.e., physical, emotional, financial). This was accompanied by a discussion of the "second injury," inflicted on victims by the criminal justice system.

The third module included topics on victim crisis, stress, and long-term emotional reactions. The purpose of module three was to explain the different types of physical and emotional stressors experienced by law enforcement officers and crime victims. Examples of specific crime victim experiences illustrated these reactions. Also, a discussion of post-traumatic stress disorder familiarized the trainees with common victim symptoms and behavioral responses. In addition, trainers discussed the impact of victim reactions on crime reporting, investigations, and prosecutions.

The fourth module focused on the officer's response at the scene of the crime with a special emphasis on effective interviewing techniques. These techniques help officers to elicit information for an arrest and investigation, and to reassure and calm victims. Knowing what to listen for and how to listen in responsive and

sensitive ways was underscored. The module concluded by apprising officers of community crime prevention efforts.

The fifth module prepared recruits to apply their training. The theme of "restoration" was recapitulated along with the positive steps a responding police officer can take to help victims recover. Because most of the victim-focused material was new, we anticipated problems when the trained recruits left the training academy to work with untrained senior officers. The problem of possible counterproductive pressures from senior officers was discussed to "inoculate" recruits against such social influence.

Responding patrol officers are often pressured to obtain "the facts" and to proceed quickly to the next call. Consequently, the recruits may have felt compelled in the field to abandon what they learned about victim sensitivity. To help prepare recruits to face these countervailing forces, we told them that they were on the "cutting edge" of new police work. We also informed them that senior officers who suggest that they "take down basic information and move" are doing so because they did not have the advantages of the specialized training. The recruits were encouraged to resist the pressure, and were left with several techniques for "putting their knowledge into practice."

#### **B. Victim-Focused Training for Civilian Volunteers**

The civilian orientation session was approximately six hours long. The training agenda was divided into: (a) an overview of the visit program, (b) a review of victims' issues and experiences, (c) a presentation of the skills necessary to participate in the program, (d) and an elaboration of program implementation procedures. During the first part of the training session, trainees were told that they would be visiting victims to allow them to "talk through" the incident with a non-judgmental and reassuring person. They were trained to be sensitive

especially to victims who live alone or who are newly divorced or isolated, and to persuade these types of victims to seek social support. The difference between "encouraging" and "pressuring" an individual to take part in some activity was made salient to the volunteers.

In addition to being a sympathetic listener, volunteers were taught to make crime victims aware of various kinds of community assistance programs. For example, if a victim expressed frustration at not being able to do anything about being burglarized, they would be given information about a Neighborhood Watch Group, an Apartment Watch Group, or the Citizens' Community Radio Patrol Program. If a victim expressed interest in making their home less susceptible to burglary, they would be given the phone number of the nearest precinct or mini-station to arrange a home security survey. If the victim expressed concern about auto theft, they would be given information about the Police Department's Vehicle Identification Program. Volunteers distributed brochures and flyers describing the many crime prevention programs in Detroit.

The second part of the orientation session discussed victims' experiences and reactions, and the types of support victims need immediately after the incident. This portion of the session was introduced in two ways. In the first introduction, the class viewed the film, *Aftershock*, provided by the National Organization of Victim Assistance (NOVA). The film shows a Tucson, Arizona crisis team at work and details some of the typical experiences of crime victims. Because the film was not available during the second orientation session, this part of the discussion also was introduced by reading crime victims' accounts of their traumatization. These presentations chronicled victims' inquiries. Although the volunteers would not be involved in crisis intervention, they were made aware of the range of victim emotions.

The third part of the orientation session covered home visit procedures. The skills necessary to become an empathic listener and helper were described and imparted. Each volunteer was given a packet of materials for preparing and conducting visits. At the top of the packet was a guide -- *Points to Remember When Visiting Victims*. The instructor reviewed the guide, which divided tasks into three components: before the visit, during the visit, and after the visit.

To conclude the orientation sessions, volunteers were instructed to review the reading material. They were encouraged to practice listening skills with a friend or in the mirror using a training hand-out. The instructor demonstrated many of the skills. Volunteers were instructed to complete the top portion of the "Visit Report" as soon as they received the assignment from the Community Services Division of the Detroit Police Department. Finally, they were told how to prepare and utilize visit materials, such as crime prevention information and the *Social Agency Resource Guide*.



### III. Research Methodology

#### A. Victim-Focused Training for Police Recruits

*Research design.* A randomized experimental design was employed to overcome the major limitations of previous evaluations. Police recruits were first matched on sex and race and then randomly assigned to one of two groups: an *experimental group* -- officers in this group were exposed to the victim-focused training program described in chapter two, or a *control group* -- officers in this group were exposed to a training program on record-keeping practices or other topics unrelated to victims.

*Sample characteristics.* New recruits at the Detroit Metropolitan Police Academy (n=122) participated in the study. The recruits ranged in age from 19-39, with a median age of 26. More than two-thirds of the officers were black and two-thirds were male. All the participants were high school graduates and more than three-fourths had attended some college.

*Hypotheses.* It was hypothesized that recruits receiving the victim-focused training would: a) be more cognizant of the rights and feelings of victims; b) feel able to influence victims' adjustment and psychological well-being at the crime scene; c) be more sensitive to the emotional impact of crime on victims; d) be less inclined to blame victims for their misfortune; and e) believe that the criminal justice system does not do enough to help crime victims.

*Measurement.* Officers in the experimental and control groups completed a two-part survey immediately after training. After approximately four months in the field, these officers were asked to complete a second survey containing many of the same questions. With the help of Detroit Police Department administrators

who encouraged officers to participate in the study, the response rate was quite high: 105 (86%) of the original 122 officers completed the second survey.

The initial police survey was a self-administered questionnaire with two sections. The first section contained items measuring officers' attitudes, beliefs, and perceptions regarding the effects of victimization, victim rights, their role toward crime victims, and other variables pertinent to the hypotheses being tested. In addition, officers were asked to rank-order from "most important" to "least important" ten activities that might occur at the scene of the crime. Five of these activities were "victim-oriented" (e.g., "try to reassure the victim that he/she is safe...") and five were "procedural-oriented" (e.g., "search for physical evidence..."). The second portion of the survey focused on the officers' behavioral intentions at the scene of the crime. Finally, officers were asked to read two crime scenarios and write a description of how they would handle each situation.

#### **B. Measuring the Effects of Police Training on Victims**

Examining the impact of the classroom training on police recruits was only the first step. The project also tested whether the training sessions would actually influence victim recovery. To explore this question, burglary, robbery, and felonious assault victims, who had recent contact with officers in the experimental and control groups, were interviewed by telephone. If the victim was a friend, relative, or acquaintance of the offender he/she was excluded from the sample. A strong effort was made to contact victims by telephone within two weeks following their report of the incident to the police.

*Sample characteristics.* More than half of the victim respondents (55%) were female, 74 percent were black, and 69 percent were high school graduates. Victims' ages ranged from 17 to 91 with a median of 40. Sixty-four percent of the sample was employed, full- or part-time, and nearly half (48%) reported an annual

income of less than \$10,000. Forty percent of the crime victims interviewed were victims of burglary (n=91), 40 percent were victims of robbery (n=91), and 20 percent were victims of felonious assault (n=45).

*Hypotheses.* It was hypothesized that victims exposed to the specially-trained officers would: a) perceive the incident as having less emotional impact on them and their families; b) report fewer symptoms; c) be less inclined to blame themselves for the victimization; d) report more positive attitudes toward, and confidence in, the police and the courts; e) express a greater willingness to cooperate with the criminal justice system; f) perceive the incident as causing less difficulty with relationships and daily activities; g) be less inclined to change their view of themselves and other people; h) interpret the incident as having less serious impact on them when compared to other crime victims; i) feel less vulnerable to a variety of adverse life events including future criminal victimization; j) be more aware of and more likely to participate in community crime prevention activities; k) feel less fearful of crime and less vulnerable to future victimization; and l) feel more confident in their ability to control events in their immediate environment.

*Measurement.* A 30-minute telephone survey measured victim responses. A wide range of variables were included to explore the impact of victimization and victims' perceptions and attitudes toward the criminal justice system. The victim survey drew upon diverse literatures. For example, measures of symptoms were derived from the rape literature (Burgess & Holmstrom, 1974; Sales, Baum, & Shore, 1984), measures of fear, perceptions of crime, and behavioral reactions to crime were derived from the reactions-to-crime literature (Fowler, McCalla, & Mangione, 1979; Lavrakas, 1979; Rosenbaum & Baumer, 1981; Skogan, Lewis, Podolefsky, DuBow, Gordon, Hunter, Maxfield, & Salem, 1982); and measures of

social cognitions and attributions were derived from social psychological research (Janoff-Bulman & Frieze, 1983; Wortman, 1983).

### **C. Measuring The Impact of Criminal Victimization**

*Research design.* Past research has typically examined the effects of criminal victimization without comparing victims to a control group of nonvictims. Hence a random sample of 125 nonvictims in Detroit was selected using a random digit-dialing procedure. The nonvictim sample was screened to exclude persons who: a) had been victims of personal or property crime in the past year; b) were not residents of Detroit proper; and c) were under 18 years of age. Also, the victim and nonvictim samples were equated on race and income by a telephone screening process.

*Sample characteristics.* A comparison of the demographic profiles of the samples showed that higher percentages of the nonvictims were female (69%) and black (75%). Victims and nonvictims were highly similar with respect to age and educational level. The mean age of nonvictims was 42, and 53 percent had obtained a high school education or less. A somewhat lower percentage of nonvictims (52%) reported an annual income of less than \$10,000. Nonvictims also were more likely to be retired or housekeepers.

*Data analysis and measurement.* A multiple regression analysis with covariates was performed to equate victims and nonvictims on competing factors associated with crime-related perceptions and behaviors (i.e., age, race, gender, prior victimization, and vicarious victimization). In the analysis, crime victim categories (burglary, robbery, assault) were collapsed, and the covariates preceded victimization (coded as a dummy variable).

Victims were compared to nonvictims on 28 dependent measures, representing six distinct clusters of outcomes: a) vulnerability -- the tendency to

view oneself as susceptible to future adverse life events; b) fear -- includes the fear of both personal and property crime; c) protective behaviors -- activities aimed at preventing subsequent criminal victimization; d) self-efficacy -- the belief that one's behaviors are effective in avoiding criminal victimization; e) symptoms -- a wide range of deleterious emotional and physical sequelae; and f) attitudes toward police -- perceptions of police performance and willingness to cooperate in the criminal justice system. Some dependent variables were measured by multi-item scales.

#### **D. Civilian Intervention**

The evaluation of the civilian component of the Police-Victims Experiment also was designed as a randomized field experiment. The civilian home visits were planned as a follow-up for victims in the original police experiment, yielding a 2 X 2 design (Exposure to Trained Officers X Exposure to Trained Civilians). Specifically, victims assigned to have contact with a trained officer would then be randomly assigned to receive a home visit from a trained civilian volunteer. However, this research design was modified when we discovered that the number of police-victim contacts during the designated time period was below our original projection.<sup>1</sup> Although civilian contacts were continued for half of the victims in the original design, a separate civilian experiment was initiated to insure that a sufficient sample size would be achieved by the end of the data collection period. Thus, recent victims of reported assault, burglary, and robbery from across the city were used in the sampling frame (*regardless* of whether the responding officer was in the original study), and these cases were randomly assigned to the

<sup>1</sup>Although many calculations were made in advance, this problem emerged primarily because of the diversion of some officers in the study to foot patrol assignments that did not respond to calls for service. Fortunately, the diversion was random with respect to experimental conditions (because administrators did not have knowledge of these conditions).

experimental group (i.e., receiving a civilian home visit) or the control group (i.e., no civilian visit). In the final analysis, data were collected from a total of 227 victims, but only 106 victims had contact with police officers participating in the original experiment; the remainder were victims identified through the civilian study. These data were combined to test hypotheses regarding the impact of victimization and the effects of the civilian intervention.

Various attrition analyses were performed to test for possible differential mortality across experimental conditions and to examine the representativeness of the remaining sample. There were no significant differences in demographic characteristics among police officers and victims in the experimental and control conditions.

## **IV. Major Findings**

### **A. Adverse Effects of Victimization**

This section provides a brief summary of the estimated impact of crime on victims. Results from multiple regression analyses are provided in Table 1. After controlling for the effects of key covariates, a number of significant differences emerged between victims and nonvictims. To summarize, crime victims suffered from increased vulnerability and fear as well as a wide range of distressing symptoms (e.g., anxiety, unpleasant thoughts, upset stomach). In addition, although victims were more likely to engage in protective behaviors, they experienced a diminished sense of self-efficacy, i.e., the belief that their behaviors would be effective in helping them avoid future victimization. Finally, there were no differences between victims' and nonvictim's judgments of police performance or their willingness to cooperate in the criminal justice system.

### **B. Effects of Training on Police**

The experimental and control groups were significantly different on 8 of 11 outcome measures and in directions supportive of the five hypotheses stated in chapter three. Specifically, the trained officers were more likely than the control group to: a) conceive of their roles as including the protection of victims' rights and feelings; b) believe that they can make a difference in victim recovery; c) acknowledge the emotional impact of victimization; d) attribute blame for the crime to sources other than the victim; and e) feel that the criminal justice system has neglected the rights and needs of crime victims (See Table 2).

The experimental group of officers also were more likely than the control group to rank victim-focused activities at the scene higher than standard procedural activities. For example, 77 percent of the officers in the experimental

Table 1  
Differences on Outcome Variables Between Victims and Nonvictims

Outcome Measures	Predictors	cum R <sup>2</sup>	F Change	Sig. F Change
Vulnerability 1 Likely Victim Any Crime	covariates victimization	.06 .07	3.48 4.26	p< .002 p< .04
Vulnerability 2 Likely Relative/ Friend Victim	covariates victimization	.07 .10	4.12 10.58	p<.0005 p< .001
Vulnerability 3 Likely Victim Compared to Others	covariates victimization	.06 .09	3.26 12.00	p< .004 p<.0006
Generalized Vulnerability 1 Car Accident	covariates victimization	.09 .10	5.97 .003	p<.0001 p< .955
Generalized Vulnerability 2 Illness	covariates victimization	.10 .13	6.31 8.97	p<.0001 p< .003
Generalized Vulnerability 3 Fire	covariates victimization	.18 .18	11.88 .685	p<.0001 p< .408
Fear of personal Crime	covariates victimization	.05 .10	2.89 18.55	p< .009 p<.0001
Fear of property Crime	covariates victimization	.03 .12	1.87 33.37	p< .08 p<.0001
Protective Behavior 1 Look For Suspicious People	covariates victimization	.01 .02	.651 2.87	p< .689 p< .09
Protective Behavior 2 Avoid Strangers	covariates victimization	.12 .13	7.17 6.72	p<.0001 p< .01
Protective Behavior 3 Look Behind Doors	covariates victimization	.04 .09	2.20 17.64	p< .04 p<.0001
Protective Behavior 4 Protection at Night	covariates victimization	.03 .03	1.79 .489	p< .10 p< .485
Efficacy in Avoiding Future Crimes 1	covariates victimization	.03 .09	1.53 20.53	p< .165 p<.0001
Efficacy in Avoiding Future Crimes 2	covariates victimization	.01 .04	.691 9.04	p<.6572 p< .003
Symptoms - Nervousness	covariates victimization	.04 .32	2.02 136.36	p< .06 p<.0001



Table 1 (continued)

OUTCOME MEASURES	PREDICTORS	CUM R2	F CHANGE	SIG. F CHANGE
Symptoms - Unpleasant Thoughts	covariates victimization	.04 .44	1.99 234.18	p< .07 p<.0001
Symptoms - Faintness	covariates victimization	.02 .02	.83 2.67	p< .546 p< .10
Symptoms - Poor Appetite	covariates victimization	.03 .12	1.55 34.95	p< .16 p<.0001
Symptoms - Fearfulness	covariates victimization	.04 .24	2.75 82.11	p< .01 p<.0001
Symptoms - Upset Stomach	covariates victimization	.04 .06	2.33 7.35	p< .032 p< .007
Symptoms - Sleep Disturbance	covariates victimization	.05 .18	3.13 48.04	p< .005 p<.0001
Symptoms Urges to Retaliate	covariates victimization	.05 .16	3.03 40.50	p< .007 p<.0001
Symptoms - Alcoholism	covariates victimization	.04 .05	2.26 1.96	p< .04 p< .163
Symptoms - Drug Use	covariates victimization	.08 .11	4.70 10.63	p<.0001 p< .001
Willing to go to Court	covariates victimization	.02 .03	1.42 .694	p< .207 p<.4056
Satisfaction With Police Services	covariates victimization	.04 .04	2.05 56.81	p< .06 p< .452
Perceptions of Police 1 Effective in Crime Prevention	covariates victimization	.02 .02	.948 .867	p< .461 p< .352
Perceptions of Police 2 Effective in Apprehending Criminals	covariates victimization	.02 .02	.948 .867	p< .461 p< .352

Table 2  
The Effects of Training on Police Recruits  
(Mean scores on post-training instrument)

Outcomes	Experimental	Control	t value
<u>Police Roles</u>			
Believe primary duty is to protect rights of the accused	3.74	3.18	5.42*
Believe providing emotional support is not a police role	4.37	4.11	2.41
Believe protecting victims' feelings is as important as getting information about the offender	4.46	3.80	10.36**
<u>Police Efficacy</u>			
Believe that officers' behavior at the scene has strong effect on victims' psychological recovery	4.69	4.33	9.13**
Believe there is not much an officer can do to help victims cope because of time constraints	4.14	3.84	2.31
<u>Psychological Impact</u>			
Feel that most burglary victims suffer significant emotional stress	4.41	3.52	22.68**
Feel that most victims recover quickly	4.59	4.03	11.58**
<u>Victim Blame</u>			
Believe that people become victims because of bad luck	3.45	2.92	5.12*
Believe that people become victims because they don't take precautions	3.67	3.34	2.15
<u>Victim Rights and Treatment by Criminal Justice System</u>			
Feel CJ system has not protected the rights of victims	4.53	3.79	13.63**
Feel that victims' needs are being met and additional services are unnecessary	4.85	4.51	8.69**

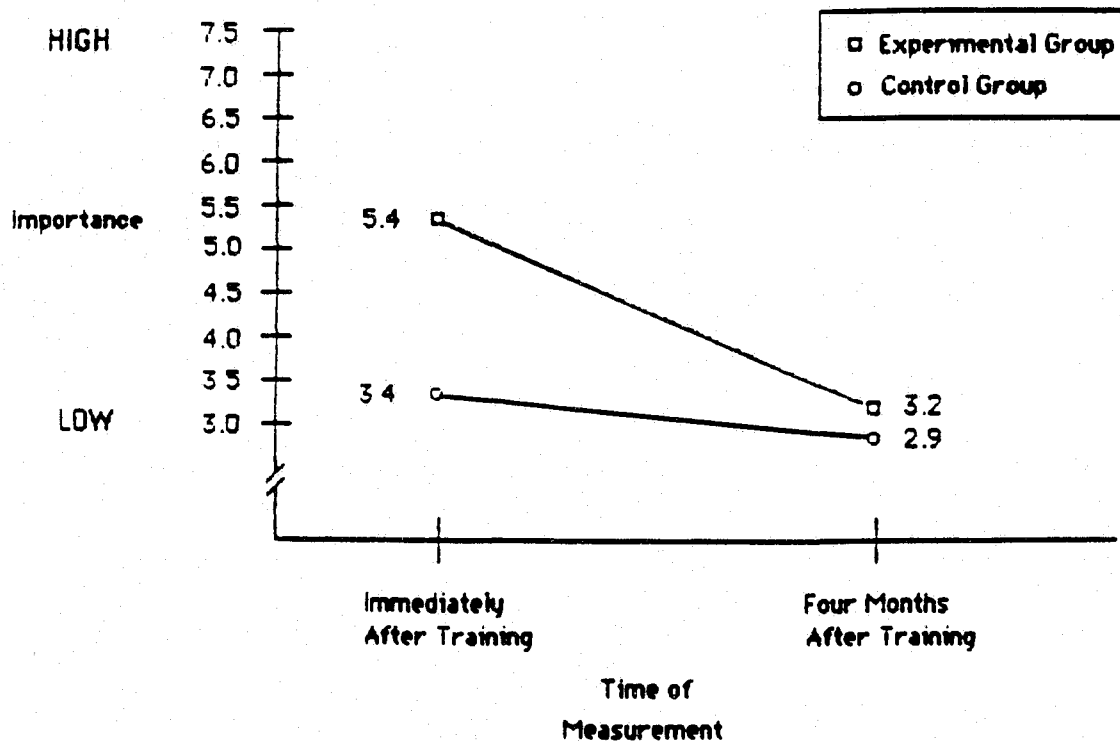
N=120. \* p<.05. \*\* p<.01.

group attached a high priority to "listening attentively while the victim expresses feelings and emotions," whereas only 24 percent of the officers in the control group attached a high priority to this response. In addition, a content analysis of police officers' responses to the crime scenarios revealed that the experimental group gave a significantly greater number of victim-oriented responses, whereas the control group gave a significantly greater number of procedure-oriented responses.

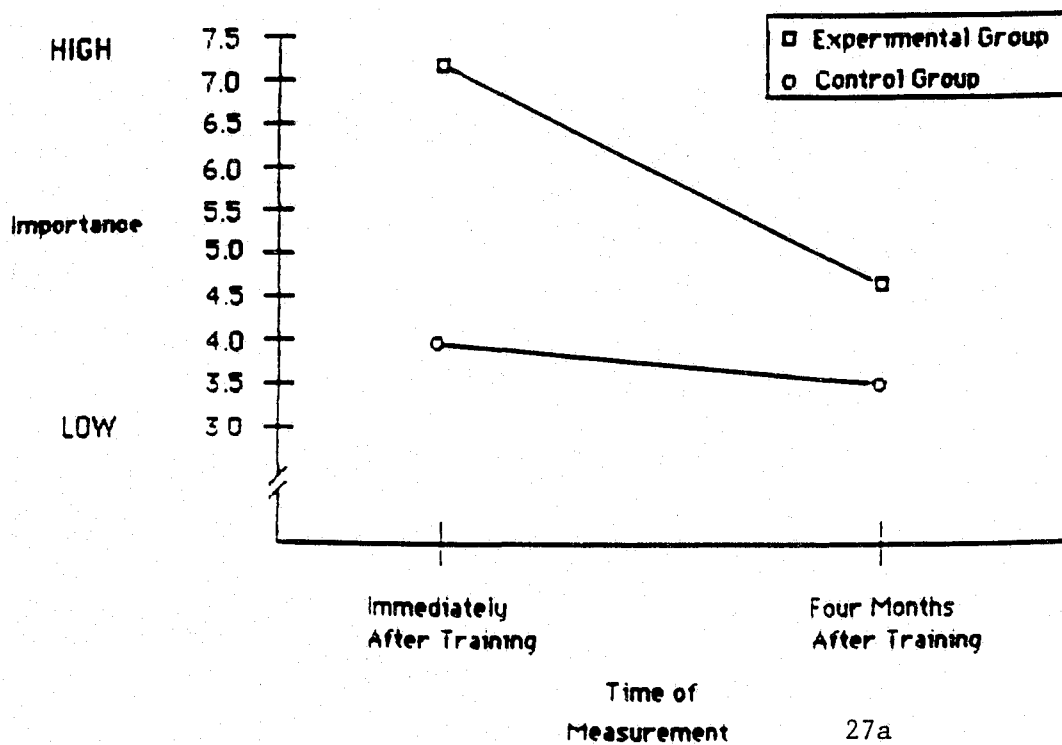
The impact of training dissipated during the four months the officers spent in the field. Only two of the eight initial differences remained significant. Although both groups of officers became less sensitive to victim's emotional needs with the passage of time, the experimental group showed a greater decline in sensitivity. The best illustration of how the effects dissipated can be found in officers' rankings of the relative importance of different activities at the scene of the crime. Item analysis suggested that two items were reliable measures of officers' sensitivity to victims feelings at the scene, which was a focal point in the training program. Specifically, Figure 1 reveals dramatic mean differences at the first posttest between the experimental and control groups on the priority that officers attached to "listen(ing) attentively while the victim expresses feelings/emotions" and "try(ing) to reassure the victim that he/she is safe." Over time, however, both groups showed declines in victim sensitivity; the greatest change occurred in the experimental group. Only one of the two differences remained significant after four months. Stated differently, whereas nearly 77 percent of the experimental officers placed a high priority after the training program on "listening attentively" to the victim's feelings, only 16 percent did so after four months on the job. Thus, 60 percent of the officers changed their feelings in the direction opposed to the posture that was encouraged by the training program.

Figure 1. Police Officers' Ranking of Specific Police Behaviors at the Crime Scene. Ranked According to "their Importance to the Officer's Role and Responsibilities." (Average Ranking Compared to 9 Other Behaviors)

1a. Importance Given to Listening Attentively When Victim Expresses Feelings or Emotions



1b. Importance Given to Reassuring Victim that He/She is Safe



### C. Effects of Programs on Crime Victims

The next critical question for the project was whether the classroom gains would exert a favorable impact on crime victims. The hypotheses stated earlier were tested using a wide range of outcome measures. Table 3 shows the major victim reactions that were measured (by victim interviews) to assess the impact of both the police and civilian interventions.

*Police Intervention.* The results were quite uniform across outcome measures. The police training had very few measurable effects on victims' psychological and behavioral reactions to victimization. The findings can be summarized as follows:

- Victims who encountered a specially trained officer were no less emotionally traumatized by the incident than victims in the control group.
- Most indicators of distress were unaffected by the police intervention. Two marginally significant findings revealed that nervousness increased and the urge to retaliate physically decreased after exposure to a trained officer.
- Although most causal attributions were not changed, victims in the experimental group were more inclined to blame external factors for the victimization -- especially "bad luck" and the "the offender" -- rather than themselves.
- Victims exposed to specially trained officers were significantly less fearful of being robbed or assaulted. Fear of property crime, however, was not altered by the victim's interaction with trained police.
- The police intervention had no effect on victims' attitudes toward the police or the courts and no effect on their willingness to report future incidents to the police or to assist in the prosecution of their own case.

Thus, while a few favorable changes were observed, the vast majority of comparisons revealed no significant differences between the experimental and control groups. In light of this limited program impact, a fundamental question is

Table 3  
Measures of Program Impact on Victims

<p><b>Emotional Impact</b> perceived emotional impact on self perceived emotional impact on family/friends perceived seriousness of incident</p> <p><b>Symptomology After Incident</b> nervousness or shakiness unpleasant thoughts that persist poor appetite nausea or upset stomach trouble falling asleep urge to beat, injure, or harm</p> <p><b>Impact on Relationships and Daily Activities</b> difficulty with job performance difficulty getting along with family members difficulty getting along with friends difficulty accomplishing daily acts difficulty solving problems ability to handle oneself in a crisis</p> <p><b>Crime Prevention Behaviors</b> look for suspicious people avoid strangers look behind doors take protection at night</p> <p><b>Responses to CJ System</b> satisfaction with police eval of police crime prevention eval of police apprehensions willingness to go to court</p>	<p><b>Self-Blame for Victimization</b> kind of person I am -- lifestyle, habits kind of person who attracts trouble specific things I might have done to protect myself specific things I might have done to protect my property could have kept myself from victimization with extra effort did things that contributed to my victimization</p> <p><b>Blame to External Factors</b> just bad luck the offender inadequate police protection high crime in general unsafe neighborhood</p> <p><b>Self-Concept &amp; World Views</b> changed the way victim looks at life changed the way victim looks at others changed the way people look at victim</p> <p><b>Social Comparison</b> felt experience wasn't bad compared to what other victims go through felt lucky things didn't turn out worse</p> <p><b>Personal Control</b> felt incident was preventable or avoidable by choosing to "make an extra effort"</p>	<p><b>Fear of Crime</b> worried offender will return to harm self or family concerned about robbery/assault walking alone concerned about burglary when gone from home</p> <p><b>Perceived Vulnerability to Crime</b> feel likely to be victim of some type of crime in the next year feel likely to be victim of any crime in next year feel likely close relative or friend will be victim of crime in next year</p> <p><b>Perceived Vulnerability to Other Misfortunes</b> feel likely to be in auto accident in the next year feel likely to be hospitalized with illness feel likely to have a fire in own home</p> <p><b>Collective Efficacy</b> believes that taking action with neighbors will reduce local crime rate believes that getting together with block residents could city to make neighborhood improvements</p>
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whether the specially trained police officers actually behaved differently toward victims in the field. The original plan to observe police behavior via a ride-along program was denied by the police department because of union objections. As an alternative, victims were asked, during their telephone interview, to describe the behavior of the responding officers on nine dimensions relevant to officers' training. As shown in Table 4, results indicate that victims generally were unable to distinguish between the on-the-scene behaviors of trained and untrained officers. Only one of the nine measures was marginally significant -- victims who interacted with trained officers saw them as more inclined to express sympathy. Several other key measures registered change in the desired direction, but did not achieve statistical significance given the sample size and the amount of variability in victim responses. Hence, the available data provided only weak evidence of changes in police behavior toward victims at the scene of the crime.

*Police Interactions.* Finally, the general hypothesis was tested that the effects of the police intervention would be qualified by the characteristics of the victim and/or the nature of the crime incident. Interactions of the police intervention with demographic variables and type of crime were examined. First, interaction terms were created in preparation for multiple regression analysis. Demographic variables used in the analysis included gender, age, and race. Type of victimization also was used and three dummy variables were created (Assault/Non-assault, Burglary/Non-burglary, Robbery/Non-robbery). When regression analyses revealed significant standardized regression coefficients (betas) associated with the interaction terms (i.e. Treatment X Victim Characteristics or Treatment X Type of Victimization), an analysis of variance was then performed to generate means. If the findings were so weak that they could not withstand an ANOVA test, they were not reported here. In addition, to protect

Table 4  
Victims' Perceptions of  
Responding Officers: A Check  
on the Experimental Manipulation

Victims' Evaluation of Responding Officers	Experimental Condition		$\chi^2$
	Experimental	Control	
	(Percent Answering "Yes")		
a. Polite to you?	97.7	94.8	0.05
b. Seem rushed?	16.3	15.5	0.00
c. Showed interest in your feelings?	86.0	78.2	0.54
d. Sympathetic when you told them about your experience?	86.0	70.7	2.49
e. Talked about ways you could prevent future crimes?	36.6	36.8	0.00
f. Gave you chance to just talk about what happened?	83.7	71.9	1.32
g. Said something you didn't like or thought was improper?	9.1	12.1	0.02
h. Percent who felt police treated them "better than expected"	32.6	24.1	1.83
i. Percent "very satisfied" with the treatment received by police	68.2	50.0	4.33
j. Perceived length of officers' stay (in minutes)	24.3	23.3	t= 0.33
k. Perceived length of time officers spent "talking to you" (in minutes)	19.8	18.0	t= 0.67

\*N=101. All Chi-square and t statistics were nonsignificant at  $p < .05$  level.



against chance findings, tables are presented only for demographic variables that show significant effects across several variables.

Victims' Age. There was some evidence that the age of the victims interacted with the police intervention to affect victims' reactions (see Table 5). For example, contact with a specially trained officer at the scene of the crime had a positive effect on the attitudes of older victims toward the Detroit police, but had a negative effect on attitudes of younger victims toward the police. In addition, there was some evidence that contact with the trained officer led older victims to accept less responsibility for preventing the incident, and led younger victims to accept more responsibility. Beyond the experience of crime, older victims felt less vulnerable to future illness requiring hospitalization after contact with the trained officer, while younger victims felt more vulnerable to future illness.

Apparently, something about the police officers' behavior (as determined by the victim-focused training) produced more favorable reactions among older victims. Police officers in the experimental group may have been nicer to older victims and communicated different messages, or younger victims may have been less receptive to police responses.

Victims' Race and Gender. There were no interaction effects when combining the police intervention with either race or gender. That is, the effects that trained police officers had on victims did not change as a function of victim race or gender. Black and White victims responded similarly to the police intervention, as did female and male victims. This can be interpreted as good news given the appearance of race effects in previous evaluations (Skogan & Wycoff, 1987) and the present-day concern about police discrimination.

Type of Victimization. Burglary victims reported more difficulty being able to "solve problems" after being exposed to a trained officer, whereas non-burglary victims reported less difficulty. Non-robbery victims reported more self-

Table 5  
Interaction of Police Intervention and Victim's Age

**A. Victim's Attitudes Toward the Detroit Police\***

Experimental Condition	Victim's Age		Total
	Less than 38	38 or More	
Police Training	4.47 (17)	5.00 (14)	4.71 (31)
No Police Training	5.03 (17)	4.50 (25)	4.71 (42)
Total	4.75 (34)	4.68 (39)	4.71 (73)

\*Higher scores indicate more favorable attitudes toward Detroit police. Mean is shown with n in parentheses. Interaction test:  $E(1,69)=3.82$ ,  $p < .05$ .

**B. Victim's Attribution of Responsibility to Self for Victimization\***

Experimental Condition	Victim's Age		Total
	Less than 38	38 or More	
Police Training	2.00 (17)	1.36 (14)	1.71 (31)
No Police Training	1.53 (17)	1.80 (25)	1.69 (42)
Total	1.76 (34)	1.64 (39)	1.70 (73)

\*Higher scores indicate victims attributed more responsibility to themselves for not having taken precautionary measures to protect their property. Mean is shown with n in parentheses. Interaction test:  $E(1,69)=7.51$ ,  $p < .008$ .

**C. Victim's Feelings of Vulnerability to Future Illness and Hospitalization\***

Experimental Condition	Victim's Age		Total
	Less than 38	38 or More	
Police Training	2.29 (17)	1.71 (14)	2.03 (31)
No Police Training	1.47 (17)	1.92 (25)	1.74 (42)
Total	1.88 (34)	1.85 (39)	1.86 (73)

\*Higher scores indicate feelings of greater vulnerability to future illness requiring hospitalization. Mean is shown with n in parentheses. Interaction test:  $E(1,69)=4.40$ ,  $p < .05$ .

blame in relation to protecting their property prior to victimization, but robbery victims were unaffected. Consistent with this finding, nonrobbery victims were less satisfied with the police after contact with a trained officer, whereas robbery victims were more satisfied. A separate analysis of assault victims was deemed unreliable because of the small sample size. These findings are consistent with the training program, which gave more attention to the psychological impact of robbery. The results are also consistent with previous research indicating that police can have unintentional adverse effects on property crime victims (Rosenbaum & Bickman, 1991).

*Civilian Intervention.* The effects of the civilian home visits were examined using the same set of outcome measures shown in Table 3. The program was expected to reinforce the police intervention by showing concern for the victim's plight, providing a sympathetic ear, reducing self-blame, encouraging crime prevention behaviors, and referring the victim to community resources. The results were more promising than those from the police intervention. A number of significant findings emerged. Specifically, victims who received a home visit from a trained civilian volunteer exhibited the following effects:

- The self-blame responses were consistent with the program objectives. Victims reported more behavioral self-blame (i.e. specific things they might have done to protect themselves and their property), but reported less characterological self-blame (i.e. "I'm the kind of person who attracts trouble"). In addition, victims were more likely to blame the offender for what happened, but less likely to blame uncontrollable factors such as "an unsafe neighborhood" or "high crime in general."
- Consistent with these cognitive changes, victims receiving a home visit were marginally less fearful of being robbed or assaulted while walking in their neighborhoods at night.
- Victims receiving a home visit felt they would be "better able" to handle themselves in a crisis as a result of this victimization experience. They also reported less difficulty getting along with friends and family members.

- Some changes in symptomology were noted. Visited victims were less likely to report problems with poor appetite following the incident, but more likely to report an "urge to beat" (opposite the effect stimulated by the police officer).
- Visited victims were less likely to report having changed the way they look at life as a result of the incident.
- Crime prevention behaviors generally were unaffected, but visited victims reported being less likely to move out of the neighborhood in the next six months. Although they felt that more self- and property-protection measures were needed, they reported less confidence (than the control group) in the efficacy of collective neighborhood action for reducing crime rates.
- Visited victims were more satisfied with police services in general.

In summary, victims receiving a visit from civilians held a healthier set of cognitions about self-blame, were less fearful of personal crime, felt greater control over future crises, reported fewer physical symptoms and improved social relations, and were more satisfied with the police. We should emphasize that these findings are weak and some may be due to chance. However, the pattern is relatively clear and encouraging, and is consistent with the objectives of the program.

*Civilian Interactions.* We tested the general hypothesis that the effects of the civilian intervention would be qualified by the characteristics of the victim and/or the nature of the crime incident. Few interactions were uncovered. Significant and stable results are described below.

Victim's Age. The victims' age interacted with the civilian visit to impact several outcomes, which are shown in Table 6. Older victims who received a visit were more inclined to report that the responding officer demonstrated an interest in their feelings, and reported greater satisfaction with police services in general. In contrast, younger victims changed in the opposite direction after

Table 6  
Interaction of Civilian Intervention and Victim's Age

**A. Victim's Perception of Responding Officers' Interest in His/Her Feelings\***

Experimental Condition	Victim's Age		Total
	Less than 38	38 or More	
Civilian Visit	0.72 (43)	0.89 (45)	0.81 (88)
No Civilian Visit	0.84 (61)	0.70 (56)	0.77 (117)
Total	0.79 (104)	0.78 (101)	0.79 (205)

\*Higher scores indicate victims were more likely to report that responding officers showed an interest in their feelings at the scene of the crime. Mean is shown with n in parentheses. Interaction test:  $E(1,201)=6.40$ ,  $p < .01$ .

**B. Victim's Satisfaction with Police Services in General\***

Experimental Condition	Victim's Age		Total
	Less than 38	38 or More	
Civilian Visit	2.62 (45)	3.12 (50)	2.88 (95)
No Civilian Visit	2.73 (70)	2.53 (58)	2.64 (128)
Total	2.69 (115)	2.81 (108)	2.74 (223)

\*Higher scores indicate victims expressed greater satisfaction with police services. Mean is shown with n in parentheses. Interaction test:  $E(1,219)=6.12$ ,  $p < .01$ .

**C. Likelihood that Victim will Move in Next Six Months\***

Experimental Condition	Victim's Age		Total
	Less than 38	38 or More	
Civilian Visit	2.62 (43)	1.67 (45)	2.14 (88)
No Civilian Visit	2.39 (61)	2.20 (56)	2.30 (117)
Total	2.49 (104)	1.96 (101)	2.23 (205)

\*Higher scores indicate greater likelihood that victim will move out of the area in the next six months. Mean is shown with n in parentheses. Interaction test:  $E(1,201)=4.55$ ,  $p < .03$ .

exposure to trained civilians, i.e. reporting the officer was less interested in their feelings and reporting less satisfaction with police services. Consistent with this finding, older victims who received a civilian visit reported being less likely to move in the next six months, whereas younger victims reported being more likely to move. In short, the civilian visits apparently had a few positive effects on older victims and some negative effects on younger victims. The fact that the civilian volunteers tended to be older themselves may help to explain these results.

Victim's Race. White victims who were visited by a civilian reported less "emotional impact" from the victimizing incident but Blacks were not affected on this dimension by the civilian visit. However, White victims who were visited reported less satisfaction with police treatment at the scene, and Black victims reported slightly more satisfaction.

Victim's Gender. Male victims who received a civilian visit, when compared to those who did not, reported fewer post-victimization difficulties with friends and family members. Females, in contrast, tended to report more difficulties with friends and family members, although the differences were smaller. Whether the civilian home visit actually affected relationships with friends and family members or whether it increased awareness or willingness to express these difficulties is unknown.

*Interaction of Police and Civilian Interventions.* This evaluation also tested the general hypothesis that the combined effects of the two interventions might be greater than the effects of each of them separately. We hypothesized that having a personal visit from a supportive volunteer, in addition to the initial response by a specially trained police officer, would have a greater positive effect on victims than either treatment alone. The idea was that the volunteer could reinforce some of the same ideas about victimization presented earlier by the trained officer and

could offer additional referrals and resources. The small sample size (due to attrition from the police intervention) offered only a weak test of this hypothesis.

The results generally provided no support for the interaction hypothesis. The two interventions did not interact to affect victim's reactions on nearly all of the outcome measures noted above. The one exception was on the set of measures related to feelings of vulnerability to other misfortunes. When victims were exposed to both interventions they felt less vulnerable to future car accidents and house fires, and more vulnerable when they received only the police visit. Vulnerability to future crimes showed a different pattern: perceived vulnerability to future victimization was lowered the most when the police visited without a civilian follow-up. Because of the large number of statistical tests, some percentage of these results may be due to chance.

## **V. Conclusions and Policy Implications**

Police officers occupy a critical position in the victim helping network. The Detroit Police-Victims Experiment instructed police recruits and civilian volunteers to address the immediate needs of "forgotten" crime victims. The project tested the hypothesis that proper police treatment at the scene would influence favorably victims' psychological adjustment and feelings about the criminal justice system. This research also tested the hypothesis that civilian visits would make a difference in victim recovery and willingness to cooperate. The civilian results were the most promising. Although the relationships were weak, the findings suggest that utilizing volunteer residents is a promising strategy for improving the coping skills and recovery of crime victims during the weeks immediately following the incident. An affiliation with the police department not only provides legitimacy for civilians, but may enhance victims' evaluations of police performance.

The use of civilian volunteers to provide victim services would appear to be cost effective, but there are hidden costs and practical problems that must be addressed before implementation can be recommended. To make home visits, civilians must be recruited, trained, transported, and protected. Vehicular transportation can be provided at a cost or local volunteers can be recruited within walking distance. The Detroit volunteers expressed concern about their own safety in certain neighborhoods and requested armed escorts. Solutions to this problem must be considered in advance. Nonetheless, the volunteers in this experiment were very enthusiastic about the program and expressed high levels of satisfaction regarding their own participation.

The police results are more problematical. On the positive side, findings demonstrate clearly that police recruits can be instructed to modify their attitudes, perceptions, and behavioral intentions toward crime victims. However, there was little evidence that victims were affected by their contact with these trained



personnel. In addition, there is only weak evidence that victims noticed a difference in the behavior of trained and untrained police officers.

These findings have several interpretations. A first possibility is that classroom training translated into police behavior in the field, but victims did not perceive the difference and hence were unaffected. If this were true, it is appropriate to ask whether crisis theory is germane to victims who may not be experiencing an actual "crisis". Although there is little question that victims of assault, robbery, and burglary are seriously distressed by victimization, they are not likely to be traumatized to the same extent as rape or domestic violence victims. Consequently, crisis theory, which served as the basis for many of the study's predictions, may place too much emphasis on early treatment and crisis management techniques as determinants of recovery. Perhaps these noncrisis victims do not want or need the type of attention they received, and instead, preferred other types of assistance such as information or material support (cf. Mayhew, 1984; Skogan, Davis, & Lurigio, 1990). Notwithstanding the applicability of crisis theory, the police intervention should have registered change on other outcome measures. For example, the simple act of being polite to victims should have at least eventuated in higher ratings of police performance at the scene and/or more positive attitudes toward the police.

A second possibility is that trained officers did very little to help victims after they left the training academy, i.e., classroom training did not produce significant changes in the way they responded to victims. There are at least two factors that could account for the gap between initial good intentions and actual behavior. One is the classic problem of a weak intervention. The training program was only three days, which may have been insufficient to produce sustained changes in police behavior. If the change in police conduct was minimal or nonexistent, then

we should not be surprised by the lack of impact on victims or their failure to detect a difference in police responsiveness.

Another factor that may have undermined officers' ability to display sensitivity to victims is the social environment in which police work. On the job, police often become cynical, suspicious, and isolated from the citizens (Niederhoffer, 1969; Skolnick, 1966). Lessons learned at the training academy may provide only a feeble challenge to the social norms and pressures operating in the world of police. New recruits are assigned routinely to work with senior officers who quickly "show them the ropes," and no doubt, sympathy for crime victims is not a central feature of being a "good cop." As part of our training program, the instructors tried to "inoculate" recruits against this influence by making them aware of the pressure, and by describing the trained officers as a "new breed" of police with special skills and knowledge. Nonetheless, the rapid drop in attitudes and intentions after four months would suggest that the inoculation was largely unsuccessful. The decay effect also may have resulted from other forces in the officers' environment, such as adverse experiences with victims or citizen complainants or time constraints that force officers at the scene to return quickly to the in-service mode.

In any event, future research should include a process evaluation to gain a fuller understanding of how and why changes in police attitudes and knowledge failed to result in significant changes in police behavior or victim recovery. Although our request was denied in Detroit, riding along with police to observe directly their responses toward victims would provide firsthand evidence to answer basic question about implementation failure. A process study could focus on the delivery of services and the dynamics of police-victim interactions.

Based on our interpretation of the data, several recommendations can be made to increase the probability of success with victim-sensitivity training. The

dramatic decline in training effects (shown earlier in Figure 1) argues for refresher courses at several intervals after recruits have been on the job. Another approach is to weave victim training into the curriculum at various points during academy course work. A distributed schedule of learning might be more effective than a block of sessions at the end of the classroom experience when there may be less incentive to learn. Our decision to schedule the intervention at the conclusion of recruits' training was made to protect the integrity of the study by preventing control group contamination. We also scheduled the officer training at the end to avoid educating any recruits who would later drop out prior to graduation, and to increase recruits retention of material by capitalizing on recency effects.

Incorporating victim-sensitivity training into a field training program is an important strategy for insuring its full implementation (Goldstein, 1977; Terriot, Swansom, & Chamelin, 1977). Field training appears to be a useful tool for closing the gap "between the classroom and the real world of police work" (McC Campbell, 1987). Recruits should be assigned to field officers who are experienced in working with victims and who evaluate young officers on their responsiveness and sensitivity toward victims. Competence in dealing with victims must become an expected component of police officer performance and advancement.

Before throwing the baby out with the bath water, a few concluding comments are in order. The results of this study indicate that some burglary, robbery, and non-sexual assault victims suffer from adverse psychological consequences. Although relatively small percentages of them are seriously traumatized, their absolute numbers constitute a large proportion of overall crime victims. Thus, there seems to be a need to offer special services to these so-called forgotten victims of crime. Interventions must be selected and calibrated to match levels of victims' symptoms and needs. In most instances, forgotten victims will not require

the same kinds of attention given to rape and domestic violence victims. However, the data also suggest that they should not be ignored. Psychological reactions are a dominant response to criminal victimization, and differences between victims of more or less serious crimes are essentially a matter of degree rather than kind (cf. Cook, Smith, and Harrell, 1987). Police must be trained to be selective, i.e., they should direct their responses at the scene toward those most obviously affected and should make follow-up referrals for those most clearly in need of services.

While our programs generally produced null findings, it also should be noted that they were not harmful to victim recovery. Police programs can have an unbidden, deleterious effect on crime victims (Rosenbaum & Bickman, 1991; Skogan & Wycoff, 1987). Victims in the present experiment reported feeling better (on a number of dimensions) after civilian visits and the volunteer helpers found the experience rewarding. These findings and the findings of others (e.g., Cook, Smith, and Harrell, 1987) show that a cadre of volunteers can work amicably and effectively with police to provide victim support and reassurance.

The current evaluation raises some larger questions about policy and theory. In the case of the police, can we realistically expect long-term success from programs designed to modify the behavior of individual officers without simultaneously changing the larger organizational environment in which they operate? Police programs for victims will be most effective when they become institutionalized within departments and fully incorporated at different levels of police policy and procedures. In the case of victims, even if responding officers do everything "right" when dealing with victims, can we realistically expect a single interaction to exert a lasting impact on victims' lives? This question applies to the civilian intervention as well. One visit may be inadequate to alter a person's psychological status or influence their immediate social behavior. Moreover, the

influence of family and friends on victim adjustment may eclipse any measurable program effects (e.g., Davis & Brickman, 1990). Whether one construes these as theoretical or implementation issues, they represent legitimate concerns for both policy analysts and researchers who are interested in the future improvement of victim service programs.

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