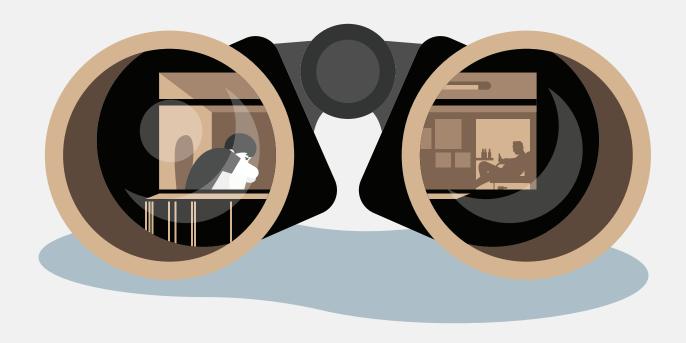
Surveying VICTIMIZATION EXPERIENCES AMONG YOUNG PEOPLE IN CUSTODY:

SYSTEMATIC REVIEW
OF METHODS AND TOOLS



A collaboration between
Thailand Institute of Justice
Griffith University





This publication is the product of collaboration between the Thailand Institute of Justice and Griffith Criminology Institute, Australia.

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Thailand Institute of Justice (TIJ) is a public organisation established by the Government of Thailand in 2011 and officially recognised by the United Nations Office on Drugs and Crime (UNODC) as the latest member of the United Nations Crime Prevention and Criminal Justice Programme Network Institutes in 2016. TIJ promotes the protection of human rights with the focus on vulnerable population in particular women and children in contact with the criminal justice system. In addition, TIJ focuses on strengthening national and regional capacity in formulating evidence-based crime prevention and criminal justice policy.

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FOREWORD

Violence against children is a common phenomenon in every society. But in many countries, too little attention is directed toward the problem due to the lack of awareness or the different standards and expectations about child-rearing embedded in each culture.

According to the World Health Organization, "Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust or power¹." Abuse and maltreatment not only impose a burden on public health, but its association with the increased risk of future delinquent behaviours also hamper the safety and stability of the entire society.

The Thailand Institute of Justice recognizes such linkage and has been planning a survey project to collect information on the prevalence of abuse among children detainees under the care of the Department of Juvenile Observation and Protection prior to their involvement in crimes, in order to understand the extent of traumatic experiences that might have influenced their delinquent behaviours. The knowledge gained will hopefully informed the designing of treatment programmes suitable to rehabilitate juvenile offenders who have been victimized, and at the same time, raise awareness among practitioners and policymakers in the field of public health, child welfare, and justice system about the need for a more integrated youth crime prevention policy.

This report is a necessary step to provide relevant background and detailed analysis of the survey instruments commonly used in childhood victimization surveys in different settings. By going through and comparing the screening measures, questionnaire, and protocols of each survey instrument, researchers will be able to select or design ones that are suitable to the specific context and that are aligned with international practice.

Professor Dr. Kittipong Kittayarak

Executive Director of Thailand Institute of Justice

K. Kotayalak.

^{1.} World Health Organization, Repot of the Consultation on Child Abuse Prevention, Geneva, 29-31 March 1999, World Health Organization, Social Change and Mental Health, Violence and Injury Prevention pp. 13.

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ACRONYMS

ACE-IQ Adverse Childhood Experiences International Questionnaire

CECA.Q Care and Abuse Questionnaire

CATS Child Abuse and Trauma Scale

CTQ Childhood Trauma Questionnaire

CTS Conflict Tactics Scale

CCMS Comprehensive Child Maltreatment

EV emotional violence

ETI-SF Early Trauma Inventory- Short Form

EtV exposure to violence

ICAST-C ISPCAN Child Abuse Screening Tool Children's Version
ICAST-P ISPCAN Child Abuse Screening Tool Parent's Version

ICAST-R ISPCAN Child Abuse Screening Tool Retrospective Version

JVQ Juvenile Victimization Questionnaire

LE labour exploitation

N neglect

PV physical violence

SASS Sexual Assault Symptom Scale
SES Sexual Experiences Survey

SE sexual exploitation
SV sexual violence

VACS Violence against Children Survey

WHO GSHS WHO Global School-Based Student Health Survey

YPICHS Young People in Custody Health Survey

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EXECUTIVE SUMMARY

The purpose of this report is to provide relevant background and explanatory information about violence against children (VAC), for the development of appropriate screening measures, survey instruments, and protocols for young people in custody. This information maps onto the analysis of survey instruments presented in Appendices 1 and 2 to the report. In these Appendices, key measures contained in fifteen (15) relevant childhood victimization surveys are set out, with a focus on highlighting the types and contexts for violence collected by different instruments. This enables the selection of appropriate measures to use in a survey of young detainees' experiences of violent victimization.

OVERVIEW OF REPORT STRUCTURE

The report begins by defining violence against children as encompassing four key types of abuse: physical abuse, sexual abuse, emotional abuse, and neglect. It provides a brief summary of the dimensions of these types of abuse, and notes the importance of collecting information about multi-type abuse or poly-victimization. The first section also contains a preliminary overview of the key contexts for violence and highlights some of the implications that flow from contextual understandings of violent victimization. The section ends by summarizing key findings regarding the effects of violent victimization on children's development and well-being.

Section Two of the report contains a brief overview of what is known about young offenders' experiences of victimization and the relationship this may have to their offending behaviours. This helps to focus on some of the key aspects of victimization that are likely to be important in understanding the experiences of young detainees, rather than youth populations more broadly. Again, this is useful background information to guide the selection of appropriate measures for the design of a tailored survey. In Section Three, individual factors and contexts for victimization are framed within a social ecological model. This enables the phenomena of violence and victimization to be

examined in more detail. The interactions between a young person's individual characteristics and their family, institutional, and socio-cultural contexts are described, with attention focused on factors relevant to victimization risks and experiences. In this section, particular attention is paid to assessing how well research findings drawn from non-Thai contexts might fit the specific socio-cultural realities of Thai youth. With this framework, survey instruments can be better assessed for cultural 'fit' which can help to flag those measures that require modification or adaptation to reflect cultural norms or specific social realities.

The report concludes with an overview and explanation of the analysis conducted with respect to the fifteen (15) survey instruments contained in Appendices 1 and 2. This includes: information about the range of surveys included and the selection process used; an assessment of what is and is not measured by these instruments; and a brief summary of issues regarding reliability, validity, and cultural 'fit'. Appendix 3 contains a more detailed summary of survey validity/reliability, which complements this section. Taken as a whole, the report serves as a practical tool with which to begin the process of designing and piloting a robust victimization survey for use among young detainees in Thailand.

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SECTION 1:

DEFINING CHILDHOOD VICTIMIZATION

Violence against children can take a number of forms, and can occur in a variety of settings and contexts. Some children may experience violence more often than others, and incidents of violence can be more or less severe (English et al., 2005). In addition, some children can experience multiple types of violence in their lives over time, at different developmental life stages (R. C. Herrenkohl & Herrenkohl, 2009; Maas, Herrenkohl, & Sousa, 2008; Thornberry, Ireland, & Smith, 2001). Indeed, for some children victimization can be better explained as a "condition" rather than as an event (Finkelhor, Ormrod, & Turner, 2007, p. 9).

These factors appear to be relevant to understanding the impact of violence on children, especially whether and how children experience victimization in ways that produce negative developmental outcomes for them (English et al., 2005; R. C. Herrenkohl & Herrenkohl, 2009; Maas et al., 2008). For this reason, in this section some of this complexity is teased out in order to provide a useful framework to assess the utility of different survey instruments measuring violence against children.

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TYPES OF VICTIMIZATION AND POLY-VICTIMIZATION

Research in the area of child maltreatment generally focuses on four main types of maltreatment: physical abuse, sexual abuse, emotional abuse, and neglect (English et al., 2005). Within each of these maltreatment areas, there are a number of different forms of abuse represented. For example, physical abuse can include many kinds of assaults. Sexual abuse can include sexual exploitation and trafficking, as well as molestation. Emotional abuse can include direct abuse towards a child, but also includes indirect abuse, such as being exposed to family violence. As children move into adolescence, dating violence and heightened levels of peer group victimization become more of a concern.

A child's experience of victimization can be differentiated by the severity and frequency of their exposure to one or multiple forms of maltreatment, and the effect of maltreatment can also vary depending on the developmental age of the child (Manly, Kim, Rogosch, & Cicchetti, 2001). Much research in the area of child maltreatment and its effects tended to focus on only one type of maltreatment at a time (for example, by exploring the effects of sexual abuse on offending, rather than all forms of abuse). More recently, findings from research that takes a developmental and longitudinal approach to the examination of child maltreatment have highlighted the importance of focusing on multi-type or chronic maltreatment (Elklit, Karstoft, Armour, Feddern, & Christoffersen, 2013; Hurren, Stewart, & Dennison, 2017). Many of the worst outcomes for children appear to be associated with this kind of poly-victimization.

In the light of this information, it is useful to consider employing instruments that collect information about a range of victimization experiences as well as the timing, frequency, and severity of abuse. This will help to build a comprehensive evidence base regarding the types and prevalence of victimization experienced in the Thai youth detention population. It will also provide information that can be used to guide the development of effective treatment protocols to assist victimized children.

COMMON SITES FOR CHILDHOOD AND ADOLESCENT VICTIMIZATION

Many examinations of childhood victimization focus on the perpetrator of violence (e.g. parent, peers, teacher, stranger). This draws attention to the different contexts and spaces within which victimization can occur. The family is a key context relevant to risk of victimization for children. Key contexts are provided also by other common sites where children can be found, such as peer groups and schools. For adolescents, intimate partner relationships also become relevant.

In addition, the broader socio-cultural contexts are occasionally highlighted. This can include assessing the prevalence of violence within a particular society, especially in war-torn countries or places with high levels of civil unrest. Macro-level examinations can also focus on assessing cultural norms about violence, as well as sub-cultural examinations of violence norms in specific communities or sub-groups of the broader population.

It is important to explore the sites or contexts relevant to child victimization, as these contexts can operate as both risk and protective factors for victimization. In addition, interventions to address violence can be targeted towards one or more of these domains if there is a careful appreciation of the way that these settings operate to amplify or moderate risk. This is explored further in section 3.

EFFECTS OF CHILDHOOD VICTIMIZATION

The literature demonstrates that experiences of victimization are linked to a range of negative developmental outcomes for children. Day et al. (2013) explain that abuse "may set a young person onto a non-normative developmental pathway toward a range of psychosocial, emotional, and behavioural problems" (p. 1). For example, child abuse is associated with an increased risk of violent and aggressive behaviour (Bender, 2010), depression (Kaufman et al.), and substance use (T. I. Herrenkohl, Huang, Tajima, & Whitney, 2003). In addition, prior experience of victimization also appears to heighten a young person's risk of being re-victimized (Widom, Czaja, & Dutton, 2008) and is also associated with offending behaviour (Jennings, Piquero, & Reingle, 2012; Lauritsen, Sampson, & Laub, 1991).

The explanations behind these associations are not yet clear, and work remains to explore what kinds of victimization drive which kinds of outcomes, but it is clear that childhood experiences of victimization put children at risk of a range of negative consequences. This also highlights the need to consider a child's response to victimization as a question of primary concern, rather than simply cataloguing incidences of violence. Although the survey instruments analysed in this report are integral to assessing whether or not children have experienced violent victimization, they do not fully assess the impact of this violence on the child. Instead, their use may need to be supported by the provision of more comprehensive mental health, behavioural, and psycho-social assessments and support.

SECTION 2:

YOUNG OFFENDERS' EXPERIENCES OF VICTIMIZATION

PREVALENCE OF THE VICTIM/OFFENDER OVERLAP

Studies of victimization experiences within juvenile offender populations demonstrate a substantial overlap between victimization and offending. The victim/offender overlap is particularly noticeable in youth detention populations. Within this population, victimization experiences appear to be both more common and more severe, and this appears to be correlated with deeper end deviancy (J. J. Chang, Chen, & Brownson, 2003; Jennings, Higgins, Tewksbury, Gover, & Piquero, 2010). This highlights the vulnerable and marginalized status of many children found in youth detention settings. However, the victim/offender overlap is not a universal feature of young offenders, and there is variability in role adoption even where similar factors are present (Schreck, Stewart, & Osgood, 2008). It is clear that there is, therefore, benefit in surveying young people's experiences of victimization within a youth detention context.

CO-VARIATES OF VICTIMIZATION AND OFFENDING

Although the existence of a victim/ offender overlap is clear, the mechanisms driving this overlap are less settled. In particular, it is difficult to ascertain the extent to which offending is connected to or driven by victimization experiences. Criminological research is only beginning to tease out the developmental timing of victimization and offending, and to explore the person/context interactions which heighten the risk of both factors occurring. Some aspects are clear,

however, such as the association of victimization and offending with other variables, including an individual's low self-control, the absence of parental monitoring, lower school commitment, and gender (J. J. Chang et al., 2003; Jennings et al., 2010; Schreck et al., 2008). These factors consistently appear to operate as risks for both victimization and offending, and of course can operate to protect against victimization and offending as well.

EXPLANATIONS FOR THE VICTIM/ OFFENDER OVERLAP

Various theories have been put forward to explain the victim-offender overlap. In particular, attention has been paid to the applicability of the following criminological theories: routine activities theory; Gottfredson and Hirschi's (1990) general theory of crime (concerned particularly with self-control); social bond and social learning theories; and sub-cultural theories (Jennings et al., 2012). For example, routine activity theories suggest that victimization and offending co-occur because the situations that place young people at risk of victimization are also situations that heighten their risk of offending - for example, by associating with delinquent peers in the absence of parental monitoring (Jennings et al., 2010). Explanations that highlight the relevance of self-control focus attention on the individual's response to external stimuli, and how this can place people at risk of both victimization and offending (Jennings et al., 2010; Schreck et al., 2008). Social bond or social control theories

highlight how children are more or less constrained by their social interactions and connections; for example, children with strong pro-social bonds or attachments are less at risk of being involved in offending, and are also more protected from victimization. Sub-cultural theories draw attention to the normative assumptions and prevalence of violence in the life contexts of some children, and demonstrate how these norms can make it more likely that children will both use violence and have it used against them (Baskin & Sommers, 2014).

Although each theoretical perspective places weight and significance on different kinds of factors, such as the influence of individual disposition, or peer groups, or cultural norms, they all demonstrate the importance of considering the individual, their social contexts, and the interactions that occur between these things. Verrecchia et al (2010) summarise this succinctly by highlighting how "maltreatment is connected to delinquency in the context of multiple ecological risks" (p. 210). To consider this more clearly, a social ecological framework is used in Section 3 to specifically explore each of these issues (individuals and social contexts) in terms of their relationship to victimization in more detail.

VICTIM/OFFENDER EXPLANATIONS IN THE THAI CONTEXT

The victim/offender overlap appears to be a consistent finding across a number of jurisdictions and cultural contexts, although there is variation in the way it manifests. For example, Jennings et al. (2012) explored studies from Bogota, Colombia, The Netherlands, and Canada, and highlighted some support for the overlap in most of these contexts. To date, there has been little specific exploration of this phenomenon in the Thai context, but it would appear that the existence of a similar overlap in the Thai youth detention population is a reasonable hypothesis. Cultural differences may, however, mean that the mechanisms driving the victim/ offender overlap may not operate the same way to shape Thai children's developmental pathways. For example, although there is a small body of work focused on Thailand that highlights similar factors and domains as being important to experiences of victimization (e.g. family, peer groups, schools, community/neighbourhood factors), it is also clear that these factors and domains are differently constituted and therefore probably operate differently to produce consequences for children (Pradubmook-Sherer, 2009; Pradubmook-Sherer & Sherer, 2016; Ruangkanchanasetr,

Plitponkarnpim, Hetrakul, & Kongsakon, 2005; Sherer & Sherer, 2014). It is important then to examine whether similar individual and contextual risk and protective factors appear within the life course of Thai victim/ offenders, compared to those found in research from other countries and cultural contexts. Moreover, it is important to consider how these factors may operate differently to shape Thai children's developmental outcomes over time.

To facilitate this exploration, a socialecological framework is used in Section 3 to explore the individual factors and social contexts that are relevant to childhood victimization. This examination focuses on providing information about three things. First, it provides a brief overview of the nature and risks for victimization experiences within each domain. Second, there is an assessment of the significance of cultural difference within each domain, and how this may shape victimization risks and experiences in each setting. Third, there is a brief discussion of the ability of different survey instruments to capture information with respect to these issues, in order to guide selection of appropriate instruments and/or measures.

SECTION 3:

UNDERSTANDING VICTIMIZATION THROUGH A SOCIAL ECOLOGICAL FRAMEWORK

OVERVIEW

The World Health Organization's (WHO) World Report on Violence and Health (2002) employed an ecological model as a useful framework within which to explore violence and to guide violence prevention programs. Ecological models of human development show how violence or victimization can be shaped and produced by complex interactions between multiple spheres of human life. The ecological model presented in the WHO report nests an individual within three key levels of a social ecology: relationships; community; and society. The WHO model was adapted from the McLeroy, Bibeau, Steckler, and Glanz (1988) ecological model for health promotion which separated an ecological system into five levels: intrapersonal; interpersonal; institutional; community; and public policy. For the purposes of the current report, we retained McLeroy et al's institutional level but otherwise followed the WHO report's model. This enabled us to explore institutional aspects relevant to victimization, given that the focus of the report is on the experiences of young people currently placed within justice institutions.

An ecological framework is helpful as it separates out the various contexts that may contribute to (or protect against) risk of victimization. This allows factors that arise at each level to be carefully explored. However, it also continues to place emphasis on the interactions and overlaps that occur within and across an individual's ecological system as a whole. In addition, the individual sits at the core of an ecological model, and the system's operation over time can both shape and be shaped by the individual. Together, this model helps draw attention to the way that factors arising at one level of the ecological system may impact on factors at other levels.

A particular strength of an ecological model is that it allows differences in culture to be examined at every level. For example, family contexts, community settings, and socio-political realities are understood to be dynamic and multidimensional contexts that can change over time and appear differently in different countries. This also allows the influence of these differences in culture to be understood in a more deeply contextualised way across the entire ecological system. Finally, this model is useful because it prompts the design of intervention programs that are appropriately tailored to the relevant system level (e.g. school, peer groups, or individual), but which also consider the way that these interventions might fit into and affect the broader ecological system.

INDIVIDUAL FACTORS

Individual characteristics such as a child's age, ethnicity, socio-economic status, mental health, and gender can be important to the risk of victimization in a number of different ways. For example, age is strongly associated with victimization risk, but it can operate as a risk for a number of different reasons. For example, there are relatively high rates of victimization among adolescent males (Sampson & Laub, 1993). This may be a product of neurological developmental issues which impair good decision-making and therefore the ability to adequately assess and protect against external risks, but it may also be that this life-stage makes its more likely that young men are enjoying greater social freedoms with greater opportunities for victimization. Younger children can also be vulnerable to victimization because their age makes them easier to victimize. Minority populations, and young people from disadvantaged areas (Schuck & Widom, 2005) are often over-represented as victims of violence, but it is difficult to tease out precisely how these factors relate to victimization. Similarly, conduct disorders,

mental illnesses, and substance use can make a person more vulnerable to abuse and more likely to be in risky situations. These factors may also interfere with a person's ability to react protectively. With respect to these kinds of factors, Posick and Gould (2015) state that "it appears that context matters, but how it matters is still up for debate" (p. 195).

Finally, gender is important to victimization, with boys more likely to be victimized than girls (Jennings et al., 2010; Schreck et al., 2008), although the social contexts driving male versus female victimization are important to consider. For example, in the Thai context, Pradubmook-Sherer and Sherer (2016) argue that the greater social freedom allowed to boys mean that they are "therefore exposed to more opportunities for being victimized" (p. 381). Girls, on the other hand, were more likely to be socialized to be compliant and less socially active, but appeared to be at substantial risk of physical and sexual violence in intimate partner relationships (Pradubmook-Sherer, 2010).

Individual FACTORS AND INSTRUMENTS

The individual factors collected within each instrument are set out in Appendix 1 to this report. It is clear that some of the instruments are much more comprehensive in this respect than others. It can be useful to include the range of information collected in, say, the YPICHS or VACS instruments, but it is also possible that this information is already collected within the detention centres and need not be assessed again. It is also clear, when looking at the instruments, that different instruments have a different focus here. For example, YPICHS reflects the fact that this is predominantly a childhood health survey, hence its attention to questions such as height and weight and nutrition. The VACS survey is the only survey to explore conformity and attitudes around gender norms. Responses to these questions may help to contextualize later questions about violence in intimate partner relationships, so it is useful to consider the overall integrity of each instrument as well as specific measures within them. It is worth noting that VACS is the only instrument to specifically frame questions to explore intimate partner violence.

INTERPERSONAL CONTEXTS PARENTAL AND FAMILY RELATIONSHIPS

Family is a key domain that features in studies of childhood abuse and neglect. In particular, domestic violence involving adult members of the family is associated with child victimization (Kantor & Little, 2003). Parental factors can be relevant to risk of victimization. For example, parental substance abuse, attitude towards child, levels of education and employment, and physical and mental health can both heighten and buffer against risk (Brown, Cohen, Johnson, & Salzinger, 1998). In addition, the nature of the parent-child relationship can mediate risk in other domains. For example, the presence

or absence of parental monitoring is relevant to victimization risk in peer and community settings (Jennings et al., 2010). This highlights the interconnected nature of risk and protective factors across multiple domains, and rein-scribes the usefulness of a social ecological framework to the investigation of childhood victimization.

Although there is little published research on the topic, it appears that Thai families may operate in similar ways in terms of their relationship to child victimization. For example, Pradubmook-Sherer and Sherer (2016) demonstrated that violence within the family was related to higher victimization rates. They also noted that, within Thai society, family was still a powerful "source of codes of behaviour and ethics" acting in a protective manner against some risks (p. 382). It is important to consider, however, the ways in which family norms and behaviours may be interpreted as violence differently across cultural settings and contexts when assessing childhood victimization experiences within the family.

Family factors WITHIN THE INSTRUMENTS

Most of the instruments collect some information about parental and family factors. ICAST-C includes a broad assessment of children's experiences of 'discipline' as well as an exploration of children's exposure to violence within the home. The use of the term discipline is less value-laden than violence, and may help to overcome some of the issues around differences in cultural understandings in this context. ACE-IQ examines a broader range of parental factors that may be relevant to victimization risk, and also assesses children's exposure to violence (not just direct victimization) within the home. VACS examines multiple types of violence within a home setting, although it asks fewer general questions about parental factors. Interestingly, both VACS and ACQ-IQ include questions about sibling violence as well.

VIOLENCE AND PEER GROUPS

Young people's peer groups can be relevant to their risk of victimization. A child may experience direct victimization from peers, but peer group membership can also place children at greater or less risk of victimization. A 'delinquent' peer group may place a child in situations where victimization risk is higher, and may also have a greater tolerance for violent behaviour as a feature of the group's sub-cultural norms (Baskin & Sommers, 2014; Jennings et al., 2010). Peer groups can also offer protection against violence as well. Peer group attitudes and the opportunities for engagement in risky situations are also likely to be culturally determined to an extent. For example, there may be different adolescent contexts relevant to rural youth compared to urban youth, which may make urban youth more at risk of victimization. This draws attention to place and neighbourhood too, and highlights the interconnection between levels of a social ecological model.

In the Thai context, peer groups appear to operate similarly as sites for violence, and as risk and protective factors, as they do in other research contexts. For example, Chokprajakchat, Kuanliang, and Sumretphol (2015) found quite high rates of peer victimization in their survey of Thai school children's experiences. Similarly, Sherer and Sherer (2014) found that "peer characteristics, their behaviour and their advice were the most related risk factor to witnessing violence" (p. 583). In addition, in their study of victimization among high school students in Thailand, Pradubmook-Sherer and Sherer (2016) found negative peer behaviours related to higher rates of victimization, whereas positive peer behaviours, such as volunteering in the community, appeared to act protectively.

Peer issues WITHIN THE INSTRUMENTS

VACS and YPICHS explore some aspects of peer networks, such as numbers of friends and connectedness to peers. VACS, ACE-IQ, and JVQ examine violence inflicted by peers, with VAC exploring this with respect to the broadest range of victimization types (i.e. physical and sexual violence and sexual exploitation). Sometimes, information about perpetration can highlight the presence of peer victimization, but this is not always clear. For example, ICAST-C allows respondents to select child/adolescent when indicating the perpetrator of violence across many types of violent experiences, and although the relationship between victim and offender is not clearly established, this can yield a broad range of relevant data in respect of victimization experiences.

INSTITUTIONAL CONTEXTS

Institutional contexts, such as schools, can be sites of bullying, violence and abuse by peers, teachers and other adults, but can also operate as places of protection and intervention for children suffering abuse or violence in other settings. School contexts appear frequently in the literature on childhood victimization, and school performance and connectedness is often associated with victimization risk. For example, poor school performance was related to adolescent risk behaviours among Thai adolescents (Ruangkanchanasetr et al., 2005) and Pradubmook-Sherer and Sherer (2016) found that the higher the child's level of educational attainment, the lower their rate of victimization.

Similarly, there are other institutions that may have a role to play in children's experiences of victimization, such as the operation of criminal justice systems with respect to young offenders. In countries where child protection and youth justice systems sit separately from each other, there appears to be considerable overlap in the populations of children who transition from being wards of the state to being prisoners of the state (Stewart, Livingston, & Dennison, 2008). There are a variety of explanations for this, including the way that childhood experiences of maltreatment have shaped children's behavioural development in anti-social directions. In addition, however, this highlights the role potentially played by institutions themselves in perpetuating victimization.

Institutional issues WITHIN THE INSTRUMENTS

VACS asks whether or not a teacher has inflicted physical. sexual, or emotional violence upon a child and also asks similar questions with respect to the police. YPICHS contains questions about physical violence from police and in custody. In addition, there are a number of instruments that ask questions about school connectedness, such as whether or not the respondent skipped classes or had support from peers. These are detailed in Appendix 1: Institutional. Many of the factors relevant to peer group victimization may also be connected to school experiences more broadly. In addition, most instruments include a question about level of educational attainment in their section on basic demographics, and VACS and YPICHS include questions about school attendance. YPICHS also asks whether children live in residential care, although this question reflects Australia's child protection system and may not translate to the Thai system effectively.

COMMUNITY AND SOCIETY

Broader community contexts are also important to consider. For example, the quality of the neighbourhood environment, and the risks associated with high crime areas or places where social norms have broken down are often highlighted as relevant to childhood risk of victimization (Baskin & Sommers, 2014; Schuck & Widom, 2005; Widom et al., 2008). Similarly, different community standards and routine activities are important to consider. For example, broader social groups such as religious organisation or extended family networks may play a role in monitoring and mediating youth activities (Sherer & Sherer, 2014). As with all contexts, these factors may operate differently to either heighten or ameliorate risk for some children. It is also clear from the preceding analysis that most other settings and contexts, such as family and institutional settings or peer group and intimate partner relationships, are shaped by broader socio-cultural influences. This can range from the economic and regulatory structures of the country (e.g. wealth and poverty), to

the strength and integrity of social norms (or the breakdown of social norms).

Some of these issues appear to be relevant to consider in the Thai context. For example, the vulnerability of children to trafficking and sexual exploitation (Krug et al., 2002), the existence of economic inequalities and differing norms across the urban/rural divide (Klausner, 2002; Pradubmook-Sherer & Sherer, 2016; Sherer & Sherer, 2014), changing social norms and expectations across generations (Sherer & Sherer, 2014), and the role of religion in different parts of the country (Pradubmook-Sherer & Sherer, 2016) are all potentially important issues bearing on childhood victimization risks. In addition, the heightened risk of violence at a macro-level (e.g. terrorism, civil unrest) is worth noting. In line with Pradubmook-Sherer and Sherer (2016), it can be noted that ongoing violent situations, such as in the southern provinces of Thailand, have an effect on victimization rates and risk more generally. They argue that this is due both to the experience of direct victimization and because of the way that "living in a terrorized society may legitimize violence in general, thus leading to more violent acts and victimization among citizens" (p. 380).

Socio-cultural contexts WITHIN THE INSTRUMENTS

VACS asks about physical and sexual violence, and sexual exploitation by members of the community more broadly, as well as exploring broader issues such as perceptions of community safety and access to social services. Both ICAST-C and ACE-IQ ask about children's experiences of community violence, war, and other forms of collective violence, with ACE-IQ providing some comprehensive questions in this respect. Sexual and labour exploitation is specifically examined only in the Mekong Challenge instrument. However, some questions regarding sexual violence in the ICAST-C instrument may suggest forms of sexual exploitation, such as whether or not children have been forced to make a sex video or photographs. ICAST-C asks about the community environment (e.g. big city, small town), which may be a useful way of exploring variability of victimization experiences within a country, especially where different environments may reflect different social norms. On the whole, however, it may be useful to draw on other research and data to explore macro-level factors, and to connect these data with victimization data in order to comprehensively examine some of the issues that arise at this level of a social ecological model.

SECTION 4:

EXAMINING THE VIOLENCE AGAINST CHILDREN (VAC) INSTRUMENTS

In addition to eight instruments² initially selected by the Thailand Institute of Justice, seven instruments³ were suggested by the Griffith research team to be included in the review. These additional instruments were selected on the basis of whether they appeared in more than one of recent review articles on VAC instruments with a systematic search (Burgermeister, 2007; Edleson et al., 2007; Stover & Berkowitz, 2005; Tonmyr, Draca, Crain, & MacMillan, 2011).

VACS, GSHS, YPICHS, ACE-IQ, Mekong Challenge, ICAST-P, ICAST-R, ICAST-C. Note the VACS used is an English version
of the core questionnaire. There are slight changes per country to handle cultural context and translations (c.f. UNICEF, 2014a).
The Household Survey is excluded because it is irrelevant to VAC.

^{3.} CECA.Q, CATS, CTQ, CTS, CCMS, JVQ, and ETI

THE FOLLOWING FIFTEEN INSTRUMENTS WERE EXAMINED

FULL NAME	ACRONYM	AVAILABILITY
Violence against Children Survey Female Questionnaire	VACS Female	provided by the Centers for Disease Control and Prevention (CDC)
Violence against Children Survey Male Questionnaire	VACS Male	provided by the Centers for Disease Control and Prevention (CDC)
WHO Global School-based Student Health Survey	GSHS	available at http://www.who.int/chp/gshs/ methodology/en/
Young People in Custody Health Survey	YPICHS	available at http://www.justicehealth.nsw.gov.au/publications/ypichs-full.pdf
Adverse Childhood Experiences International Questionnaire	ACE-IQ	available at http://www.who.int/violence_injury_prevention/violence/activities/adverse_childhood_experiences/en/
Mekong Challenge		available at http://www.ilo.org/wcmsp5/groups/public/asia/ro-bangkok/documents/publication/wcms_bk_pb_69_en.pdf
ISPCAN Child Abuse Screening Tool Parent's Version	ICAST-P	provided by the International Society for the Prevention of Child Abuse and Neglect
ISPCAN Child Abuse Screening Tool Retrospective Version	ICAST-R	provided by the International Society for the Prevention of Child Abuse and Neglect
ISPCAN Child Abuse Screening Tool Children's Version	ICAST-C	provided by the International Society for the Prevention of Child Abuse and Neglect
Care and Abuse Questionnaire	CECA.Q	available at http://cecainterview.com/
Child Abuse and Trauma Scale	CATS	available at http://www.sciencedirect.com/science/article/pii/S0145213494001316)
Childhood Trauma Questionnaire	CTQ	available at http://www.midss.org/sites/default/files/trauma.pdf
Conflict Tactics Scale	CTS	available at https://www.icpsr.umich.edu/icpsrweb/ PHDCN/descriptions/cts-parent-child-w1-w2-w3.jsp
Comprehensive Child Maltreatment	CCMS	available at http://www.tandfonline.com/doi/pdf/ 10.5172/jfs.7.1.7
Early Trauma Inventory	ETI-SF	available at http://www.psychiatry.emory.edu/documents/research/ETISR-SF%20Adult%20traumas.pdf
Juvenile Victimization Questionnaire	JVQ	available at http://www.unh.edu/ccrc/juvenile_ victimization_questionnaire.html

ANALYSIS OF THE INSTRUMENTS

To enable a robust comparison of all of the survey instruments, the measures contained within each instrument were extracted and presented in Appendix 1 to this report using the following framework. First, the surveys collected in terms of individual factors, such as age, religion, and education levels were assessed. Then, additional demographic information collected by the instruments, such as household income and parental factors was highlighted. The types of victimization

the instruments focused on were noted; this is specifically whether the violence was physical, emotional, or sexual; whether information about neglect and other forms of child maltreatment was captured; and whether the instruments examined other types of violence such as intimate partner violence, peer violence, community violence, exploitation, and exposure to violence. This makes it easier to assess the strengths and weaknesses of the different instruments in terms of their ability to capture certain types of information. It also makes possible the selection of a range of measures from different instruments to create a bespoke instrument that meets the specific needs at hand.

DISCUSSION OF INSTRUMENTS: STRENGTHS AND WEAKNESSES

There are some observations to be made about the instruments as a whole. First, the focus of the instruments is predominantly on collecting information about whether or not children have experienced victimization and on the types of victimization experienced. Less attention is paid to the contexts of violence. Some instruments ask for information about the perpetrator of violence (e.g. parent, family member, peer etc.), but even this is not a universal feature. This is the focus of the analysis in Appendix 2, where an attempt is made to compare the instruments in terms of how they collect information about the perpetrators and sites of violence.

In addition, it is important to note that not all the instruments collect information about life-time experiences of victimization, and that there is considerable variation in the way that instruments explore the frequency of victimization. Some are limited to specific timeframes. Given that poly-victimization appears to be an issue of importance to youth offender populations, this is an important consideration. This is how time frames are reflected in each instrument:

INSTRUMENT TIME PERIODS/FREQUENCY **VACS** Ever happened, happened in last 12 months, how old were you last time **ICAST** Frequency (e.g. once a week or more often) **CCMS** How frequently happened **CATS** When you were child or teenager, did happen CTS In the past year, did happen **GSHS** Frequency (e.g. 0 times) CTQ Prior to the age of 17, ever happened ACE-IQ Frequency (e.g. when growing up, during the first 18 years of your life - always, most of the time) CECA.Q Ever happened **YPICHS** Frequency ETI-SF Ever happened (before the age of 18) JVQ Ever happened (before the age of 18)

In addition, assessments of the seriousness of victimization are sometimes not included, or are difficult to make on the basis of the instruments' questions. There are some exceptions to this; for example, instruments such VACS and CECA.Q contain questions about whether children are injured as a result of violence, and some instruments contain scales to assess severity of violence that can then be weighted to assess the depth of a child's overall victimization experience. Part of the issue here is that seriousness is a difficult concept to operationalize, depending on whether this is understood as objective (e.g. force or scale of the violent action) or subjective seriousness (e.g. the impact on the child). This underscores the point that victimization surveys can be helpful tools but are not always effective instruments to assess the effects of victimization on children.

RELIABILITY AND VALIDITY OF THE INSTRUMENTS, AND CULTURAL 'FIT'

Since none of the instruments reviewed in this report have been employed in Thailand, special consideration must be given to questions of reliability and validity of these instruments in the Thai context, particularly in relation to the following issues:

- Determination of social and cultural "fit" of instrument questions
- Determination of overall reliability and validity of instruments, specifically in the Thai context, and more broadly in the Southeast Asian context
- Translation of instruments into Thai or other regional languages

Existing research on the social and cultural "fit" of VAC instruments employed in non-Western or Southeast Asian countries is minimal. However, there is existing research in Thailand on youth victimization in terms of relevant cultural and social factors, which has been discussed above. Research from other Asian countries such as Taiwan (Chen and Avi Astor, 2009) has also found that Western risk models have been effective in predicting school violence and victimization in young people in Taiwan. As such, our assessment is that there is some limited research on the "transferability" of such instruments, but not enough to determine problems of reliability or validity in relation to cultural fit and the specific social and cultural factors clearly relevant to Thai youth.

All victimization surveys contain inherent problems related to validity and reliability. These problems are more pronounced when instruments are adopted or used in social or cultural settings different from those in which they were created. the following steps should be taken to ensure that potential problems with reliability and validity are addressed to the fullest extent possible prior to the use of the survey for youth in custody.

Partial or full adoption of any victimization survey instrument should be guided by parties with significant experience in large scale victimization survey design, research, methodology and delivery. Up-front costs for this will inevitably be offset by the minimization of serious reliability or validity problems that will likely arise later in the project, if these issues are not adequately addressed prior to the delivery of the instrument to youth in custody.

Staff involved in the adoption and implementation of the victimization survey instrument should, as much as possible, familiarize themselves generally with the theoretical, methodological, and practical issues related to survey design, and more specifically to those issues of victimization surveys. We suggest that the UN-ECE Statistical Division's Manual on Victimization Surveys (https://www.scribd.com/document/41169741/Manual-on-Victimization-Surveys) would be particularly useful in terms of considering questions of method, reliability and validity, and cultural "fit" for the adoption and implementation of an instrument to be used for youth in custody.

Whatever instrument that is adopted must be thoroughly pilot-tested for issues of reliability and validity, as well as for cultural "fit".

Appendix 3 contains a selection of literature regarding the reliability of instruments as well as some commentaries about their use and adaption in different contexts. It does not appear that any of the instruments reviewed has previously been adapted for use in the Thai context, but the following instruments have been tested beyond the Western context:

INSTRUMENT	COUNTRIES
VACS	Swaziland, Tanzania, Kenya, Zimbabwe, Haiti, Cambodia, Malawi (Chiang et al., 2016)
ACE-IQ	Saudi Arabia (Almuneef, Qayad, Aleissa, & Albuhairan, 2014)
ICAST	Brazil (Silveira & Grassi-Oliveira, 2016), South Korea (Lee & Kim, 2011), Qatar and Palestine (Eldeeb et al., 2016), Saudi Arabia (Al-Eissa et al., 2015), Taiwan (H. Y. Chang, Lin, Chang, Tsai, & Feng, 2013)
CTQ	Iran (Garrusi & Nakhaee, 2009), South Korea (Kim, Park, Yang, & Oh, 2011)

One important issue to consider when using the instrument in any different cultural context is the challenge of translation. The back-translating strategy is commonly used when translating instruments from the original language (e.g. English) into the target languages (e.g. Thai). It generally involves the following procedures: (1) to develop an instrument in the original language; (2) to translate the instrument into the target language; (3) to back-translate the target language into the original language: (4) to check the consistency in grammar and concepts by comparing the original and translated instruments; and (5) to conduct a pilot to test validity and reliability (e.g. Brislin 1970; Runyan et al. 2009; Sundborg et al. 2012).

Less research exists on challenges in back-translating instruments in the field of violence against women/children (or victimization more broadly). However, studies in other areas, particularly in nursing, show problems of this method. One of the significant challenges is the equivalence between the original and the translated instruments. Simply translating from the original language into the target one may sometimes be insufficient or change meanings of concepts or words (Hilton and Skrutkowski 2002; Wang, Lee and Fetzer 2006). To overcome this problem, it is vital to involve bilinguals in the translation process and monolingual experts in the review process (see Cha, Kim and Erlen 2007).

CONCLUSION

The Violence Against Children (VACS) survey instrument is clearly the most comprehensive survey instrument of all survey instruments reviewed. It collects information about various types of violence and neglect, within a number of different contexts, and provides information about frequency and life-course experience. It has also been successfully used in a variety of different cultural contexts. However, from a practical point of view, VACS is a fairly long and complex instrument that requires specialised training and skills for interviewers (UNICEF, 2014b). It may not be easy to implement as a frequently used survey in a custodial environment. On the other hand, ACE-IQ and ICAST are both instruments that have been developed for use in a variety of different cultural contexts, and their validity and reliability have been confirmed in different countries. These instruments are both careful to frame questions in ways that avoid many value-laden interpretations and to appropriately reflect local conditions. In addition, ICAST has a very user-friendly manual that helps to ensure the robust and ethical administration of the survey. As outlined in Section 3, there are various strengths and weaknesses for each instrument, making it useful to assess the various measures provided in the attached Appendices and to examine each instrument as a whole to determine the factors that are most important to the needs.

In conclusion, it is worth considering whether there is an intention to use the survey instruments under review here to facilitate a regular survey in custody of the victimization experiences of young offenders, or whether the intention is to survey the population infrequently in order to gather information for macro-level use only. Research from UNICEF (2014b) on the assessment of quantitative indicators and assessments of VAC, which is probably the most comprehensive overview to date on these tools, suggests that many current survey instruments lack reliability or validity in terms of the purpose and context of their use. Many of

the survey instruments they assessed were developed to identify VAC in specific or targeted problems in youth groups or subgroups, not for general populations. Conversely, some of these instruments have been used to infer levels or types of VAC for general populations of young people from instruments delivered to targeted populations.

As such, it should be clear that to use the VAC instruments more generally in Thailand, the researcher must first identify the specific purpose and the targeted population of the instrument. If the purpose of the proposed instrument is to regularly assess prevalence and experiences of victimization within the cohort, and to use this information to guide the development of individual level treatment and support for young detainees or youth under supervision, then such instrument needs to be developed or chosen from the identified instruments for this purpose, and not for the purpose of attempting to measure or ascertain VAC within the general youth population in Thailand. For this purpose, instruments

such as the VACS may be less practical than a shorter (but less comprehensive) instrument, such as ACE-IQ or ICAST. However, if the purpose is to use the instrument to explore childhood victimization more broadly and to use findings to influence macro-level change, broader policy goals, or general risk areas for young people, then it may be useful to use a longer, more comprehensive survey such as VACS. It may also be useful to build a specific instrument for this purpose, although the advantages of ACE-IQ, VACS, and ICAST are that they are used widely enough to facilitate useful cross-jurisdictional comparisons.

Either way, it is possible over time to build a more contextualized understanding of children's experiences by continuing to assess findings from these surveys against macro-level examinations of the prevalence and meaning of violence in Thai society, and to frame further targeted research around violence against children in society more broadly.

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APPENDIX 1: MEASURES AND TYPES OF VIOLENCE

Age

INDIVIDUAL

Gender Country of origin Race/ethnicity Religion Education level School attendance Literacy status Having disability Attending special school or class Employment status Income Participation in vocational training Type of accommodation Residential stability Living in residential care Marital status Living with spouse/partner Parentship Experiencing pregnancy Conformity/attitude toward gender norm/role about domestic violence Conformity/attitude toward gender norm/role about domestic violence/sex Attitude toward parental violence Experience of custody Drinking alcohol Using illegal drug (e.g. marijuana, amphetamines, cocaine, inhalants) Receiving treatment for drug or alcohol (methadone or buprenorphine program) Smoking cigarette/tabacco (Physical) health status Height and weight Nutrition Victimization experience Experiencing physical (serious) injury Dental health condition Mental health issues Taking medication Feeling loneliness/worrying about not being able to sleep Suicidal behaviour/attempt and self-harm

Traumatic sexual experience

Tattooing/body piercing
Weight/body image

Knowledge of sexually transmitted infections

Sexual history and risky sexual behaviour

Avoiding eating to lose weight or related behaviour History of having boyfriend/girlfriend/romantic partner Experience of sexual behaviour (vaginal, oral, anal)

Experiencing sexually transmitted infections

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INDIVIDUAL

OTHER DEMOGRAPHICS

Attending health education/programme

Help-seeking behaviour

Extent of daily physical activity (e.g. attending physical education, sitting and watching television, playing computer games)

Household income

Household utility condition (e.g. electricity)

Poverty (not paying full amount of gas, oil, electricity)

Living environment (living with whom)

Perceived safety in family/home

Parent age

Parent country of origin

Parent education level

Parent employment status

Parent-child relationship

Divorce of parents/parent-to-parent relationship

Custodial interference/family abduction

Loss of parent(s)

Parent monitoring/supervision

Parental incarceration

Parental smoking

Parental substance abuse problem (e.g. alcohol, illegal drug)

Family member with physical, mental or emotional problem

Victimization of family member/household

Number of friends

Connectedness with friends (e.g. talking about problems)

Existence of deviant peer

INTERPERSONAL

PHYSICAL VIOLENCE

Experiencing physical violence (being punched, kicked, whipped, beaten with object)

Experiencing physical violence (being choked, smothered, tied to drown, burned intentionally)

Experiencing physical violence (being threatened with knife, gun, other weapon)

Experiencing physical violence (being shaken hard)

Experiencing corporal punishment (privileges or money taken away)

Experiencing corporal punishment (being forbidden from going out)

Experiencing corporal punishment (being locked out of home)

Experiencing corporal punishment (being kicked)

Experiencing corporal punishment (being shaken aggressively)

Experiencing corporal punishment (being pushed or shoved)

Experiencing corporal punishment (being slapped on face or on back of head)

Experiencing corporal punishment (being hit on head with knuckles)

Experiencing corporal punishment (being hit with thrown object)

Experiencing corporal punishment (being spanked on bottom with bare hand)

Experiencing corporal punishment (being hit elsewhere (not buttocks) with object)

Experiencing corporal punishment (being hit over and over again with object or fist)

Experiencing corporal punishment (being choked to prevent from breathing)

Experiencing corporal punishment (being burned or scalded or branded)

Experiencing corporal punishment (hot pepper, soap, or spicy food put in mouth (to cause pain))

Experiencing corporal punishment (being locked up or tied to restrict movement)

Experiencing corporal punishment (ear twisted)

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INTERPERSONAL

PHYSICAL VIOLENCE

Experiencing corporal punishment (hair pulled)

Experiencing corporal punishment (being pinched to cause pain)

Experiencing corporal punishment (being forced to stand, sit or kneel in position that causes pain)

Experiencing corporal punishment (being put in timeout)

Experiencing corporal punishment (being stopped from being with other children to make feel bad or lonely)

Experiencing corporal punishment (belonging stolen, broken, or ruined)

Experiencing mistreatment or bullying by brother/sister

EMOTIONAL VIOLENCE

Experiencing emotional violence (being told not loved, not deserved to be loved)

Experiencing emotional violence (being wished never been born or dead)

Experiencing emotional violence (being ridiculed, put down e.g. by saying stupid or useless)

Experiencing emotional violence (being yelled, screamed or sweared at, insulted or humilated)

Experiencing emotional violence (threatened with abandonment or being thrown out)

Experiencing emotional violence (being ignored)

Experiencing emotional punishment (being shouted, yelled, screamed at very loudly)

Experiencing emotional punishment (being insulted by calling dumb, lazy, other names like that)

Experiencing emotional punishment (being ignored)

Experiencing emotional punishment (being blamed for misfortune)

Experiencing emotional punishment (being embarrassed publicly)

Experiencing emotional punishment (being said wished dead or never born)

Experiencing emotional punishment (threatened with being left or abandoned)

Experiencing emotional punishment (being threatened to invoke harmful people, ghosts, evil spirits)

Experiencing emotional punishment (being threatened to hurt or kill)

Experiencing emotional punishment (being referred to by skin colour/gender/religious or culture in hurtful way)

Experiencing emotional punishment (being embarrassed due to being orphan or without parents)

Experiencing emotional punishment (being threatened with bad marks that does not deserve)

SEXUAL VIOLENCE

Experiencing sexual abuse (physically forced sex)

Experiencing sexual abuse (pressured sex through harassment, threats, manipulation)

Experiencing sexual abuse (touched without permission)

Experiencing sexual abuse (forced to touch body in sexual way)

Experiencing sexual abuse (attempted sex but not successful)

Experiencing sexual abuse (forced to look at sexual intercourse)

Experiencing sexual abuse (forced to look at private part or looked at yours)

Experiencing sexual abuse (sex video or photographs taken when did not want to)

Experiencing sexual abuse (upset by being spoken to in sexual way or written sexual things)

Experiencing sexual violence at workplace

NEGLECT

Experiencing physical neglect (not being given enough food)

Experiencing corporal punishment (meal withheld as punishment)

Experiencing physical neglect (being made to wear dirty, torn, inappropriate clothes)

Experiencing physical neglect (being injured due to lack of supervision)

Experiencing physical neglect (not being provided a safe place to live even though affordable)

Experiencing physical neglect (not being provided physical care)

Experiencing parental mistreatment (being given drugs or alcohol)

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INTERPERSONAL

NEGLECT

Experiencing emotional neglect (not being provided emotional care)

Experiencing educational neglect (not being sent to school)

Experiencing medical neglect (not being taken care of when sick or injured)

INTIMATE PARTNER VIOLENCE

Experiencing intimate partner violence (being punched, kicked, whipped, beaten with object)

Experiencing intimate partner violence (being choked, smothered, tried to drown, burned intentionally)

Experiencing intimate partner violence (being threatened with knife, gun, other weapon)

PEER VIOLENCE

Experiencing peer violence (being punched, kicked, whipped, beaten with object)

Experiencing peer violence (being choked, smothered, tried to drown, burned intentionally)

Experiencing peer violence (being threatened with knife, gun, other weapon)

Bullying victimization

COMMUNITY VIOLENCE

Experiencing violence from community member (e.g. teacher, police, employer, religious or community leader, neighbour, other adult) (being punched, kicked, whipped, beaten with object)

Experiencing violence from community member (e.g. teacher, police, employer, religious or community leader, neighbour, other adult) (being choked, smothered, tried to drown, burn intentionally)

Experiencing violence from community member (e.g. teacher, police, employer, religious or community leader, neighbour, other adult) (being threatened with knife, qun, other weapon)

Experiencing physical violence at workplace (being beaten)

Experiencing emotional violence at workplace (being shouted, sweared at)

EXPLOITATION

Sexual exploitation (e.g. paid sex)

Experiencing labour exploitation at workplace

EXPOSURE TO VIOLENCE

Witnessing physical violence at home (parent or household member being slapped, kicked, punched or beaten up)

Witnessing physical violence at home (parent or household member being hit or cut with object)

Witnessing physical violence at home (adults in home use knife, gun, stick, rock or other things to hurt or scare someone else in home)

Witnessing emotional violence at home (parent or household member being yelled at, screamed at, insulted, humiliated)

Witnessing sexual mistreatment/abuse of another family member

Witnessing violence (murder)

Witnessing violence in neighbourhood/community (someone being beaten up)

Witnessing violence in neighbourhood/community (someone being stabbed or shot)

Witnessing violence in neighbourhood/community (someone being threatened with knife or gun)

INSTITUTIONAL

Missing classes or skipping school

Experiencing school suspension

Support from peer students

COMMUNITY AND SOCIETAL

Community environment (e.g. big city, small town)

Trust toward people in community/neighbourhood

Perception of safety in community/neighbourhood

Visiting healthcare/social work services

Experiencing war/collective violence

Experiencing natural disaster

NOTES

- 1. VACS is an English version of the core questionnaire. There are slight changes per country to handle cultural context and translations.
- 2. Since the 'full' ETI instrument is not available, the ETI-Short Form version is used.

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APPENDIX 2:

CONTEXTS OF VIOLENCE BY VAC INSTRUMENT

CONTEXT	PERPETRATOR	VACS	WHO GSHS	YPICHS	ACE-IQ	MEKONG CHAL	ICAST-P
HOME	Parent	PV, EV, SV		PV	N, EtV, EV		PV, EV, SV
	Other Caregiver	PV, EV, SV			N, EtV, EV		PV, EV, SV, N
	Brother/sister	PV, EV, SV			EtV, EV		
	Other adult family member (e.g. cousin, grandparent, uncle/aunt)	PV, EV, SV			EtV, EV		PV, EV, SV, N
SCHOOL	Teacher	PV, EV, SE					
	Peer	PV, SE, SV	PV		PV, EV		
WORKPLACE	Employer	PV, SE, SV				PV, SV, LE	
INSTITUTION	Police	PV, SE, SV		PV	PV, EV		
	Custody			PV			
COMMUNITY	Neighbour/Community Member (e.g. religious leader)	PV, SE, SV		PV, SE	EtV		
	Partner	PV, SV		PV			

NOTES

- 1. Context does not necessarily mean where the violence occurs because it is not the focus of the measurements (Cells are merged e.g. CCMS).
- 2. ICAST-C does not define specific perpetrator, only the context (e.g. by Adult male/female, Child/Adolescent male/female) except for a few questions.
- 3. CTQ (e.g. Have you ever experienced ...?) does not specify the context nor perpetrator.
- 4. CTS does not specify the context nor perpetorater. (e.g. Has any adult ever \ldots ?)
- 5. JVQ does not specify the perpetrator of violence at community (e.g. Did anyone hit or attack you on street?) except SV.
- 6. ETI-SF (e.g. Were you ever slapped?) does not specify the context nor perpetrator.

ICAST-R	ICAST-C	CECA.Q	CATS	CTQ	СТЅ	CCMS	ETI-SF	JVQ
N, PV, EV, SV	PV, EV, SV, N	PV, EV, N	EV, PV, N, SV			PV, EV, N, SV		PV, EV, N, EtV
N, PV, EV, SV	PV, EV, SV, N	PV, EV, N				PV, EV, N, SV		PV, EV, N, EtV
						PV, EV, N, SV		PV, EtV
N, PV, EV, SV	PV, EV, SV, N	PV, EV, N	EtV			PV, EV, N, SV		PV, EV, N, EtV
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APPENDIX 3: SELECTED LITERATURE RE: INSTRUMENTS

INSTRUMENT	AUTHOR	PUBLICATION YEAR	PUBLICATION TITLE	TARGET OF MEASUREMENT	COUNTRY	METHOD (e.g. SELF-REPORT SURVEY, FACE-TO-FACE INTERVIEW, PARENT REPORT)
GSHS	Becker et al.	2010	Youth Health-Risk Behaviour Assessment in Fiji: The Reliability of Global School-Based Student Health Survey Content Adapted for Ethnic Fijian	Risk behaviours	Fiji	Self-report survey
ICAST-R	Eldeeb et al.	2016	Child Discipline in Qatar and Palestine: A Comparative Study of ICAST-R	Child discipline	Qatar, Palestine	Self-report survey (interview and focus group)
ICAST-C	Chang et al.	2013	Psychometric Testing of the Chinese version of ISPCAN Child Abuse Screening Tools Children's Home Version (ICAST-CH-C)	Child maltreatment	Taiwan	Self-report survey
СТQ	Grasssi- Oliveira et al.	2014	Childhood Trauma Questionnaire (CTQ) in Brazilian Samples of Different Age Groups: Findings from Confirmatory Factor Analysis	Childhood abuse	Brazil	Self-report survey
CTQ	Garrusi et al.	2009	Validity and Reliability of a Persian Version of the Childhood Trauma Questionnaire	Child abuse	Iran	Self-report survey
CTQ	Kim et al.	2013	Psychometric Properties of the Childhood Trauma Questionnaire- Short Form (CTQ-SF) in Korean Patients with Schizophrenia	Childhood trauma	South Korea	Self-report survey
CTQ	Kim et al.	2011	Reliability and Validity of the Korean Version of the Childhood Trauma Questionnaire-Short Form for Psychiatric Outpatients	Childhood trauma	South Korea	Self-report survey
ETI-SF	Osório et al.	2013	Psychometrics Properties of Early Trauma Inventory Self Report - Short Form (ETISR-SR) for the Brazilian Context	Early traumatic experience	Brazil	Self-report survey

NOTES

^{1.} English-language literature independently (i.e. except for those who have developed the instruments testing validity/reliability of the selected instruments outside 'Western' contexts are only included.

LANGUAGE	TIME TO ADMINISTER	AGE GROUP/ SAMPLE CHARACTERISTICS	SAMPLE	SAMPLING	VALIDITY	RELIABILITY
Fijian	Not mentioned	15-20	523 (81 in subsample)	Strata (purposive)	Not assessed	Test-retest reliability .3398 (average .77); Cohen's kapps .47
Arabic	Not mentioned	18-24	697 (Qatar), 2064 (Palestine) in survey; 20 in interview, 31 in focus group	Two-stage simple systematic (Qatar); stratified multi-stage cluster (Palestine)	Not assessed	Internal consistency: Qatar-physical abuse .495, emotional abuse .438, sexual abuse. 729; Palestine-physical abuse .632, emotional abuse.565
Chinese	20 min	Grades 7-12	98 in phase 2, 5236 in phase 3	Convenience	Construct validity GFI (.83) and AGFI (.80)	Internal consistency .90 (.7178 in subscale except for exposure to violence . 61)
Portuguese	Not mentioned	Adolescent, adult, elder	1925	Unknown	Not assessed	Cronbach alpha .80 (emotional abuse), .80 (physical abuse), .90 (sexual abuse), .91 (emotional neglect), .46 (physical neglect)
Persian	Not mentioned	drug addicts, psychiatric patients, college students	1000	Unknown	Face validity established in pilot; convergent validity with General Health Questionnaire (Pearson r .42)	Test-retest reliability .90; intenal consistency .86, .85, .84, .60
Korean	Not mentioned	Patients diagnosed with schizophrenia	100	Unknown	Concurrent validity confirmed with Trauma Antecedents Questionnaire; convergent and discriminant validity confirmed with post-traumatic symptoms and pathological dissociation	Test-retest reliability (Spearman p = .75); internal consistency (Cronbach alpha = .89).
Korean	Not mentioned	non-psychotic psychiatric outpatients	163	Unknown	Concurrent validity confirmed with Trauma Antecedent Questionnaire; convergent and discriminant validity confirmed with post-traumatic symptoms and pathological dissociation; factorial validity confirmed	Test-retest reliablity . 87; internal consistency (Cronbach alpha .88)
Portuguese			253	Unknown	Concurrent and divergent validity confirmed with Patient Health Questionnaire and Beck Anxiety Inventory	Internal consistency .83; Test-retest reliability .7890

APPENDIX 4:

REVIEW OF EXISTING RESEARCH ON INSTRUMENTS USED TO MEASURE SEXUAL VICTIMIZATION

INSTRUMENT	AUTHOR	PUBLICATION YEAR	PUBLICATION TITLE	TARGET OF MEASUREMENT	COUNTRY	METHOD (e.g. SURVEY, INTERVIEW, PARENT REPORT)
SASS	Ruch et al.	2006	Validation of the Sexual Assault Symptom Scale II (SASS II) Using a Panel Research Design	Sexual assault trauma	US	Self-report survey
SASS	Wang et al.	2014	Assessing the Reliability and Validity of the Chinese Sexual Assault Symptom Scale (C-SASS): Scale Development and Validation	Sexual assault trauma	Taiwan	Self-report survey
SASS	Ruch et al.	1991	The Sexual Assault Symptom Scale: Measuring Self-Reported Sexual Assault Trauma in the Emergency Room	Sexual assault trauma	US	Interview
SES	Cecil et al.	2006	Sexual Victimization among African American Adolescent Females: Examination of the Reliability and Validity of the Sexual Experiences Survey	Sexual victimization	US	Interview
SES	Koss et al.	1985	Sexual Experiences Survey: Reliability and Validity	Sexual victimization	US	Self-report survey
SES	Krahe et al.	1999	Measuring Sexual Aggression: The Reliability of the Sexual Experiences Survey in a German Sample	Sexual aggression and victimization	Germany	Self-report survey

NOTES

(1) unlike Appendix 3, it includes instruments on sexual violence/victimization the psychometric properties of which have been tested not only beyond but within Western context because only few research exists beyond the Western context; and (2) it only includes instruments used to measure solely the sexual violence/victimization, which means that it does not include studies that measure sexual violence/victimization as one type of violence against children/women in conjunction with other types of violence against children/women.

LANGUAGE	TIME TO ADMINISTER	AGE GROUP	SAMPLE	SAMPLING	VALIDITY	RELIABILITY
English	Not mentioned	14 to 59	223	Unknown	Convergent validity; discriminant validity confirmed	Internal consistency (Cronbach alpha) confirmed
Chinese	Not mentioned	Unknown	418	Unknown	Discriminant validity confirmed	Internal consistency (Cronbach alpha) confirmed
English	Not mentioned	14 or older	329	Unknown	Construct validity confirmed	Not assessed
English	Not mentioned	14 to 19	249	Convenience	Convergent validity confirmed	Internal consistency (Kuder- Richardson confirmed)
English	Not mentioned	University students	448	Convenience	Criterion validity confirmed	Internal consistency (Cronbach alpha) and test-retest reliability confirmed
Germany	Not mentioned	Unknown	114	Unknown	Not assessed	Test-retest reliability confirmed







