

The Burden of Victimization

Crime Victims Institute at the Criminal Justice Center at Sam Houston State University

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A staggering 9 million property crimes and nearly 1.25 million violent crimes occurred nationwide during 2010.1 These crimes led to an estimated 18.7 million people becoming victims of violent or property crime.² As the second largest state, a sizable proportion of these crimes occurred in Texas, which recorded nearly 1 million property index crimes and over 113,000 violent index crimes in 2010.3 While violent and property crime and subsequent victimization rates have been declining during the past decade, the need for and importance of victim services should not be underestimated. Criminal victimization is a heavy burden to bear, beginning with the immediate cost of crime and extending to consequences relating to health, education, employment, and overall quality of life. Additionally, the consequences of victimization are often intertwined. Victims rarely experience one adverse effect, like physical injury, without also developing issues in other areas, such as missed employment due to the injury or anxiety resulting from the experience.

Costs of Victimization

The overall economic cost of victimization is significant. In terms of direct costs (property theft or damage, loss of cash, medical expenses, or lost wages due to victimization), over 13 percent of violent crime victims and nearly 94 percent of property crime victims experience some type of economic loss.⁴ This results in annual total losses of about \$14.8 billion for property crime victims and nearly \$1.5 billion for violent crime victims. Adding in less direct costs, including victim services and assistance, pain and suffering, and lost quality of life, the estimated annual cost of victimization to victims and society is \$450 billion.⁵

Physical Health Care Costs

Physical health care costs associated with victimization vary based on the crime type and victim characteristics, and pertain mainly to violent crimes such as assault, robbery, or sexual assault. Costs of these crimes include immediate medical care such as the trip to the hospital, injury treat-

ment, prescriptions, medical devices, and related insurance claims processing costs. These costs, which can be difficult to accurately estimate, affect a large number of victims. Over 37 percent of robbery victims and 21 percent of assault victims sustained a physical injury during their victimization.6 More than 500,000 victims of violence received some type of medical care following their victimization, with most of those receiving care at a doctor's office, hospital, or emergency room.⁷ Estimates suggest that injuries sustained during victimization lead to an estimated \$5.6 billion spent on medical care, with an average cost of more than \$24,000 per case involving hospitalization and more than \$1,000 per case in medical care without hospitalization.8 Others have estimated medical costs associated with specific types of victimization and have reported a cost of \$500 per sexual assault case, \$1,470 per assault case, \$1,000 per robbery incident, and \$10,000 for an arson related injury, although these measures do not include lengthy hospital treatment.9

It is also important to note that, in the year following victimization, crime victims' physician visits increased almost 22 percent more than nonvictims, increasing their overall health costs 2.5 times. 10 Possible long-term physical health costs associated with victimization include extended physical therapy, prescriptions for ongoing health conditions, future surgeries, and additional adverse effects of the injury; however these costs are harder to estimate due to the individual nature of specific injuries. Finally, physical health care costs often lead to other costs associated with victimization as physical injuries and immediate trauma may result in mental health issues, as well as lost productivity, or reduced educational attainment.

Mental Health Care Costs

In addition to the physical injuries that victims may experience, the mental and emotional repercussions of victimization may be substantial. Depression, suicidal tendencies, post-traumatic stress disorder (PTSD), anxiety issues, and fear of future victimization are common adverse mental



health outcomes of victimization, often leading victims to seek the services of psychiatrists, psychologists, social workers, and counselors. Crime victims are estimated to comprise almost 25 percent of the client population of mental health care professionals, costing upwards of \$6.8 billion annually.¹¹

Mental health issues may affect all crime victims, but the victims of interpersonal crimes such as sexual assault, peer-related bullying, and domestic violence are often more susceptible to developing issues with depression, anxiety, and PTSD than victims of assault and robbery. 12 Depression is an outcome of intimate partner violence for almost 50 percent of female victims, while suicidality occurs among nearly 18 percent of victims, and PTSD results for about 64 percent of victims.¹³ Estimates of mental health consequences for other crime victims show almost 25 percent of all victims experience PTSD-related symptoms. 14 Conservative estimates of the mental health expenses related to victimization put the cost for rape to be just under \$4,000, robbery to be under \$900, and assault to be over \$350 per incident.15

Although it may be difficult to put a dollar amount on the cost of mental health problems, especially in the form of reduced quality of life and damage to relationships, the long term costs of these problems are significant. Depression, for example, leads to lower income and educational attainment, costs an individual an average of 5.6 hours of productivity every week, leading to a loss of \$10,000 of income annually for the depressed person. Additionally, depression increases the risk of drug use by five times, unemployment by seven times, and suicide by almost thirty times.

Educational Consequences

Being the victim of a crime is also linked to a number of adverse consequences within an educational framework. Research has documented connections between victimization and poor school performance, lower grades and standardized test scores, truancy, and dropping out. 18 The educational consequences of victimization not only undermine school performance and overall educational attainment, but may also lead to loss of potential income and occupational status. Studies have found that these consequences in the educational arena are translated into reduced wages for victims as compared to non-victims. 19

Productivity and Employment Costs

Victimization experiences may also often directly affect the employment of the victim. Seven percent of violent and property crime victims experience a loss of work as a result of their victimization,²⁰ with the majority of these individuals missing 5 or fewer days. However, almost 11 percent of violent crime victims

lose more than 11 days or half a month of work.²¹ Cost estimates of these consequences, in terms of the employment cost and loss of productivity due to victimization, find sexual assault costs almost \$2,200 per incident, while assault and robbery cost \$950 per incident.²² Lost productivity costs upwards of \$64.6 billion in total lifetime expenses, breaking down to an average of \$1.3 million for fatal assault cases, \$57,200 for assault cases including hospitalization, and \$2,800 for non-hospitalization assault cases.²³

The Importance of Victim Services

Unfortunately, most victims do not receive support services from victim advocates or victim service agencies. In 2008, more than 90 percent of victims reported receiving no assistance following their experience.²⁴ Over the last twenty or more years, there has been no appreciable change in the percent of victims receiving assistance from victim service agencies.²⁵ While many victims do not access services, there are important interrelationships between receiving assistance from victim service agencies and criminal justice processing of cases. In particular, receiving assistance is more likely when victims report their crimes to police, suggesting that the police may play an important role in referring victims to service providers.²⁶ Additionally, victims who received services were more likely to experience a follow-up criminal justice action, including police notification, arrest, or follow-up further into the criminal justice system.²⁷ This may reflect an effect of the services provided in that victims feel supported and are more willing to pursue a case through the criminal justice system or that service providers offer an important advocacy service to help represent the victim throughout the criminal justice process.

Being the victim of a crime may have significant and substantial consequences for victims later in life. The adverse health consequences of victimization are much more far-reaching than just immediate injury and trauma. Beyond physical and mental health consequences, victimization also has short- and longterm impacts on educational attainment, employment and productivity, and overall quality of life. Understanding these long-term consequences is important to assessing the true toll of crime on its victims and on society as well as to responding to crime victims more effectively. Investing in victim services and effective prevention programs is crucial to efforts to ameliorate the immediate trauma, both physical and emotional, that victims experience. Perhaps equally as important is the need to make victims more aware of the types of services and programs available to them to assist in their coping. Investments in victim services may also have the added benefit of reducing the long-term deleterious effects identified in this and other studies,

thus reducing the high cost of victimization borne by the victims themselves, the health care system, mental health system, employers, and society in general.

Endnotes

- ¹ "Crime in the United States, 2010," Federal Bureau of Investigation, U.S. Department of Justice, accessed July 2012, http://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s.-2010.
- ² Jennifer L. Truman, *Criminal Victimization*, 2010 (Washington, D.C.: Bureau of Justice Statistics, U.S. Department of Justice, 2011).
- 3 "Crime in the United States, 2010."
- ⁴ Bureau of Justice Statistics, Criminal Victimization in the United States, 2008, Statistical Tables: Table 82 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice), accessed September 2012, http://bjs.ojp.usdoj.gov/content/pub/html/cvus/index.cfm.
- ⁵ Ted R. Miller, Mark A. Cohen, and Brian Wiersema, Victim Costs and Consequences: A New Look (Washington, D.C.: National Institute of Justice, U.S. Department of Justice, 1996).
- ⁶ Bureau of Justice Statistics, Criminal Victimization in the United States, 2008, Statistical Tables: Table 75 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice), accessed September 2012, http://bjs.ojp.usdoj.gov/content/pub/html/cyus/index.cfm.
- ⁷ Bureau of Justice Statistics, Criminal Victimization in the United States, 2008, Statistical Tables: Table 76 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice), accessed September 2012, http://bjs.ojp.usdoj.gov/content/pub/html/cvus/index.cfm.
- 8 Phaedra S. Corso, James A. Mercy, Thomas R. Simon, Eric A. Finkelstein, and Ted R. Miller, "Medical Costs and Productivity Losses Due to Interpersonal and Self-Directed Violence in the United States," *American Journal of Preventive Medicine* 32 (2007): 474-482.
- ⁹ Miller, Cohen, and Wiersema, Victim Costs and Consequences.
- Mary P. Koss, Paul G. Koss, and Joy Woodruff, J. "Deleterious Effects of Criminal Victimization on Women's Health and Medical Utilization," *Archives of Internal Medicine* 151 (1991): 342-347.
- Mark A. Cohen and Ted R. Miller, "The Cost of Mental Health Care for Victims of Crime," *Journal of Interpersonal Violence* 13 (1998): 93-110.
- ¹² Ross MacMillian, "Adolescent Victimization and Income Deficits in Adulthood: Rethinking the Costs of Criminal Violence from a Life-Course Perspective," *Criminology* 38 (2000): 553-580.
- ¹³ Jacqueline M. Golding, "Intimate Partner Violence as a Risk Factor for Mental Disorders: A Meta-Analysis," *Journal of Family Violence* 14 (1999): 99-132.
- ¹⁴ Dean G. Kilpatrick, Benjamin E. Saunders, Lois J. Veronen, Connie L. Best, and Judith M. Von, "Criminal Victimization: Lifetime Prevalence, Reporting to Police, and Psychological Impact," *Crime and Delinquency* 33 (1987): 479-489.
- ¹⁵ Mark A. Cohen, Ted R. Miller, and Shelli B. Rossman, S, "The Costs and Consequences of Violent Behavior in the

- United States," in *Understanding and Preventing* Violence, ed. Albert Reiss and Jeffrey Roth (Washington, D.C.: National Academy Press, 1994).
- ¹⁶ James P. Smith and Gillian C. Smith, "Long-Term Economic Costs of Psychological Problems during Childhood," *Social Science & Medicine* 71 (2010): 110-115; Walter F. Stewart, Judith A. Ricci, Elsbeth Chee, Steven R. Hahn, and David Morganstein, "Cost of Lost Productive Work Time among U.S. Workers with Depression," *Journal of the American Medical Association* 289 (2003): 3135-3144.
- Keith E. Hawton, "Suicide and Attempted Suicide," in Handbook of Affective Disorders, 2nd Edition, edited by Eugene S. Paykel (New York: Guilford Press, 1992), 635-650; Debra Lerner, David A. Adler, Hong Chang, Leueen Lapitsky, Maggie Y. Hood, Carla Perissinotto, John Reed, Thomas J. McLaughlin, Ernst R. Berndt, and William H. Rogers, "Unemployment, Job Retention, and Productivity Loss among Employees with Depression," Psychiatric Services 55 (2004): 1371-1378.
- ¹⁸ Ross MacMillan, "Violence and the Life Course: The Consequences of Victimization for Personal and Social Development," *Annual Review of Sociology* 27 (2001): 1-22.
- 19 Ibid.
- ²⁰ Bureau of Justice Statistics, Criminal Victimization in the United States, 2008, Statistical Tables: Table 87 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice), accessed September 2012, http://bjs.ojp.usdoj.gov/content/pub/html/cvus/index.cfm.
- Bureau of Justice Statistics, Criminal Victimization in the United States, 2008, Statistical Tables: Table 89 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice), accessed September 2012, http://bjs.ojp.usdoj.gov/content/pub/html/cvus/index.cfm.
- ²² Miller, Cohen and Wiersema, *Victim Costs and Consequences*
- ²³ Corso et al., "Medical Costs and Productivity Losses."
- ²⁴ Bureau of Justice Statistics, Criminal Victimization in the United States, 2008, Statistical Tables: Table 109 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice), accessed September 2012, http://bjs.ojp.usdoj.gov/content/pub/html/cvus/index.cfm.
- 25 Lynn Langton, Use of Victim Service Agencies by Victims of Serious Violent Crime, 1993-2009 (Washington, D.C.: Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice).
- ²⁶ Ibid.
- ²⁷ Ibid.

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