

Prevalence and co-occurrence of violence against children in the Quebec population

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Violence against children is a major public health concern in occidental societies. Empirical studies suggest that violence against children is linked to short and long-term consequences on physical and mental health.¹⁻³ A number of studies have also shown that the presence of multiple forms of victimisation significantly increases the severity of symptoms for victims, highlighting a cumulative effect.⁴⁻⁷

A literature review examining the incidence of different forms of child maltreatment has highlighted significant differences in rates across countries.⁸ However, rates of reported violence were very similar in Australia and Quebec. For instance, in Quebec, between 1994 and 1997, the rate of maltreated children known to Child Protection Services (CPS) varied from 6.3 to 6.5 for 1,000 children while in Australia, it varied from 5.8 to 6.2.⁸ While the prevalence of each form of victimisation has been documented, the phenomenon of co-occurrence of different forms of violence has been less explored both in the context of prevalence studies of adults⁵ and incidence studies conducted

with clientele under CPS.⁸ Studies of representative samples of maltreated children identified by CPS agencies suggest however that an important proportion of maltreatment children are victims of more than one form of maltreatment.⁹⁻¹¹ For instance, in a study of 10,000 CPS reports in the province of Quebec, 21% of confirmed cases involve children experiencing more than one form of maltreatment.¹⁰ This type of study does not provide a precise overview of the phenomenon since the majority of maltreatment are not reported to CPS agencies.⁸ Studies conducted with samples from the general population represent a valuable alternative to document the rate of the phenomenon. Results from such studies are likely to provide cues for the design of preventive and curative public health services.

In a recent review of the empirical literature, Higgins and McCabe⁵ identified 29 retrospective studies conducted with adult samples that have evaluated more than one form of childhood victimisation. The authors underline a number of methodological limits

Abstract

Objective: A literature review on the incidence of different forms of child maltreatment revealed that rates in Australia and Quebec (Canada) were similar. This study sought to determine the prevalence and co-occurrence of various forms of violence (physical, sexual and psychological) and explore gender and age difference.

Methods: A telephone inquiry was conducted with a representative sample of 1,002 adults from the province of Quebec.

Results: More than one in three adults (37%) reported having experienced at least one of three forms of violence in childhood. Twelve per cent (12%) of the adults experienced two forms of violence while 4% of the respondents reported having experienced all three forms of violence in childhood. Psychological violence (22%) was the form most frequently reported, followed by physical violence (19%) and sexual violence (16%). The different prevalence rates did not vary as a function of age. However, regarding gender, women were more likely to report having been sexually victimised (rape and fondling) and less likely to report having experienced physical violence. A lower percentage of women reported having sustained no form of childhood victimisation and a higher percentage of women reported have experienced both sexual and psychological violence compared to men.

Conclusion: These results, including both the global rates and those particular to each gender, are comparable to findings in similar North American studies. The co-occurrence rates noted are salient enough to necessitate particular attention to diverse clinical clientele and need to be considered in future research exploring the risk factors of violence and its subsequent repercussions.

Key Words: Prevalence, child abuse, sexual, adult survivors of child abuse, health surveys.

Aust N Z Public Health. 2008; 32:331-5
doi: 10.1111/j.1753-6405.2008.00250.x

Submitted: January 2008

Revision Requested: –

Accepted: April 2008

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in this area of research, namely, that few studies have explored more than two forms of victimisation simultaneously and the samples used are convenience samples and are not representative of the population. In this context, the present study aims to document the prevalence rates of three forms of childhood victimisation (sexual, physical and psychological) and of co-occurring forms of violence in a representative sample of Quebec adults, while considering gender and age of participants. Higgins and McCabe⁵ divided childhood maltreatment experiences into five different forms: sexual abuse, physical abuse, psychological abuse, neglect and witnessing family violence. In the present study and following the recommendations of several researchers, we have considered witnessing inter-parental violence (excluding sibling abuse) as a form of family violence and as a dimension of psychological abuse.^{12,13}

Methods

Procedure

Data were collected by a telephone survey conducted between 13 April and 14 May 2006 with a sample of 1,002 adults from

Table 1: Characteristics of the sample expressed in percentage before and after weighting for design effect.

Characteristics	Unweighted sample n = 1002	Weighted sample corrected for design effect n = 804
Regions		
Montreal island	18.5	23.2
Other metropolitan regions of Montreal	20.4	24.5
Metropolitan region of Quebec city	12.2	10.2
Others regions of Quebec	49.0	42.1
Age		
18-24	8.9	11.3
25-34	17.4	17.0
35-44	24.2	19.5
45-54	20.5	20.0
55-64	15.8	15.0
65+	13.3	17.1
Gender		
Male	35.9	48.9
Female	64.1	51.1
Income level		
-\$20,000	14.7	15.3
\$20,000 – \$39,999	22.3	22.5
\$40,000 – \$59,999	18.2	17.6
\$60,000 – \$79,999	13.4	12.9
\$80,000 and +	19.0	20.2
Refusal	12.6	11.5
Schooling		
Elementary school	6.4	7.5
High school	33.5	33.0
Collegial	28.7	28.1
University	31.0	31.0
Refusal	0.3	0.4

the province of Quebec (Canada). Selection without substitution of respondent was performed in two steps. Households were first selected by random digit dialing among those having the telephone all over the province of Quebec. Then, in each selected household, a respondent was chosen using a random selection schedule among those aged 18 years and over and able to complete the survey in either French or English. No substitution of respondent was allowed. The overall response rate was 30% considering those eligible participants who refused to participate (n = 1,909), incomplete interviews (n = 27), a proportion of randomly selected households that remained impossible to reach after five attempts on different days and times (n = 318), communication problems (faulty phone line, inaudible communication, etc.) (n = 102) and selected respondents for which it was impossible to complete the interview before the desired sample size was achieved (n = 209). Verbal consent of respondents was solicited at the time of the interview and the study received approval from the Institutional Review Board (IRB) of the Faculty of education of the University of Sherbrooke. Each interviewer received specific training regarding the study's objectives, the questions and possible answers from one of the researcher. In addition, a portion (around 10%) of the interview was subjected to an audio systematic review in order to verify the quality of the interview.

Sample

Data from 1,002 respondents were weighted by region, age and gender based on the 2001 Canada census data of adults aged 18 years and over.¹⁴ Afterward, a correction for design effect was applied. Design effect is equal to $1 / (1 + \text{variance of weighting coefficients})$ and each weighting coefficient was multiplied by 0.81 (or 1/1.24) in order to correct for the weighting effect on statistical accuracy.¹⁵ Table 1 show that the initial sample of 1,002 respondents correspond, following this correction, to a sample of 804 respondents that present the same characteristics of the Quebec population in terms of distribution by region, age and gender. This weighting and correction for design effect thus reduces disparities between characteristics of the sample and those of the population and avoid overestimating statistical precision.

Measures

In addition to socio-demographic variables, six questions explored childhood victimisation experiences.

Childhood sexual abuse

Two questions evaluated the presence of childhood sexual abuse: unwanted sexual touching and unwanted sexual intercourse before the age of 18. These questions were used in similar American and Canadian surveys.^{16,17} Prevalence of childhood sexual abuse was defined as a positive answer to either question.

Childhood physical abuse

Two questions were used to evaluate childhood physical abuse (minor and severe) experienced by the respondent. Respondents indicated their answer on a four-point Likert scale ranging from "no,

never” to “yes, very often”. Minor physical abuse was defined as receiving a spanking “yes, often” or “yes, very often” while severe physical abuse was defined as being hit harder than a spanking at least once. These two questions were used in the 1999 Quebec Health Survey.¹⁸ In that survey, minor physical abuse was defined as “adult conduct towards a child that aim to modify behaviors through the use of corporal punishment or physical force. These conducts may provoke discomfort or pain without hurting the child; they are generally admitted by law and even, as indicated by article 43 of the Canadian criminal code, may be recognised as a right in the exercise of the parental role.” (p 20).

For severe physical violence, Clément et al.¹⁸ refer to “[...] disciplinary conducts or corporal punishments of such a nature that they are likely to hurt the child. These conducts may be similar to abusive forms of conduct towards the child” (p 20).

The prevalence of physical violence is defined as having experienced either minor or severe physical violence.

Psychological violence in childhood

Direct and indirect psychological abuse was evaluated by two questions: direct psychological violence aimed at the child (i.e. being threatened, humiliated or ridiculed “often” or “very often” in childhood) and indirect psychological violence (child witnessing inter-parental violence). Indirect psychological violence was defined as having witnessed at least “rarely” inter-parental violence. These questions were used in the 1999 Quebec Health Survey.¹⁸ Prevalence of psychological violence was defined as having experienced either direct or indirect psychological abuse.

To determine if prevalence rate differ according to gender and age, a series of CHI square tests were performed.

Results

Prevalence

As it appears in Table 2, psychological violence (22%) is the form of violence most often reported in childhood, followed by physical violence (19%) and sexual violence (16%). Men are more likely to report physical violence ($\chi^2(1, n = 804) = 4.572, p < 0.05$), while women are more likely to experience childhood sexual violence ($\chi^2(1, n = 804) = 22.743, p < 0.001$), be it sexual touching ($\chi^2(1, n = 804) = 21.427, p < 0.001$) or rape ($\chi^2(1, n = 804) = 4.562, p < 0.05$). Results failed to highlight any significant differences linked to age (excepted for indirect psychological violence) suggesting that the prevalence of different forms of violence was stable in Quebec over the last four decades.

Co-occurrence

Table 3 illustrates that close to two adults out of three (63%) do not report any victimisation experiences in childhood. While an important proportion of respondents experienced only one form of violence (20%), 12% disclose having experienced two forms of violence and 4% reported three forms of violence. Psychological violence is the most frequently reported form of violence experienced in co-occurrence with another form of violence. On the other hand, sexual violence is the form the least likely to be reported in co-occurrence. Table 3 reveals that the number of victimisation experienced and the nature of double occurrences of violence varies according to gender. Indeed women are less likely than men to have experienced no form of victimisation and they report with greater frequency having sustained one or three forms of violence. Concerning the specific nature of double occurrences, women are more likely to report having experienced both sexual and psychological violence, while men report more frequently sustaining both psychological and physical violence.

Table 2: Prevalence (in %) and confidence intervals (lower and higher limit) of each different forms of violence experienced in childhood by gender and age.

Violence in childhood	Total	Gender		Age			
	N=804 ^a	M N=393	W N= 411	18-24 N=91	25-44 N=293	45-64 N=282	65+ N=138
Sexual abuse	15.9 (13.4-18.4)	9.6 (6.7-12.5)	22.0 *** ^b (18.0-26.0)	12.6 (5.7-19.5)	17.4 (13.1-21.7)	16.0 (11.7-20.3)	14.8 (8.9-20.7)
Sexual touching	15.5 (13.0-18.0)	9.4 (6.5-12.3)	21.3 *** (17.3-25.3)	12.6 (5.7-19.5)	17.1 (12.8-24.4)	15.6 (11.4-19.8)	13.9 (8.1-19.7)
Rape	3.7 (2.4-5.0)	2.2 (0.7-3.7)	5.2* (3.1-7.3)	2.4 (-0.8-5.6)	4.6 (2.2-7.0)	2.4 (0.6-4.2)	5.4 (1.6-9.2)
Physical violence	19.4 (16.7-22.1)	22.5 (18.4-26.6)	16.5* (12.9-20.1)	19.8 (11.6-28.0)	20.0 (15.4-24.6)	19.5 (14.9-24.1)	17.9 (11.5-24.3)
Minor	13.1 (10.8-15.4)	14.6 (11.1-18.1)	11.7 (8.6-14.8)	14.6 (7.3-21.9)	13.1 (9.2-17.0)	13.1 (9.2-17.0)	12.5 (7.0-18.0)
Severe	15.1 (12.6-17.6)	18.1 (14.3-21.9)	12.3* (9.1-15.5)	13.0 (6.1-19.9)	16.0 (11.8-20.2)	15.2 (11.0-19.4)	14.5 (8.6-20.4)
Psychological violence	22.0 (19.1-24.9)	22.2 (18.1-26.3)	21.7 (17.7-25.7)	23.6 (14.8-32.4)	24.5 (19.6-29.4)	20.5 (15.8-25.2)	18.5 (12.0-25.0)
Direct	9.4 (7.4-11.4)	8.2 (5.5-10.9)	10.6 (7.6-13.6)	2.9 (-0.6-6.4)	9.9 (6.5-13.3)	10.1 (6.6-13.6)	11.3 (6.0-16.6)
Indirect	17.8 (15.2-20.4)	19.2 (15.3-23.1)	16.5 (12.9-20.1)	21.5 (13.0-30.0)	21.4 (16.7-26.1)	16.4 (12.1-20.7)	10.5* (5.4-15.6)

Notes:

(a) Weighted sample size corrected for design effect.

(b) CHI square test * $p < 0.05$, ** $p < 0.01$ and *** $p < 0.001$.

Discussion

Prevalence rates of different forms of violence reported by Quebec adults are similar to those reported in studies conducted with other representative samples in terms of sexual, physical and psychological violence. For instance, in their review of North American studies of the prevalence of sexual violence, Gorey and Leslie¹⁹ report an average rate of 22% of women and 9% of men, while the present results reveal prevalence rates of 22% and 10% respectively. Results are also similar to a Quebec survey conducted in 2002 where the prevalence rates of sexual violence were found to be 18% of women and 10% of men.¹⁷ However, in the former study, physical violence was the most prevalent form of violence experienced, being reported by 22% of respondents. In the present study, psychological violence is the most prevalent form, also reported by 22% of participants.¹⁷

Differences observed between women and men in regards to prevalence rates are also similar to those found in Canadian studies in which physical violence is more often reported by men while sexual violence is more often experienced by women.^{17,20,21}

Prevalence of violence in childhood does not vary according to age, suggesting that there was no reduction of the phenomenon in Quebec in past decades, corroborating results from the 2002 Quebec survey.¹⁷ MacMillan²¹ found similar results for physical and sexual violence but only for Ontario men, the prevalence of sexual and physical violence for Ontario women diminishing across time especially for participants aged 65 years and over. The issue of the decline of violence remains a controversial issue, especially regarding sexual violence.¹⁹ However, the review of prevalence studies of sexual violence of Gorey and Leslie¹⁹ suggests that variations observed across time may be linked to methodological bias, such as response rate and definitions used, rather than actual changes in prevalence rates. Despite this, the lack of significant differences between age

groups suggests that the prevalence of violence in Quebec was quite stable over time.

Co-occurrence of different forms of violence is not a rare phenomenon since it touches close to one Quebec adult out of six (17%). In comparison to the 2002 survey, where the co-occurrence of different forms of violence was reported by 13% of the Quebec population, the rates of co-occurrence are slightly higher in the present study.¹⁷ Retrospective studies of prevalence conducted with adults, reviewed by Higgins and McCabe⁵ report rates of double victimisation varying from 3% to 18% while rate of co-occurrence of three forms of violence are 11% in two studies. The latter rates are slightly higher than the rates found in the present study.

Practice implications

Implications of the present results for the design of public health services are numerous. First, the results illustrate the rate of the phenomenon and the non-negligible rates of co-occurrence of different forms of violence. Second, different forms of violence are associated with pervasive consequences for the victims and cumulative effects linked to co-occurrence have been reported. In their review of long term consequences, Higgins and McCabe⁵ underline that: "In all of these studies, the authors concluded that experiencing more than one type of maltreatment was associated with greater adjustment problems than experiencing a single form of maltreatment" (p 571). Results suggest it is important to consider co-occurring forms of violence in the development of prevention and treatment programs that have, traditionally been elaborated in regards to only one specific form of violence, without considering the presence of co-occurring forms. This is especially important considering that prevalence studies conducted with clinical samples (in comparison to populational studies) reveal even much higher rates of co-occurrence.⁵

Table 3: Co-occurrence (in %) and confidence intervals (lower and higher limit) of different forms of violence experienced in childhood by gender and age.

Violence in childhood N=804 ^a	Total	Gender		Age			
	N=393	M N= 411	W N=91	18-24 N=293	25-44 N=282	45-64 N=138	65+
Number of co-occurrence of violence							
No type of violence	63.3 (60.0-66.6)	64.8 (60.1-69.5)	61.9 ^{ab} (57.2-66.6)	65.0 (55.1-74.9)	61.5 (55.9-67.1)	63.5 (57.9-69.1)	65.6 (57.6-73.6)
One type of violence	20.2 (17.4-23.0)	18.4 (14.6-22.2)	22.0* (18.0-26.0)	17.7 (9.8-25.6)	20.0 (15.4-24.6)	20.8 (16.1-25.5)	21.4 (14.5-28.3)
Two types of violence	12.3 (10.0-14.6)	14.4 (10.9-17.9)	10.2* (7.3-13.1)	13.5 (6.4-20.6)	13.8 (9.8-17.8)	11.8 (8.0-15.6)	9.3 (4.4-14.2)
Three forms of violence	4.2 (2.8-5.6)	2.4 (0.9-3.9)	5.9* (3.6-8.2)	3.8 (-0.2-7.8)	4.8 (2.3-7.3)	3.9 (1.6-6.2)	3.7 (0.5-6.9)
Double co-occurrences							
Sexual and psychological violence	2.4 (1.3-3.5)	1.0 (0.0-2.0)	3.7* (1.9-5.5)	3.1 (-0.5-6.7)	3.8 (1.6-6.0)	1.8 (0.2-3.4)	0.0 (0.0-0.0)
Sexual and physical violence	1.8 (0.9-2.7)	2.0 (0.6-3.4)	1.5 (0.3-2.7)	1.2 (-0.1-3.4)	1.5 (0.1-2.9)	2.6 (0.7-4.5)	1.0 (-0.7-2.7)
Psychological and physical violence	8.1 (6.2-10.0)	11.4 (8.3-14.5)	4.9*** (2.8-7.0)	9.2 (3.2-15.2)	8.4 (5.2-11.6)	7.2 (4.4-10.2)	8.3 (3.7-12.9)

Notes:

(a) Weighted sample size corrected for design effect.

(b) CHI square test * $p < 0.05$, ** $p < 0.01$ and *** $p < 0.001$.

Methodological considerations

The present study has the advantage of exploring the main forms of violence in childhood with a sufficient large representative adult sample of Quebec to offer a good precision of rates. Nevertheless, the study presents some classical limits for this type of study: 1) the retrospective design of the survey which may involve bias linked to memories of respondents; 2) the sampling method by telephone number that does not allow reaching respondents which may have been particularly at-risk for childhood victimisation, such as homeless or institutionalised adults; 3) the reliance on one or two questions to measure childhood victimisation experiences that does not permit a detailed description of the nature and severity of each form of violence and 4) a low response rate of 30%. This response rate is below the average rate for similar studies. Indeed Gorey and Leslie¹⁹ noted that since 1985, prevalence studies of sexual violence with adult populations show an average participation rate of 49%. However, a tendency for a lower participation rate in studies relying on phone interviews is observed internationally in the past years.^{22,23} The important proportion of calls without response may explain in part the response rate, namely by the now popular use of caller id phones which filter undesirable calls. Moreover, the raising number of telemarketing firms may increase the refusal rate and be linked to low response rates.²³ Also, ethical norms limit the number of recalls that can be made to the non respondent. Despite the low response rate found in the present study, the prevalence rates of victimisation experiences remain comparable to those found in a similar Quebec survey for which the response rate was 50%.¹⁷ In addition, the limits of the present study may have underestimated the real prevalence of victimisation experiences.^{19,24-26} Finally, it should be underlined that while numerous forms of victimisation were assessed in the present study, neglect (the most prevalent form of maltreatment) was not considered. Inclusion of neglect would offer a more comprehensive picture and probably increase the rates of co-occurrence. Indeed, in the cases of children identified by CPS agencies, neglect appear as the form of maltreatment most often found to co-occur with other forms of maltreatment.¹⁰

Acknowledgements

The research was supported by grants from the Fondation Marie-Vincent, the Faculty of Education (University of Sherbrooke) and the Centre interdisciplinaire sur les problèmes conjugaux et les agressions sexuelles (CRIPCAS).

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