

INTRODUCTION

Interpersonal violence is increasingly recognized as an important issue in public health. Violent acts, such as child abuse, domestic violence, elder abuse, and gang violence cause physical and emotional harm to persons, and harm families and communities. The prevalence of interpersonal violence may indeed have implications for the overall health of society.

Strong social and legal sanctions against perpetrators of interpersonal violence make it difficult to identify or estimate the frequency of interpersonal violence. Much of the information about the scope or magnitude of the problem has been gathered by medical and legal systems. Data from these sources have obvious shortcomings. Emergency rooms and hospitals can report only those incidents of violence that have been treated at their facilities, and physicians often underreport cases because many do not routinely ask patients about their experiences with interpersonal violence. Likewise, information collected by the legal system is limited to incidents that were reported to authorities. Attempts to gather a more representative measure of the problem have led the public health field to search for population-based methods of data collection, such as surveys. Information collected by health surveys is subject to other difficulties such as respondents refusing to disclose information, or reporting inaccurate information. Many factors may inhibit people from reporting violent incidents to the legal system, medical personnel, or survey interviewers. The private nature of the event, fear of retribution from a familiar perpetrator, perceived stigma, or the belief that no purpose would be served in reporting the incident keep an unknown number of victims or family members from talking about these episodes. It is likely that all measures of interpersonal violence, including surveys, underestimate the actual extent of the problem.

In the 1996 Health Status Survey, survey respondents were asked about incidents of interpersonal violence in their households. In many contexts, the word “violence” is associated with a particular type of violence, for instance domestic violence or child abuse. In this report, violence was defined as being

“... intentionally, hit, slapped, pushed, or kicked by someone, or had a weapon used against them, or was otherwise hurt by another person.”

This included being hurt by other household members as well as by people from outside the household. It also included incidents of violence among adults, between adults and children, and also among children.

The 1996 Utah Health Status Survey violence questions were administered to a subset of 1,113 out of 6,369 survey households. Survey respondents in these households were asked whether any household member had been a victim of interpersonal violence. Each respondent who indicated that there had been at least one such incident was asked how many incidents of interpersonal violence occurred among members of their household during the past year, as well as specific characteristics about the most recent incident. Information collected on incidents included: identity of the most recent victim in the household; whether the incident happened at home; the age of the perpetrator; whether the perpetrator was known to the victim; whether the victim was injured and if so, if they were examined by a doctor; and whether the incident was reported to the police or other authorities.

One caveat requires mention. The number of households in which a violent incident occurred was small (n=93). Since we asked about only the most recent incident in the household, we are basing a number

of our survey estimates on data from this very small sample size. We have reported 95% confidence intervals throughout the report. The reader should attend to these confidence intervals, and interpret the data accordingly.

This report presents three different kinds of information about violence:

1. Characteristics of households where violent incidents occurred (Figures 1-5, Table 1),
2. Demographic characteristics of persons who were victims of violent incidents (Table 2), and
3. Characteristics of violent incidents, themselves (Figures 6-20, Tables 3-10).

The reader should note that the first type of information describes households, while the latter two describe incidents. The way the questions were asked does not allow us to report the characteristics of an unduplicated sample of individual people who were victims of violence. Rather we describe the characteristics of victims based on a representative sample of incidents. Because an individual may have been victimized multiple times, it is inappropriate to apply the incident level estimates to persons. In households where more than one person was the victim of a violent incident, our sample would tend to over represent those persons who were more often victims of a violent incident. All the information in this report is presented at the household or the incident level, never at the person level of analysis.