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Violent Injuries Among Women in an Urban Area

Abstract

The national statistics are familiar by now: each year, more than 2 million women are raped and/or physically assaulted; more than one-third of them are injured during their most recent assault. Annually, more than 500,000 women seek medical services as a result of violence-related injuries, often from hospital emergency departments. But national statistics cannot fully capture the extent of violence experienced by women in inner-city areas, nor do they point to modifiable risk factors at a community level. This Issue Brief highlights a new study that investigates the circumstances and correlates of violent injuries among women in one urban, low-income community.

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Violent Injuries Among Women in an Urban Area

Editor's Note: The national statistics are familiar by now: each year, more than 2 million women are raped and/or physically assaulted; more than one-third of them are injured during their most recent assault. Annually, more than 500,000 women seek medical services as a result of violence-related injuries, often from hospital emergency departments. But national statistics cannot fully capture the extent of violence experienced by women in inner-city areas, nor do they point to modifiable risk factors at a community level. This Issue Brief highlights a new study that investigates the circumstances and correlates of violent injuries among women in one urban, low-income community.

Emergency department interviews confirm prevalence of domestic violence	 Grisso and colleagues studied three emergency departments in one inner-city community (in west Philadelphia). The hospitals were chosen on the basis of a previous research finding that 90% of women from this community who sought care for injuries were treated at one of them. Between 1996 and 1997, researchers interviewed 405 adolescent girls and women who had been intentionally injured, and compared them with 520 women who went to the emergency department for health problems unrelated to violence.
	• Interviewers asked women about the circumstances of the event, medical and reproductive history, personal and social contacts, financial support, alcohol and substance use (confirmed by urine screening), previous experience with violence, and characteristics of partners.
	• Overall, 52% of the women in the study—both injured and non-injured— reported having a current or past partner who was abusive, indicating a high prevalence of intimate partner violence in this community.
<i>Most injured women know their attacker</i>	In this primarily African-American community, women face violence in many aspects of their lives, both within intimate relationships and in encounters with family members, acquaintances or friends.
	• Of the 405 intentionally injured women, 187 (46%) had been injured by their current or most recent male partner. A total of 213 women had been injured by persons other than their partners. Only 13% of the women were injured by a stranger.

	 Of the women injured by a partner, 81% described the perpetrator as a current, as opposed to a past, partner. Most of the women (64%) reported that this partner had behaved violently at least once in the past. Most of the violent acts did not involve the use of guns. Nearly all (88%) of the women injured by their partners had been beaten with fists or a household object, as had 73% of the women injured by people other than partners. Just 12% of the women injured by partners and 26% of the women injured by non-partners had been stabbed. The majority of women were beaten around the face, head, and neck. Most suffered lacerations and contusions. Approximately 20% had one or more fractures.
Study identifies risk factors for violent injuries inflicted by a partner	Researchers compared women injured by a male partner to women visiting the emergency department for other reasons, who currently or recently had a male partner. This "case-control" study design enabled the researchers to identify risk factors for violent injuries inflicted by an intimate partner.
	• Women's social isolation, low self-esteem, self-reported substance abuse, and previous exposure to violence were associated with an increased risk of violence from partners. Many of these characteristics have been identified as consequences of ongoing abuse.
	• As compared with women who had not experienced violence from a partner, injured women were more likely to have been abused as children, raped as adults, or assaulted while pregnant. These characteristics are consistent with a portrait of abused women who have a long history of victimization, little control over their lives, and few resources.
	• The most common reasons women report for the violence were the partner's temper, his jealousy, or his drug or alcohol use.
	• Partners who inflict violent injuries were more likely than nonabusive partners to have been arrested in the past, to use cocaine, and to have experienced abuse as a child.
<i>Violence inflicted by people other than partners often erupts in plain view</i>	In this study, more than half of the violent injuries were inflicted by people other than the woman's intimate partner.
	• Of the 213 women injured by non-partners, 44% were injured by acquaintances or neighbors, 21% by family members, 24% by strangers, and 11% by friends.
	• Of these injuries, 44% had been inflicted by women, 43% by men, and 13% by both men and women. In most cases (68%), just one person had inflicted the injuries.
	• The majority of violent acts (57%) had occurred outdoors, usually in a public place. In most of these cases (87%), witnesses had been present.

Non-partner violence affects younger women in very low income neighborhoods	 Researchers compared the 213 women injured by non-partners with the control group of women visiting the emergency department for other reasons. Compared to the control group, women injured by non-partners were younger, had a higher frequency of social encounters, and had greater use of psychotropic medications (used to treat mental disorders) and marijuana in the past six months. After adjusting for other factors, women injured by non-partners were more likely than the control group to live in neighborhoods with a high rate of change of residence and a median family income of less than \$15,000. The correlates of violent injuries inflicted by non-partners. Women injured by partners had significantly higher levels of depression and lower self-esteem than women injured by non-partners. Social isolation was a risk factor for women injured by their partners, while more frequent social encounters was associated with injuries by non-partners.
Drug abuse is a major risk factor for all violent injuries	 In addition to asking women about use of drugs and alcohol, researchers also collected urine specimens to screen for the presence of illicit drugs. About 80% of all women agreed to submit these samples. Using the case-control approach, researchers showed that drug and alcohol use is strongly associated with the risk of violent injuries. Of all violently injured women submitting urine samples, more than one-third tested positive for cocaine. In women injured by partners, cocaine or marijuana use was correlated with the reported use of the drugs by their partners. Positive tests results for cocaine and alcohol were independently associated with an increased risk of violence from a partner. In women injured by non-partners, positive tests results for cocaine, marijuana, and alcohol were independently associated with a risk of violent injury.
POLICY IMPLICATIONS	 Creating a safe environment for women in low-income urban communities presents many challenges. This study points to factors at the community level that should be addressed by police, the courts, and social service agencies. Drug abuse was a major predictor of violent injuries inflicted by partners and non-partners alike. Although it is widely believed that the "crack" cocaine epidemic has ended, cocaine use remains an important problem in low-income, urban communities. A significant number of injuries to women were inflicted by women. This is likely the result of young women in low-income communities adopting what has been called the "code of the street." This code emphasizes the commanding of respect through aggressive posturing and the use of violence to resolve disputes.

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their communities as risk factors for domestic violence. Abusive partners need effective, mandated programs to prevent further violence; on a community level, public education campaigns should target men and boys with the message that it takes a real man to be gentle.
• Several cities have created community policing and court systems that target public disorder in socially disorganized neighborhoods. The most promising of these programs provide assistance to victims, mandate substance abuse programs for offenders, sentence offenders to make restitution to the community, and create outreach and economic development plans.
• There is a critical need for emergency department programs that counsel and support violently injured women through the immediate physical and emotional trauma as well as provide follow-up and ongoing assistance with the criminal justice system and community services.

This Issue Brief is based on the following article: J.A. Grisso, D.F. Schwarz, N. Hirschinger, M. Sammel, C. Brensinger, J. Santanna, R.A. Lowe, E. Anderson, L.M. Shaw, C.A. Bethel, L. Teeple. Violent injuries among women in an urban area. New England Journal of Medicine, December 16, 1999, vol. 341, pp. 1899-1905. See also: J.A. Grisso, D.F. Schwarz, C.G. Miles, J.H. Holmes. Injuries among inner-city minority women: a population-based longitudinal study. American Journal of Public Health, January 1996, vol. 86, pp. 67-70.

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