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DOMESTIC VIOLENCE: FINDINGS FROM THE BCS SELF-COMPLETION QUESTIONNAIRE

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A computer-assisted self-interviewing (CASI) questionnaire, designed to give the most reliable findings to date on the extent of domestic violence in England and Wales, was included in the 1996 British Crime Survey. The questionnaire covered frightening threats and physical assaults committed by current and former partners against men and women aged 16 to 59.

KEY POINTS

- ▶ 4.2% of women and 4.2% of men said they had been physically assaulted by a current or former partner in the last year. 4.9% of men and 5.9% of women had experienced physical assault and/or frightening threats.
- ▶ Women were twice as likely as men to have been injured by a partner in the last year and three times as likely to have suffered frightening threats. They were also more likely to have been assaulted three or more times.
- ▶ 23% of women and 15% of men aged 16 to 59 said they had been physically assaulted by a current or former partner at some time in their lives. These figures increased to 26% and 17% respectively when frightening threats were included.
- ▶ At greatest risk of domestic assault were the under 25s and those in financial difficulties. For women, risks were particularly high for those who were separated from a spouse.
- ▶ Half the victims had told someone about their most recent assault, most often a friend, neighbour or relative. The police were the next most likely to hear of incidents, followed by medical staff.

The British Crime Survey (BCS) is a large national survey which gives a count of crime that includes incidents not reported to the police and those reported to them, but not recorded.

All sweeps of the survey have provided an annual estimate of the number of incidents of domestic violence. However, it has been acknowledged this is likely to be an under-estimate. This is mainly because of the face-to-face mode of questioning, though various strategies are used to overcome this, including the use of a card for the respondent to read and respond to. The 1992 survey additionally included a card-based measure of lifetime experience of domestic violence, but this question too was thought to have its limitations. The switch to computer-assisted interviewing for the main BCS provided the opportunity to introduce computer-assisted self-interviewing (CASI). The interviewers

pass the laptop computer over to the respondent who reads the questions on the screen and inputs responses directly into the computer. The method was first used in the 1994 survey to measure illegal drug use and sexual victimisation.

The 1996 BCS included a new CASI component designed to give a measure of domestic violence committed by partners and ex-partners against men and women aged 16 to 59. CASI improves data quality (questions cannot be left unanswered) and respondents also seem to perceive a greater degree of confidentiality. However, because responses must be pre-coded, the detail required to classify incidents into offence categories cannot be collected.

EXTENT OF DOMESTIC VIOLENCE

The CASI questionnaire measured both the use of physical violence by current and former partners

(domestic assault) and frightening threats. Respondents were asked whether they had ever experienced these, and whether they had done so in the previous 12 months (interviews were conducted between January and May 1996).

4.2% of both women and men aged 16 to 59 said they had experienced domestic assault in the previous year. Women were twice as likely to say they had been injured by such an assault as men (2.2% compared with 1.1% of men); and they were more likely to have suffered repeated assault within the year: 2.0% of women had been assaulted three or more times compared with 1.5% of men. They were also much more likely to say they had suffered from frightening threats from a partner (3.8% said so, compared with 1.2% of men).

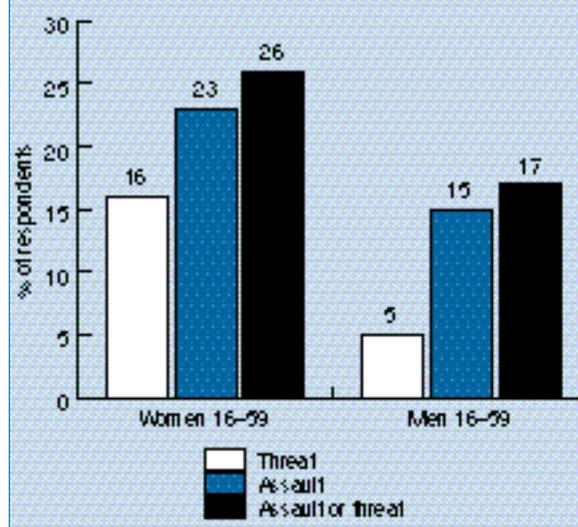
In total, it is estimated there were 6.6 million incidents of domestic assault in 1995. Although, on average, female victims are more likely to experience repeated assault, the total number of assaults in the year is evenly split between men and women, because there are more men than women aged 16 to 59 in the population.

Lifetime experience

Figure 1 shows the lifetime prevalence of domestic violence. In total, 26% of women and 17% of men have been victims of assault or threat. 23% of women and 15% of men said they had been assaulted by a current or former partner at some time in their lives, and 16% of women and 5% of men had experienced frightening threats.

Amongst women, it was the 20- to 24-year-olds who were most likely to say they had experienced domestic assault (28%) and/or frightening threats (20%) from a partner at some time in their life. For men, it was the 30- to 34-year-olds (20% and 6% respectively). The oldest age group (men and women) were the least likely to report such experiences. This may indicate that risks of experiencing domestic violence have increased over time, perhaps because young people now have a greater number of 'domestic' relationships. On the

Figure 1 Lifetime prevalence of domestic violence



other hand, it may be that the older age groups are more reluctant to report their experiences to the survey (or that incidents which took place longer ago are less likely to be recalled in the survey context).

Repeated violence suggests an abusive relationship in which violence is relatively likely to recur. Therefore, the risks and nature of victimisation are considered separately for victims who said they had been assaulted 'once or twice' (*intermittent* victims) and for those who reported three or more assaults (*chronic* victims). An important limitation of this classification is that no account is taken of the seriousness of the assaults. A victim of rare, but serious assaults, would be classified as intermittent and someone who reported frequent but minor shoves and pushes would be classified as a chronic victim.

Of 16- to 59-year-olds, 8.7% were classified as chronic victims and 10.3% as intermittent. Women were more likely to be classified as chronic victims (12.1% compared with 5.0% of men – see Table 1).

Table 1 Typology of domestic assault (CASI)

	Women %	Men %	All %
In lifetime			
No domestic assault	77.3	85.1	81.0
Chronic levels of assault	12.1	5.0	8.7
Intermittent levels of assault	10.6	9.9	10.3
In last year			
No domestic assault	95.8	95.8	95.8
Chronic levels of assault	2.0	1.5	1.7
Intermittent levels of assault	2.2	2.8	2.5

Note: Source – 1996 BCS, CASI questionnaire.

Levels of lifetime chronic assault may be slightly under-estimated because (due to limitations imposed by the questionnaire design) victims who had one or two incidents in the last year are classified as intermittent victims, even though they may have experienced more incidents over their lifetime.

Chronic assault = three or more incidents. Intermittent = one or two incidents.

THE VICTIMS

The socio-demographic profiles and lifestyles of victims of domestic assault are shown below. Because information collected about respondents may not have applied at the time they were last victimised, only those experiencing domestic violence in the previous year are counted as 'victims' here.

Sex

- 4.2% of both sexes reported an assault in the last year but women's chances of serious assault are greater than men's on average.

Age

- The under 25s were at greatest risk. 13% of women and 9% of men aged 16 to 24 said they had been assaulted by a partner within the last year.
- Although risks decrease with age, they do not disappear. For both men and women, around 1% of the over-45s had been assaulted recently.

Employment status

- Women who worked outside the home were at lower risk than those who were not earning. For men, those working part-time were at highest risk.

Financial status

- The proportion of women assaulted by a partner in the last year was highest in those households with an income below £5,000 (10% were victims). Risks for men were more evenly spread.
- Those living in households which were getting into financial difficulties were at far higher risk of domestic violence – 10% of women and 12% of men in these households had been assaulted in the previous year.

Children

- Overall, women with children in the household were at higher risk. This was particularly evident for women aged 30 to 59.

Ethnic group

- Amongst women risks of domestic violence do not differ significantly – about 4% of all ethnic groups said they had been victims in 1995. Risks were higher for white men (4%) and black men (3%) compared with Asian men (2%).

Marital status

- Women who described themselves as currently separated from a partner they had been living with were by far the most likely to have been victims – 22% had been assaulted at least once in 1995. At lowest risk were married women (2%) and women co-habiting (3%).
- Married men were also at lowest risk, but those with the greatest risk were those co-habiting (8%) rather than the separated.

Disability/ill health

- Over one in ten young men (aged 16 to 29) with a long-standing illness or disability said they had been assaulted in the previous year.
- Amongst women, only *limiting* disabilities seemed to increase risk of assault (12% in comparison with 8% for young women with no long-standing illness/disability).

Alcohol and drugs

- Victims of domestic assault have far higher levels of alcohol consumption than non-victims. Drug users also reported higher levels of domestic assault.

THE NATURE OF ASSAULTS

Victims were asked to describe the most recent incident they had experienced. Pushing, shoving and grabbing was the most common type of force used – almost two-thirds of domestic assaults involved this. The assailant kicked, slapped or hit the victim with their fist in nearly half of incidents (47%). Throwing objects at the victim was also fairly common (21%). Less common were choking, strangling or suffocating, but they did occur in nearly one in ten assaults – most commonly against women. Women were also more likely to report being forced to have sex – 12% of chronic female victims. Weapons were used to threaten or to attack in less than one in ten incidents, although their use was more common against chronic rather than intermittent victims.

Victims were injured in 41% of incidents. The most common injuries were:

- bruising (35% of domestic assaults)
- scratches (18%)
- cuts (9%) and broken bones (2%).

Women were more likely to be injured (47%) than men (31%). Chronic female victims reported injury in 58% of the most recent incidents, and they were the most likely to seek medical help – a fifth had done so after the most recent incident.

Most of the incidents had upset the victim in some way. Female victims were more likely to say they had been very upset on the last occasion (90% of chronic victims and 75% of intermittent). Although only a fifth of male victims said they had been very upset, it may be that men are more reluctant to admit to this. Men and women differed even more in how frightening they found assaults:

- chronic female victims (60% were very frightened)
- intermittent female victims (26%)
- chronic male victims (5%)
- intermittent male victims (2%).

PRESENCE OF CHILDREN

Half of those who had suffered violence from a partner or ex-partner in the previous year were living with children under 16. They were asked whether the children had seen or heard what had happened during the last violent incident. Overall, 29% said the children had been aware of what was going on. Children were much more often witnesses to violence where the woman had suffered repeat violence – 45% of these women said their children were aware of the last incident.

SUPPORT AND ADVICE

By its nature, domestic violence is often hidden from public view and opportunities for intervention depend largely on victims telling others about their experiences. Over half the victims of a partner assault said they had not told anyone about the last attack. Of the 47% of victims who had told someone, nearly all (45%) had told a friend or relative, even if they had also told someone else.

The police were the next most likely to hear of incidents, though only 11% of domestic assaults occurring in the previous year had been reported to them. Because sometimes previous assaults had been reported, 17% of victims said the police were aware they had been assaulted by a partner at some time. Even so, clearly the police are not aware of the vast majority of incidents or victims.

Few victims had talked to Victim Support, which in part reflects the low level of reporting incidents to the police. However, those who had done so rated them highly in terms of the level of support and advice they received. The proportion of domestic assault victims contacting Victim Support is likely to increase with the setting up in 1998 of a direct help line number. Of particular concern in terms of support following an

assault are the chronic victims. Although a majority of chronic female victims had told someone about the last incident, a third had not. Men were less likely to tell anyone – two-thirds had not.

For those agencies which specifically target 'domestic violence victims', an important issue is whether victims perceive themselves in this way. When asked whether they thought their most recent experience made them a 'victim of domestic violence', overall one-third agreed that it had. When asked about lifetime experiences, 39% of victims said they had been, in their judgement, victims of domestic violence.

DISCUSSION

Traditionally, women have been viewed as the main victims of domestic violence. This survey uncovered relatively similar levels of recent domestic assault for men and women within the past year. Are men, then, equal victims? The findings suggest not. On average, men were:

- less upset by their experience
- considerably less frightened
- less often injured
- less likely to seek medical help.

The effectiveness of targeting prevention, intervention and support can be improved by identifying the circumstances in which domestic violence is most likely to occur. Although the BCS cannot definitively state the causes of domestic violence, the factors identified indicate the importance of relationships under particular social or economic strain. One implication is that agencies which are already in contact with these groups of people, such as the medical profession, may be in the best position to identify and provide initial support to victims.

METHODOLOGICAL NOTE

The 1996 BCS interviews were conducted by Social and Community Planning Research (SCPR). The overall BCS response rate was 83%, and 97% of respondents aged 16 to 59 (10,844) completed the CASI questionnaire.

For a more detailed report, see *Domestic Violence: findings from a new British Crime Survey self-completion questionnaire* by C Mirrlees-Black. (1998). Home Office Research Study No 192. London: Home Office. Copies are available from Information and Publications Group (address below).

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