

Health Status Survey Brief

Injury and Interpersonal Violence in Utah

Injury in Utah

Unintentional (“accidental”) injury claims the lives of more Utahns aged 1 through 44 than any other cause of death.¹ Nationally, trauma has become the most costly medical problem, consuming an estimated \$71.6 billion in medical spending, which tops the \$67.8 billion spent on heart conditions.²

The 2001 Utah Health Status Survey (HSS) included questions designed to measure the prevalence of nonfatal intentional, as well as unintentional injury in the Utah population. Injury was defined as any accidental or intentional injury to a person as a result of a fall, burn, poisoning, overdose, motor vehicle crash, sports injury, bite, gunshot, drowning, suicide attempt, or any other cause. Questions were asked of a randomly selected adult household member, 18 years of age or older, regarding all household members, beginning with the following question: “Has anyone currently living in your household had an injury during the last 12 months that limited their usual activities for a day or longer or caused them to require medical attention?”

According to 2001 HSS, of the 24,088 resident survey participants, 12.0% had experienced a nonfatal injury in the last year which limited usual physical activity or caused them to seek medical attention. Of those for whom there was a reported injury, 55.7% are reported to have gone to a hospital or emergency room for care.

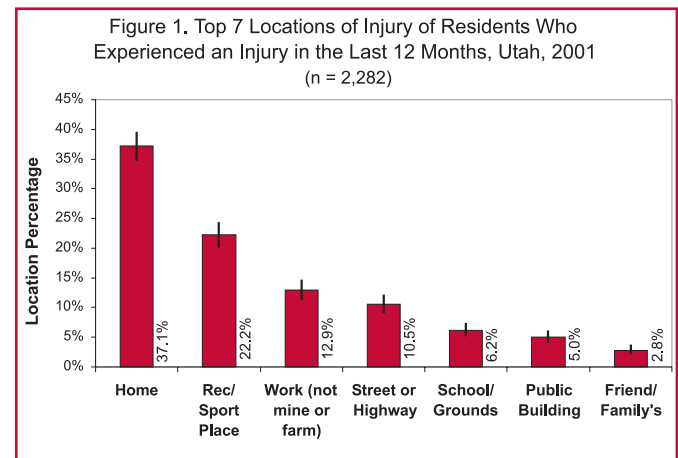
Injury Incidence by Age and Sex

10.4% of females and 13.7% of males reported they had experienced an injury in the last 12 months. The HSS data indicate that “older” males (65 and older) were less likely, at 8.2%, to experience injuries than were male teens and children (aged 17 and younger), at 12.6%. At 18.2%, males aged 18–34 had the most injuries of any age group.

The HSS data further indicate that statistically significant injury differences existed between women 65 and older (15.2%) versus younger females. Females aged 0–17 were the least likely to experience an injury compared to other age groups (9.5%).

Where Injuries Happen

The top seven most commonly reported injury locations accounted for 96.7% of all Utah injury locations reported. “Home” (37.1% of injuries) was the most commonly identified location, followed by “place for recreation and sport” (22.2% of injuries), and “workplace and premises [other than farm or mine]” (12.9% of injuries). Although it was not initially included as a response category, enough respondents mentioned “home of friend or family” that it was later added as a category to be included in analysis.



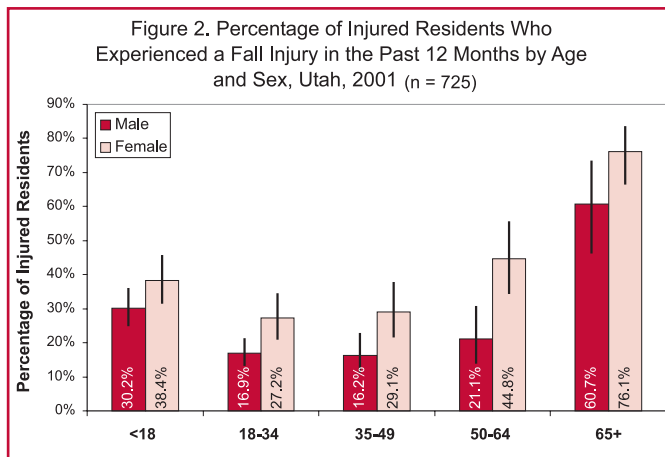
Fall Injuries

To identify only the most recently occurring injury to an individual, survey respondents were asked: “What was the cause of the most recent injury?” The HSS survey administration team recoded responses to this open-ended question into 34 injury causes.

The most frequently reported type of injury among the 2001 Utah HSS sample was falls. More than 30% of all most recent injuries mentioned by respondents were “falls.” The second most frequently mentioned injury, at 16.6% of the time, was “other sports injury.” The third leading cause of injury, mentioned 7.7% of the time, was “motor vehicle accident.”

Fall Incidence by Age and Sex

According to these data, the prevalence of fall injuries differed significantly between men and women only between the ages of 50 and 64. Among Utahns who experienced any injury in 2001, women aged 50–64 at 44.8% were more likely to experience falls than men, at 21.1% in the same age group.



For both males and females, the findings indicated the greatest likelihood of experiencing a fall injury was in old age. Among Utah men 65 and older who were reported to have experienced any injury in 2001, 60.7% were reported to have had falls. Young males (aged 17 and under) were the age group second most likely to experience fall injuries (30.2%). Among Utah women 65 and older who were reported to have experienced an injury in 2001, 76.1% were reported to have had falls. Females aged 50–64 were second most likely to experience a fall injury at 44.8%.

Limitations of the 2001 Utah HSS Injury Data

The greatest limitation of the HSS data is that they are proxy data. That is, one randomly selected household resident, aged 18 or older, answers the survey questions regarding the health of *all* household members. Also, the survey injury items have a relatively long recall time span of one year. A further limitation

is that the “injury cause” survey item includes both *underlying* cause response categories (e.g., fall, motor vehicle accident, other sports injury) in addition to *injury description* categories (e.g., back strain, cut/laceration, caught in or crushed by). Had respondents been probed by interviewers for underlying cause responses, this HSS item might have provided a clearer picture of how people get hurt in Utah. A small sample size of Utahns aged 65 and over also limited the extent of data analysis.

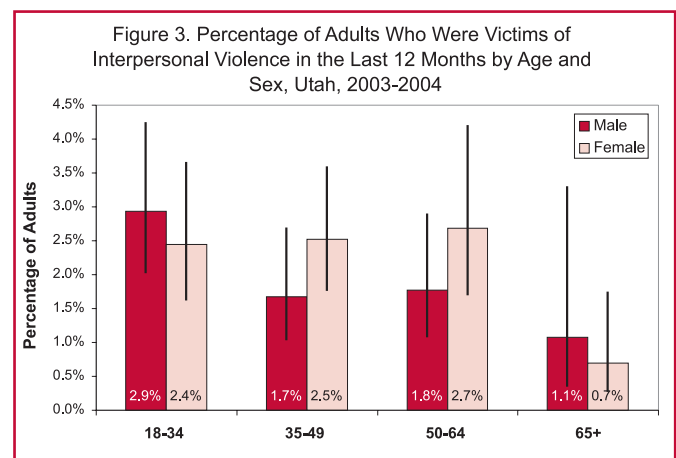
Interpersonal Violence in Utah

In 2002, the World Health Organization (WHO) declared violence as a leading worldwide public health problem³ and estimated the cost of interpersonal violence in the United States at \$300 billion a year.⁴ From 2003 to 2004, the HSS measured the prevalence of interpersonal violence in Utah for adults. Interpersonal violence was defined as any time a household member was intentionally hit, slapped, pushed, or kicked by someone, or had a weapon used against them, or was otherwise hurt by another person. It included being hurt by household members, as well as other people outside of the household. Questions were asked only of adults 18 years of age or older.

Interpersonal violence was measured by the HSS beginning with the following question:

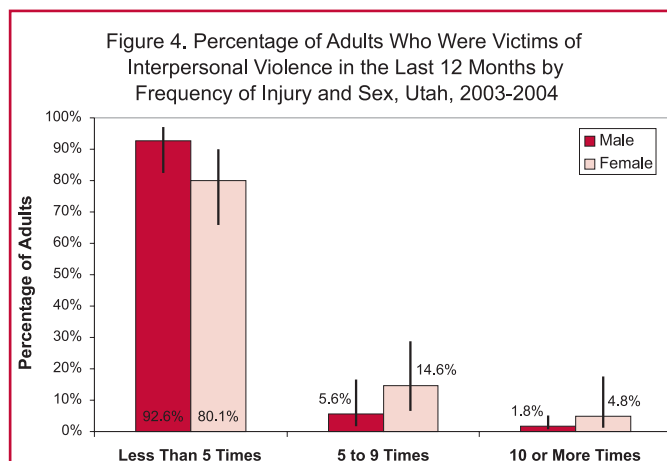
“Was there ever a time during the last 12 months that you or a member of your household were a victim of interpersonal violence?”

Respondents who answered “yes” were then asked questions regarding the frequency of injury, where the incident took place, who hurt them, the type of injury sustained, whether they were examined by a

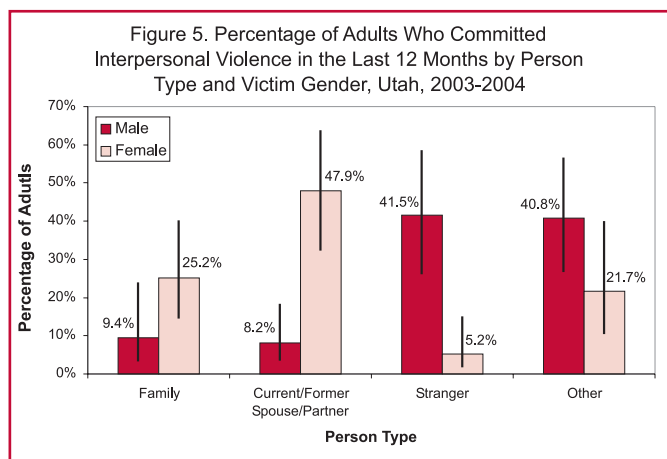


health care provider, and whether the incident was reported to authorities.

According to the 2003–2004 HSS, an estimated 18,500 Utahns 18 years or older (1.1%), had been a victim of interpersonal violence in the last 12 months. Males were more likely to have been victims of interpersonal violence at younger ages (18–34, 1.8%) than females (Figure 3). As the frequency of injuries increased (5 or more times in the last 12 months), females were more likely to be victims of interpersonal violence than males (Figure 4).



Results from the HSS show that 77.6% of those who committed interpersonal violence were males, and 52.0% of interpersonal violence incidents occurred at home or in the yard. Furthermore, it was found that males were more likely to be victims of interpersonal violence when committed by strangers (41.5%) and least likely to be victims when committed by a current or former spouse, boyfriend, or girlfriend (8.3%). The opposite was seen in female victims.



They were more likely to be victims of interpersonal violence when committed by a current or former spouse, boyfriend, or girlfriend (48.5%) and least likely to be victims when committed by strangers (5.3%) (Figure 5). While women are less likely than men to be victims of violent crimes overall, women are five to eight times more likely than men to be victimized by an intimate partner.⁵

On the most recent occasion of interpersonal violence, 79.7% of the victims sustained an injury, such as a bruise, broken bone or tooth, or a cut or a scrape. Twenty-six percent of the victims were examined by a doctor or other health care provider and 50.6% reported the incident to the police or other authorities.

References

1. National Center for Health Statistics (NCHS) Vital Statistics System, 1999-2002 data.
2. Agency for Healthcare Research and Quality (AHRQ) U.S. Dept. of Health & Human Services, 1996-2003 data.
3. World Report on Violence and Health, World Health Organization, 2002.
4. The Economic Dimensions of Interpersonal Violence, World Health Organization, 2004.
5. U.S. Department of Justice, Violence by Intimates: Analysis of Data on Crimes by Current or Former Spouses, Boyfriends, and Girlfriends, March 1998.



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The Utah Health Status Survey (HSS), conducted on an ongoing basis by the Utah Department of Health, is representative of noninstitutionalized adults and children living in Utah households with telephones. It includes information on a variety of topics, including physical and mental health status, health insurance coverage, and access to care. The HSS was conducted with 7,520 households (24,088 persons) in 2001 and 6,065 households (19,062 persons) in 2003–04. Prior to analysis, HSS data are weighted so that the findings can be generalized to the general Utah population. **The Utah Department of Health would like to thank the citizens of Utah who have participated in this survey.**

For more information about the Utah Health Status Survey, please contact the HSS Coordinator at the Utah Department of Health at (801) 538-9947. You may also visit the Utah Department of Health, Office of Public Health Assessment website, at: <http://ibis.health.utah.gov>.