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Assault in Queensland

Introduction

The level of violence in the community is a cause of serious concern to the public. Incidents such as random, vicious attacks on schoolchildren give rise to considerable fear for personal safety, particularly among women, children and the elderly. Frequent assaults in public places make people reluctant to use these places, thereby contributing to a sense of fear. There is also increasing concern about the amount of assault that occurs in the home.

Assault has a serious financial impact on the community. The more serious cases require medical treatment and a stay in hospital. Added to this are the loss of income for victims and the cost to taxpayers of apprehending and punishing the perpetrators. There are also the incalculable emotional costs to victims and their families, and the social damage to the community generally.

This paper examines such questions as:

- · How common is the offence of assault in Queensland?
- How much is reported to the police?
- Has assault been increasing in Queensland?
- How does Queensland compare with the rest of Australia?
- Who is most at risk of assault?
- In what circumstances are people most likely to be assaulted?
- What proportion of assaults involve the use of weapons?
- Who are the offenders?

The paper is divided into three parts. The first part focuses on assault trends over time; the second part analyses the factors that increase or decrease the risk of assault; and the third describes the context in which assaults are most likely to occur.

Much of the quantitative research on which this paper is based was undertaken as a joint
project between the Criminal Justice Commission and the Queensland Government
Statistician's Office.

Sources of data

Three main sources of data are used in this paper. Each source has some limitations, but taken together they can tell us a good deal about trends and patterns. If the three sources agree, we can be reasonably certain of the facts; if they disagree, we must be much more careful in drawing conclusions:

- Queensland Police Service (QPS) statistics on assault. These statistics contain details on a wide variety of violent incidents and have the great advantage of being collected continuously. However, for an incident to be recorded by police it must first be reported to them and then judged serious enough to warrant recording as an offence. Many incidents of domestic violence, for example, are not reported to police and even when reported may not be judged worthy of investigation.
- Australian Bureau of Statistics (ABS) Crime and Safety Surveys 1983, 1993 and 1995, and the Queensland Government Statistician's Office (GSO) Crime Victims Survey 1991. Because assaults are often not reported to police, researchers have turned to surveys of the public to find out how many people have been victims of violence. These surveys always reveal a great deal of victimisation that never comes to the attention of the police, but they have their own particular limitations—people may be reluctant to report some incidents, such as domestic violence, even to an anonymous interviewer, and, of course, people forget and exaggerate. Surveys of crime victims can also produce different measures of the extent of assault depending on the methodology employed and the questions asked. For example, the 1991 GSO survey, which asked people about assault in three separate questions, produced an estimated assault rate 152 per cent higher than the 1993 ABS survey. It is known that the more questions that are asked, the more respondents are prompted to remember or include incidents. It could be this factor that accounts for the discrepancy between the two surveys. In addition, the 1991 GSO survey used face-to-face interviews, whereas the 1993 ABS survey used questionnaires that respondents returned by post.
- Queensland Department of Health hospital statistics on inpatient 'separations' for purposely inflicted injuries. These statistics have the obvious advantage that they count actual incidents of serious assault in a reasonably objective fashion. But, even here, hospital staff are often dependent on the willingness of victims to tell the truth about the causes of their injuries. In addition, medical criteria for deciding whether a person is injured seriously enough to be treated as an inpatient rather than as an outpatient may have changed over time. Consequently, inpatient figures reflect only 'the tip of the iceberg'—and one that is subject to changing medical definitions.

Part 1: The nature and extent of assault in Queensland

How common is assault?

In 1995–96, police recorded 17,397 assaults in Queensland (excluding sexual assaults), representing one assault for every 193 people. About 58 per cent of these assaults were classified as 'serious', meaning that the incident resulted in injury or interfered with the victim's health or comfort.

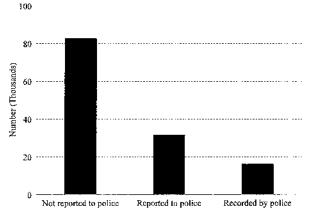
In the 1995 Queensland Crime and Safety Survey, 3.2 per cent of respondents (people aged 15 years or over) stated that they had been assaulted at least once in the previous year. This represented a victimisation rate approximately six times greater than indicated by police statistics.

Figure 1 compares the number of assaults and threatened assaults committed in Queensland from March 1994 to April 1995 and not reported to police (as estimated from the 1995 ABS survey), the estimated number reported to the police, and the number recorded by the police from July 1994 to June 1995.³ This figure indicates that the main reason police statistics under-count violence is because most assaults are not reported to police. Only 36 per cent of victims of assault and threatened assault who were

surveyed said that they had reported the offence to the police.

The most common reason given for not reporting assaults was that they were too trivial (one-third of unreported assaults). One-fifth of those who did not report the assault said it was a private matter and/or that they had dealt with it themselves; another fifth felt that the police would be unwilling to do anything about it.

Figure 1: Recorded and unrecorded assault, 1994-95, Qld



Source: ABS Crime and Safety Survey 1995, Queensland; QPS Statistical Review 1994-95

Note: Recorded assaults include those against under 15 year-olds which were not measured by the crime and safety surveys.

Factors that appear to increase the likelihood of an assault being reported are the seriousness of the assault, the use of a weapon, and the assailant being known to the victim.

Figure 1 also shows that the number of assaults that victims said they had reported to police was substantially higher than the number recorded by police. There may be several explanations for this discrepancy. Sometimes police will record an incident that involves a number of victims as a single incident; or the incident may not be regarded as sufficiently serious; or police may have taken informal action that did not require them to record the assault; or the incident was recorded by police, but as something other than an assault.

Measuring domestic assault

The various crime and safety surveys undertaken in Queensland have not thrown much light on the problem of domestic violence because they have collected little information on assaults between people in a domestic relationship. Indeed, it is likely that standard crime victims surveys do not detect most incidents of domestic violence because they do not explicitly state that victims should include assaults by people known to them.

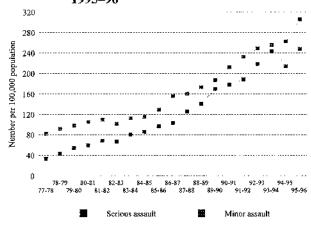
To obtain more accurate estimates of domestic violence and of the extent of violence against women generally, the ABS interviewed about 6,300 women throughout Australia between February and April 1996. The results of this survey were published as Women's Safety Australia (ABS 1996a). This survey found that 2.6 per cent of women who were married or in a de facto relationship had experienced domestic violence in the previous twelve months. It also found that 5.9 per cent of women overall had experienced physical violence in the previous twelve months, and 1.9 per cent had been sexually assaulted. These estimates are much higher than reported in previous Australian surveys.

Is the rate of assault increasing?

Police data. The QPS data presented in figure 2 show trends in serious and minor assaults. Sexual assault is excluded since these offences have not been consistently reported or recorded over time, and because it is difficult to make comparisons with data from crime victims surveys.

From July 1977 to June 1996, the number of assaults (per 100,000 population) recorded annually by police increased by 381 per cent. In 1977–78, there were 115 recorded incidents of assault per 100,000 population; by June 1996, this had increased to 553 per 100,000, the highest rate on record.

FIGURE 2: RECORDED SERIOUS AND MINOR ASSAULTS PER 100,000 OF QLD POPULATION, 1977-78 TO 1995-96



Source: OPS Statistical Review 1994-95

Note:

In 1991, there was a change from counting incidents as having occurred in the year in which they were recorded to the year in which they were reported. In 1994, the QPS changed from a manual/paper recording system to centralised telephone recording (CRISP).

As shown in figure 2 above, over this period the number of recorded serious assaults (i.e. those resulting in injury or interfering with the victim's health or comfort) per 100,000 people increased more than the number recorded as minor, particularly during the 1990s.

Between July 1993 and June 1996, the number of minor assaults recorded by the police actually fell slightly. This may indicate that the reporting of serious and minor assaults has changed (with serious assaults now more likely to be reported). Alternatively, it may be that offences once recorded by police as minor are now more likely to be classified as serious.

Survey data. Table 1 (next page) compares assault victimisation rates for the Queensland population aged 15 years and over from the 1983, 1993 and 1995 ABS Crime and Safety Surveys.⁵ (Because of the methodological differences described earlier, the 1991 GSO survey is not included in this comparison.)

^{2.} The 1983 and 1993 ABS surveys (both national surveys) collected data from approximately 7,500 and 9,150 Queensland respondents respectively. The 1995 survey, which covered 7,844 respondents, was restricted to Queensland, although very similar surveys were conducted in several other jurisdictions around the same time. The 1991 Queensland GSO survey covered 6,315 respondents.

Estimates of the number of reported and unreported incidents were derived by multiplying incident and reporting rates for the sample by the population size. The number of incidents per respondent was capped at three.

A comprehensive analysis of the problems involved in measuring the extent of domestic violence may be found in Ferrante, Morgan, Indermaur and Harding (1996).

Although the 1983 survey was conducted using face-to-face interviews rather than a mail-back questionnaire, it is included because the question structure is highly comparable.

TABLE 1: Assault in Queensland (Crime and Safety Surveys 1983, 1993 and 1995)

% victims	1983	1993	1995
Assault	2.9	2.9	3.2
Assault with injury		0.7	0.9

Source: ABS Crime and Safety Surveys 1983, 1993 and 1995 (weighted

data).

Note: The victimisation rate is the estimated proportion of the

population aged 15 years and over who were assaulted at

least once in the preceding year.

The table shows that the 1983 assault rate was identical to that obtained in 1993 (2.9% of the sample), suggesting no change in rates of violence in that ten-year period. However, between 1993 and 1995 the rate increased to 3.2 per cent, an increase of 9 per cent.

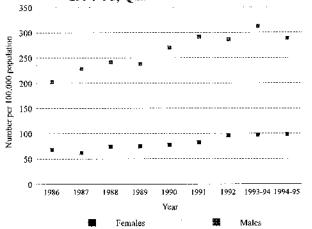
The increase recorded by the surveys between 1993 and 1995 is of the same order as the increase in the number of assaults recorded by the police over the same period (10%). Both survey and recorded crime statistics show a substantially higher rate of increase in serious assaults, in the vicinity of 30 per cent.

Hospital inpatient statistics. Figure 3 shows, for the period 1986 to 1994–95, the number of adults (aged 15 years or more) per 100,000 population who spent at least one night in hospital because of injury purposely inflicted by another person. Figure 4 shows the same data for children aged up to 14 years.⁶

In 1994–95, there were 3,666 inpatient separations (related to assault injuries) recorded for adult males and 1,257 for adult females. Between 1986 and 1994–95, the number of inpatient separations (i.e. discharges) per 100,000 of the population increased by 42 per cent for adult males and 44 per cent for adult females (see figure 3). However, in contrast to the picture given by police and survey statistics, there was no increase in the rate of recorded injuries for adult males and females between 1993-94 and 1994–95. The rate for children (per 100,000) changed less between 1986 and 1994-95, with a 23 per cent increase for boys and a 23 per cent decline for girls (see figure 4). These figures suggest that, although violence directed against children is a serious problem, it is not increasing as rapidly as violence against adults.

Analysis by age-groups suggests that women aged over 25 accounted for a disproportionate share of the increase in adult violence. Adjusted for population growth, the number of female victims older than 25

FIGURE 3: HOSPITAL INPATIENT SEPARATIONS FOR PURPOSELY INFLICTED INJURIES, NUMBER PER 100,000 AGED 15 YEARS OR MORE, 1986 TO 1994–95, QLD

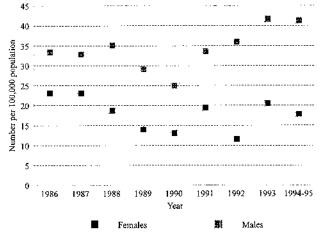


Source: Queensland Health Department unpublished data

Notes:

- The term 'inpatient separation' refers to people admitted as inpatients and later discharged. A person may be counted more than once if admitted and discharged more than once.
- 2. Excluded are injuries where the cause was undetermined.

FIGURE 4: HOSPITAL INPATIENT SEPARATIONS FOR PURPOSELY INFLICTED INJURIES, NUMBER PER 100,000 AGED UP TO 14 YEARS, 1986 TO 1994-95, QLD



Source: Queensland Health Department unpublished data

Notes:

- The term 'inpatient separation' refers to people admitted as inpatients and later discharged. A person may be counted more than once if admitted and discharged more than once.
- 2. Excluded are injuries where the cause was undetermined.

years increased by 61 per cent between 1986 and 1994–95, compared with an increase of only 20 per cent in the 15 to 24 female age-group. This might reflect a greater willingness by older women to report domestic violence as a cause of their injuries, or more care taken by hospital authorities to record such incidents. For men, increases in hospitalisation rates were not related to age—the increase (adjusted for population) was about 43 per cent, both for those aged 15 to 24 years and for those older than 25 years.

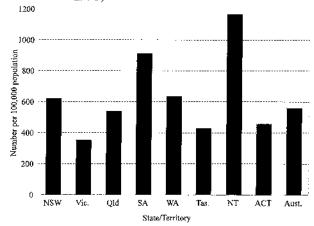
Interstate comparisons

Another way of assessing rates of violence in Queensland is to compare Queensland with other States. The ABS publication National Crime Statistics January to December 1995 (1996b) provides comparative recorded police statistics of the rate of victimisation from assault per 100,000 of the population. Comparison between States and Territories shows that Queensland was ranked fifth for rate of assault victimisation after the Northern Territory, South Australia, Western Australia and New South Wales (see figure 5). According to police data, therefore, Queensland was below the national average rate of assault victimisation.

The 1993 and 1995 ABS surveys show a different pattern, with Queensland scoring higher than all the other mainland States in both years (see figure 6).⁷ This discrepancy between police and survey statistics may reflect differences in police recording practices.

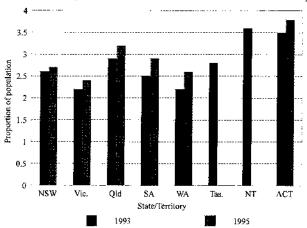
There is no obvious explanation for why Queensland may have a higher rate of assault than other States, but we can say with some certainty that this is unlikely to be attributable to differences in the effectiveness of the police or the criminal justice system. The explanation is much more likely to be found in lifestyle or demographic factors, or may reflect cyclical factors of some kind.

FIGURE 5: RATE OF ASSAULT VICTIMISATION BY STATE AND TERRITORY (NATIONAL CRIME STATISTICS 1995)



Source: ABS (1996b)

FIGURE 6: Proportion of the population who were victims of assault by State and Territory (Crime and Safety Surveys 1993 and 1995)



Source: ABS Crime and Safety Surveys 1993 and 1995

Note: Tasmania and the Northern Territory did not conduct Crime and Safety Surveys in 1995.

Summary: Trends in assault

For the period 1983 to 1993, police statistics show a sharp rise in assault, whereas the survey data show no change. But the two sources agree that between 1993 and 1995 the number of assaults increased by about 10 per cent. Police and hospital data agree that over the past decade there has been a substantial increase in assaults, although the police data suggest a bigger increase in serious assaults than the hospital statistics. Hospital statistics show no increase at all in the number of adult victims of serious assault between July 1993 and June 1995. Police and survey data also disagree on how the assault rate in Queensland compares with those of other States.

It is not unusual for different kinds of crime statistics to disagree. For example, in a recent report for the Australian Institute of Criminology, David Indermaur used crime victims surveys and police statistics on homicide, serious assault, rape and robbery to examine trends in violence in Australia (1996). He found in using the survey and homicide statistics that there was no evidence of an increase in violence over the past twenty years, but that the police figures on non-lethal violence showed a strong upward trend in the same period. He concluded cautiously that since the survey and homicide statistics are the most reliable indicators, most forms of violence probably have not increased in the past twenty years.

What can we conclude for Queensland? It is noteworthy that none of the data sources indicates any *decline* in violence since the 1980s. Most sources indicate an increase, although they disagree on exactly when the increase occurred and how big it was. The evidence points to an increase in assaults, but the size of the increase is probably much less than the dramatic rise suggested by police statistics.

If there has been an increase in assault, what has caused it? Criminological research suggests that changes in the level of crime in society over time may be influenced by many factors—demographic shifts, economic or cultural change and increased opportunities for offending to occur. However, without more research it is not possible to say which, if any, of these factors apply to Queensland.

The data cover the period 1986 to June 1995, with a six months' break in the first half of 1993 due to a change in recording practices from calendar to financial years.

The Western Australian 1995 survey was conducted in October 1995, and those for other States in April 1995. This may have had some effect on the comparability of the estimates.

Part 2: Risk factors

Not everyone is at equal risk of becoming a victim of violence. Identifying which groups in society are at greatest risk is essential, therefore, for the effective targeting of preventive strategies.

Various risk factors were identified by Stewart and Homel (1995) in a detailed analysis of data from the 1991 GSO survey. This survey provided particularly comprehensive information on the nature of victimisation, ranging from verbal abuse only, through theft of personal belongings, to direct physical assault. Verbal abuse was found to be the most common personal crime, having been reported by 10.6 per cent of the sample in the preceding year. The next most frequent type of offence was theft of personal property at 8.0 per cent, with assault victimisation (including threats) being reported by 7.1 per cent. Domestic assault was reported by only 0.9 per cent of the sample.8 However, as discussed above, the survey was not well suited to measuring the incidence of domestic violence.

Age and gender

Of respondents who reported being a victim of an offence, those in the younger age-groups were more likely to be victims of assault or property crime than verbal abuse. Respondents between the ages of 35 and 49 were about equally likely to be the victim of either verbal abuse or an assault/property crime. However, if an older person reported being the victim of an offence, the offence was more likely to be verbal abuse than the more serious crimes.

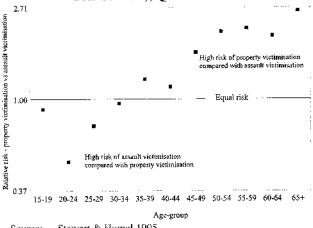
Young people, particularly those aged 20 to 24 years, were at greater risk of an assault than a property crime (see figure 7). Conversely, victims over the age of 45 were substantially more likely to be victims of a property crime than a violent crime.

Males were more likely to be the victim of some kind of crime against the person than females, with 28.3 per cent of males reporting victimisation compared with 21.4 per cent of females.

Males were almost twice as likely as females to report being the victim of an assault (4.9% compared with 2.6%). However, women were at far greater risk of actual and threatened domestic assault than men. For example, 38.8 per cent of females who said that they had been the victim of an assault reported that the assault had been perpetrated by a partner or expartner, compared with only 2.1 per cent of males.

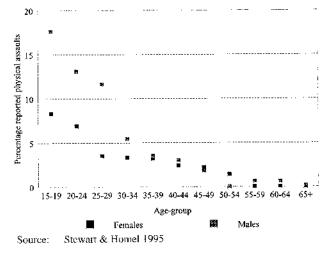
Figure 8 shows that the differences between male and female assault rates are greatest for the younger age-groups. In fact, males and females over the age of 35 years had an equal low risk of physical assault.

FIGURE 7: RISKS OF VICTIMISATION FOR PROPERTY OFFENCES COMPARED WITH VICTIMISATION FOR ASSAULT, BY AGE OF VICTIM (CRIME VICTIMS Survey 1991), Qld



Stewart & Homel 1995 Source:

FIGURE 8: RISK OF ASSAULT VICTIMISATION, BY AGE AND GENDER (CRIME VICTIMS SURVEY 1991), QLD



Males in the younger age-groups were more at risk of a physical assault than young females and they were at risk until an older age. Of all females, those in the 15 to 19 year age-group were at the highest risk. By the time a female has reached 25, this risk has levelled out. Not until the mid-30s do males reach this plateau.

In summary, it is clear that young people, and in particular young males, are disproportionately likely to be victims of physical assault.

Marital and labour force status

The 1993 and 1995 ABS surveys confirm the analyses of the 1991 GSO survey concerning variations in risk for males and females of different age-groups and also enable us to calculate the risks of assault by marital and labour force status.9

Table 2 shows the relative risks of becoming a victim of assault for men and women in different age-groups according to their marital status. Risks of assault or threatened assault are greatest for single young men,

at 2.7 times the average. The risk of assault is also high for separated or divorced people in the middle age bracket, at twice the average for men and 1.65 the average for women. Within each sex/age group, married people and those in de facto relationships have the lowest risks of assault.

Table 3 shows the relative risks by labour force status. The unemployed are at greatest risk, especially young males, at 4.7 times the average. Young males not in the labour force, mainly because they are at school or college, are also at high risk at 2.75 times the average.

TABLE 2: RELATIVE RISKS OF ASSAULT VICTIMISATION BY AGE, GENDER, AND MARITAL STATUS (CRIME AND SAFETY SURVEYS 1993 AND 1995), QLD

		Males	Females
15-24	Married/De facto	1.45	.50
	Separated/Divorced	_	
	Single/Widowed	2.70	1.60
	All	2.60	1.35
25-54	Married/De facto	1.20	.50
	Separated/Divorced	2.05	1.65
	Single/Widowed	1.50	.95
	All	1.30	.65
55+	Married/De facto	.20	<.01
	Separate/Divorced	1.20	.45
	Single/Widowed	.25	.05
	Ali	.25	.10

Source: ABS Crime and Safety Surveys 1993 and 1995 (combined Queensland samples; weighted data)

Note: Average risk for each offence type = 1.00. Indexed risks rounded to nearest .05. Indicates sample too small for reliable estimates.

Table 3: Relative risks of assault victimisation by age, sex, and labour force status (Crime and Safety Surveys 1993 and 1995), QLD

		Males	Females
15-24	Employed	2.10	1.15
	Unemployed	4.70	1.90
	Not in labour force	2.75	1.80
	All	2.60	1.35
25-54	Employed	1.25	.55
	Unemployed	1.95	1.40
	Not in labour force	1.50	.70
	All	1.30	.65
55+	Employed	.30	.25
	Unemployed	1.10	.0
	Not in labour force	.20	.5
	All	.25	1.0

Source: ABS Crime and Safety Surveys 1993 and 1995 (combined Queensland samples; weighted data)

Note: Average risk for each offence type = 1.00. Indexed risks rounded to nearest .05.

Those in employment may be at lower risk because they have less time to spend at high-risk locations. The lowest risks, though, are for those aged 55 years or more who are no longer in the labour force.

Aboriginal and Torres Strait Islanders

National crime surveys do not include large enough samples of some minority groups to allow reliable estimates of crime risks for these groups. In 1994, a special ABS survey interviewed 15,700 Aboriginal and Torres Strait Islanders (ABS 1994). The survey included some questions on experiences of violence.

About one in eight (12.9%) of those aged 13 years or over said they had been physically attacked or verbally threatened in the previous year, a much higher figure than that given by the 1993 ABS survey for the Queensland population as a whole, and higher than the approximately 7 per cent victimisation rate found in the 1991 Queensland GSO survey. Forty-four per cent of physical assaults and 31 per cent of threats of assault were said to have been reported to the police, which represents slightly higher rates than for the general population (see above). 12

Moller (1996) reports an analysis of national death and hospitalisation data, comparing causes of injury for the indigenous population with the same data for the non-indigenous population. Moller cautions that injury data are often unreliable, especially when the injury is not fatal. However, he concludes that the rate of injuries among indigenous peoples is much higher than among non-indigenous people.

According to Moller, taking into account differences in the age structures of indigenous and non-indigenous populations, indigenous people have a death rate caused by interpersonal violence nearly 11 times greater than non-indigenous people. ¹³ Similarly, the injury rate for interpersonal violence based on hospital separations

Assaults were included as domestic assaults when the victim identified the assailant as either a current or former spouse or de facto, or a current boyfriend or girlfriend.

The 1993 and 1995 Crime and Safety Survey data were combined to increase the reliability of the analysis.

Face-to-face interviews were conducted by trained indigenous interviewers.

^{11.} Unlike the Crime and Safety Surveys, this survey included 13 and 14 year-olds, for whom the assault rate was lower. Comparing only the 15+ age-group would increase the Aboriginal and Torres Strait Islander rate slightly. Only 2.6 per cent of the Aboriginal and Torres Strait Islander population are aged 65 or over, compared to 14.5 per cent of the non-indigenous population, and victimisation rates are lower for older age-groups. However, rates of assault are still higher when comparing equivalent age-groups.

^{12.} Based on the last incident.

^{13.} The rate ratios are for the period 1990–92 for deaths, and 1991–92 for hospital separations. Queensland death certificates did not need to indicate Aboriginality until January 1996, so the data on death rates do not include Queensland.

is 17 times greater (although, as Moller cautions, this ratio may be inflated by a greater reluctance by non-indigenous women to admit to domestic violence as a cause of their injuries).

High-rate ratios were obtained for some other causes of injury and death, particularly 'poison: substances other than pharmaceuticals etc.' and 'fires, burns, and scalds'. This suggests that interpersonal violence is part of a cluster of serious health and lifestyle problems in indigenous communities and should not be viewed in isolation.

In summary, it is clear that although the reliability and comprehensiveness of survey and injury data need to be improved, the indigenous population suffers far higher rates of injury caused by interpersonal violence than the non-indigenous population.

Lifestyle

The 1993 ABS survey asked respondents where and how often they went out for entertainment after 6 p.m. It found that those who went out more frequently were more likely to have been assaulted—8.1 per cent of those who generally went out more than once a week had been a victim of assault at least once in the preceding twelve months, while only 2.2 per cent of those who said they rarely went out had been a victim of assault. This result was observed both within and between age-groups.

People who frequent particular places also seem to be at greater risk of assault. For instance, those attending hotels and clubs were more than twice as likely to have been assaulted in the previous year than those who had not.

Multiple victimisation

Some victims are assaulted more than once over a twelve-month period. Recorded crime statistics provide no information about the extent of repeat victimisation, but crime victims surveys, including the 1993 and 1995 Crime and Safety Surveys, do provide some information. ¹⁴ Table 4 shows that about half of the victims identified by these surveys had been assaulted more than once, and a fifth had been assaulted three times or more. This latter group, which represented fewer than 1 per cent of all respondents, accounted for 38 per cent of the incidents of assault and threatened assault counted by the surveys. ¹⁵

These surveys also show that victims of one type of violence are more likely to be victims of another. According to the 1993 ABS survey, 7 per cent of assault victims were also victims of robbery, compared to just 1 per cent of people who had not been assaulted that year.

Table 4: Levels of multiple victimisation for assault and threatened assaults (Crime and Safety Surveys 1993 and 1995), QLD

No. of incidents of crime victimisation in previous twelve months	% respondents	% victims	% incidents
0	97		_
1	2	55	33
2	1	24	29
3+	<1	21	38

Source: ABS Crime and Safety Surveys 1993 and 1995 (combined Queensland samples; weighted data)

Summary: Risk factors

- · Young people and males are victimised more overall.
- When assaulted, young people are more likely than older people to be physically assaulted rather than just threatened.
- Young men (especially teenagers) are more at risk of physical assault than young women.
- Women are at more risk than men of being assaulted by their partners.
- People with strong ties to the community through marriage or employment are at less risk of assault than people without these ties.
- Single, unemployed young men have the highest risk of any group in the community.
- Indigenous Australians are at a substantially greater risk of becoming victims of physical assault resulting in death or injury than non-indigenous Australians.
- Those who go out for entertainment at night, particularly to hotels and clubs, have a higher than average risk of assault.
- Victims of assault tend to have been victimised more than once, and are also more likely than non-victims to have been the victim of other violent offences

Part 3: The method and context of assault

Method of assault

In 1995, 6 per cent of recorded minor assaults and 18 per cent of serious assaults were recorded by the police as involving the use of a weapon. Use of firearms in assault was rare; just 1.4 per cent of serious assaults involved firearms. In part, this reflects the greater lethal consequence of their use—firearms were responsible for a quarter of the murders in Queensland in 1995. 16

According to victims in the 1993 and 1995 Crime and Safety Surveys, a weapon of some type was used in 16 per cent of assaults or threatened assaults. The use of a weapon was only slightly more likely to result in injury to the victim (29% of such assaults compared to 26% of those not involving a weapon). The most common weapon was a knife (31% of weapon assaults), followed by clubs or other hitting implements (29%). Guns were used in only 8 per cent of weapon assaults.

In 1994–95, assault by cutting and piercing (stabbing) accounted for 8.3 per cent of injuries to males and 8.1 per cent of injuries to females. Injuries caused by firearms accounted for only 0.4 per cent of all cases.

Of males receiving inpatient care for assault-related injuries in 1994–95, 72 per cent were treated for the effect of unarmed fights or brawls, roughly the same proportion as in 1986. This was a particularly common cause of injury for 15–24 year old males, accounting for 80.6 per cent of admissions in 1994–95.

Unarmed fights and brawls were recorded as the cause of injury in 61 per cent of female admissions in 1994–95, up from only 43 per cent in 1986. It is possible that this increase may reflect a rise in the number of domestic assaults coming to the attention of, and being recorded by, hospital authorities.

In the under 15 age-group, in 1994–95, 37.1 per cent of the female inpatient cases were of child battering and other maltreatment, compared to one-fifth (20.9%) of male cases. The main cause of injury for children, as for adults, was unarmed fights or brawls (62.1% of male cases and 40.3% of female cases).

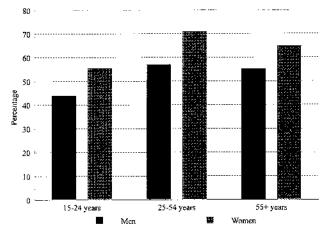
Context of assault

Relationship of offender to victim. Victims in the 1993 and 1995 Crime and Safety Surveys were asked if they knew the offender. Only 42 per cent of actual and threatened assaults were committed by strangers. The majority of young men were assaulted by a stranger (see figure 9), whereas women, particularly in the middle age-range, were more likely to say that they knew their assailant.¹⁷

Where and when. According to police statistics, the most common places for assaults to occur are streets (24% of all assaults recorded in 1995) and dwellings (21%).

Figure 10 shows where assaults against men and women of different age-groups occurred, according to the 1993 and 1995 Crime and Safety Surveys. For younger men, the most common location was outside the home. Women were most likely to be assaulted at their own or another person's home (55% of assaults), as were males aged more than 65 years.

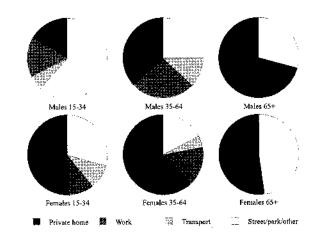
FIGURE 9: PROPORTION OF ASSAULTS IN WHICH THE VICTIM KNEW THE OFFENDER, BY AGE AND SEX OF VICTIM (CRIME AND SAFETY SURVEYS 1993 AND 1995), OLD



Source: ABS Crime and Safety Surveys 1993 and 1995, Queensland (weighted data)

Note: Based on all incidents, including those where victims did not know if they knew the offender.

Figure 10: Location of assaults in Queensland (Crime and Safety Surveys 1993 and 1995)



Source: ABS Crime and Safety Surveys 1993 and 1995, Queensland

Note: 'Private home' includes in and around home. 'Transport' includes inside private or public vehicle.

However, police call-out data can be used to identify addresses that have been visited more than once over a period of time (CJC 1996).

^{15.} The findings under-count the extent of repeat victimisation because the number of incidents of each type was capped at three. Moreover, only multiple incidents of the same crime type are included here.

^{16.} QPS unpublished data. See also CJC 1994.

^{17.} Knowing the offender does not necessarily mean there was a personal relationship—the victim may just have known of the person. The difficulties of measuring accurately cases in which there was a domestic relationship were discussed earlier in this report.

The 1991 Queensland Crime Victims Survey recorded more details about the time and place of incidents than did the ABS Crime and Safety Surveys. These data were analysed in terms of the age and sex of the 509 respondents in the survey who said they were assaulted or threatened with assault (including the few who had a weapon used against them).¹⁸

The aim of the analysis was to find out how the experiences of male and female victims aged under 20 differ from those of older victims, to help in understanding why teenagers are at such high risk of victimisation for assault. The results suggest that, because of some fairly obvious lifestyle factors, the nature of assaults experienced by teenagers and the associated risk patterns are rather different from those for older victims.

Key results were:

- About two-thirds of assaults occur after dark. Weekends (including Friday nights) are high-risk times for all victims, accounting for about a half of all assaults. Men aged 20 to 24 years are particularly likely to be assaulted at these times, no doubt often in the context of alcohol consumption.
- 'Semi-public' places, such as shopping centres, sporting facilities, commercial establishments, workplaces, schools, universities and colleges, were the locations for about one-third of assaults. Men are more often victimised in these settings than women, and older people more often than younger people. Relatively few young females are victimised in these settings.
- Around a quarter of incidents occur in streets, public parks, or public transport. Men are about twice as likely to be victimised in these settings as women, and there is also a slight trend for younger rather than older people to be assaulted in such places. Once again, most young female victims are not assaulted in these places.
- Generally, the incidence of victimisation in or around the home is higher for women, and increases with the age of victims for both sexes. For example, 20 per cent of young male victims and 30 per cent of young female victims were assaulted in or near their own or someone else's home, compared with 60 per cent of female victims aged over 20 years.
- The majority of teenage victims are assaulted in places they go to often (86% of females and 61% of males). About half of both male and female teenage victims are assaulted in places involving leisure activities away from home (other than holiday locations). Not surprisingly, leisure environments are less common locations for older victims.

In summary, the riskiest places for teenagers, especially teenage females, appear to be places of

entertainment or leisure that are visited at weekends and after dark. Perhaps surprisingly, home environments are not as risky for teenage females as they are for older women.

Characteristics of offenders

In 1995, the police recorded that they cleared 63 per cent of minor assaults and 64 per cent of serious assaults, mostly by arresting a suspected offender. The clearance rate for assault compares very favourably with the equivalent figure for other offences—for example, police cleared only 21 per cent of property offences. ¹⁹ This is largely because in many assaults the offender is known to the victim.

Of persons identified by the police as having committed minor assaults during 1995, 78 per cent were male and 20 per cent female. Males were the offenders in 84 per cent of serious assaults. Most assailants were aged under 30, with one-third aged under 20 and 8 per cent aged under 15 years. Only one in 10 offenders was aged 40 years or more.

According to the 1991 Queensland Crime Victims Survey, male victims are almost always assaulted by other males. Women are also most likely to be assaulted by males, but there are some age differences. About 40 per cent of teenage female victims are assaulted by other females, whereas only about 15 per cent of the assaults on female victims over the age of 25 years are committed by other women.

Summary: Method and context of assault

- For both adults and children, unarmed fights and brawls are the most common cause of injury.
- Firearm injuries are very uncommon.
- Child battering and maltreatment account for over a third of assault injuries inflicted on young girls and about one-fifth of the injuries sustained by boys.
- Young men aged 15 to 24 are particularly likely to be injured in unarmed fights or brawls. This is also becoming a more common cause of injuries to young women
- Most victims of assault know, or know of, their assaulant.
- Most male victims, especially young males, are assaulted in public and semi-public places; most female victims (other than teenagers) and most older victims are assaulted in their own or another's home.
- Teenagers are most vulnerable to assault in entertainment and leisure venues.
- Assaults are most likely to occur on weekends and at night.
- Most assailants are male...

^{18.} The results reported in this part of the analysis are based mainly on actual assaults rather than threats.

Property offences comprise: breaking and entering, arson, property damage, motor vehicle theft, stealing, and fraud.

Conclusion

The main findings presented in this paper, and relevant policy implications, are as follows:

- Police crime statistics considerably overstate the extent to which assault in Queensland has increased in the last decade. However, crime victims surveys and hospital data confirm that there has probably been some upward trend in the underlying rate of assault in Queensland in recent years. This seems to be opposite to assault trends observed elsewhere in Australia (Indermaur 1996). There is also some evidence that the rate of assault in Queensland may be slightly above the national average.
- The 1996 ABS Women's Safety Survey has shown substantially higher levels of domestic violence against women than found using traditional measures. This highlights the importance of conducting specific-purpose surveys such as this regularly.
- When information about the victims of assault is closely analysed, it is clear that some groups are at greater risk than others, namely young people, males, single people, the unemployed, and indigenous people. Young people, especially teenagers, are at the highest risk of the most serious forms of violent victimisation. These groups should therefore be given priority in any initiatives to reduce violence.
- For young people, the risk of assault is greater at the hands of peers, while out at night in public places of entertainment. Older people are more likely to be victimised in or near a private home. Clearly, preventive measures that target young people need to be quite different from those aimed at adults or the elderly. These findings indicate, for instance, a need for better regulation of night-time entertainment venues frequented by young people (such as video game parlours, shopping malls and nightclubs).
- The greater risk of violent victimisation experienced by indigenous Australians appears to be one aspect of a range of health and lifestyle problems they have. Strategies aimed at reducing violence need to be incorporated into broader initiatives aimed at improving the quality of life within these communities.

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