

XXXI ACHR

*Meeting of the Advisory Committee on Health Research
of the Pan American Health Organization
15-17 July 1996
Washington, D.C..*

CULTURAL NORMS AND ATTITUDES TOWARD VIOLENCE IN SELECTED CITIES OF THE REGION OF THE AMERICAS



Research Coordination
Division of Health and Human Development
Pan American Health Organization
*Pan American Sanitary Bureau • Regional Office of the
World Health Organization
Washington, D.C.
1996*

MULTICENTER STUDY:
**CULTURAL NORMS AND ATTITUDES TOWARD VIOLENCE IN SELECTED CITIES
OF THE REGION OF THE AMERICAS**

PROJECT ACTIVA

SUMMARY¹

Washington, D.C.

June 1996

RESEARCH COORDINATION
DIVISION OF HEALTH AND HUMAN DEVELOPMENT

¹ Based on the original version of the Research Protocol prepared by Alfred McAlister, Ph.D.; Luis Fernando Vélez, M.D., Ph.D. candidate; and Rebecca de los Ríos, M.P.H., M.Sc. The present version includes the contributions made by investigators in the meetings held in Houston, Texas, 15-19 January, 1996, and in San José, Costa Rica, 15-20 April 1996, sponsored by the Pan American Health Organization.

Table Contents

	<u>Page</u>
I. INTRODUCTION	1
II. SUMMARY OF PROJECT ACTIVA	
1. Background and Rationale	2
2. Theoretical Model: Social Psychological Processes Governing Violence	3
3. Definitions of Model Components	6
4. Objectives and Purposes of the Study:	8
5. Methodology	
5.1 Measurement of Study Variables:	10
5.2 Study Design	14
III. MULTICENTER PROJECT ACTIVA: Timetable of Activities	15
IV. PRINCIPAL AND ASSOCIATE INVESTIGATORS by Country and Institution	16
METHODOLOGICAL ANNEX	17
SAMPLE OF QUESTIONNAIRE	

**CULTURAL NORMS AND ATTITUDES TOWARD VIOLENCE IN SELECTED CITIES
OF THE REGION OF THE AMERICAS**

I. INTRODUCTION

The Multicenter Study on Cultural Norms and Attitudes on Violence in Selected Cities of the Region of the Americas (Project Activa 96) is a regional initiative coordinated by the Pan American Health Organization in which a total of 15 cities in several countries of the Region are participating to date.

The Pan American Health Organization is providing technical cooperation and financing for the preparatory phase of the study and the analysis and dissemination of its results. The countries themselves have been responsible for guaranteeing financing for the survey and analysis of the results in each city. The study therefore represents an inter-American effort supported by technical cooperation provided by the Pan American Sanitary Bureau and research centers of excellence in the Region and joint financing by both entities.

The initiative is a cross-sectional study that will utilize a common questionnaire to be applied to a sample of 1,200 individuals aged 18 to 70 residing in the metropolitan areas of the selected cities. The violent and nonviolent behavior of the population will be studied through psychometric scales and other social and economic parameters, as will the prevailing cultural norms and attitudes toward violence in these cities.

The results of the study are expected to afford in-depth knowledge of the relations between psychosocial aspects of violence in different areas (the family, the community, and the citizenry at large) and other relevant socioeconomic and environmental factors.

The knowledge generated will serve as a basis for orienting policies and designing intervention programs through a public health approach to mitigate and prevent growing violence that is ravaging most of the cities of the Americas.

The Program on Research Coordination of the Pan American Sanitary Bureau has been entrusted with directing and coordinating the technical methodological work involved and ensuring technical cooperation for the entire study, from the preparation of the protocol and pilot testing of the information-gathering instrument up through

analysis and publication of the results. Technical support in formulating the master protocol and the first version of the questionnaire was provided by the WHO Collaborating Center, the University of Texas Center for Health Promotion. The Psychological Research Institute of the University of Costa Rica served as a processing center for data analysis resulting from the pilot testing of the questionnaire and the final study. All the centers and investigators involved in the project have been extensively involved in reviewing and refining the protocol and the final design of the questionnaire to be used in the cities.

The present document includes a summary of the original version of the Project, detailing its objectives, purposes, and methodology, and provides an updated timetable of the study and a list of the participating research centers and investigators.

II. SUMMARY OF PROJECT ACTIVA

1. Background and Rationale

Violence is recognized as one of the most serious threats to public health and safety in the Americas. However, the lack of information and comparative studies on cities, cultures, and countries in the Region has proved to be a limitation to understand the socioeconomic, psychosocial, and cultural factors associated with the problem.

The Pan American Health Organization thus decided to undertake a comparative study of selected cities in the Region that would make it possible to comprehend the structural and social learning factors that lead to differences in the violent behavior patterns of urban populations and, in particular, those related to violence or physical assault in the family, community, and citizenry at large.

The principal aim of the study is to analyze and compare, in a number of cities, the role of social learning in the varied forms displayed by physically violent intention and reaction in the family, community, and citizenry at large and to identify the environmental and socioeconomic factors associated with such intention and reaction.

The results of the study will show differences in violent and nonviolent behavior and social learning according to city. This will be measured by means of psychometric scales of cultural norms and attitudes toward physical violence and scales of conflict resolution skills in the family, community, and citizenry at large. An attempt will be made to confirm the association between these scales and characteristics of the

population, such as socioeconomic status and sociodemographic, family, ethnic, and religious attributes.

The knowledge generated will be used to demonstrate that the problem of violence may be addressed not only through public safety measures but also through public health programs. It will thus furnish information that will be highly useful in formulating and evaluating intervention programs and helping to promote healthy attitudes and behavior among the population.

2. Theoretical Model: Social Psychological Processes Governing Violence

The cognitive function and social learning model developed by Bandura (1973, 1986) is used as a conceptual framework for the study and as a theoretical reference that permits partial understanding of the forms of human behavior and, in particular, violent intention and reaction.

Use of the concepts in this framework demonstrates that common structures and sociocognitive processes operate at all levels and types of violence presently under study. Figure 1 sheds light on the processes that lead or fail to lead to violence and in which the concepts of Bandura's theory are applied to human behavior.

This figure may help in understanding the role played by attitudes and skills in all forms of violent or peaceful behavior. In each case, the environment has produced a circumstance, situation, or event to which both the perpetrator and the victim respond. The reaction to this event depends on the attitudes of both with regard to what the situation means and how they should and can react. If the event or situation triggers an emotional reaction of anger or frustration or an urgent need to respond, the selection of concrete behavioral responses is guided by evaluative attitudes regarding such responses and their social or moral acceptability or desirability, as well as by the expectations of self-efficacy (ability) in carrying them out. Alcohol, emotion, stress, and other factors influence the processing of information and the evaluation of attitudes, for example, since they lower thresholds, limit the weighing of options, and obfuscate reasoning. Environmental factors, such as the availability of weapons and economic deprivation can also influence the kinds of behavior selected in seeking justice or self-protection.

Although attitudes and skills are different in each form of violence, the theoretical process is the same. This may be seen in all interactions between young people and

adults when the struggle for advantage leads to conflict and when the results of such conflict lead to dispute and hostility between the groups involved. The theoretical concepts in the figure also help explain collective and organized violence, since nations or entire groups respond to events on the basis of their attitudes to one another and their national and international skills for resolving conflict. The basic notion is that attitudes and skills may determine whether the violence is derived from concrete situations or events.

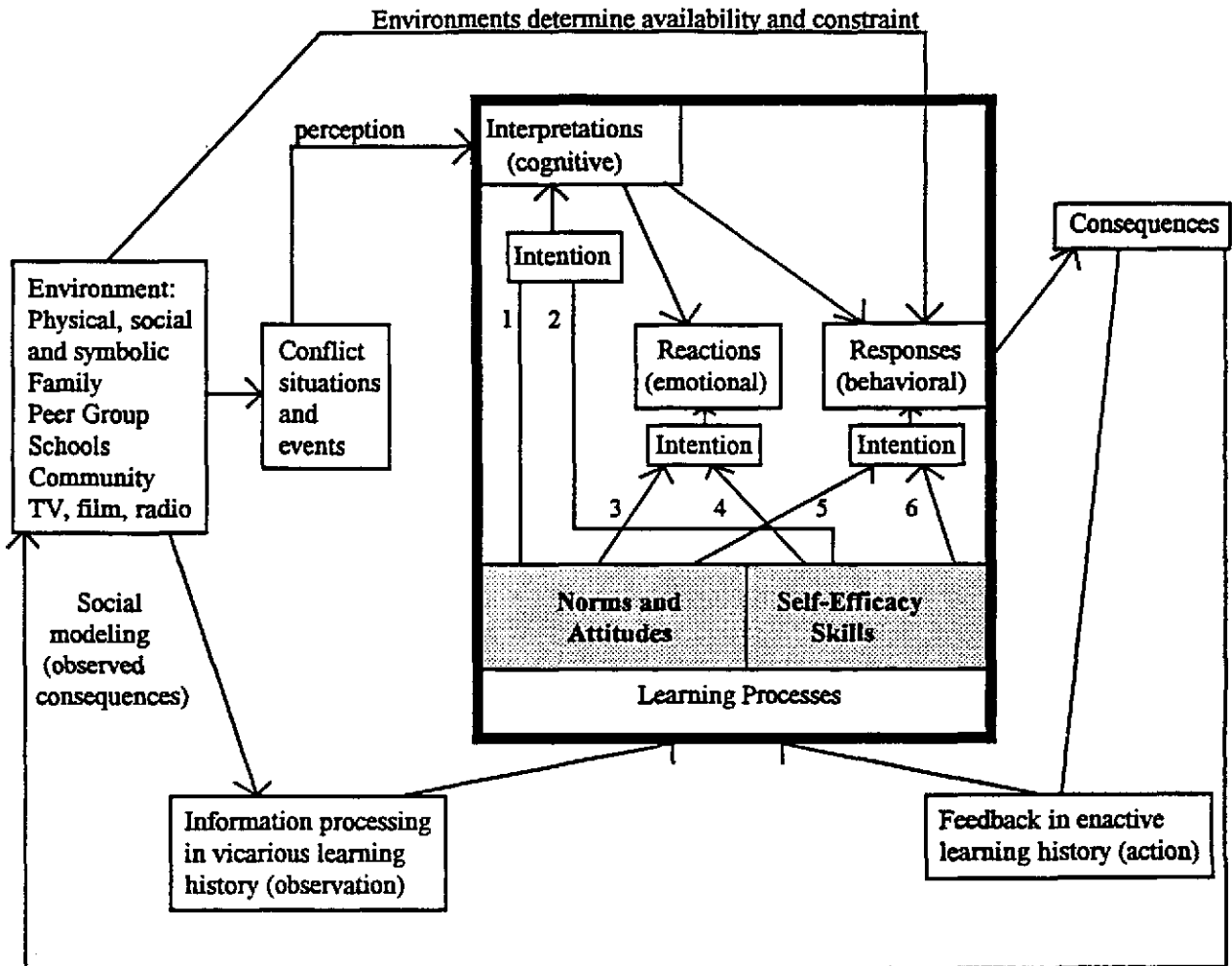
By evaluating all the relevant components of attitudes, it is theoretically possible to quantify their influences on behavior and to put to the test theoretical models of their effect on intention and behavior. However, due to practical research limitations, it is not possible to evaluate every theoretical process or element. The particular concepts to be evaluated should therefore be selected strategically and should include social approval, evaluative attitudes, and, for some concepts, perceived norms and intentions related to different forms of violence.

Attitudes should also be evaluated with regard to different, nonviolent possibilities. Particular skills and related expectations of self-efficacy (ability) that should be evaluated consist of interpretations of conflicts and provocative events, self-control, and the ability to use nonviolent methods to resolve social conflicts. Inasmuch as they influence the manner in which people interpret situations and resolve conflicts, it would also be useful to evaluate hostility between groups and related attitudes, for example, with regard to foreigners. The research examined in the previous section can be used to prepare and apply methods for comprehensive transcultural evaluation of the theoretical concepts presented here. In making such an evaluation the objectives and purposes of this research program may be fulfilled.

It is recognized that this model, which focuses on cognition and learning, does not fully explain the causes of violence in the societies in the Region in that it presents only a certain aspect of the normative, psychosocial, and behavioral sphere. In order to improve the model by the inclusion of certain structural factors related to violence, elements will be introduced that will make it possible to analyze topics relating to poverty, the family, confidence in the system of justice, and anomie, among others. The study consequently does not explain all the dimensions of the problem, but seeks to address those that may eventually serve as targets for public health interventions.

Figure 1

SOCIAL PSYCHOLOGICAL PROCESSES GOVERNING VIOLENCE



- (1) The interpretation of a conflict depends upon beliefs, and values, which influence attribution, e.g., when provocative intent is inferred selectively to groups.
- (2) Information coding, attribution and other cognitive skills determine how accurately the conflict situation or event is interpreted, i.e., whether its causes are understood.
- (3) Depending upon attitudes about emotion and its expression, some interpretations may lead to anger and aggrievement.
- (4) Cognitive and emotional self-control skills may inhibit or heighten the intensity of reaction and the likelihood of response.
- (5) Preferences among responses are determined by the perceived norms and attitudes about their usefulness, appropriateness, etc.
- (6) Selections are selected according to actual skills and perceived self-efficacy for performing them effectively and correctly.

3. Definitions of Model Components:

Definitions of the theory are presented below:

Conflict

Conflict is defined as situations and events which may precipitate violence because of problems in the relationships between individuals and groups. Some conflicts may involve resource allocation, as when a poor person uses force to rob the wealthy or when individuals or organizations disagree on boundaries, terms of payment for loans, political power, etc. Conflicts also involve injury or threat to things of value. Conflict may occur if a person believes she or he has been or will be harmed personally, indirectly (e.g., through injury to a family member) or psychologically (e.g., through insults) by another person or group.

Interpretation

Interpretation is the process through which events are understood by a person experiencing conflict. This includes attributions for disparities in resource allocation or for experience or perceived injuries or threats. This process determines whether conflict is perceived and where actions or feelings are directed, i.e., determining who is to be blamed or seen as the cause of a perceived harm or resource disparity. As the theoretical model shows, this process is influenced by attitudes about certain events, situations, persons and groups, and by skills for processing information about them. Thus, a person who has hostile attitudes toward members of a certain group may infer perceived conflict of interests and/or threats or injuries, dangerous disposition, or enmity to actions not actually intended to harm them.

Reaction

Reaction is the emotional consequence of an interpretation of conflict. It may consist of physiological reactions and/or verbal or mental statements about feelings. Specific reactions include fear, anger, embarrassment, grievance, etc. This process is also influenced by attitudes and skills, as shown in the theoretical model. When conflicts lead to violence, they often arise from emotional arousal and feelings of anger and frustration that are directed at another person or group.

Response

Response is defined as the actual behavior that is elicited by the conflict. It may be a violent behavior or a nonviolent behavior. It may be intended to resolve a conflict or simply to harm the person or group that is blamed for a conflict. If it is a violent behavior, it may be verbal or physical. If physical, it may be mildly harmful or life-threatening, as in the use of weapons of different kinds. If a response is seen as necessary or useful, preferences among different response alternatives determine whether conflicts or provocations lead to violent or peaceful resolution. These preferences depend upon attitudes toward them and the person's perception of his or her skill or ability to perform the selected response effectively. As the theoretical model shows, the environment may determine what responses are available, e.g., the types of weapons or means of defense that can be chosen.

Norms

Norms are defined in several ways. Firstly, the term *cultural norm* may simply refer to the behaviors that are commonly or normally practiced in a population or subgroup. Secondly, the term *social norm* refers to the behavioral expectations and recommendations that are expressed by the members of a culture, as when parents tell children what to do or when friends or leaders state their approval or disapproval of thoughts, emotions, or actions. Finally, *perceived norms* are defined as a person's belief about what other people usually do in certain situations (normative beliefs) or about what they expect her or him to do in those situations (normative expectations).

Attitudes

Attitudes are defined as evaluative beliefs that are expressed verbally in the form of adjective statements about persons, group conflicts, interpretations, reactions, and responses, etc. Thus, a person may say something is good or bad, safer or dangerous, wise or foolish, pleasant or unpleasant, clean or dirty, weak or strong. These statements of evaluative belief represent attitudes which are learned through observation or experience. Cultural and social norms are connected with attitudes, when people are shown or told how to label and value things by parents, peers, leaders, media role models, etc. Prevalent or expected practices are motivated by attitudes, which express incentive values for different outcomes of behavior. Violent behavior may also be justified by attitudes, as when perpetrators perceive their victims as bad, dangerous, etc.

Skill

Skill is defined as the ability to do something. This may involve internal cognitive operations, e.g., interpretation of situations and control of emotion. Skill also refers to behavioral capacities related to communication, use of nonviolent conflict resolution, etc. Skills are acquired through observation of modeling rehearsal and feedback.

Self-efficacy

Self-efficacy is defined as a belief in ability to perform a behavior or cognitive operation response requiring skill. It may also refer to beliefs about abilities for interpreting complex situations or for managing emotional reactions. It is indicated by verbal statements about knowing how and being able to do something. Like attitudes, self-efficacy beliefs are connected to cultural norms, i.e., when parents, peers, etc., set ability expectations for behaviors by telling what one should or must be able to do. Self-efficacy is also learned through observation of what others can do and personal experiences in attempts to perform the behavior. Violent responses are often selected because a person has low self-efficacy for use of nonviolent conflict resolution, as when people do not know how to negotiate, reason, communicate, or use formal or informal systems for dispute mediation.

Intention

Intention is defined theoretically as a person's prediction as to whether they will perform a particular behavior or cognitive operation (interpretation) or whether they will experience or express a particular emotion. Intentions are expressed in terms of situations (which may vary in many ways), behaviors (also variable), and likelihood of that behavior (e.g., probability of occurrence).

As shown in the theoretical model, intentions are a combined function (1) normative beliefs and expectations, (2) evaluative attitudes, and (3) self-efficacy expectations. By measuring intentions, a researcher may obtain an indicator of all theoretical processes influencing interpretations, reactions, and responses to conflicts.

4. Objectives and Purposes of the Study:

Based on the foregoing considerations, the study seeks to fulfill the following objectives and purposes:

General Objective

To analyze and compare in selected cities the role of social learning processes in the various forms taken by physically violent intentions and reactions in different areas, and to identify the environmental, socioeconomic, and domestic factors associated with such violent intentions and reactions.²

Specific Objectives:

- To compare, in selected cities, the associations between the population's cultural norms and skills with respect to conflict resolution and violent intentions and reactions (behaviors) in the family, community, and citizenry at large.
- To establish comparative associations between violent intentions and reactions in the family, community, and citizenry at large, on the one hand, and environmental factors, such as exposure to mass media and previous experiences with violence and the carrying of weapons, on the other.
- To identify differences in violent behaviors, attitudes, and cultural norms and conflict-resolution skills of the population by socioeconomic strata and other factors such as family structure, employment status, migration, and ethnic origin.

Purposes of the Study

This is applied research intended as input:

- To formulate and evaluate policies and plans to prevent violence in the cities and provide decision-making criteria.
- To design programs and interventions using a public health approach aimed at developing attitudes, skills, and alternative practices among the citizenry for conflict resolution and violence prevention in different areas.

² For the purposes of the study, aggression or physical violence will be interpreted as "the use of physical force or credible threat of force with the intention of perpetrating physical harm to oneself, to another person or group, or to personal and social property."

- To serve as a baseline for the evaluation of policies and programs to prevent violence.

5. Methodology

5.1 Measurement of Study Variables:

The design and selection of measurements was based on the theoretical model described above. Starting with that model and a preliminary item pool from previous studies, the research team identified, adapted, or developed new interview questions.

In addition to the variables taken directly from the theoretical model, as illustrated in the table, the investigators also selected elements to measure environmental variables such as media consumption, access to weapons, confidence in state institutions of justice and public order, and opinions that might influence conflicts related to economic or political factors. With regard to structural variables, consideration was given to elements connected with a particular socioeconomic stratum, type of family, and occupation. In addition, sociodemographic aspects such as age, sex, migratory status, religion, ethnic origin, marital status, and number of children were also taken into account.

Measures were found for variables across the entire spectrum of violence and conflict, e.g., domestic, community, institutional, and national. This led to a concrete operational definition of the model's underlying concepts, as illustrated in the tables below.

The information-gathering instrument establishes a balance among all the dimensions of violence and emphasizes violent behavior and responses. Norms, attitudes, and skills are evaluated in greater detail with regard to domestic, group, and social relations. Regarding personal and civil conflict, attention is focused on attitudes and intentions; aggressive interpretations or reactions to conflict are also measured.

In accordance with their peculiarities, the variables are operationalized in psychometric scales with response categories based on frequency scales or Likert scales. Others are operationalized in questions not included in scales that are part of so-called correlates and factors related to violent or nonviolent intentions and reactions.

5.1.1 Principal Variables of the Study (Scales of Behaviors, Norms, Skills, and Attitudes)

Psychosocial Scales	Indicators (Activa III)	Sources Utilized
Behavior of parents and those who care for minors	Scale of behavior toward children/minors 4 items (NI9-NI12)	Strauss and Gelles (1995)
Behavior of domestic partners currently living together or married	Scale of behavior in a couples relationship. 7 items (P4-P10)	Strauss and Gelles (1995)
Other behaviors	Scale of behavior toward strangers. 4 items (OC1-OC4)	ACTIVA/PAHO Scale (1996)
Family norms	Scale of norms 5 items NO2-NO6	Strauss and Gelles (1995) ACTIVA/PAHO (1996)
Social norms	6 items NO7-NO12	Cohen and Nisbett (1994) McAlister and Vélez (1995) ACTIVA/PAHO (1996)
Conflict-resolution skills	5 items HA1-HA5	Orpinas (1995) ACTIVA/PAHO (1996)
Attitudes of approval of violence	11 items AC1-AC11	Cohen and Nisbett (1994) Masse and McAlister (1995) ACTIVA/PAHO (1996)
Group relations	5 items RI1-RI5	Eurobarometer (1995) ACTIVA/PAHO (1996)
No. of Scales Activa III = 9	47 items	There is a balance in the items by scales (behavior, attitudes, norms, and skills), and their reliability and validity, i.e., their consistency with the theoretical model, has been proven.

XXXI MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH (ACHR)
Washington, D.C., 15-17 July 1996

5.1.2 Correlates: Other Dimensions Not Constructed as Scales

Dimensions	Activa III	Sources Utilized
Social attitudes: Confidence in institutions	7 questions IN1-IN7	U.S. General Social Survey (1994) ACTIVA/PAHO (1996)
Family norms	2 questions (NF1-NF2)	ACTIVA/PAHO (1996)
Institutional norms: National relations	4 questions (RN1-RN4)	Masse and McAlister (1995) ACTIVA/PAHO (1996)
Carrying of weapons	4 questions (DE20-DE23)	U.S. General Social Survey (1994) ACTIVA/PAHO (1996)
Media consumption	3 questions (D17-D19)	
Social attitudes: Anomie and other attitudes toward the system	4 questions	Eurobarometer (1995) ACTIVA/PAHO (1996)
Victimization	13 questions (VI1-VI13)	U.S. General Social Survey (1994) ACTIVA/PAHO (1996)
Consequences of violent behavior among the population	9 questions	Vélez L.F., Center of Health Studies and Violence Call, Colombia (1996)
Total	54 questions	

**5.1.3. Correlates: Sociodemographic Variables Not Constructed as Scales
 (comparison with questions)**

Sociodemographic Variables	Activa III	Sources Consulted
No. of persons in the home, their relationship, sex, age, schooling, and identification as wage earners		Demographic and Health Surveys (DHS,1995)
Overcrowding	1 Question	Population censuses
Schooling of persons in the household	1 Question	Censuses, DHS
School attendance of persons in the household	1 Question	Population censuses
Activity level	2 Question	Multipurpose household surveys
Occupation	1 Question	Idem
Occupational category	1 Question	Population censuses
Migratory status	2 Questions.	Population censuses
Religion	2 Questions	Piquet Carneiro L., Institute of Religion Studies (1995)
Race	1 Question	ACTIVA/PAHO (1996)
Children (one's own and those cared for)	6 Questions	ACTIVA/PAHO (1996)
Marital Status/Nuptiality	3 Questions	ACTIVA/PAHO (1996)

5.2 Study Design

This is a cross-sectional study that will survey a sample of the population between 18 and 70 years of age living in households in the metropolitan areas of selected cities in the Region.³

A representative sample will be selected in each city, by socioeconomic stratum, using a multistage sample that is stratified by clusters and that is proportional in terms of socioeconomic condition and population density. Assuming a variance and maximum error of a 95% confidence level, the size of the sample has been estimated at some 1,200 individuals, who will be selected in households by systematic sampling and without substitution.

Data collection will be carried out using a common questionnaire that has been prepared in accordance with the theoretical model based on a structure of psychometric scales on behaviors, norms, and attitudes toward violence in different areas and a set of associated variables or correlates that will make it possible to fulfill the objectives proposed.

³ Research Protocol "Estudio Multicéntrico sobre Actitudes y Normas Culturales sobre la Violencia en Ciudades Seleccionadas en las Américas" (Project ACTIVA). Document OPS/HDP-HDR/96.4., Pan American Health Organization.

XXXI MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH (ACHR)
Washington, D.C., 15-17 July 1996

III. MULTICENTER PROJECT ACTIVA: TIMETABLE OF ACTIVITIES⁴

ACTIVITIES	DATES ⁵	RESPONSIBLE ENTITY
Preparation of the Master Protocol and first version of the questionnaire. First consultation meeting with investigators.	Dec. 1995/ Jan. 1996	PAHO/U. Texas
Pilot Test of the first version of the questionnaire	Jan.-Mar. 1996	PAHO/investigators
Analysis of results of first pilot test, preparation of second version of the questionnaire and second pilot test	April 1996	PAHO/UCR, Costa Rica Investigators
Analysis of results of second pilot test and preparation of the third version of the questionnaire	May 1996	PAHO/UCR, Costa Rica
Consultation on third version of the questionnaire and delivery of observations	21 June 1996	Country investigators
Preparation of sampling design. Delivery of the statistician's report with stage I and II and description of the criteria for the classification of census segments by socioeconomic level and configuration of strata.	5 July 1996	Investigators-statisticians responsible for the sample at the country level
Criteria for classification of census segments by socioeconomic levels measured. Sampling designs and configuration of strata with approval for initiation of use of questionnaires.	12 July 1996	Designated technical advisers/PAHO
Definitive questionnaire prepared, together with interviewer and supervisor manuals; initiation of delivery to investigators.	24 June 1996	UCR, Costa Rica/PAHO
Application of the survey and data collection. Coding and entry of information, cleanup of database, and delivery to the processing and analysis center (UCR/Costa Rica).	15 Oct. 1996	Country investigators
Beginning of delivery and distribution of database (system file) and manual for entering and coding data. Distribution of the program for basic country analyses.	5 July 1996	PAHO/UCR, Costa Rica
Application of the basic analysis program, delivery of the report on results, and file with basic country analysis tables	15 Nov. 1996	PAHO/UCR, Costa Rica
Basic comparative analyses, preparation of preliminary regional report, and delivery to investigators	15 Dec. 1996	Country investigators
Meeting with investigators to discuss results and publications plan	Jan. 1997 (exact dates to be fixed)	PAHO/ISER-Rio de Janeiro
Delivery of regional results to the communications media	Jan. 1997	DPI/PAHO

⁴ General timetable of the study and general framework of activities and times for the preparation of country timetables.

⁵ Refers to deadline for delivery.

XXXI MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH (ACHR)
Washington, D.C., 15-17 July 1996

IV. PRINCIPAL AND ASSOCIATE INVESTIGATORS BY COUNTRY AND INSTITUTION⁶

Investigator	Institution	City/Country
Leandro Piquet Carneiro	ISER/Universidad Estatal de R.J.	Rio de Janeiro, Brazil
Ceci Vilar Noronha (Director) Eduardo Paes Machado (Associate)	Instituto de Salud Colectiva	Salvador, Bahia, Brazil
Ma. Cristina Barroetavena	Department of Health Care and Epidemiology University of British Columbia	Vancouver, Canada
Enrique Oviedo Saavedra	Sur Profesionales	Santiago, Chile
Luis F. Vélez	CISALVA/ Universidad del Valle, Cali, Colombia	Bogotá, Cali, Medellín, Colombia
Marco V. Fournier (Director) Jorge Sanabria (Associate)	Instituto de Investigaciones Psicológicas Universidad de Costa Rica	San José, Costa Rica
Mariano Bonet G.	Instituto de Higiene y Epidemiología, MINSAP	Havana, Cuba
José Miguel Cruz	Instituto de Opinión Pública Universidad Centroamericana	San Salvador, El Salvador
Roberto Briceño León (Director) Gladys Villarroel (Associate)	Laboratorio de Ciencias Sociales Universidad Central de Venezuela	Caracas, Venezuela
Jesús E. Párraga	Instituto de Criminología, Universidad del Zulia	Maracaibo, Venezuela
Alfred McAlister (Director) Pamela Orpinas (Associate)	School of Public Health Houston Health Sciences Center, University of Texas	Houston, Texas
Rebecca de los Ríos Research Coordinator	Pan American Health Organization Washington, D.C.	Region
Rodrigo Guerrero Program on Healthy Lifestyles and Mental Health	Pan American Health Organization	Region

Experts and consultants: José Rafael López-Islas (University of Texas), Richard Nisbett (University of Michigan), Pamela Orpinas (University of Texas), and Murray Straus (University of New Hampshire).

⁶ List of investigators and institutions participating in the study confirmed as of 22 January 1996 and those participating in workshops to examine the study protocol and the questionnaire, held in Houston, Texas, 15-19 January 1996 and in San José, Costa Rica, 15-20 April 1996.

**METHODOLOGICAL ANNEX⁷ - PROJECT ACTIVA
SAMPLE SIZE AND METHODOLOGY FOR THE SELECTION
OF SAMPLING AND OBSERVATION UNITS**

Sample Size:

Assuming a maximum variance of 0.5, a confidence level of 95%, and a maximum error of 2.8, the size of the sample is defined as 1,200 individuals between 18 and 70 years of age living in households in the metropolitan areas of the cities under study. As the selection will be without replacement, a rejection rate of 25% should be foreseen in the low and middle strata and 50% in the upper stratum, and consequently the number of contacts will exceed 1,200. This factor notwithstanding, adequate training of the interviewers should guarantee proper management of possible rejections with a view to reducing them to a minimum.

Selection of the sampling and observation units: Multistage sampling will be employed that will be stratified by clusters and proportional according to socioeconomic condition and population density, without replacement or substitution, in the following stages:

1. First Stage: Selection of the smallest units of the city's political administration

1.1 The number of political units of the metropolitan region to be included in the sample should be defined administratively. The number of units cannot be less than 50% of the total.

1.2 The two units with the greatest population will in every instance be assigned a selection probability of 1. The others will be selected randomly.

IMPORTANT PREVIOUS STEP:

Prior to the second stage, a minimum of three socioeconomic strata (low, intermediate, and high) should be constructed by means of the census segments of the selected units. For this purpose the criteria established by statistics and census bureaus should be followed in order to determine classification of the segments by strata.⁸

⁷ Prepared by Fournier, M., Piquet-Carneiro, L., and De Los Ríos, R.

⁸ The criteria used by each country will be evaluated beforehand so that recommendations may be made regarding the classification of segments in each of the strata.

2. Second Stage: Random selection of census segments, weighted in proportion to the population (Proportional Population Selection-PPS) in each stratum

3. Third Stage: Selection of households

3.1 Ten percent of total households in the segment will be used to determine households to be selected.

3.2 Based on the cartographic description of Statistics and Censuses, households will be selected randomly or systematically, preferably the latter. Each household selected should be contacted.

4. Fourth Stage: Selection of individuals in the household

4.1 Preselection in the blank questionnaires:

A systematic sampling of categories will be conducted in each questionnaire in the table of household members (A2). In order to guarantee coverage of the entire table, a point of departure will be randomly selected between 1 and the average number of adults (aged 18 and over) estimated for the city based on the data from household surveys or more recent censuses.

In order to cover the table, the average number of adults per household will be used. An asterisk will be placed on each category selected in this manner.

4.2 Selection of interviewees in the household:

The interviewer will fill out the table of household members (A2) using the following criteria;

- Head of household
- Spouse
- Children in descending age order
- Other family members in descending age order.
- Other nonfamily members in descending age order.

Important: This order must not be altered, since the entire selection will otherwise be affected and the sample invalidated.

The interviewer should interview all persons listed on a line containing an asterisk. Persons under 18 years of age or older than 70 will not be interviewed. This method implies the possibility that more than one person in a single household may be interviewed or, on the contrary, that none may be interviewed.

PAHO/HDP-HDR/96.5

Original: Spanish

Rev. III: Draft for review-Do not reproduce



PAN AMERICAN HEALTH ORGANIZATION
Pan American Sanitary Bureau • Regional Office of the
WORLD HEALTH ORGANIZATION

QUESTIONNAIRE:
CULTURAL NORMS AND ATTITUDES
TOWARD VIOLENCE IN SELECTED CITIES OF THE
REGION OF THE AMERICAS

PROJECT ACTIVA

Washington, D.C..

1996

Research Coordination
Division of Health and Human Development

NO. _____ SEG. _____

..and the Pan American Health Organization are a conducting a study on violence in the Americas. You have been selected to participate in this study. Your responses will help us understand some of the reasons behind violence or citizen safety in our city.

This is an anonymous questionnaire, and we will not record your address or identify. The information you give us is strictly confidential. Please answer each question as honestly as possible.

Your participation is voluntary. You may refuse to answer any question or end the interview any time you wish.

Thank you for your collaboration.

DATE: _____ / _____ / _____	MUNICIPALITY: _____
INTERVIEWER: _____	SUP. OFFICE: _____
FIELD SUP.: _____	
CODING: _____	
TYPING: _____	
OBSERVATIONS: _____	

DE - DEMOGRAPHIC VARIABLES

TIME INTERVIEW BEGAN: _____

DE1. How many people usually live here--that is, how many sleep and eat most of the week in this household? Include both adults and children. _____

DE2. We would now like some information on the people who usually live in this household. Let's begin with the person who is considered the "head of the family" or head of household.

NUMBER	SEL.	APPOINTMENTS	RELATIONSHIP	SEX	AGE	Highest level of schooling	Do you receive income from work?
			1 Head of household 2 Spouse 3 Daughter/Son 4 Father/Mother 5 Father-in-law/Mother-in-law 6 Brother/Sister 7 Grandchild 8 Son-in-law/Daughter-in-law 9 Other relative 10 Other non-relatives 11 Domestic employee	1 M 2 F		0 None 1 Primary not completed 2 Primary completed 3 Secondary not completed 4 Secondary completed 5 Technical 6 University 9 Unknown	1 Yes 2 No 9 Unknown
1			HEAD OF HOUSEHOLD				
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

DE3. How many rooms are used for sleeping in this household? _____

DE4. Of the children 12 years of age or under living in this home, how many are attending school?

FROM HERE ON, ALL QUESTIONS REFER TO THE PERSON SELECTED FOR THE INTERVIEW

---> CORROBORATE THE INFORMATION IN TABLE A2 WITH THE INTERVIEWEE

DE5. In what year were you born? 19__ __

DE6. Marital status: (1) Unmarried (2) Married
 (3) Common-law union (4) Separated or divorced
 (5) Widower

DE7. Did you work or look for work last week? (1) Yes — GO TO QUESTION DE9 (2) No

DE8. Did you have work last week, even though you did not work?

(1) Yes

(2) No — GO TO QUESTION DE11

DE9. Are you...? ---> SEE CHOICES BELOW

- (1) An employer
- (2) Self-employed
- (3) An unsalaried worker
- (4) An unsalaried family worker

DE10. What is your occupation? _____

> GO TO QUESTION DE12

DE11. Are you... — SEE THE CHOICES BELOW

- (1) A student
- (2) A pensioner, retiree, person of independent means
- (3) A housewife/househusband
- (4) No particular occupation

DE12. In what country were you born?

(1) This country ---> GO TO QUESTION DE14. (2) Some other country:
Which? _____

DE13. In what year did you arrive in this country? 19__ __

DE14. I am going to read a list of religions. Please indicate which one you follow.

---> Read slowly and pause after each item

- (1) Pentacostal Protestantism or Evangelism
- (2) Non-Pentacostal Protestantism or Evangelism
- (3) Spiritism or Spiritualism (Kardecism, Umbanda, Candomblé, or other religion of African origin)
- (4) Roman Catholicism
- (5) Judaism
- (6) Islam
- (7) Other religion
- (8) No religion, but believe in God
- (9) No belief in God.

DE15. How often do you attend church or some religious function?

- (1) More than once a week
- (2) At least once a week
- (3) From 1 to 3 times a month
- (4) Less than once a month
- (5) Never

DE16. Which of these options best describes you?

—> SHOW CARD #1

- (1) White
- (2) Mestizo (mixture of white and Amerindian)
- (3) Mulatto (mixture of black and white)
- (4) Black
- (5) Amerindian
- (6) East Asian
- (7) East Indian
- (8) Other

DE17. How many hours of television do you watch during a normal weekday? _____

DE18. How many hours of television do you watch during a weekend day? _____

DE19. Thinking of the violence that currently exists in your neighborhood, do you believe that television shows:

- (1) More violence than really exists?
- (2) The same amount of violence that currently exists?
- (3) Less violence than really exists?

DE20. Do you have any firearms (pistol, revolver, rifle) in your home?

(1) Yes

(2) No—> GO TO QUESTION DE23

DE21. If yes, what is your main reason for owning such a weapon?

- (1) Sport or hunting
- (2) Personal protection
- (3) Professional activity

DE22. When you leave your house, do you take a weapon with you to protect yourself?

(1) Yes

(2) No

—> Go to Section IN

DE23. If you could, would you own a firearm for protection?

(1) Yes

(2) No

IN - INSTITUTIONS

Based on your experience and what you have heard, how would you rate the efficiency of the institutions that serve your community as far as criminal justice is concerned?

	Very good	Good	Fair	Poor	Very poor
IN1. Police	5	4	3	2	1
IN2. Courts (Judges)	5	4	3	2	1
IN3. Penitentiary system (Prisons)	5	4	3	2	1
IN4. District Attorney's Office	5	4	3	2	1
IN5. Army	5	4	3	2	1
IN6. Public Defender's Office	5	4	3	2	1
IN7. Communications Media	5	4	3	2	1

SA - SOCIAL ATTITUDES AND OPINIONS

SA1. In general, do you believe that within five years you are going to be:

- (1) Better off than now
- (2) As well off as now
- (3) Worse off than now
- (4) —> Do not read: Uncertain

SA2. Do you believe that within five years the country will be:

- (1) Better off than now
- (2) As well off as now
- (3) Worse off than now
- (4) —> Do not read: Uncertain

SA3. Do you agree or disagree with the following statement? The authorities of the country are truly concerned about what happens to you?

- (1) Strongly agree
- (2) Agree
- (3) Not sure
- (4) Disagree
- (5) Strongly disagree

—> SHOW CARD # 2

SA10. Which of the following three statements is closest to your own opinion?

- (1) Democracy is the best political system under any circumstances.
- (2) In certain circumstances a dictatorship could be good.
- (3) Whether we live in a democracy or in a dictatorship makes no difference to people like me.

NO - CULTURAL NORMS

I am now going to read you several statements. Please tell me whether you agree or disagree with each.

STATEMENT	STRONGLY AGREE	AGREE	NOT SURE	DIS-AGREE	STRONGLY DIS-AGREE
NO2. Corporal punishment is necessary in order to educate children.	5	4	3	2	1
NO3. There are situations in which an adult is justified in hitting a child other than his own.	5	4	3	2	1
NO4. There are situations in which a man is justified in hitting his wife.	5	4	3	2	1
NO5. There are situations in which a woman is justified in hitting her husband.	5	4	3	2	1
NO6. If a woman has been unfaithful to her husband, she deserves to be beaten by him.	5	4	3	2	1
NO7. A woman has the right to assault another woman who is stealing her husband.	5	4	3	2	1
NO8. If the authorities fail, people have the right to take justice into their own hands.	5	4	3	2	1
NO9. The police have the right to enter a home without a warrant in order to pursue criminals.	5	4	3	2	1
NO10. The police have the right to detain young people they consider suspicious because of their physical appearance.	5	4	3	2	1
NO11. In some cases the police are justified in torturing suspects to obtain information.	5	4	3	2	1
NO12. Capital punishment should be applied for certain crimes.	5	4	3	2	1

AT - ATTITUDES

I am going to describe to you several situations that you might witness at any time. For each of the situations I want you to tell me whether you would approve, would not approve but would understand, or would neither approve nor understand.

—> SHOW CARD # 3

SITUATION	WOULD APPROVE	WOULD NOT APPROVE BUT WOULD UNDERSTAND	WOULD NOT APPROVE OR UNDERSTAND
AT1. If someone cuts into a line and another person insults him, you ...	3	2	1
AT2. Suppose a person seriously hurts another person for stealing his or her wife or husband. You ...	3	2	1
AT3. Suppose a person kills someone who has raped his daughter. You ...	3	2	1
AT4. If a person has caused your community distress or fear and someone kills him or her, you ...	3	2	1
AT5. If a group of people begins to carry out "social cleansings"—that is, to kill undesirable people, you ...	3	2	1

I am now going to read you some statements. Please tell me whether you agree or disagree with each.

STATEMENT	STRONGLY AGREE	AGREE	NOT SURE	DIS-AGREE	STRONGLY DIS-AGREE
AT6. A person has the right to kill to defend his family.	5	4	3	2	1
AT7. A person has the right to kill to defend his home or property.	5	4	3	2	1
AT9. Having a weapon at home makes the home safer.	5	4	3	2	1
AT10. Carrying a weapon makes the carrier safer.	5	4	3	2	1
AT11. Street children should be thrown in jail.	5	4	3	2	1

IR - INTERGROUP RELATIONS

I am now going to read you some statements. Please tell me whether you agree or disagree with each.

STATEMENTS	STRONGLY AGREE	AGREE	NOT SURE	DIS-AGREE	STRONG-LY DIS-AGREE
IR1. A neighborhood should be made up of a single social class.	5	4	3	2	1
IR2. A neighborhood should be made up of people of the same religion.	5	4	3	2	1
IR3. A neighborhood should be made up of people of a single ethnic origin or race.	5	4	3	2	1
IR4. A neighborhood should be made up of people with the same political ideas.	5	4	3	2	1
IR5. People have the right to remove certain groups of people from their neighborhood or community.	5	4	3	2	1

NR - NATIONAL RELATIONS

I am now going to read you some statements. Please tell me if you agree or disagree with each.

STATEMENTS	STRONGLY AGREE	AGREE	NOT SURE	DIS-AGREE	STRONG-LY DIS-AGREE
NR1. War is necessary to settle differences between countries.	5	4	3	2	1
NR2. If a country has a border dispute with a neighboring country, the government should launch effective military action.	5	4	3	2	1
NR3. If in a country a group initiates violent action against the government, the government should attempt to negotiate an agreement.	5	4	3	2	1
NR4. A military presence in the streets is necessary for controlling violence in the country.	5	4	3	2	1

CR - CONFLICT RESOLUTION SKILLS

Generally speaking, all people face conflicts at some time, and there are different ways of dealing with them. I am going to read you ways of handling conflicts, and I would like you to tell me how often you use them.

STATEMENT	ALWAYS	ALMOST ALWAYS	SOME-TIMES	ALMOST NEVER	NEVER
CR1. Faced with a problem, I know how to control my temper and stay out of fights.	5	4	3	2	1
CR2. If someone insults me, I might lose control and fight them.	5	4	3	2	1
CR3. If someone hurts me, I assume they did it on purpose.	5	4	3	2	1
CR4. If I have a serious conflict or disagreement with my partner, I can explain my reasons without getting upset.	5	4	3	2	1
CR5. If I need to correct a child, I know how to talk or reason with the child and explain why some things are wrong.	5	4	3	2	1

FN - FAMILY NORMS/ATTITUDES

FN1. How often were you spanked as a child?

- (1) Never **---> GO TO SECTION P/C**
- (2) Very rarely
- (3) Once a month or so
- (4) Once a week or so
- (5) Almost daily

FN2. What were you hit with as a child?

- (1) The hand
- (2) A shoe
- (3) A stick, a strap, or a whip
- (4) Any hard object
- (5) All of the above

P/C - PARENTS/CARETAKERS

P/C1. Do you take care of children between 2 and 15 years of age? (1) Yes

(2) No ---> GO TO SECTION C0

P/C2. How many children or adolescents do you care for? _____

P/C3. How many of these children or adolescents live with you? _____

P/C4. How many of these children or adolescents are yours? _____

---> IF THE INTERVIEWEE HAS NO CHILDREN, GO TO QUESTION 16

P/C5. In what year was your first child born? 19 ____

---> IF THE INTERVIEWEE DOES NOT RECALL THE YEAR, ASK THE AGE OF THE OLDEST CHILD: _____

P/C6. Of the children or adolescents you care for, what is the name of the one who had the most recent birthday? _____

P/C7. Is (*NAME OF THE CHILD*) your son or daughter? (1) Yes (2) No

---> INDICATE THE SEX OF THE CHILD OR ADOLESCENT. IF NOT CLEAR, ASK QUESTION B7.

NI7. What sex is ---> MENTION THE NAME OF THE CHILD

(1) Male

(2) Female

P/C8. How old is (*NAME OF THE CHILD*)? _____

I am going to mention some situations between you and -- (name of the child) that may have arisen. Please indicate how many times they occurred in the last month--that is, from _____ (the month prior to the interview).

	Almost every day (>3 x wk)	Once a week (1-2 x wk)	Sometimes in the month (<4 times)	Never, or at least not in last month
P/C9. How many times in the past month did you have to punish (<u>--> Name of the child</u>) by not allowing her/him to do something s/he enjoys?	4	3	2	1
P/C10. How many times in the past month did you have to shout at (<u>--> Name of the child</u>)?	4	3	2	1
P/C11. How many times in the past month did you have to spank (<u>--> Name of the child</u>)?	4	3	2	1
P/C12. How many times in the past month did you have to hit her/him on some part of her/his body other than the buttocks with an object such as a strap or stick?	4	3	2	1

CO - COUPLES (SPOUSES/OR DOMESTIC PARTNERS)

CO1. How many times have you been married or have you lived with a domestic partner, including your present partner? _____

---> (00) IF THE INTERVIEWEE HAS NOT BEEN MARRIED OR LIVED WITH A DOMESTIC PARTNER, GO TO SECTION OB

CO2. In what year did you get married or begin living with a domestic partner? 19 ____

---> IF THE INTERVIEWEE DOES NOT RECALL THE YEAR, ASK THE AGE AT WHICH THE PERSON MARRIED OR BEGAN LIVING WITH A DOMESTIC PARTNER: _____

CO3. Do you currently live with your spouse or domestic partner?

(1) Yes

(2) No ---> GO TO SECTION OB

Couples have different ways of settling their differences. I will now mention certain things that may take place when you have differences, problems, or disagreements with your partner. Please tell me how many times you have done each of the following things when you have had differences, problems, or disagreements and how many times your partner has done them to you in the past 12 months.

---> SHOW CARD # 4

	OFTEN (≥ 6 times)	SOMETIME S (3-5 times)	RARELY (1-2 times)	NEVER, OR NOT IN LAST YEAR
CO4. How many times in the past 12 months have you shouted in anger at your partner?	4	3	2	1
CO5. How many times in the past 12 months has your partner shouted in anger at you?	4	3	2	1
CO6. How many times in the past 12 months have you struck your partner?	4	3	2	1
CO7. How many times in the past 12 months has your partner struck you?	4	3	2	1
CO8. How many times in the past 12 months have you shoved your partner in anger?	4	3	2	1
CO9. How many times in the past 12 months have you struck your partner with an object that could have hurt him or her?	4	3	2	1
CO10. How many times in the past 12 months has your partner struck you with an object that could have hurt you?	4	3	2	1

OB - OTHER BEHAVIOR

Sometimes people have problems with people they know or strangers, sometimes because they are in a bad mood or for some other reason. I am going to mention some things that might happen. Please indicate how many times you have done each of these things in the past 12 months.

	Often (≥ 6 times)	Some- times (3-5 times)	Rarely (1-2 times)	Never, or not in the past year
OB1. In connection with some problem, have you insulted someone who is not member of your family in the past 12 months?	4	3	2	1
OB2. Have you threatened to seriously harm someone who is not a family member in the past 12 months?	4	3	2	1
OB3. Have you assaulted someone who is not a family member in the past 12 months?	4	3	2	1
OB4. Have you made use of someone else to harm a person with whom you have had problems in the past 12 months?	4	3	2	1

VI - VICTIMIZATION EXPERIENCES

The following section refers to acts of violence against you that may have occurred within the past 12 months. Please think of what has happened to you in the past 12 months in order to answer the questions.

	How many times?	Did you report the incident the last time?
VI1. Have you had something taken from you in the past 12 months by someone who was armed?		(1) Yes (2) No
VI2. Have you witnessed an armed robbery of some other person?		(1) Yes (2) No
VI3. Has any policeman or other public authority extorted money from you in the past 12 months?		(1) Yes (2) No
VI4. Has someone who is not a policeman or public authority threaten you to extort money from you in the past 12 months?		(1) Yes (2) No
VI5. Has anyone threatened you to force you to change your place of residence, change your opinions, or remain silent with regard to something you knew in the past 12 months?		(1) Yes (2) No
VI6. Have you been beaten by some other person or persons in the past 12 months?		(1) Yes (2) No
VI7. Have you been wounded with a firearm or other weapon in the past 12 months?		(1) Yes (2) No
VI8. Have you seen someone being wounded with a firearm or other weapon in the past 12 months?		(1) Yes (2) No
VI9. Have you or a close relative been threatened with death in the past 12 months?		(1) Yes (2) No
VI10. Have you or a close relative been kidnapped in the past 12 months?		(1) Yes (2) No
VII1. Has a close relative of yours been murdered in the past 12 months?		(1) Yes (2) No
VII2. Has a close relative of yours committed suicide in the past 12 months?		(1) Yes (2) No
VII3. Have the police abused you or beaten you in the past 12 months?		(1) Yes (2) No

OPTIONAL QUESTIONS

How afraid are you at present of being assaulted or robbed?

	LESS THAN BEFORE	SAME AS BEFORE	MORE THAN BEFORE
OP1. In your home or apartment	1	2	3
OP2. On the streets of your community during the day	1	2	3
OP3. On the streets of your community at night	1	2	3
OP4. On mass transportation	1	2	3
OP5. In the center of the city	1	2	3

Because of your fear of being the victim of violence you currently

	A GREAT DEAL	SOME- WHAT	NOT AT ALL
OP6. Have limited the places where you go shopping	3	2	1
OP7. Have limited recreation activities you formerly enjoyed	3	2	1
OP8. Have needed to acquire weapons for self-protection	3	2	1
OP9. Have felt the need to move to another city or area within or outside the country	3	2	1

OP10. Please note three things that make you feel proud of this country:

OP11. Please note three things that make you feel ashamed of this country:
