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**DATA COLLECTION SYSTEM FOR DOMESTIC VIOLENCE**

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# DATA COLLECTION SYSTEM FOR DOMESTIC VIOLENCE

## Introduction

Domestic violence has affected the social fabric of societies on a global scale. In the Caribbean, it is known to persist in domestic settings irrespective of place of residence, socio-economic status and ethnicity. There have been numerous attempts by various agencies to obtain a handle on domestic violence. In every instance, the primary objective has been to meet agency-specific needs and permit such agencies to fulfil their functions within a larger societal structure. This, agencies such as hotlines, shelters, hospitals, health centres, police stations and the court system receive reports of cases of domestic violence and record incidents in order to serve their specific needs. Public sector departments with responsibility for domestic violence have also been making attempts to collect and analyze data to facilitate initiatives akin to their social policies and sustainable development processes, as a whole. The latter hinges upon the availability of data systems that permit the retrieval of the requisite input data deemed to be necessary in enabling policy makers and other stakeholders to:

- (a) Obtain a profile of victims and perpetrators,
- (b) Understand the frequency and incidence of domestic violence,
- (c) Identify the groups at risk,
- (d) Develop intervention programmes, and
- (e) Monitor the effectiveness of violence prevention and intervention activities.

There have been recent efforts by the Pan American Health Organization/World Health Organization (PAHO/WHO) to develop similar data systems in Latin America and the Andean region. In Belize, for example, a surveillance system has been developed and constitutes a useful model as the Economic Commission for Latin America and the Caribbean/Caribbean Development and Cooperation Committee (ECLAC/CDCC) strives to develop a data collection protocol for the Caribbean subregion.

This initiative is an attempt to develop a reliable data collection system for consideration by governments in the Caribbean subregion. It became a reality following a Working Group Meeting on Data Collection Systems: Domestic Violence. At that meeting, the representative of the ECLAC/CDCC secretariat noted that the development of a data collection protocol for domestic violence constituted a principal component of a larger project entitled "*Development of Social Statistical Databases and a Methodological Approach for a Social Vulnerability Index for Small Island Development States*".

From the standpoint of Caribbean societies, she also noted that there were difficulties in ascertaining the incidence of domestic violence despite evidence of a small, but growing body of sociological research on domestic violence. Not surprisingly, she attributed such difficulties to underreporting and data collection inadequacies. While underreporting is a universal limitation impacting upon the accuracy of attempts to measure the prevalence of domestic violence, it might be possible to adopt data collection strategies that could militate against the adverse effects of under-reporting. The critical contribution of this initiative lies in its ability to effectively treat with the data collection inadequacies plaguing efforts to ascertain the incidence and prevalence of domestic violence in the Caribbean subregion.

A cursory examination of the main objectives of a data collection system suggests that reliable assessments of incidence and prevalence ought to be of utmost importance and hence a primary concern in treating with the scourge of domestic violence in the Caribbean subregion. However, the extent to which different countries will be successful toward this end depends upon their capacity to overcome a host of cultural, technical and bureaucratic challenges that are likely to obstruct efforts towards satisfying some of the essential preconditions underlying the attainment of reliable measures of incidence and prevalence. Given that domestic violence in all its manifestations is a universal phenomenon, it is imperative that every country in the Caribbean subregion gives due consideration to the implementation of data collection systems that take into account differential capacities in attaining the primary virtue of reliably assessing incidence and prevalence. Given the difficulties associated with the underreporting of domestic violence, a first step might be to ensure that every country has the capacity to at least develop a monitoring and surveillance system targeting reported cases. While not losing sight of the primary virtue, each country should develop the capability to track cases as they relate to victims, domestic units (for example, households or other culturally-determined living arrangements) and perpetrators.

This, therefore, is consistent with the contextual framework informing the commissioning of this project, the principal focus of which is as follows:

- (a) To identify the sources of relevant data (e.g. databases from the police, the court system, social service providers and health institutions);
- (b) To define the core minimum information needed by participating agencies;
- (c) To define and develop the methodology and tools to capture and analyze the data from multiple sources;
- (d) To develop a method of uniquely identifying the victims and perpetrators of domestic violence to avoid duplication of incident-based reports.

Recent developments pertaining to the scourge of domestic violence have resulted in a thrust towards the development of systems to collect the requisite data. In several countries across the globe, agencies such as the police, the courts, shelters, health institutions and other related service delivery organs have established independent data collections systems to serve their specific ends. This has resulted in multiple data sources producing a range of critical data that are complementary in many instances. However, there is need for reconciliation through

processes of harmonization as these disparate elements of data hinge upon different conceptual principles that impact not only upon the variable quality of the emergent data but also efforts towards reconciliation. This is further compounded by a dearth of technical expertise that is essential in order to appreciate the importance of and to develop reliable data systems that make allowances for flexibility and sustainability. As such, the proposed protocol towards the development of an appropriate data collection system would focus upon issues of definition, context, suitable data elements, data quality, resource inputs, prospective output and analytical significance.

### **Emergent issues in assessing the prevalence of domestic violence**

The assessment of prevalence is a primary function of victimology which is defined as “the study of the criminal-victim relationship” (Schafer, 1977). Drapkin and Viano (1974) define victimology as “that branch of criminology which primarily studies victims of crime and everything that is connected with such a victim”. In the conduct of victimological inquiries, Parsonage (1979) identifies five general approaches: (i) official crime statistics, (ii) victimization surveys, (iii) self-report surveys, (iv) case studies, and (v) the development of victim typologies.

Official crime statistics are usually the products of reports to designated law enforcement agencies. They provide information on the extent of reported crime as obtained voluntarily from a wide cross-section of law enforcement agencies across some countries. In addressing the utility of these statistics in the context of the United States, Vetter and Silverman (1978) made reference to 10 shortcomings, the two most striking being the inability to relate statistics to various phases of the criminal justice process and the inability to capture differentials in the enforcement of criminal statutes. Notwithstanding such limitations, official crime statistics are still considered to be a primary source for information on the prevalence and distribution of crime in different countries.

In some countries, victimological studies hinge upon victimization surveys that produce longitudinal data, permit the estimation of the relative risks of victimization, offer insights into the consequences of crime, and describe characteristics associated with the official reporting of crime. More importantly, they constitute the most reliable means of estimating crime prevalence. Self-report surveys are useful as means of obtaining data that permit assessments of hidden crimes. In many cases, they are conducted anonymously via telephone interviews although some face-to-face reporting has been found to be worthwhile. Self-report surveys have also been used to obtain data on the attributes of offenders. Case study approaches have been used to gather data relating to crime. These are extremely useful in studying special categories of victims and offenders. While they enhance the validity of the results pertaining to the specific groups in question, they limit attempts to make generalizations that will apply to other sub-populations. Where programmatic concerns arise, victim-typologies provide a basis for understanding the link between victims’ roles in the actual crimes that have been committed against them. Accordingly, they facilitate decision-making initiatives geared towards treating with the consequences of crime.

Clarke (2001) discusses the problems that emerge as a result of police officers’ conception of domestic violence. In fact, there is a popular view that domestic violence is not

treated as a crime but more as a social problem. With the passage of the Domestic Violence Act, Clarke points to evidence that is indicative of a greater level of pro-activity among police officers with respect to treating cases of domestic violence as criminal matters. Clarke also made reference to the fact that studies in many countries found that women were less concerned with punishment and deterrence and often settled for legal institutions, including police reporting mechanisms as means of securing their own safety or getting counseling intervention for their abusers. As a result, two possible courses of action have emerged and are pursued by different actors. On one hand, there has been a thrust towards enforcing the law to prosecute those found to be guilty of domestic violence. On the other hand, there has been an orientation towards satisfying the wishes of those victims who prefer law enforcement agencies to refrain from prosecution. Nonetheless, there is increasing recognition of the need to foster arrest, prosecution and conviction for offenders in domestic abuse cases. Notwithstanding arguments countering arrests, the primary concern is that domestic abuse in all its manifestations is tantamount to a crime and thus subject to similar treatment in the eyes of the law. This means that similar data collection systems could be developed and used for assessing the prevalence and gauging outcomes as they relate to domestic violence in myriad social contexts.

As the scourge of domestic violence continues to affect specific institutions and sub-populations globally, it is important to establish mechanisms that would improve access to reliable data that provide insights into profiles associated with different targets for programme intervention and treatment. A primary objective of such initiatives is to reduce the prevalence of domestic violence. This is likely to be accomplished by embarking upon strategies, such as counseling victims and offenders, offering protection to victims and potential victims, and initiating legal proceedings that may result in the conviction of offenders. Another objective is the reduction of injury, social and economic costs associated with domestic abuse. As a result of domestic violence, State institutions, such as the family and the work place, are exposed to burdensome social and economic costs. These can be mitigated by the services offered by social service providers, health care institutions and law enforcement agencies. In order to respond appropriately, the requisite data ought to be gathered, managed, stored in retrievable formats and refined to permit description, monitoring and evaluation. Such data should be capable of providing profiles of the various targets of intervention and treatment. In addition, they should also provide some basis for evaluating attributes associated with situational experiences at institutions such as the health authorities, social service agencies, law enforcement/legal authorities, the family and the work place.

At this point, attention should be directed to the principal targets of intervention that are necessary in treating with domestic violence. St. Bernard (2000) identifies different units of analysis that constitute the targets of intervention. According to St. Bernard, the principal units are the victim, the perpetrator, the case (i.e. a specific experience that is tantamount to exposure to domestic violence) and the domestic setting. As a target for intervention, the domestic setting is an elusive concept that is so fluid across time that it defies attempts to monitor and evaluate implicit processes of change. To this end, St. Bernard has claimed that “the domestic setting hinges upon the concept of a *domestic group* which may transcend the bounds of the family or the household unit”. All of these units constitute targets of intervention and therefore possess attributes that are to be described, monitored and assessed using systematic techniques of

evaluation to determine the efficacy of change processes. In essence, such targets of intervention provide a basis for enumerating domestic violence in various social institutional settings.

### **Conceptualizing domestic violence**

Insofar as domestic violence hinges upon conceptions of a “domestic group” as a point of reference, it has become an elusive concept. Nonetheless, there have been several attempts to define domestic violence to the extent that interesting parallels can be gleaned across definitions and, thus, used as a basis for reconciling differences emanating from the diverse attempts to gauge prevalence and other interesting dimensions of domestic violence. In a recent Training and Information Manual for Community Educators, domestic violence was defined as follows:

*Any violence that takes place in or outside the home between family and household members or partners in existing or previous relationships. It can include mental/emotional, sexual and physical violence (James, 1997).*

Clarke (2001) evaluated domestic violence legislation in Antigua and Barbuda, Saint Lucia, St. Kitts and Nevis and Saint Vincent and the Grenadines. In the context of Antigua and Barbuda and Saint Lucia, domestic violence is defined as follows:

*Any act of violence whether physical or verbal abuse perpetrated by a member of a household upon a member of a household which causes or is likely to cause physical, mental or emotional injury or harm to the abused party or other members of the household.*

For St. Kitts and Nevis, a number of actions have been itemized as conduct tantamount to domestic violence and permit victims to make applications for protection orders. These actions include the following:

- (a) Violence that results in or is likely to result in:
  - Physical harm,
  - Sexual suffering,
- (b) Threats of violence,
- (c) Coercion,
- (d) Arbitrary deprivation of liberty,
- (e) Molestation,
- (f) Conduct of an offensive or harassing nature and,
- (g) Conduct which amounts to psychological abuse, intimidation and persecution.

Clarke (2001) noted that the Domestic Violence Act for Saint Vincent and the Grenadines did not include a definition of domestic violence in the interpretation section of the

legislation. However, the 1999 Domestic Violence Act in Trinidad and Tobago has offered a definition which is as follows:

*Physical, sexual, emotional or psychological or financial abuse committed by a person against a spouse, child, any other person who is a member of the household or dependant.*

The Trinidad and Tobago Act also includes definitions of each type of abuse characterizing domestic violence.

In 1998, the United States Department of Health and Human Services and the United States Department of Justice co-sponsored a workshop entitled *Building Data Systems for Monitoring and Responding to Violence against Women*. The workshop consisted of four working groups, one of which was charged with the responsibility of developing recommendations to define and measure violence against women. In the group's deliberations, reference was made to The Center for Disease Control and its initiative geared towards developing and pilot testing uniform definitions relating to intimate-partner violence. In this regard, reference was made to violence as "actions that cause or threaten physical harm". In such a context, "violence against women" can be defined in terms of physical violence, sexual violence and threats of physical and/or sexual violence. The working group also made reference to "violence and abuse against women" – a term that goes beyond physical harm or the threat of it and also takes into account psychological/emotional and other forms of abuse along with the trauma and social costs that they inflict upon victims. As such, "violence and abuse against women" was defined in terms of physical violence, sexual violence, threats of physical and/or sexual violence, stalking and psychological/emotional abuse. In the end, it was recommended that data collection should, as much as possible, focus on all five components of violence and abuse against women. Moreover, the recommendations also alluded to the prospect of co-occurrence of the different components for any given incident and noted that data collection systems should make allowances for such a prospect.

While "violence against women" might assume the form of a restricted conception of intimate-partner violence, "violence and abuse against women assume the form of broader conception". Apart from intimate-partner violence, such conceptions may also apply in the context of other forms of domestic violence, for example, violence meted out to children and elderly or disabled family members. Despite cultural and interpersonal interpretations of "self" and "the other" that may influence individuals' willingness to report cases of domestic violence, the prospect of reporting cases that fall within the confines of violence within domestic settings is likely to be greater than that of reporting cases of abuse within such settings. This might be due to differential consequences that are likely to be more graphic and visible in the case of violence as opposed to abuse. Notwithstanding such developments, the broader interpretation (i.e. including abuse) should be entertained in surveillance and monitoring systems in order to facilitate more holistic assessments of the situation regarding domestic violence. This is especially relevant in the Caribbean subregion as there is evidence to suggest that the broader interpretation has been reflected in the Domestic Violence Acts of some countries.

## **Domestic violence surveillance systems: Some international standards**

### The case of the United States of America

In the United States, the Uniform Crime Report (UCR) is the official source of data on crime that has been reported to law enforcement agencies. Published since 1930, it provides information on the extent of reported crime as obtained voluntarily from a wide cross-section of law enforcement agencies across the country. In an effort to understand how the United States collects centralized databases on the incidence and prevalence of domestic violence in different States, the Justice Research and Statistics Association (JRSA) was commissioned to undertake studies in 1996 and 1997 (Orchowsky, 1999). In order to classify domestic violence and sexual assault at the level of the State, use was made of the Federal Bureau of Investigation's UCR Programme. At the level of the State, reference was to those data collection systems that provided more detailed data on domestic violence and sexual assaults than was available at the national level. The National Incident-Based Reporting System (NIBRS) was also examined in the context of the centralized database. The reported data originated from two sources – law enforcement agencies and service providers. According to the JRSA study, 34 States relied upon law enforcement agencies for the purpose of collecting data on domestic violence and 17 relied upon them for the purpose of collecting data on sexual assaults. The corresponding figures for States relying upon service providers for data collection pertaining to domestic violence and sexual assaults were six and eight. A total of 10 States relied upon national summary systems for the collection of data on domestic violence as opposed to nine in the case of data on sexual assaults. At the level of the State, the data collection systems can be summarized as follows:

- (a) Law Enforcement Incident-Based Crime Reporting System;
  - (b) Specialized Domestic and Sexual Violence Data Collection Systems – Incident-Based;
  - (c) Specialized Domestic and Sexual Violence Data Collection Systems – Summary-Based;
  - (d) Service Provider Systems – Client Based;
  - (e) Service Provider Systems – Summary Based.
- (a) Law enforcement incident-based crime reporting system

With respect to the 54 States and territories surveyed as part of the JRSA study, Orchowsky (1999) reveals that 46 had either implemented an incident-based system, were in the process of implementing one or planning to initiate steps in that direction. However, only seven States were considered to be NIBRS-States with Incident-Based Reporting (IBR) systems that adequately met the national standards for IBR. Accordingly, the NIBRS does not enable the generation of nationally representative data. With respect to reporting and analyzing domestic violence and sexual assaults, the NIBRS is deemed to be a superior mechanism when compared

to the UCR system. It has resulted in an expansion of the number of assault offenses such as simple assault and intimidation in the case of domestic violence and forcible sodomy, sexual assault with an object and forcible fondling in the case of sexual assault. The NIBRS approach also permits countries to classify the relationship between the victim and the perpetrator, for example, spouse, common-law partner, sibling, parent, child within family settings and ex-spouse outside the family setting. Generally speaking, State-IBR systems contain data on the characteristics of victims, perpetrators, the nature of the offense, the nature of injuries (if any), third party presence during the offense, remedial responses such as the pursuit of protection orders and referrals to service providers. These systems also provide standardized processes for definition and coding and thus facilitate comparison across States.

(b) *Specialized domestic and sexual violence data collection systems: Incident-based*

A total of 14 States rely upon specialized incident-based data collection forms as a basis for collecting data on domestic violence and sexual assaults. These systems capture similar but more detailed information when compared with those systems that hinge upon the NIBRS approach. The specialized incident-based systems also permit the collection of data on substance abuse within domestic situations and prior abuse histories.

(c) *Specialized domestic and sexual violence data collection systems: Summary-based*

A total of nine States collect data on domestic and sexual violence summary-based systems. These systems collect data in a manner similar to the UCR system. In some instances, they do not even capture data relating to the characteristics of victims and perpetrators, the nature of the offense and victim/perpetrator relationship.

(d) *Service provider systems: Client-based*

These systems have been developed primarily for providing data to satisfy attempts by funding agencies to evaluate processes associated with the service delivery activities of client-based provider agencies. In some States, there exists a systematic process for gathering data on domestic and sexual violence from service provider agencies. A total of nine States were involved in processes that involved the collection of data pertaining to each client. In addition, there were nine additional States with interests in initiating data collection from all clients. These data are usually collected by the staff of the service provider agencies and, in most cases, hinge upon the use of hotlines or face-to-face contact with clients. In many instances, a standard form is used and some of the more modern systems permit direct data entry using a computer. These data collection systems should permit the identification of the primary victim (i.e. child, significant others), new clients/incidents (incidence), the type of abuse and the timing of the abuse which may be different from the timing of the report. Often times, there are problems associated with the different media through which the requisite data are collected by service provider agencies. Apart from hotlines, a lot of data may be collected by means of crisis-calls. This will limit the breadth of data captured insofar as the primary function of such agencies is service provision as opposed to data collection.

(e) Service provider systems: Summary-based

These systems are similar to the client-based systems insofar as they also seek to serve the requirements of agencies that have funded service delivery programmes. However, the summary-based programmes tend to focus upon the number of clients and the quantum of service delivery. Due to limitations regarding the collection of data that would adequately permit assessments about the characteristics of clients, the information from summary-based systems appear to be characterized by limited utility.

The case of Belize

In Belize, the Domestic Violence Surveillance System captures cases of domestic violence by using a registration form that elicits data on the characteristics of allegations of domestic violence including child abuse. These data represent part of the National Health Information System that is administered under the auspices of the Ministry of Health. The data are collected in triplicate. The patient holds one copy and is advised to share its contents with other service providers who are likely to offer assistance with respect to domestic violence. The second copy is sent to the Ministry of Health District Information Unit while the third is kept in the client's record with the strictest confidence. The data collection form is multi-purpose insofar as it provides data for medical research and programmes development.

For each case, data are captured with respect to the health centre as the principal reference point. From the standpoint of the client, the form elicits general information that includes date of registration, client's name, age (i.e. date of birth), sex, nationality, phone number and unique identifiers (registration ID and social security ID). The data collection instrument also captures other demographic data including place of residence, employment status (i.e. occupation and whether or not employed), educational attainment, marital/civil status, ethnicity/race, religion and pregnancy status. In the case of child abuse, data are elicited on the name of the school, grade, and details of emergency contact (i.e. address, relationship and phone contact). The incident is one of the principal units of analysis in analyzing domestic violence. The instrument provides a basis for capturing the characteristics of incidents and focuses on occurrences (i.e. first incident or repeated incident), date of injury, type of violence (i.e. sexual, psychological, physical or other) and mode of injury (i.e. physical force, fire arm, sharp instrument or other).

The characteristics of the informant are important and some are routinely collected in Belize. Apart from the informant's name, address and registration ID, personal characteristics pertaining to age, sex and relationship to client are elicited. The data collection form also throws light upon the characteristics of the perpetrator. Apart from his/her name, address and registration ID, personal characteristics such as age, sex, relationship to client, occupation and perpetrator history (criminal record, alcoholic, drug addict, repeat batterer and/or other) form the basis of inquiry. There is also an attempt to gather details relating to remedial action resulting from the fact that there was an act of domestic violence. These assume the form of the kind of information that was provided (i.e. information that abuse is a crime, information about the following: the domestic violence bill, contacts for hotlines, shelters and volunteers, legal aid, brochures on domestic violence) and referrals. The latter assumed the form of medical follow-

ups and prospective engagements with entities such as social workers, women's departments, the police, public health nurses, psychiatric nurses, legal aid, haven house, the family court or others. The instrument also contains a well-documented set of instructions that facilitate its accurate completion.

The flow of information pertaining to domestic violence is critical in the process of efficiently capturing data and their subsequent dissemination to the different stakeholders. In Belize, the process begins with care providers who are professionals in various institutions that are responsible for service delivery and the management of services to victims and perpetrators of domestic violence. In any given district, care providers submit the details pertaining to district-specific cases to a District Health Information Unit that produces a District Monthly Report available for use by stakeholders at local levels. In every District Health Information Unit, there is a weekly electronic data transfer of district-specific cases to a National Health Information Unit that compiles a National Monthly Report for use by stakeholders at the national level. The National Health Information Unit is tantamount to a central registry that fulfills the data needs of users interested in the dynamics akin to domestic violence. These users might include the Ministry of Health, the police, the Ministry of Human Development, Central Statistical Office, Family Court, National Women's Commission, Mental Health Programme, National Commission for Families and Children, PAHO, United Nations Children Fund (UNICEF), Human Rights Commission and the Office of the Prime Minister. Providing that every district-specific case is channeled through district care providers, there could be some mechanism of control that could minimize problems such as double counting.

For countries that have nothing in place to capture the details pertaining to cases of domestic violence, the Belizean model offers some useful insights. It reinforces the importance of completeness, accuracy and promptness in documenting the incidents. It also highlights the importance of capturing more than one unique identifier since every client may not be able to use a common registration system for the purposes of personal identification. In the absence of the details pertaining to the use of the data for statistical and monitoring purposes, it would appear that obstacles are evident with respect to comprehensive analyses beyond the case or, as in the case of the United States model, the incident-based analyses. As such, the system does not appear to provide sufficient leverage to permit comprehensive analyses according to the attributes of victims or perpetrators.

### The case of Panama

In the Panamanian context, the data collection system with respect to domestic violence is indicative of some interesting departure when compared to the Belizean model. The Panamanian system permits the collection of a medical history of persons involved in domestic violence, for example, victims and their attackers. It targets a greater number of variables than the Belizean model. While it is quite comprehensive in terms of its coverage, there are definite challenges to manipulating the data for statistical and research purposes. Another apparent difference between the Panamanian and the Belizean systems is that the former permits treatments of victims and attackers as the principal units of analysis while the latter lends itself more easily to incident-based analyses.

In Panama, the Ministry of Health has also been engaged in the collection of research data on cases based upon a suspicion of domestic violence. A screening questionnaire is then administered to determine whether or not cases fit within the context of domestic violence, this being the case only with respect to consensual unions. In this restricted scenario, the data collection process seems to be amenable to analyses at the level of victims, perpetrators and cases/incidents. Notwithstanding such a prospect, the efficient manipulation of the data still constitutes a real problem. The Panamanian system also attempts to classify cases of domestic violence according to the type of injuries sustained by victims. In this regard, use is made of the Tenth Edition of the International Classification of Diseases (See Codigos Utilizados para los Diagnosticos de Violencia en General y su Vinculo con Registro de Casos de Violencia Intrafamiliar y Sexual – CIE 10).

### The case of Trinidad and Tobago

In Trinidad and Tobago, a task force was commissioned to develop a comprehensive policy to address the problem of domestic violence nationwide. This was in response to the overwhelming interests of a number of key stakeholders who were interested in treating with the scourge of domestic violence. In addition to witnessing a proliferation of non-governmental organizations (NGOs) and religious bodies engaging in the provision of services for victims of domestic violence, a Sexual Offences Bill and a Domestic Violence Act were passed in parliament during the 1990s. Moreover, there was evidence of a greater level of sensitivity among the police and this culminated in the establishment of a Community Policing Division. Within the public service, a Domestic Violence Unit was set up within the Gender Affairs Division of the Ministry of Culture and Gender Affairs which along with other departments, such as the National Family Services Division, introduced voluntary counseling services for victims. Similar services were also offered by a number of women's organizations. With such interest being evident, it was recommended that a system of data collection be developed to facilitate greater understanding with respect to the extent and complexity of domestic violence and to inform judgment about possible policy interventions that might be considered to be worthwhile solutions.

Not surprisingly, most of these agencies had initiated their own internal processes of data collection with respect to domestic violence. Since these activities were not coordinated, there was some concern about the quality and the reliability of the data. Most of the agencies also collected agency-specific data that fit within their respective programmatic agendas. Moreover, there has been an absence of a centralized system that assembles the data from disparate entities into a single system. The Domestic Violence Unit (DVU), for example, has established a Hotline (800-SAVE) that enables victims, perpetrators and others affected by domestic violence to seek counseling and referrals. Through the Hotline mechanism, the DVU constitutes a valuable source of data although one has to be aware of its limitations with regard to coverage. Based upon the contribution of Gopaul, Morgan and Reddock (1994), the need for a centralized database tapping into the national situation characterizing domestic violence was brought to the forefront and facilitated a number of activities geared toward its realization.

In Trinidad and Tobago, data collection pertaining to domestic violence has been in existence in a number of State agencies and NGOs. From the standpoint of State agencies,

entities such as the Domestic Violence Unit, Probation Services, the police (Modus Operandi and Community Policing Division) and the Central Statistical Office have actively been engaged in data collection activities. Additionally, State agencies collect data that have a direct bearing upon domestic violence. These include the Ministry of Education (Guidance Unit), Ministry of Health (Child Guidance Unit, Statistical Unit, State Hospitals and Medical Social Workers Reports), Ministry of Community Empowerment, Sports and Consumer Affairs (National Family Services) and Ministry of the Attorney General (The High Court). With respect to non-governmental organizations, data on domestic violence have been collected by the Rape Crisis Society and The Coalition against Domestic Violence (Shelter for Battered Women). Other relevant data can also be obtained from other shelters for battered women, children's homes and private hospitals. Notwithstanding these efforts, there exists no acceptable standard for data collection and there is widespread variation with respect to input processes and the quality of outcomes.

In striving toward the establishment of a central registry for the collection, analysis and dissemination of reliable data at the national level, it became necessary to satisfy a few underlying criteria. In particular, it was considered important to upgrade data collection systems in relevant government and non-government agencies and to increase cooperation among agencies involved in the collection of data pertaining to domestic violence. It was also necessary to forge some kind of integration that would culminate in the development of a national system for the collection and dissemination of data pertaining to domestic violence. In this regard, the role of the Central Statistical Office was considered to be critical. In order to meet these criteria, it was recommended that an inventory of equipment (hardware and software) and skills be undertaken as a pre-requirement for upgrading and retooling. Specialized training was viewed as concomitant with upgrading and retooling especially in areas akin to data collection, data preparation, data management and statistical analysis.

In its quest to develop a comprehensive policy to address the problem of domestic violence in Trinidad and Tobago, the National Task Force set itself a number of different objectives. In particular, the Task Force had embarked on a path to develop a standard form that could eventually be implemented across the wide spectrum of service providers and other agencies that collect data on domestic violence. Based upon examinations of input forms collected from entities including the Ministry of Culture and Gender Affairs, all branches of the police, shelters for battered women and the Domestic Violence Hotline, a standard form was developed for pilot-testing in a number of settings. These settings included government hospitals, halfway homes, children's homes, Hot Lines, a Tobagonian Halfway House and the Community Policing Unit (Tobago). The standard form was divided into seven sections (A-G) that were as follows:

- Section A: Agency/Shelter Name and biographic and demographic details
- Section B: Demographic Details of Offspring/Parents
- Section C: Current Medical Profile of the Client
- Section D: Employment Characteristics of the Client

- Section E: Educational Characteristics of the Client
- Section F: Biographic/Demographic Sketch of the Perpetrator
- Section G: Remedial Action/Abuse Characteristics

**Table 1: Standard Data Collection Form for Trinidad and Tobago - Main items**

**SECTION A**

Name of Agency/Shelter, Client's Name, Client's Address, Client's Age (DOB)  
 Date Admitted, Contact Numbers, NIS Number, Ethnicity, Religion, Union/Civil Status, Next of Kin – Victim as the reference unit

**SECTION B**

Demographics of Offspring, Medical Profile of Offspring – Victim as the reference unit

**SECTION C**

Prevalence of Degenerative Diseases, Prevalence of Physical Ailments  
 Prevalence of Sexually Transmitted Infections, Pregnancy Status – Victim as the reference unit

**SECTION D**

Employment Status, Occupation, Full-Time/Part-Time Status, Aspirations  
 - Victim as the reference unit

**SECTION E**

Educational Attainment, Educational Qualifications, Special Skills – Victim as the reference unit

**SECTION F**

Perpetrator's Name, Perpetrator's Address, Perpetrator's Age (DOB),  
 Perpetrator's Employment Status – Victim as the reference unit

**SECTION G**

Remedial Action – Home leaving motivations and practices, Exposure to Shelter  
 Referrals - Incidents – Form of Abuse (Current), Prior Abuse, Presence of Restraining Order

Table 1 provides some additional details about the contents of each section. It shows that the data collection form is an omnibus instrument that is attempting to treat with the interests of the broad range of service providers. Therefore, it runs the risk of being so lengthy that it militates against full completion, not to mention the additional virtues of promptness and

accuracy. Nonetheless, it represents an informative tool that can enable efforts toward identifying the critical data items that optimally fit within a data collection protocol for the Caribbean subregion. In the context of Trinidad and Tobago, details relating to the flow of information, software and hardware inputs, skills training and the central registry are yet to be finalized.

## **Toward a data collection protocol for domestic violence**

### Conceptual issues

In order to develop a protocol that is sufficiently appropriate to facilitate data collection in relation to domestic violence, one has to focus on the specific units that will be used for analytical purposes. Based upon earlier discussions, these are likely to be victims, perpetrators and the actual incidents of violence. It also means that some yardstick has to be put in place to uniquely identify distinct units and provide some assurance of confidentiality. For such purposes, some data collection systems have used social insurance numbers or personal identification numbers issued by national elections' commissions. Irrespective of the unit that is central to any specific analysis, it is important to establish some basis for classifying domestic violence. Given earlier attempts that have examined the concept, the proposed protocol will embrace the broad conception that treats with violence in terms of abuse or actions that cause or threaten physical harm. Thus, domestic violence will include physical violence, sexual violence, threats of physical and/or sexual violence and psychological/emotional abuse. In addition to permitting unidimensional classifications of domestic violence, the protocol will permit multi-dimensional classifications.

Apart from defining and classifying domestic violence, it is critical to have some notion of the "domestic setting" in which the behaviours of interest have been unfolding. This could be defined in terms of some physical location and in terms of a universal set of relatives. Thus, there ought to be some consensus on the myriad forms that "domestic settings" can assume within the Caribbean subregion. In other words, there should be a set of boundaries defining the universal set of physical spaces and family relationships that constitute "domestic settings" within the Caribbean subregion. For instance, domestic violence may occur within the confines of private residences as well as in work places and other public places. The "domestic group" is likely to be intra-familial and/or intra-household. For the purpose of the proposed data collection system, the "domestic group" is considered to be intra-familial since such a conception often includes family members within a household context and will also reflect experiences between family members living in different households. It should be noted that family members refer to two or more persons who are related to one another by blood, marriage and adoption. The family is also bound by primary and secondary relationships.

Since an objective of this project is to identify the core minimum information needed by participating agencies, it will be possible to recommend some data elements that ought to be captured to reflect the conceptual issues raised in this discussion. Also evident is the need to develop a tool that collects data that are specific to each of the following: the victim, the perpetrator and the incident. In particular, incident-based data collection will be pursued and

will permit analyses of incidents according to characteristics of the victim, the perpetrator, the nature of the violence/abuse and the physical location. In order to engage in analyses at the level of victims and perpetrators, it is necessary to identify unique identifiers for the two sets of individuals. Such an identifier is likely to be generated on the basis of one's date of birth and other ascriptive characteristics, thus providing a means for cross-checking and identifying victims and perpetrators as distinct units of analysis. The familial relationship between the victim and the perpetrator is another core data item that emerges out of the discussion on conceptual issues.

### Analytical challenges

A Data Collection System for Domestic Violence has been proposed because of stakeholders' needs to describe and explain different aspects of this international scourge. Moreover, domestic violence is symptomatic of inequality with respect to relations in domestic settings and has been deemed a violation of human rights. There is also a persistent need to monitor and evaluate the outcomes associated with the range of interventions that have been implemented to effect change in behaviours and conditions that impact upon the prevalence of domestic violence at national levels and within communities. In one's quest to satisfy these needs, analytical challenges arise and have bearings in every arena that is supposedly served by the stakeholders. In this regard, three principal arenas are found to be critical and assume the form of service providers (i.e. safe houses, family services, religious organizations, children's homes and Hot Lines, to name a few), health care providers (i.e. medical records at hospitals/health centres) and law enforcement agencies (i.e. the police and the courts). This means that relevant data have to be elicited within each of these arenas for every incident of domestic violence.

Before identifying data items that are to be elicited in each of these arenas, it is important to identify the set of additional data items that describe features characterizing incidents. These include date and time of occurrence, injury status of the victim, mode of injury, ordinal status of incident (first or repeat) and report status of incident (i.e. whether or not reported to the police). These data items are important in terms of providing important descriptive parameters that are considered to be instrumental from the standpoint of monitoring outcomes and evaluating the impact associated with interventions designed to influence the incidence and prevalence of incidents. For each incident, data ought to be provided to reflect experiences and outcomes associated with the three principal arenas of action. With respect to service providers, it is important to capture data on the name of service provider agency, date of visit/contact and informants (i.e. victim, family member or other person). These items should also be captured for health care providers and the law enforcement agencies. In terms of the latter, additional data should reflect details of arrests, prosecutions and convictions. For each of the three processes, it will be important to have some knowledge about whether or not each has been executed, respective dates of such executions and, in the case of convictions, the outcome. In each arena, these data would facilitate the use of the relevant data in applied research efforts such as those akin to process evaluation.

For each incident that is captured, data are to be collected with respect to victims and perpetrators. Such data include demographic characteristics such as gender, age, marital/civil status, place of residence, labour market characteristics (i.e. employment status and occupational

status), educational status (i.e. attainment and qualifications), religion and ethnicity/race and are critical from the standpoint of substantive analyses. These data will be important in permitting assessments of differentials in the incidence and prevalence of domestic violence predicated upon gender, age, civil status, religion, ethnicity and residence. Analyses that hinge upon the link between domestic violence and power relations in domestic settings can be assessed in terms of labour market characteristics and/or educational characteristics. In the case of perpetrators, there is likely to be an interest in the impact of deviant behaviour (i.e. drug use and alcohol use) in evaluating links between deviance and violence within domestic settings. In the case of female victims, there is likely to be an interest in pregnancy status at the time of victimization.

### Data collection

The data collection process is facilitated through the efforts of the principal arenas where incidents of domestic violence are reported within national confines. It has already been noted that social service providers, health care providers and law enforcement agencies are the principal actors. While the latter are primarily public sector agencies, the others constitute agencies that are not only public sector interests but also operated by non-governmental agencies. In the context of every country within the Caribbean subregion, it will be important, as a first step, to list agencies that provide services to victims/perpetrators of domestic violence and as a result have developed some mechanism for collecting data relating to incidents that have affected the lives of their clients. Since each agency is collecting data to serve its specific programmatic agenda, a consultative process should be encouraged to ensure that such agencies continue collecting the data that serve their programmatic ends while, at the same time, entertaining the data needs of the proposed data collection system. Thus, a participative approach should be embraced in order to produce a “win-win” situation for the various stakeholders. This militates against the development of a standardized form such as the one recommended and tested for primary data collection in Trinidad and Tobago. In fact, the consultative process should enable the agencies to refine their instruments to serve the data needs of the proposed data collection machinery that is to be managed by a central registry. As such, the proposed data collection machinery should meet standards set for the core items that facilitate the secondary data collection stage at the level of the central registry.

Every incident of domestic violence should be reported to one of the above-mentioned agencies. The data should be recorded in triplicate so that the first copy remains with the service provider/agency and the second with the client/informant. An officer from the central registry should collect the third form for the purpose of constructing the national database of incidents. These returns should be collected on a monthly basis from the different agencies nationwide. This suggests that a traveling officer position should be assigned to the department that is the home of the central registry. The central registry should also have a website that would enable clients and informants to interface with and complete the proposed data collection machinery. However, their respective inputs should be evaluated before being entered into the national database. The website could contribute towards enhancing the prospect of responses among clients/informants who, otherwise, may not have reported incidents.

### Data quality

In order to assure data quality, there has to be commitment from all players towards the virtues of the proposed domestic violence data collection system. In addition to facilitating revisions with respect to agency-specific data collection instruments, provision should be made to train designated agency staff so that they could appreciate the significance of the proposed process and their contribution towards its success. In revising agency-specific instruments to satisfy appropriate data quality standards, professional inputs will be necessary to ensure that appropriate standards are met with respect to the different dimensions of the instrument - layout, content, response/recording options and efficiency with respect to data collection and data processing.

The central registry should have at least two members of staff devoted to managing the national database. The two officers should have adequate training in official and applied statistics, in addition to exposure to training in the use of computer software such as SPSS, Epi-Info, IMPS and CS Pro. In general, the acquisition of training in these areas would enhance the proficiency of such officers in the delivery of statistical and data management services that are critical to the sustenance of the proposed data collection system in their respective domains. Within the Caribbean subregion, there should be two zonal training workshops targeting officers from the northern and southern/eastern Caribbean to strengthen their capacity to perform these duties. The training should target two officers from each country, one from the department housing the central registry and the other from the department responsible for gender affairs and in particular, violence against women. These officers should then be responsible for conducting training within their respective countries, in particular, within their respective offices. This should ensure that the quality of the process and the data are not threatened when officers are promoted, transferred or no longer serve the department upon resignation, retirement or death.

Before being implemented in the Caribbean subregion, the proposed data collection system and its attendant methodology ought to be tested in about four countries. The results of the pretest should provide useful insights toward enhancing the reliability of processes underlying data collection and data processing as proposed in accordance with the data collection system. In choosing the countries, some of the underlying criteria should include size (physical and population), level of data collection and processing sophistication and commitment toward establishing a data collection system. To this end, countries such as Trinidad and Tobago, Guyana, perhaps Haiti or Jamaica, and one of Saint Lucia, Saint Vincent and the Grenadines, Antigua and Barbuda or St. Kitts and Nevis could constitute the four countries in the subregion.

### Data management

Once established, the proposed data collection system is to be managed by a Central Registry. It is recommended that this system be established within National Statistical Offices where legislative arrangements and technical expertise render such an undertaking to be extremely viable. Moreover, such departments should develop the capacity to collect, process, analyze and disseminate statistical information relating to all aspects of criminal activities within national settings. This means that the responsibility of managing the proposed data collection system should rest with such units especially since the technical expertise is potentially available to realize such ends. In addition, statistics on domestic violence could be deemed a subset of

statistics on crime and deviant behaviour. It should also be noted that statistics on domestic violence extend beyond the bounds of violence against women or gender-related crime, both of which have often been the focus of Gender Affairs Units. Accordingly, they should more appropriately fit within the context of operations akin to National Statistical Offices.

The proposed data collection system is expected to facilitate the production of annual data sets in which the unit of analysis is the incident. By a process of sorting the data on variables reflecting unique identifiers and merging and/or joining victim and/or perpetrator characteristics to incident characteristics, the central registry could build separate data files focusing on victims and perpetrators. Altogether, three annual data files can be generated. These include an incident file, a victim file and a perpetrator file. The processing and analysis of these data are to be undertaken using IMPS, CS Pro, Epi-Info and SPSS. Microsoft Access is another software that could be useful for the purpose of data capture. It is expected that the training of designated officers will include exposure to software such as IMPS, CS Pro, SPSS, Epi-Info and Microsoft Access.

### Prospective output

On an annual basis, the prospective output of the Central Registry is likely to be the three data files reflecting data sets pertaining to incidents, victims and perpetrators. Within the Central Registry, the officers should be expected to produce an Annual Statistical Report on Domestic Violence at national levels. Apart from satisfying data requests to facilitate the research of different user groups, it should also provide data sets to research organizations subject to the submission of a research proposal and the payment of a nominal fee. In addition, there should be a contractual agreement between the Central Registry and researchers, not only with respect to the terms and conditions governing access to the data but also with respect to the output emanating from their proposed research. In essence, the contract should oblige the researcher to share his/her findings with the Central Registry. The Central Registry should also entertain collaborative research insofar as it may enhance the capability of its staff.

### **Summary**

It is clear that the experiences of the four cases – the United States, Belize, Panama and Trinidad and Tobago - featured in shaping the recommendations pertaining to the definition and development of the methodology and tools proposed in the data collection systems for Central Registries. The developmental process consisted of a critical examination of a range of methodological concerns such as conceptual issues, analytical challenges, data collection, data quality, data management and prospective output. The examinations of the conceptual issues and analytical challenges facilitated attempts to identify the principal units of analysis – the incident, the victim and the perpetrator. They also provide a basis for determining the relationship between these units in the development of the proposed data system. In this regard, the relevance and utility of the proposed unique identifier become important. The examinations also permit attempts to reconcile definitional issues as they relate to differential conceptions of domestic violence and the bound that applies in terms of “domestic groups” and “domestic settings” or “locales”. More important, the examinations permitted recommendations regarding

a core minimum set of data items to be collected by participating agencies for inclusion in the proposed data collection system (see Annex).

The remaining methodological concerns are inter-connected insofar as they all address the role of the Central Registry in the process of developing the data collection system. Throughout the Caribbean subregion, the Central Registry can be accommodated in the National Statistical Office in the unit that is responsible for the collection, collation and dissemination of statistics on crime<sup>1</sup>. This unit should be well endowed with highly trained personnel with strong capabilities in official statistics, applied statistics and data management systems. There should also be a traveling position within such a unit to permit monthly data capture from the principal providers of the data – social service providers, health care providers and law enforcement agencies. It has also been proposed that the staff of the Central Registry should benefit from training that would enhance the quality of the data to be produced. Such training is likely to be in areas such as official statistics, applied statistics, and the use of software such as SPSS, IMPS, CS Pro, Epi-Info and Microsoft Access. The quality of the data will be further enhanced by the proposed conduct of pilot tests in four countries that vary according to size (physical and population), level of statistical sophistication and commitment to the establishment of a data collection system.

At the data collection stage, it has also been recommended that a participative approach be embraced to ensure that there is congruence with respect to the contents of agency-specific data collection instruments. Generally speaking, the proposed protocol should be sensitive of the need for agencies to collect data to satisfy their specific programmatic needs. While encouraging the agencies to collect data pertaining to the core minimum items proposed for the purposes of the proposed data collection system, a general focus should be upon their adherence to sound methodological standards as they strive to revise their specific data collection processes. It is recommended that the Central Registry will be responsible for managing the proposed data collection system. The staff of the Registry should have access to IMPS, CS Pro, SPSS and Microsoft ACCESS. Such software could assist in preventing the duplication of incident-based events by permitting the sorting of cases according to unique identifiers.

With respect to prospective output, the central registry has the ultimate responsibility for the production of the following:

- (a) Three data files reflecting data sets pertaining to each of the following: incidents, victims and perpetrators,
- (b) The production of an Annual Statistical Report on Domestic Violence at national levels and,
- (c) The provision of data to facilitate the research of different user groups and data sets to research organizations subject to the submission of a research proposal, payment of a nominal fee and adherence to a set of contractual obligations.

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<sup>1</sup> In some countries, National Statistical Offices do not produce crime statistics. Nonetheless, the responsibilities associated with Central Registries could still be assigned to the National Statistical Office or any other department deemed to have the requisite technical capacity or potential.

With respect to the core minimum data items that have been identified as being critical to the data collection system, a template has been developed and is included in the annex to this document.

### **Prospects for the future**

In the Caribbean subregion, the countries are at different levels of readiness to accommodate the proposed data collection system. This hinges primarily upon levels of statistical sophistication, population size, cultural sensibilities governing interpretations of domestic violence as a criminal act and commitment toward data collection within the countries. Though several countries may consider the proposed model to be unattainable, it constitutes a reasonable target that should be the focus of aspirations. It is meant to be a guide to countries desirous of establishing data collection systems and provides an array of core items for consideration. While these items are not expected to be compulsory, stakeholder groups, through a consultative process, could embrace country-specific criteria to determine the menu of items deemed to be essential in meeting the needs of respective countries. Providing that the interest and commitment is resident, each country should establish a data collection system to facilitate its needs while bearing in mind financial, technical and logistic constraints. Such a system should be pilot tested to ascertain its validity. In addition, a Monitoring Committee consisting of senior officials from the major stakeholder groups should oversee the entire process in order to assess its validity.

Data collection systems based upon reported cases of domestic violence will undoubtedly be characterized by limitations that impact negatively upon efforts to realistically discern the myriad aspects of domestic violence in any given setting. Despite such limitations, the proposed model has tremendous utility as a tool for monitoring and evaluating outcomes associated with changes in the different aspects of reported cases of domestic violence. In the Anglophone Caribbean, countries such as Belize and Trinidad and Tobago have taken active steps toward the establishment of data collection systems. In other countries such as Saint Lucia, St. Kitts and Nevis, Antigua and Barbuda and Saint Vincent and the Grenadines, the potential exists for embracing the proposed system as a guide in the establishment of country-specific models. These models can be interpreted as a first step that could eventually be supported by the outcomes of more robust approaches such as a sample survey.

As data collection processes evolve in the Anglophone Caribbean, sample surveys are likely to become more commonplace in the quest to assess and evaluate the incidence and prevalence of domestic violence on a more reliable basis. Johnson (1998) has alluded to recent developments in the United States and Canada where survey research processes facilitated improvements in the quality of data for assessing the prevalence of violence against women. In particular, Johnson documents a wide cross-section of technical inputs and considerations that have been instrumental in facilitating such improvements in the context of the Violence against Women Survey conducted by Statistics Canada. This path could constitute a tremendous challenge for most Caribbean countries despite the merits associated with reliably reflecting the prevalence of domestic violence and other critical attributes such as patterns of reporting cases to

the police and associated outcomes of cases within the legal system. Nonetheless, it is a worthwhile challenge that ought to be given due consideration.

In a discussion of methodologies for the measurement of gender dimensions of crime and violence, Shrader (2000) makes reference to the Demographic and Health Surveys (DHS) that were conducted in several developing countries across the globe. While the DHS focused primarily on fertility behaviour, fertility regulation and child and maternal health, there were a few additional modules that targeted subjects such as HIV/AIDS and domestic violence. In the case of the latter, there were differential attempts to assess the prevalence of spousal violence against women, but in some cases there were variable levels of reliability. In the context of the Caribbean, a few countries have developed capabilities to undertake continuous sample surveys to track changes in labour force characteristics and living conditions. Perhaps, every three-five years, a module targeting domestic violence could be appended to these inquiries as a means of providing some indication with respect to incidence, prevalence, patterns of reporting and experiences within the legal system. Such indicators, if reliably generated, could have profound effects in terms of enhancing the technical inputs akin to the proposed data collection system. In addition to the latter, the countries of the subregion are also encouraged to explore the prospects of enhancing their capacity to undertake research initiatives that could throw light upon the prevalence of domestic violence whether at national levels or within specific sub-population groups.

Annex

**CENTRAL REGISTRY DATA COLLECTION FORM  
DOMESTIC VIOLENCE IN THE CARIBBEAN SUBREGION**

**(MODEL)**

## SECTION 1: CHARACTERISTICS OF THE INCIDENT

1. Institution where incident was reported: \_\_\_\_\_

Has this incident been ever reported at another institution:      1. Yes      2. No

If "Yes", where: \_\_\_\_\_

2. Nature of Incident - Is it characterized by:

- |                                   |        |       |
|-----------------------------------|--------|-------|
| a. Physical Abuse:                | 1. Yes | 2. No |
| b. Sexual Abuse:                  | 1. Yes | 2. No |
| c. Psychological/Emotional Abuse: | 1. Yes | 2. No |
| d. Financial Abuse:               | 1. Yes | 2. No |
| e. Verbal Abuse:                  | 1. Yes | 2. No |
| f. Other:                         | 1. Yes | 2. No |

3. Place of Occurrence:      1. Home  
                                  2. Work Place  
                                  3. Other Public Place

4. Date of Occurrence: Day \_\_\_\_ Month \_\_\_\_ Year \_\_\_\_

5. Time of Occurrence: Hour \_\_\_\_ Min \_\_\_\_ AM/PM

6. Date of Report: Day \_\_\_\_ Month \_\_\_\_ Year \_\_\_\_

7. Occurrence Status of the Incident:  
 1. First Incident:      1. Yes      2. No  
 2. First Reported Incident:      1. Yes      2. No  
 2. Repeated Incident:      1. Yes      2. No

8. Injury Status of Incident:      1. No Injury  
                                       2. Slight Injury  
                                       3. Serious Injury  
                                       4. Death

9. Mode of Injury:      1. Physical Force:      1. Yes      2. No  
                                   2. Fire Arms:      1. Yes      2. No  
                                   3. Sharp Instrument:      1. Yes      2. No  
                                   4. Other (Specify) \_\_\_\_\_:      1. Yes      2. No

## **SECTION 2: DOMESTIC VIOLENCE: EXPOSURE HISTORY, INFORMATION AND ASSISTANCE**

21. If this incident was not the first, answer the following questions:

- i. Place of Occurrence of the First Incident:             
 

1. Home
2. Work Place
3. Other Public Place
  
- ii. Date of Occurrence of the First Incident: Day \_\_\_\_ Month \_\_\_\_ Year \_\_\_\_
  
- iii. Nature of the First Incident:
  - a. Physical Abuse:             
 

1. Yes
2. No
  - b. Sexual Abuse:             
 

1. Yes
2. No
  - c. Psychological/Emotional Abuse:  
 

1. Yes
2. No
  - d. Financial Abuse:             
 

1. Yes
2. No
  - e. Verbal Abuse:             
 

1. Yes
2. No
  - f. Other:             
 

1. Yes
2. No

22. Type of Information Ever Received with respect to Domestic Violence:

- (a) Information that Abuse is a Crime:             
 

1. Yes
2. No
- (b) Presented with Domestic Violence Bill:             
 

1. Yes
2. No
- (c) Phone Contacts- Hotlines, Shelters:             
 

1. Yes
2. No
- (d) Legal Aid:             
 

1. Yes
2. No
- (e) Pamphlets, Brochures on Domestic Violence:             
 

1. Yes
2. No

23. Referrals for Assistance with respect to Domestic Violence:

- (a) Medical follow Up:             
 

1. Yes
2. No
- (b) Social Worker:             
 

1. Yes
2. No
- (c) Women's Department:             
 

1. Yes
2. No
- (d) Police :             
 

1. Yes
2. No
- (e) Public Health Nurse:             
 

1. Yes
2. No
- (f) Psychiatric Nurse:             
 

1. Yes
2. No
- (g) Legal Aid:             
 

1. Yes
2. No
- (h) Haven House:             
 

1. Yes
2. No
- (i) Family Court/Magistrate:             
 

1. Yes
2. No
- (j) Other \_\_\_\_\_:             
 

1. Yes
2. No

### **SECTION 3: CHARACTERISTICS OF THE VICTIM**

31. Personal Identification: \_\_\_\_\_
32. Sex:            1. Male            2. Female
33. Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_
34. Place of Residence: \_\_\_\_\_
35. Marital Status:    1. Single            2. Married            3. Divorced  
                          4. Separated          5. Common-Law        6. Widowed
36. Ethnicity: \_\_\_\_\_
37. Religion: \_\_\_\_\_
38. Relationship to Perpetrator:    01. Spouse/Partner    02. Child    03. Grand-Child  
    04. Sibling            05. Ex-Spouse/Partner    06. Parent  
    07. Grand-Parent    08. Niece            09. Nephew  
    10. Aunt              11. Uncle            12. Cousin  
    13. In-Laws            14. Care Receiver    15. Other
39. Educational Characteristics:  
 a. Educational Attainment: 1. None            2. Primary            3. Secondary  
     4. Tertiary              5. Other
- b. Educational Qualifications: \_\_\_\_\_
40. Labour Force Characteristics:  
 a. Employed at the time of the Incident: 1. Yes            2. No  
 b. Main Occupation: \_\_\_\_\_  
 c. Employment Status at the time of the Incident: 1. Full Time    2. Part Time
41. Does the Victim have any dependents? 1. Yes            2. No
42. For female victims only:  
 a. Was the Victim Pregnant at the Time of the Interview: 1. Yes            2. No

**If the Informant is not the VICTIM, obtain the following data as they pertain to the INFORMANT. Otherwise, go to SECTION 4 and continue.**

43.      Informant:      1. Perpetrator      2. Other Person

44. If "Other Person", Relationship to Victim:

- |                    |                       |               |
|--------------------|-----------------------|---------------|
| 01. Spouse/Partner | 02. Father            | 03. Mother    |
| 04. Sibling        | 05. Ex-Spouse/Partner | 06. Child     |
| 07. Grand-Parent   | 08. Grand-Child       | 09. Caregiver |
| 10. Aunt           | 11. Uncle             | 12. Cousin    |
| 13. In-Laws        | 14. Other             |               |

45. Sex: 1. Male 2. Female

46. Place of Residence:

## **SECTION 4: CHARACTERISTICS OF THE PERPETRATOR**

51. Personal Identification:

52. Sex: 1. Male 2. Female

53. Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

54. Place of Residence:

55. Marital Status: 1. Single 2. Married 3. Divorced

56.      Ethnicity: \_\_\_\_\_

57. Religion: \_\_\_\_\_

58. Educational Characteristics:



- b. Educational Qualifications: \_\_\_\_\_

## 59. Labour Force Characteristics:



- b. Main Occupation: \_\_\_\_\_

- c. Employment Status at the time of the Incident: 1. Full Time 2. Part Time

60. At the Time of Occurrence, was the Perpetrator under the Influence of :

- a. Drug (Other than Alcohol): 1. Yes                  2. No
  - b. Alcohol:    1. Yes                  2. No
2. No

## **SECTION 5: LEGAL ACTIONS AND OUTCOMES: REFERENCE TO INCIDENT UNDER REVIEW**

71. Had Protection Order Ever Been Sought Against Perpetrator: 1. Yes                  2. No

Date of Action: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

72. Has Protection Order Ever Been Obtained Against Perpetrator: 1. Yes                  2. No

Date of Action: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

73. Has Perpetrator Ever Breached Protection Order:      1. Yes                  2. No

74. Has this Incident Ever Been Reported to the Police: 1. Yes                  2. No

Date of Action: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

Police Response:    1. Sensitive                  2. Insensitive

75. Has an Arrest Been Made based upon Report:      1. Yes                  2. No

Date of Action: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

76. Has Prosecution Been Initiated:                            1. Yes                  2. No

Date of Action: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

77. Outcome of Prosecution - Verdict: 1. Guilty                  2. Not Guilty

Sentence: \_\_\_\_\_

Date of Action: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

## INSTRUCTIONS

### **SECTION 1: CHARACTERISTICS OF THE INCIDENT**

1. Institution where incident was reported: State the name of the institution and assign appropriate code that is to be determined for each country.  
Has this incident been ever reported at another institution: Place a circle around the code corresponding to appropriate response.  
If “Yes”, where: State the name of the institution and assign appropriate code that is to be determined for each country.
2. Nature of Incident: Place circle around the code corresponding to appropriate response.
3. Place of Occurrence: Place circle around the code corresponding to appropriate response.
4. Date of Occurrence: Use Century-Month-Code to facilitate measure of duration in months.
5. Time of Occurrence: State Hour, Min and whether AM or PM.
6. Date of Report: Use Century-Month-Code to facilitate measure of duration in months.
7. Occurrence Status of the Incident: Place circle around the code corresponding to appropriate response.
8. Injury Status of Incident: Place circle around the code corresponding to most appropriate response.
9. Mode of Injury: Place circle around the code corresponding to appropriate response.
10. Exposure to Assistance: Place circle around the code corresponding to appropriate response.

### **SECTION 2: DOMESTIC VIOLENCE: EXPOSURE HISTORY, INFORMATION AND ASSISTANCE**

21. If this incident was not the first, answer the following questions:
  - i. Place of Occurrence of the First Incident: Place circle around the code corresponding to the most appropriate response.
  - ii. Date of Occurrence of the First Incident: Use Century-Month-Code to facilitate measure of duration in months.
  - iv. Nature of the First Incident: Place circle around the code corresponding to the most appropriate response.
22. Type of Information Ever Received with respect to Domestic Violence: Place circle around the code corresponding to the most appropriate response.

23. Referrals for Assistance with respect to Domestic Violence: Place circle around the code corresponding to the most appropriate response.

## **CHARACTERISTICS OF THE VICTIM**

31. Personal Identification: This code is a combination of date of birth, sex codes, place of birth code and unique identifier. It looks somewhat like this (YYYYMMDDSP???).
32. Sex: Place circle around the code corresponding to appropriate response.
33. Date of Birth: Compute age in completed years and state age.
34. Place of Residence: To be classified using country-specific geographic classification used in the census.
35. Marital Status: Place circle around the code corresponding to appropriate response.
36. Ethnicity: To be classified using country-specific ethnic/racial classification used in the census.
37. Religion: To be classified using country-specific religious classification used in the census.
38. Relationship to Perpetrator: Place circle around the code corresponding to appropriate response.
39. Educational Characteristics
  - i. Educational Attainment: Place circle around the code corresponding to appropriate response.
  - ii. Educational Qualifications: To be classified using country-specific classification used in the census.
40. Labour Force Characteristics
  - i. Employment Status at the Time of Incident: Place circle around the code corresponding to appropriate response.
  - ii. Main Occupation: To be classified using country-specific occupational classification used in the census.
  - iii. Full-Time/Part-Time Status: Place circle around the code corresponding to appropriate response.
41. Does the Victim have any dependents: Place circle around the code corresponding to appropriate response.
42. For Females Only
  - i. Pregnancy Status at the Time of Incident: Place circle around the code corresponding to appropriate response.

**If the informant is not the VICTIM, obtain the following data as they pertain to the INFORMANT. Otherwise, go to Section 4 and continue.**

43. Informant: Place circle around the code corresponding to appropriate response.
44. If "Other Person", Relationship to Victim: Place circle corresponding to appropriate response.
45. Sex: Place circle around the code corresponding to appropriate response.
46. Place of Residence: To be classified using country-specific geographic classification used in the census.

## **CHARACTERISTICS OF THE PERPETRATOR**

51. Personal Identification: Personal Identification: This code is a combination of date of birth, sex codes, place of birth code and unique identifier. It looks somewhat like this (YYYYMMDDSP???).
52. Sex: Place circle around the code corresponding to appropriate response.
53. Date of Birth: Compute age in completed years and state age.
54. Place of Residence: To be classified using country-specific geographic classification used in the census.
55. Marital Status: Place circle around the code corresponding to appropriate response.
56. Ethnicity: To be classified using country-specific ethnic/racial classification used in the census.
57. Religion: To be classified using country-specific religious classification used in the census.
58. Educational Characteristics
  - i. Educational Attainment: Place circle around the code corresponding to appropriate response.
  - ii. Educational Qualifications: To be classified using country-specific classification used in the census.
59. Labour Force Characteristics
  - i. Employment Status at the Time of Incident: Place circle around the code corresponding to appropriate response.
  - ii. Main Occupation: To be classified using country-specific occupational classification used in the census.
  - iii. Full-Time/Part-Time Status: Place circle around the code corresponding to appropriate response.
60. At the Time of Occurrence, was the Perpetrator under the Influence of: Place circle around the code corresponding to appropriate response.

**LEGAL ACTIONS AND OUTCOMES: REFERENCE TO INCIDENT**

71. Protection Order Sought: Place circle around the code corresponding to appropriate response.  
Date of Action: Use Century-Month-Code to facilitate measure of duration in months.
72. Protection Order Obtained: Place circle around the code corresponding to appropriate response.  
Date of Action: Use Century-Month-Code to facilitate measure of duration in months.
73. Report Made to Police: Place circle around the code corresponding to appropriate response.  
Date of Action: Use Century-Month-Code to facilitate measure of duration in months.  
Police Response: Place circle around the code corresponding to appropriate response.
74. Arrest Made: Place circle around the code corresponding to appropriate response.  
Date of Action: Use Century-Month-Code to facilitate measure of duration in months.
75. Prosecution Initiated: Place circle around the code corresponding to appropriate response.  
Date of Action: Use Century-Month-Code to facilitate measure of duration in months.
76. Conviction: Place circle around the code corresponding to appropriate response.  
Date of Action: Use Century-Month-Code to facilitate measure of duration in months.  
Verdict: Place circle around the code corresponding to appropriate response.  
Sentence: State the nature of the sentence. To be classified in accordance with the legal process across countries of the Sub-Region.

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