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Data Collection Systems: Domestic Violence
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**REPORT OF THE WORKING GROUP MEETING ON
DATA COLLECTION SYSTEMS: DOMESTIC VIOLENCE**



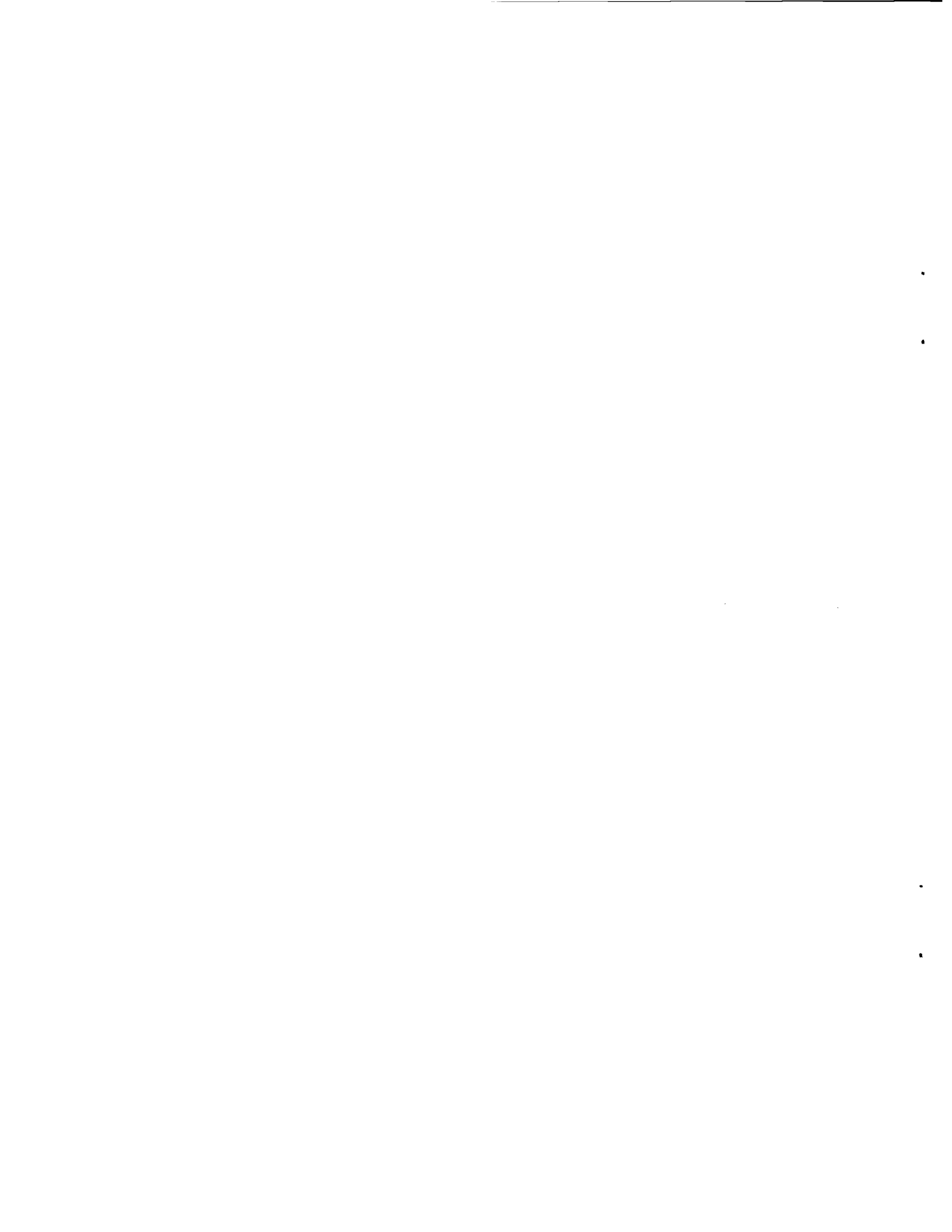
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CARIBBEAN DEVELOPMENT AND COOPERATION COMMITTEE



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REPORT OF THE WORKING GROUP MEETING ON DATA COLLECTION SYSTEMS: DOMESTIC VIOLENCE

The Economic Commission for Latin America and the Caribbean/Caribbean Development and Cooperation Committee (ECLAC/CDCC) convened a one-day meeting on data collection systems: domestic violence, 20 February 2001, in Port of Spain, Trinidad and Tobago.

Attending the meeting were representatives from the Ministry of Human Development, Youth and Culture of Trinidad and Tobago; Community Policing; National Institute of Higher Education, Research, Science and Technology (NIHERST); Central Statistical Office (CSO); Supreme Court of Trinidad and Tobago and the Pan American Health Organization/World Health Organization (PAHO/WHO). The list of participants is attached as Annex I.

Agenda item 1: Welcome and background to the project

Ms. Sandra John, Officer-in-Charge, welcomed participants on behalf of the Director of the ECLAC/CDCC secretariat and wished them well in their deliberations.

The representative of the ECLAC/CDCC secretariat explained that the proposed development of a data collection protocol for domestic violence formed one component of a larger project entitled "Development of Social Statistical Databases and a Methodological Approach for a Social Vulnerability Index for Small Island Developing States". This project aimed at the creation and maintenance of a fully searchable social database at the ECLAC Subregional Headquarters for the Caribbean and the building of capacity at the national and subregional levels for the monitoring and evaluation of social vulnerability, through linkages with national and regional databases on social statistics.

She noted that while there existed a small, but growing, body of sociological research on domestic violence there were continuing difficulties in ascertaining the incidence of domestic violence in the Caribbean due to a combination of underreporting and data collection inadequacies.

By and large, the policy responses to domestic violence had focused on the consequences of violence through legislative reform and the provision of services, such as shelters and hotlines, for victims of violence. Increasingly in the Caribbean subregion, policy makers were concerned with developing a more holistic and integrated response which would continue to address the needs of the victims for protection; the punishment and treatment of offenders

as well as the eradication of gender-based violence through a reform of socialisation practices in State institutions, such as schools. She gave the example of the abolition of corporal punishment in schools in Trinidad and Tobago, which was a direct outcome of advocacy around violence against women.

The project on data collections systems for domestic violence was being implemented against a background of regional and international calls for the development of a holistic and multidisciplinary approach to the challenging task of promoting families and communities that were free from violence. The Beijing Plan of Action reflected that the absence of gender-disaggregated data and statistics on the incidence of violence made the elaboration of programmes and the monitoring of changes difficult and impeded efforts to design specific intervention strategies.

The ECLAC/CDCC representative stated that the lack of consistent information about domestic violence affected the capacity of policy makers to:

- (a) obtain a profile of victims and perpetrators;
- (b) understand the frequency and incidence of violence;
- (c) identify the groups at risk;
- (d) develop intervention programmes; and
- (e) monitor the effectiveness of violence prevention and intervention activities.

She pointed out that higher quality and more timely incidence and prevalence estimates had the potential to be of use to a wide audience, including policy makers, researchers, public health practitioners, victim advocates, service providers and media professionals.

However, obtaining accurate and reliable estimates of the number of women affected by violence was complicated by a number of factors, including the fact that there was no established and ongoing mechanism for surveillance of violence against women and, as a result, policy makers were often forced to rely on multiple data systems to obtain minimal incidence and prevalence information.

The reliance on multiple data systems was inadequate for the task of establishing incidence and prevalence estimates of violence against women, because these data sources were created and maintained for purposes other than monitoring the scope of the problem. Police collected information about violence against women for the purpose of apprehending and bringing charges

against the perpetrator(s) of the violence and, therefore, recorded few details about the victim. Hospitals, on the other hand, collected information primarily for providing optimal patient care and recorded little, if any, details about the perpetrator of the violence.

In addition, she recognised that social barriers to the collection of data also existed.

In response to requests for technical assistance, the ECLAC/CDCC secretariat was seeking to address some of the conceptual and logistical difficulties of data collection in this area. The specific objectives of this meeting were to:

- (a) Share information about data collection for domestic violence;
- (b) Identify gaps and limitations of existing systems for ongoing data collection regarding violence against women; and
- (c) Suggest guidelines for the development of a model data collection system.

Discussion

The ECLAC/CDCC secretariat was commended on the initiative taken to prepare a model data collection protocol for domestic violence. The participants considered that reliable data on this phenomenon was vital for the formulation of social and legal policy.

The meeting was informed that a similar project relating to the development of a data collection protocol for domestic violence was being undertaken in Belize and that the experiences of this project would be of value to the project now being undertaken by the ECLAC/CDCC secretariat.

The meeting also noted that decision makers sometimes did not view the collection of social data as a priority since the benefits of this exercise were not immediately apparent.

Agenda item 2:

Experiences in the development of data collection protocols

The representative of the Ministry of Human Development, Youth and Culture of Trinidad and Tobago commended the ECLAC/CDCC secretariat for the timeliness of the meeting. She reported that her ministry now had in its possession, a number of reports from agencies involved in various aspects of

service delivery to victims of domestic violence that might provide useful information in the context of the project being undertaken by the ECLAC/CDCC secretariat. These reports included information related to problems of data collection and monitoring, methods of reporting and recommendations on variables around which they would like to see data collected. She considered that collaboration would be critical in the development and maintenance of an integrated data collection system.

She reported that in 1995, a hotline was established for victims of domestic violence, followed by the establishment of a Domestic Violence Unit in June 1997. In both cases, forms were created which allowed information on the users of these services to be collected.

More recently, the Division undertook a situational analysis of systems of data collection on domestic violence. The report spoke to the need for a standardised definition of domestic violence that would be able to accommodate the definitions used by all stakeholders. Other challenges to the development of a data collection system were the need for a certain level of confidentiality and the need to avoid duplication of reports.

As a result of recommendations arising from the situational analysis, a Cabinet-appointed committee consisting of stakeholders, including representatives from the Central Statistical Office, demographers, the Rape Crisis Centre, police, the hospital and information technology personnel from NIHERST was formed to address the development of a central data system.

As a part of its work, the committee piloted a standardised questionnaire for data collection among agencies. Over 400 of these questionnaires were sent out, of which approximately 50 per cent were returned. The questionnaire met with limited success because the participating agencies considered that their own forms were better suited to their needs, the questionnaire was too lengthy and some questions were seen as irrelevant.

It was expected that feedback from this exercise would inform the development of a more effective data collection system in the area of domestic violence.

The representative of the Supreme Court of Trinidad and Tobago spoke of her experience in attempting to structure the data of the Judiciary, both in the Supreme Court and the Magistracy. She explained that the capacity for data collection and compilation was stronger in the Supreme Court where records were already computerised. She informed the meeting that in the case of the Magistracy, legislation was needed to make the changes to facilitate the collection of data on domestic violence.

She explained that a number of factors acted as obstacles to obtaining appropriate data from the court system. These included the fact that efforts to cull social data were hampered by the tediousness associated with the manual transcription of the court records. There were also problems of duplication of reports, as well as understaffing, associated with the structure of the Public Service.

The representative of the ECLAC/CDCC secretariat, informed the meeting of past efforts of the Social Affairs Unit to collect data on domestic violence in the island of Tobago, and in some other countries of the Organisation of Eastern Caribbean States (OECS). It was often found that some of the problems of collecting data had to do with feelings of shame and embarrassment felt by victims. Ms. Cuales explained that apart from women, persons with disabilities were also victims of domestic violence, especially sexual abuse. She stated that the problem was not only the collation of data across agencies but also the capturing of the unreported acts of domestic violence which were taking place within communities.

The representative of PAHO/WHO, informed the meeting that efforts to study the effects of domestic violence had led to the development of a project by PAHO/WHO for Latin America and the Andean region. She discussed aspects of this research explaining that the problem of domestic violence was often made invisible due to society's response to it, and that the definition of domestic violence varied from country to country. It was noted that physical and psychological violence was common to all definitions, while sexual and patrimonial or financial violence was not necessarily incorporated.

She spoke of the effects of domestic violence on the society, among them, an increase in teenage pregnancies, female mortality and the high risk of contracting AIDS. She explained that in spite of the international conventions against domestic violence signed by many countries, there was still much to be done by way of an integrated response to domestic violence.

She informed the meeting of a surveillance system being implemented in Belize. Important to the development of this system was the identification of the critical routes of interaction when victims of domestic violence sought help. In developing the data surveillance system, consultation with the agencies identified in the critical route assessment was held to ensure the inclusion of data variables relevant to the needs of each institution. The definition of core minimum information needed by each collaborating agency was, therefore, important.

She explained that the surveillance system was not intended to replace individual instruments of data collection developed by institutions.

Agenda item 3:
Discussion on principles and elements of a reporting system

The participants discussed the difficulty in obtaining reliable indications of incidence of domestic violence from reports made to health, police and judicial institutions because of duplication of reports and underreporting. The meeting agreed that over time, such a compilation of reports could give an indication of incidence. Crime victimisation surveys were advocated as more appropriate to get at the prevalence of domestic violence.

The participants discussed whether a data collection system which compiled reports of domestic violence should be concerned with proof of domestic violence since this might determine the agencies from which data was to be collected. It was pointed out that police records on all types of crime generally addressed reports made and, in this regard, there was no difference in the records of reports made to shelters or hotlines. Still, the participants felt that official government records should be treated separately from statistics derived from non-governmental organizations.

Issues of standardisation, harmonisation and reliability were thought to be challenges in the preparation of a data collection system. The importance of the surveillance system were reiterated and the need for a registry that would be responsible for housing and analysing the data from all of the participating units/points of contact were recommended.

In the context of the discussion, the meeting identified the main issues to be addressed as:

- (a) Identifying the sources of the data;
- (b) Finding a methodology to capture the data;
- (c) Developing a method of uniquely identifying the victims of domestic violence to avoid duplication; and
- (d) Obtaining information on the perpetrators of domestic violence.

The meeting concluded that the main objectives of a data collection system on domestic violence would be the following:

- (a) To gauge the magnitude of the problem of domestic violence;
- (b) To identify those groups at highest risk who might benefit from focused intervention or increased services;

- (c) To track and assess changes in the incidence of domestic violence;
and
- (d) To formulate, monitor and improve intervention strategies and services.

The data collection system was seen to be important to police, service providers, policy makers, court administration, the health sector and non-governmental organizations which work on this issue.

The meeting agreed that the development of a data collection protocol for domestic violence should be informed by a situational analysis on the state of information systems on domestic violence. This situational analysis would identify the existing gaps in the information system and make recommendations for the kinds of information that would be needed to achieve the objectives of the project. The meeting also recommended that a consultant be identified to draft a model data collection protocol. In developing this draft, the participants considered that it would be critical to seek the input of all the stakeholders.

Finally, the participants agreed that ECLAC/CDCC's work on the data collection protocols for domestic violence would be extremely useful to formulating integrated responses which met the mandate of the eradication of gender-based violence.

Annex I**LIST OF PARTICIPANTS**

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ECLAC system

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