



Administrative data collection on domestic violence: good practices

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An extensive review on good practices regarding administrative data collection on domestic violence displays the several benefits of having a centralized domestic violence (henceforth DV) register, as long as the structures, practices and capacities for data collection and registering have a strong foundation. The need for a centralized DV register stems from the benefits of bringing together all the relevant data in a single location that is easily accessible to practitioners, policy makers as well as the public. Furthermore, extensive centralization ensures that the data is comparable between institutions in a country, over time, and, ideally, between countries. For this reason, the data collection must be harmonized with clear and common definitions for variables (EIGE 2016:10-1; UNDESA 2014:121-5). Ideally this will subsequently promote the assessment of domestic violence and thus assist in securing an adequate response to it.

This review will pay specific attention to Spain and Denmark which have an extensively centralized and harmonized system for administrative data collection (CoE 2019; EIGE 2016; GREVIO 2017). In addition to providing a more in-depth look at the aforementioned two countries, further examples from specific administrative contexts of other countries will also be highlighted, with the intention to point out effective and holistic practices that have stood out during the review.

Centralized data register - Spain

Spain collects relevant administrative data and has also proceeded towards the development of coherence in this data by developing a new system for holding it. **The Central Register for the Protection of Victims of Domestic and Gender-based Violence** collects the relevant administrative data annually for the whole of Spain. This central register is located in the Ministry of Justice which sends the data to the The National Statistics Institute (INE) annually (Walby 2016:14, CoE 2019; Spanish Istanbul Shadow Platform 2018:11).

The register holds data about the following two forms of violent crime: gender-based violence and domestic violence. It includes information about the victim (including sex, age and relationship with the accused), the accused, the punishable offence, location and interim measures (e.g. protection order) and final judgments (Walby 2016:14, CoE 2019; Spanish Istanbul Shadow Platform 2018:11).

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Danish Data Collection and personal ID numbers

Denmark has an inter-ministerial working group on violence against women which is required to assess the need for implementing policies and activities in regard to conventions, protocols, conclusions, recommendations or other international obligations (hence, also the Istanbul Convention), ensuring a broad and holistic coordinated response to the issue (Stubberud 2018: 19-20).

Denmark collects the relevant statistics in a series of "registers", and in a further step has linked these registers with unique personal ID numbers of individuals. This linkage makes it possible to follow the experiences of the same person through the various administrative systems by using the person's unique ID number (Walby 2016:15; EIGE 2016:24-6).

These registers include statistics on crime (police recorded crime and court verdicts), hospital patients, cause of death, and use of shelters/refuges; thus producing a detailed overview concerning the use of public services by victims of violence. Databases established by linking registers are stored at Statistics Denmark (Walby 2016:15; EIGE 2016:24-6).

Data Collection in Social Services - Danish Shelters

It is well acknowledged that the endeavor of compiling harmonized data from social services is very challenging, both because of the varying types of services (shelters, telephone hotlines, support services, legal advice services, etc.) and the fact that services often target specific groups (e.g. migrant women, young women, women suffering from substance abuse, women with disabilities etc.) (EIGE 2016:44-7).

A special example of centralized data collection from social services is the centralized data collection from shelters in Denmark. The Danish National Action Plan to combat violence against women includes a specific budget set aside for data collection and analysis, as part of which Denmark's 48 shelters collect common data. These data are based on information provided during the women's first contact with the shelter and

include very detailed data on, for example, socio-demographic factors and information on the nature of the violence experienced (EIGE 2016:45-7; EIGE 2019; Walby 2016:16-7).

If the victim consents, the shelters register the data together with the victim's ID number (in compliance with data regulation rules) in order to link it with administrative data (such as the national patient register or criminal statistics). Furthermore, this linked data is encrypted and fed into microdata sets, which are made available to researchers on request. Currently, around 30% of the shelters' cases are linked, as not all victims agree to share their ID number (EIGE 2016:45-7; Walby 2016:16-7).

Judicial and Law Enforcement – Sweden

The Swedish National Council for Crime Prevention (Brottsförebyggande rådet BRÅ) plays an important role by producing Sweden's official crime statistics. The council is an agency under the Ministry of Justice and a center for research and development within the judicial system (EIGE 2016:34-5).

The council primarily works to reduce crime and improve levels of safety in society by producing data and disseminating knowledge on crime and crime prevention work. The collected data is disaggregated by sex and includes all events reported and registered with the Swedish Police, the Swedish Prosecution Authority, Swedish Customs and the Swedish Economic Crimes Authority. The results are a basis for decision-makers within the judicial system, the parliament and the government striving to achieve the overall objective of Swedish gender equality (Brå 2019; EIGE 2016:34-8; Swedish MoJ 2014:8).

Development work is ongoing with the aim of creating a common system where each case and each individual is given a separate ID — the same throughout the whole chain of justice — which would make it possible to track a case or an individual (victim or offender) more closely, also meaning less administrative work among the different authorities (EIGE 2016:34-8, Grevio 2019:20-1).

Health Sector - Portugal

In 2013, as a continuation to the strategy adopted in 2008 by the Ministry of Health through the creation of the health action for children and youths at risk, an integrated model of intervention on interpersonal violence across the lifecycle was created: this is called the HAGVLS, which stands for health action on gender, violence and lifecycle. The HAGVLS model is coordinated by the Directorate-General of Health (EIGE 2016: 52-4; EIGE 2019).

When a health professional is confronted with a victimization situation, he/she must fill a clinical registration form of violence, which is available on a specific web platform. The practitioner must also fill out a copy of the form and it must be provided to a multidisciplinary team called the TPVA. These multidisciplinary Teams of Prevention of Violence against Adults (TPVA) provide

consulting in cases of violence registered in the health sector, and, in exceptional cases, they can also provide intervention. Hence, the process should be conducted and supported by family health teams or other professionals who have a closer relationship with the end-users of health services, with TPVA consulting if needed (EIGE 2016: 52-4; EIGE 2019).

Currently, the network of these multidisciplinary TPVA teams is being formed and health professionals who are part of it are being trained. The TPVA teams are intended to have the competence to collect and organize statistics on violence cases attended in health settings (EIGE 2016: 52-4; Grevio 2019:31).

It is acknowledged that the high number of cases (38% of women in Portugal experience VAW), the complexity of the phenomena and the lack of human and technical resources are just some of the many difficulties currently faced by HAGVLS. However, regardless of the difficulties, it is highlighted as a promising and holistic approach, with some of the benefits being: early detection of interpersonal violence cases, specialized care, networking the interventions due to the multidisciplinary approach (EIGE 2016: 52-4; EIGE 2019; Grevio 2019).

Conclusions

The review's main finding is that there are a wide range of policy alternatives for data management that can be implemented, with a further variance in the instruments of domestic violence data collection. Finally, it also needs to be acknowledged that implementing any new policy requires a thorough understanding of the complexity of the subject matter itself which the policy will target, while also demanding knowledge on the technical aspects of the implementation of the proposed policy. In relation, increasing and strengthening the capacities of the various practitioners affected by the implementation of the policy is of utmost importance in order to enable practitioners to respond to the increased responsibilities and the universal principles emerging from the policy implementation.

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