Measurement of family violence at a population level: What might be needed to develop reliable and valid family violence indicators?

Pauline Gulliver¹, PhD; Associate Professor Janet Fanslow², PhD

Summary

This Issues Paper reviews some of the available sources of data on family violence, assesses strengths and limitations of these data sources for measuring trends in family violence, and seeks to assist the reader to develop an understanding of the issues associated with family violence data collections.

Government agencies, non-government organisations and researchers all require reliable measures of family violence to understand the magnitude of the problem, to appropriately target resources, and to identify strategies that are effective in reducing and ultimately eliminating family violence.

In this paper we:

- Draw attention to the data that is currently available in New Zealand;
- Assess the strengths and weaknesses of this data in relation to monitoring trends in family violence at the population level;
- Highlight opportunities for further development of existing datasets, drawing on the experiences of other developed countries;
- Consider some of the implications for reporting family violence data at the national level; and
- Suggest some future courses of action which could support the development of reliable and valid family violence indicators.



¹ Research Fellow, New Zealand Family Violence Clearinghouse

² Associate Professor, Social & Community Health, School of Population Health, The University of Auckland; Co-Director, New Zealand Family Violence Clearinghouse

The New Zealand Family Violence Clearinghouse can be contacted at:

New Zealand Family Violence Clearinghouse Tāmaki Innovation Campus The University of Auckland Private Bag 92019, Victoria Street West Auckland 1142 New Zealand

Phone: + 64 9 923 4640

Email: info@nzfvc.org.nz Website: www.nzfvc.org.nz

ISSN: 2253-3214 (print) ISSN: 2253-3222 (online)

Recommended citation

Gulliver, P., Fanslow, J. (2012). *Measurement of family violence at a population level: What might be needed to develop reliable and valid family violence indicators?* Auckland, New Zealand: New Zealand Family Violence Clearinghouse, The University of Auckland.

Acknowledgements

Thank you to Debbie Scott (Australian Institute of Family Studies), Professor Jane Koziol-McLain (Auckland University of Technology), Hera Clarke (Māori Advisory Group of the Taskforce for Action on Violence within Families) and Kiri Hannifin (National NGO Alliance against Family Violence) for providing comments on earlier versions of this paper. Thank you to Radha Balakrishnan (Families Commission) for information on the role of family violence data in the government policy environment. Finally, thank you to Nicola Paton (New Zealand Family Violence Clearinghouse) for her contribution throughout the development of the issues paper.



Contents

G	los	sary			4	
1.		Intro	oduc	tion	5	
2.		Bacl	kgrou	ınd	7	
	2.	1	Defi	nition of family violence	8	
	2.	2	Wha	hat do we mean by measurement?		
		2.2.	1	Surveillance	12	
		2.2.	2	Monitoring		
		2.2.	3	Research	13	
3.		Data	a sou	rces in New Zealand	16	
	3.	3.1 Pol		ce	17	
	3.	.2 Cou		rt data	18	
	3.	3.3 Gov		ernment social service agency data (i.e. Child Youth and Family data)	19	
	3.	3.4 Hos		pital discharge data	19	
	3.	3.5 NGC		O administrative data	21	
	3.	6	Рор	ulation-based surveys	21	
		3.6.	3.6.1	Crime Victim Surveys	22	
		3.6.2		The University of Auckland's Youth2000	23	
		3.6.	3	Family violence specific surveys	2 3	
	3.	7	Res	earch studies	24	
4.		Inte	rnati	onal experiences	26	
	4.	1	Surv	veillance through linking multiple administrative data sources, from Scotland	26	
	4.	2	Enhancing data from existing sources, from the USA		27	
	4.	3	An e	example of using crime surveys, from the UK	28	
	4.	4.4 Incl		uding violence-specific modules in other general population surveys, from the USA	29	
	4.	5	Fam	nily violence specific population-based measurements, from the USA	30	
5.		Disc	ussic	on	32	
6.		Con	clusio	on and recommendations	34	
R	efe	renc	es		37	
Α	ppe	endix	(1: D	refinitions of family violence	40	

Glossary

Term	Definition			
Administrative data set	Data sets maintained by government agencies for monitoring resource use and for policy development and implementation.			
Jurisdictions	The limits within which any government or court has authority (e.g. province or state, administrative boundaries such as police districts).			
Operational definition	Specifies what is meant by the theoretical definition in terms of observable, measurable variables.			
Pre-processing of data	'Cleaning' a data set to ensure that inconsistent or incomplete data is removed and errors have been corrected.			
Theoretical definition	Specifies what is meant by a concept or term, allowing a common understanding of that concept.			



1. Introduction

The purpose of this Issues Paper is to review some of the available sources of data on family violence, assess strengths and limitations of these data sources, and to assist the reader to develop an understanding of the issues associated with family violence data collections. In particular, there is a focus on assessing these data collections in relation to the production of indicators for family violence (see Section 5).

Indicators are intended to provide simple and reliable estimate of trends over time. To be useful, valid and reliable, indicators should be based on data that is complete and that measures what it claims to measure consistently, exhibiting little variation due to subjectivity [3]. In "The Good Indicators Guide", the following analogy is used to describe an indicator:

"Imagine a car dashboard: an **indicator** is a warning light flashing on the dashboard. It is fed by one of many streams of **data** – maybe oil level, temperature etc... It flashes when all is not well, suggesting we **stop** the car. The indicator 'alerts us to something worthy of investigation'" (pg 6 [4]).

The reliability and validity of the indicator is important, because it tells us when a response is required. If the flash on the dashboard alerts us at an inappropriate time (when there is nothing wrong with the car), this can result in unnecessary inconvenience. Similarly, if an indicator is based on data that is influenced by factors unrelated to changes in family violence, it can inappropriately redirect resources.

A related goal of this document is to support a wide range of readers to develop an understanding of the issues associated with family violence data collections. The paper concludes with suggestions for future work that could assist the development of family violence indicators in New Zealand. People who may be interested in the content of this paper will range from members of the public with an interest in family violence to those involved in the development of government policy.

The New Zealand Family Violence Clearinghouse was motivated by a desire to keep this information in an accessible and readable format. Therefore, while we have sought to

identify key issues associated with family violence data, we have not discussed each point exhaustively. Where more detailed discussion on a topic might be of interest to some readers, literature has been highlighted that may be of use. In addition, at the end of each section we have produced a summary of 'key points'.

Some topics are not addressed within the scope of this paper. This Issues Paper will not answer the question of whether family violence indicators can be developed and the process for doing so. Further work is required to understand the flow of data through administrative datasets, potential points of influence on the data and how changes in organisational business practice impact on data collection before reliable and valid indicators can be developed. In addition, this paper will not address family violence prevention, nor the theoretical underpinnings of prevention. Previous publications are available that address both of these issues [5].

Key points:

- 'Indicators' are simple summary measures to describe underlying phenomena.
- Indicators provide a simpler, more reliable estimate of trends over time. Valid and reliable indicators measure what they claim to measure and do so consistently, exhibiting little variation due to subjectivity.
- Proposed indicators need to be feasible and achievable, as well as based on readily available data sources in order to enhance the likelihood they will be adopted and will continue to be routinely measured into the future.



2. Background

Government agencies, non-government organisations and researchers all require reliable measures of family violence and its components in order to understand the magnitude of the problem, to identify strategies that are effective in reducing the magnitude of the problem and to effectively target resources. For these stakeholders, the availability of good quality family violence data could help to answer such questions as whether there are changes in the trends of family violence (is it increasing or decreasing), whether family violence is becoming more severe, whether the nature of family violence is changing (e.g. from less physical to more psychological assault), and whether there exists good quality regional data which can inform local interventions.

As the national centre for collecting and disseminating information about family violence in New Zealand, the New Zealand Family Violence Clearinghouse has a strong interest in the quality of family violence data. In this paper we:

- Draw attention to the data that is currently available in New Zealand;
- Assess the strengths and weaknesses of this data in relation to monitoring trends in family violence at the population level;
- Highlight opportunities for further development of existing datasets, drawing on the experiences of other developed countries;
- Consider some of the implications for reporting family violence data at the national level; and
- Suggest some future courses of action which could support the development of reliable and valid family violence indicators.

This Issues Paper discusses both fatal and non-fatal family violence events. There are a number of sources of fatal family violence data in New Zealand which, if interrogated and reported upon consistently, could provide an indication of trends over time. It is in the interrogation and reporting of non-fatal family violence data that New Zealand, and many other countries, experience difficulties.

2.1 Definition of family violence

Definitions are the starting point for all measurement of family violence, so that we can be clear about what we are counting. Without consistent definitions underpinning our data collection systems, we cannot hope to answer policy questions about trends over time.

The importance of definitions

As part of their 'whole-of-government' approach to reducing family violence in the Australian state of Victoria, the state government recognised that preventing violence against women and children is a complex task involving interventions at several levels of government and community, intersecting policies and overlapping interventions in numerous settings. As such, they set about reforming a number of integrated components that approach the prevention of family violence.

Top of the list of reforms was the new Family Violence Protection Act 2008 (Vic) to provide a clear legislative framework to better protect victims of family violence and hold perpetrators accountable. One of the key elements of the new legislation was a consistent and comprehensive definition of family violence that includes economic and emotional abuse as well as other types of threatening or controlling behaviour [2].

There are different types of definitions. *Theoretical definitions* explain what is meant by a concept, allowing a common understanding of that concept. An example of a theoretical definition might be "that family violence is comprised of different components or types of violence, such as child abuse and neglect, intimate partner violence, and violence against older people". *Operational definitions* explain what is meant by the theoretical definition in terms of observable, measurable variables. Differences in operational definitions (for example, between organisations or changes in definition over time) can create challenges in when trying to make comparisons.

This issues paper will focus on the definition of family violence used by the Taskforce for Action on Violence within Families [6], as it encompasses differences in relationships between the victim and family or household members who may or may not be related but are living in 'family-like' relationships. This definition was derived from the New Zealand Government Statement of Policy on Family Violence [7] and the Domestic Violence Act 1995.

The definition of family violence used in the Taskforce for Action on Violence within Families' indicators report is the Te Rito definition:

"a broad range of controlling behaviours, commonly of a physical, sexual and/or psychological nature, which typically involve fear, intimidation and emotional deprivation. It occurs within a variety of close interpersonal relationships, such as

between partners, parents and children, siblings, and in other relationships where significant others are not part of the physical household but are part of the family and/or are fulfilling the function of family." [6].

By using a wide definition, we seek to acknowledge the many different forms that family violence can take, as well as the wide variety of relationships that can be involved in family violence and the cultural contexts in which these will exist. We also acknowledge both the similarities and the unique dynamics of violence across family relationships and across the lifespan. However, by adopting this wide definition, we must also acknowledge that there are some datasets which do not routinely include aspects of family violence, such as psychological or financial abuse. Such wide definitions also allow for the existence of grey areas where there is uncertainty concerning whether an act constitutes family violence.

We also acknowledge that both theoretical and operational definitions can be contentious, and that there are a range of definitions, including those that reflect Māori [8] and Pacific [9] worldviews. As such, it may be time to revisit the Te Rito definition to question whether this appropriately accommodates family violence as it is understood in the current New Zealand context. As yet, no precise definitions of family violence have been accepted in academic literature or implemented by government policy (for a useful overview of this discussion, see Barnett et al, 2011 [10]).

Definitions are also subject to change, as community perceptions of the nature, extent and social acceptance or disapproval of family violence change. Community perceptions are also influenced by community advocacy and policy changes. Such changes, in turn, have impacts on the identification, detection, reporting and response to this social problem [11]. However, while acknowledging these complexities, we need to be clear that if effective monitoring of the extent of family violence in the community is to take place, there needs to be a consistent theoretical definition that underpins administrative data collections used for reporting family violence at the population level. Different government agencies will require specific operational definitions of family violence because of unique performance requirements. However, a common theoretical definition and an explicit outline of the operational definitions would aid understanding of the data for policy makers and the general public.

Definitions of the various types of family violence (child abuse, intimate partner violence, sibling abuse, assault on a parent, abuse in later life) have not been covered within this document. This is not to discount the importance of and differences between these, but rather in recognition that to provide a full and comprehensive discussion of each would each require separate Issues Papers (for example, see Fallon et al 2010 [11]). Readers interested in learning more about definitions in these areas are referred to work undertaken by the international research community in recent years to establish acceptable definitions of different types of violence (see, for example the US Centers for Disease Control uniform definitions for child maltreatment [12], sexual violence [13], and intimate partner violence [14], and publications from the United Nations for a discussion of definitions of violence against women [15]).

New Zealand is at a significant advantage to other countries as cross-jurisdictional differences in definitions do not exist in this country. In contrast, in Canada (for example), the inclusion of educational neglect in child maltreatment definitions varies by from province to province [11]. The US National Child Abuse and Neglect Data System (NCANDS) also has to contend with state-to-state variations in child maltreatment laws as well as variability in definitions and what is included under the broad maltreatment typologies [11]. Consistency across jurisdictions (or the lack of multiple jurisdictions to enable the development of different definitions) does not, however, mean that there is consistency in what is considered family violence. This is exemplified by what should be considered the most specific category of family violence – deaths related to family violence (see Table 1).

Table 1 provides a description of family violence related deaths from three sources: Family Violence Death Review Committee [16, 17], New Zealand Police, and the Taskforce for Action Against Violence within Families [6]. The different figures produced in this table arise as a result of different operational definitions for family violence (see Appendix 1 for a full description of these definitions). The differences in percentages are the result of each count of 'family violence deaths' being divided by a different population ('culpable deaths', vs 'total murders' vs 'total family violence and non-family violence homicide offences'). While the style of describing the data will be influenced by the culture of the organisation from where it is sourced, the use of consistent descriptors would reduce confusion for those intending to use the data, including the media, the general public and policy makers.

Table 1: Family violence deaths as reported by three sources [18]

Source	Definition	2006	2007	2008	2009	2010
Family Violence Death Review Committee (2009; 2011)	Family violence deaths out of culpable deaths	25 out of 53 (47%)	26 out of 63 (41%)	19 out of 65 (29%)	42 out of 88 (48%)	26 ^a out of 72 (36%)
New Zealand Police	Recorded family violence murders out of total murders	26 out of 49 (53%)	21 out of 49 (44%)	16 out of 52 (31%)	36 out of 65 (55%)	25 out of 46 (54%)
Taskforce for Action on Violence within Families (2011)	Recorded family violence homicide offences (out of total family violence and non-family violence homicide offences)	31 out of 64 (48%)	28 out of 65 (43%)	19 out of 65 (29%)	42 out of 91 (46%)	32 out of 75 (43%)

^a Preliminary count of family violence deaths identified by the Committee as at December 2011

In summary, lack of consistency in the definitions of family violence used in New Zealand is an impediment to complementary data collection across national administrative data sets. Without an acceptable theoretical definition of family violence, there can be no expectation of the employment of compatible operational definitions for family violence across national administrative data sets.

2.2 What do we mean by measurement?

The first report of the Taskforce for Action on Violence within Families outlined a vision that "All family and whānau have healthy respectful, stable relationships, free from violence" (pg 9). Success in achieving this vision would be measured, in part, by a consistent year on year reduction in the levels of all forms of family violence [19]. The challenge then lies in how to consistently measure family violence in order to identify year on year trends.

This section describes three types of measurement, outlines the purposes, and describes the strengths and limitations of each. This background is important in understanding the types of data that might feed into the measurement of family violence at a national level.

2.2.1 Surveillance

Surveillance is defined as the ongoing, systematic collection, analysis and interpretation of data on specific events for use in the planning, implementation and evaluation of programmes at the population level [20]. There are a number of reasons for undertaking surveillance, including defining a problem, estimating its magnitude and estimating changes in magnitude over time (trends). The purpose of gathering this information is to facilitate planning, and to enable monitoring of the impact of prevention or control measures. In order for a surveillance system to be effective, it must be responsive to changes in the environment and accessible for stakeholders.

Data systems for surveillance range from simple systems which derive the data from one source to complex systems that receive data from multiple sources in multiple formats and include complex surveys. The reliability of the data source is crucial to the usefulness of the system to accurately monitor trends and reflect the underlying problem being investigated [21].

2.2.2 Monitoring

Monitoring is the recording of the occurrence of a condition over time. It is distinct from surveillance as there is no requirement to report back to stakeholders or indeed use the information for programme or policy development. However, monitoring forms part of the core function of a surveillance system.

Accurate reporting is an essential component of monitoring. For many events, reporting is 'passive'. For example, the Department of Labour uses passive reporting for work related injuries, poisoning and fatalities, in which the onus is on the affected party to report the event. An alternative method at the national level is population screening (for example, screening airline travellers as they enter the country for pests that may impact on the New Zealand environment). Screening such as this is not frequently implemented

at the population level due to the expense involved and potential invasion of privacy [22].

Routinely available administrative data is also used for monitoring government agency performance. Examples from the justice sector include tracking attrition rates between charging and prosecutions of offences, completion of mandated stopping violence programmes and subsequent breach of protection orders. Whilst these are important uses of administrative data, they focus on specific areas of agency activity rather than on the monitoring of an event in a community.

In New Zealand [23], and in some other countries, screening for intimate partner violence or other forms of family violence is recommended [24]. However, screening needs to occur in a well-controlled environment that acknowledges the potential dangers involved for the victim should the perpetrator be made aware of disclosure. Contrary to health professionals' concerns about invading the privacy of the patient, there is evidence that women appreciate the concern for their safety and well-being inherent in questions about possible violence in a relationship [25]. Indeed, screening for intimate partner violence may also improve the quality of care received.

For monitoring to be consistent across localities and across time, it is important for those involved in the reporting process (such as health professionals, police and community workers) to be aware of clear, uniform case definitions [22]. In the case of infectious diseases, this can be achieved through laboratory diagnoses. However, with events such as family violence that do not have clearly defined criteria, measurement and reporting may be more influenced by disclosure, staff implementation of identification procedures, and by the wider system dynamics [26].

2.2.3 Research

In the research environment, there is a focus on specific, objective measures of the phenomena under investigation. Depending on the focus of the research project, and the definitions and methods of measurement

employed, projects have the potential to allow for the identification of subtypes, chronicity and severity [27]. One of the strengths of research in the family violence area is clarity in defining and operationalising measurement in ways that allow comparability across localities and at different points in time (e.g. comparing rates in one time period against another) [27].

In-depth research into family violence also has the potential to answer the questions that administrative data sources (such as police, courts and health data) cannot. For example, it can investigate the precursors to a violent event, or the long term outcomes for those who are victims of family violence.

There is much that statistical data cannot tell us; for example, about how violence is experienced and understood by victims, or why some people take up violent behaviour and others do not. The use of statistical data, together with qualitative research studies, provides a fuller picture of the nature of domestic and family violence, such as its gender dynamics, its secrecy, and the shame and fear which lie behind the figures. (pg 13 [28])

However, research is often focussed on specific sub-groups of the population, such as at-risk children, women accessing support services or perpetrators of family violence. Because of the specific focus, some but not all [29] research into the frequency of family violence in the community may have limited generalisability to the general population.

In the next section, we examine data sources in New Zealand which provide information on family violence.



Key Points:

- Good quality family violence data is vital to accurately estimate the impact of family violence on the victims, their families and the community, and to better direct policy and resources.
- ❖ The measurement of family violence is required for the planning, implementation and evaluation of preventative measures; to identify precursors to a violent event, to understand the long term outcomes for those who are victims of family violence; and to monitor trends in family violence over time.
- We have described three types of family violence measurement. Each measurement method has strengths and weaknesses and can produce different results.

3. Data sources in New Zealand

This section provides a brief overview of data sources available for documenting the impact of family violence in New Zealand at a national level, and the associated strengths and weaknesses of each of these data sources. The 'strengths' and 'weaknesses' relate to the use of the data to measure changes in family violence at the population level. They are primarily driven by the fact that none of the datasets described below were specifically designed to measure family violence. As such, this is not a critique of the data systems per se, but an evaluation of the *use of the data* collected for *monitoring* family violence. The limitations noted are readily acknowledged by the agencies concerned. A number have also been identified by previous researchers who have provided a more detailed discussion of the strengths and weaknesses of national administrative data sets for the surveillance of violence over time (e.g. [30-32]).

There are a number of consistent themes that emerge from the review of these data sources. The themes include:

- Issues to do with the accuracy of the measurement of family violence. This is the
 result of no one government or non-government agency having a responsibility to
 ensure that consistent, reliable, complete data on family violence is collected and
 maintained.
- The "sensitive and often covert" nature of family violence, which can result in reluctance on the part of the victim to report what has happened [31], also limits the accurate measurement of family violence.
- Changing societal beliefs about family violence can influence disclosure, help seeking, and the likelihood of reporting family violence.
- The consistency of family violence data is also affected by changes in
 organisations' policies and procedures over time. Some suggestions exist for
 mitigating the effects of these changes over times (e.g. through pre-processing of
 the data (i.e. introducing a severity threshold for counting cases/crimes/events)). It
 is important to note that severity thresholds do not belittle the importance of events

that are not consistently counted, but are used to introduce confidence that those events that are counted are done so on a consistent basis to allow trends over time to be described.

3.1 Police

Until 2012, family violence figures were released at the same time as the official crime statistics. From 2012 onwards, a new data set is being created that is intended to ensure effective capture of the relationship between the perpetrator and the victim for crimes that are associated with family violence [33].

Changes to the recording of police data related to family violence affect our ability to interpret trends over time have happened a number of times. These include policy changes that have influenced the number of crimes that have been recorded by police administration systems over recent years, and changes in technology. For example, in 2005, the Law Enforcement System was replaced with the National Intelligence Application. This made it easier for police to record an offence as family violence related, but was also associated with an increase in crime statistics [34]. As a result, data that covers this period should not be used to draw inferences about changes in the frequency or rate of family violence in New Zealand [35].

It should also be noted that police statistics reflect police activity, and that changes in police policy can impact on the level of *reported* crime in different areas. The availability of resources may also dictate the level of seriousness of crime that is perceived to necessitate a response. In addition, the police may direct resources to different areas in response to need (such as crowd control during the 2011 Rugby World Cup).

Traditionally, police have been reluctant to consider family violence as a crime [36]. Issues associated with collecting sufficient evidence to allow for prosecution have also resulted in a perceived waste of police resources and time [36]. Policy, training and practice changes have impacted on what is considered important to respond to and record. As a consequence, police statistics need to be

understood as reflecting the activities of those who record the crime more than fluctuations in the underlying phenomena being documented [37].

3.2 Court data

Conviction and sentencing data for family violence related offences are maintained by the Ministry of Justice. There are, however, no offences of "family violence", while there are Breach of Protection Order, offences against the Domestic Violence Act 1995, offences against the Children, Young Persons, and Their Families Act 1989, and offences that have been flagged by the police as family violence related.

As with other administrative data sets, court data have undergone organisational changes in recent years. For example, in 2004 the Ministry of Justice's Case Management System was introduced to replace the Law Enforcement System. In July 2010, the Australian and New Zealand Standard Offence Classification (ANZSOC) was introduced [38]. In general, these changes have been motivated by a desire to improve and strengthen systems, but they limit our ability to use the resulting data to monitor trends.

There are also external influences on the frequencies reported in conviction and sentencing data, such as changes in legislation, corrections to data, and changes to the way data are presented. For example, until 2008, conviction and sentencing statistics were compiled on the basis of cases; from 2009 onwards, they have been compiled on the basis of individuals [39].

Sometimes systems are interlinked, and changes in one system can result in changes in another. For example, because court data are derived as a result of police activity, changes in police policy and practices will influence conviction and sentencing data. A case in point is the new New Zealand Police policy document that provides guidance on charging family violence offenders. The document provides an overview of a typical build-up to a violent act in a family [40]. Such awareness-raising and education of police may result in an increase in the number charged and therefore convicted. In addition, in July 2010, the advent of the Police Safety Order and the requirement for this to be associated

with a 'Domestic Dispute' occurrence is thought to have "stimulated an increase in the number of 1Ds recorded" (New Zealand Police National Statistics Manager, 2011).

3.3 Government social service agency data (i.e. Child Youth and Family data)

This national administrative data set is one of the few that collects information related to the experience of child abuse and neglect. As with other administrative data sets, case capture by Child Youth and Family is influenced by changes in government policy, by the availability of support services at a local and national level [41], and by changes in clinical and policy guidelines available to social workers [42].

Although Child Youth and Family data has the *potential* to provide information on the frequency and rates of substantiated child maltreatment over time, unlike police or hospital data, this data source does not provide any information concerning other forms of family violence. As such, it would need to be supplemented with other data sources to form the basis of a family violence measure. Through the numbers of unsubstantiated reports, Child, Youth and Family data also has the potential to provide an insight into the number of children *at risk* – where maltreatment may not yet have occurred, but where there is concern about the environment in which the children are living.

3.4 Hospital discharge data

As with all administrative data sets, hospital discharge data is subject to influence from a number of external factors, including patient characteristics, the health care delivery system, the quality of care provided, accessibility of services and patient satisfaction with services [43]. Poor recording of family violence in hospital recording systems in the United States may be the result of health care providers being concerned about patients losing their health insurance [43]. Although this is unlikely to be a significant problem in the New Zealand context, there continue to be concerns from the academic sector about lack of reporting of family violence in hospital discharge data, especially with more difficult to

identify cases of family violence (such as psychological harm and sexual assault [44]).

Changes in general admission policy also have implications for the reporting of family violence data. For example, in recent years, the Ministry of Health has encouraged hospitals in New Zealand to record all discharges where the patient had been admitted for a period of 3 hours or more. The effect of this has been a significant increase in the number of emergency department discharges that are recorded in the hospital discharge data set, which further complicates estimation of trends. To reduce the impact of external factors such as policy changes, admission criteria and the availability of resources, Cryer and Langley (2006) have recommended the use of a "threat to life" threshold in analysing data used to discern trends, whereby only cases meeting this threshold are counted. This is on the basis that these most severe injuries would have a very high probability of admission, regardless of policy changes thereby minimising bias in case ascertainment [45]. There is concern, however, that only counting severe cases would result in an impression that only 'serious' injuries are sufficiently important, when in fact the difference between a serious and non-serious case may only be the speed at which the victim could run from the perpetrator. Clearly, further work is required to explore the utility and validity of severity thresholds in context of family violence measurement.

Hospital discharge data in New Zealand, as in many developed countries, is coded using the World Health Organisation's "Statistical Classification of Diseases and Other Health Related Problems" [46]. Within this coding scheme, there is the ability to record the cause of an injury event as well as the relationship between the perpetrator and victim (in the case of violence or assault-related hospitalisations) and location of the injury event. The World Health Organisation coding guidelines for recording the intent of the injuries (unintentional, self-harm or assault) require that self-harm and assault codes not be used unless this has been documented by the clinicians involved. Therefore, recording of this information (perpetrator, location and intent) is dependent upon documentation in patient notes, which in turn is dependent on clinician identification and recording of the event.

3.5 NGO administrative data

Data on family violence can also be obtained from non-government organisations (NGOs), such as the New Zealand National Collective of Independent Women's Refuges. NGO data provide specific information concerning the experience of family violence for groups who access their services [47]. They have the advantage of providing detailed information about more difficult to reach groups, including older people (e.g. Age Concern) and people with disabilities (e.g. Enable NZ). These data sets can also provide information on non-physical forms of family violence, such as psychological and financial abuse. In addition, the use of NGO data may provide access to information about perpetrators of family violence (e.g. National Network of Stopping Violence Services).

As with other national administrative data sets, NGO administrative data is developed to respond to queries from funding partners and to account for services provided. As such, the data they record and report may change over time, in response to the reporting requirements of funders and other changes. Therefore, as with other data sets, pre-processing of the data may be required in order to ensure consistent measurement of family violence occurring to the clients they serve over time.

In summary, administrative data sets are influenced over time by internal changes in policy and practice, and by external factors such as changed practice by other organisations, and by changing social norms. These sources of variability mean that administrative data sets are likely to always have limitations in terms of interpreting trends over time.

3.6 Population-based surveys

Population-based surveys may provide the best opportunity to derive an estimate of the population prevalence of family violence. They can be divided into two categories: general population-based surveys that include specific questions or modules on family violence, and surveys specifically undertaken to measure family violence. We discuss these in turn.

3.6.1 Crime Victim Surveys

Crime Victim Surveys are regularly conducted in New Zealand (New Zealand Crime and Safety Survey, NZCASS) as well as in other countries, and provide an estimate of the frequency of interpersonal violence irrespective of whether that violence has been reported to the police or resulted in hospital or social service agency contact.

Crime victim surveys are at their best when consistent methods are employed to ensure comparable data is obtained over a prolonged period of time. However, even when these ideal conditions are met, there can be difficulties in obtaining a representative sample, and problems with attrition and changing social norms influencing reporting behaviour [30]. Additionally, communities' understanding of violence will vary according to culture and context [47], including within countries. These differences in understanding can influence what is reported.

It should be noted that the NZCASS does not provide an estimate on family violence. NZCASS describes 'confrontational crime' which is defined as assaults, threats to an individual or their personal property and damage to personal property. Neither does NZCASS collect information on the full range of behaviours that are included in the Te Rito family violence definition. The survey is answered by those aged 15 years and over and information is collected on: offences committed by partners, offences committed by other persons well-known to the victim and sexual offences that were experienced in the previous 12 months. Limited information is collected concerning the prevalence of child maltreatment, with the exception of what could be gathered from questions concerning lifetime prevalence of violence.

Other issues also limit the ability of NZCASS to be used for tracking changes over time. There have been four crime victim surveys conducted in New Zealand, the first in 1996 [48], followed by one in 2001 [49], 2006 [50] and 2009 [51]. Improvements in best practice for conducting these surveys were built into the design of the 2006 and 2009 surveys, preventing comparison of the latter two surveys with those conducted in 1996 and 2001 [34]. The

response rates for the 2006 NZCASS were 59% and 56% respectively for the main and Māori booster samples. For the 2009 surveys, the response rates were 71% and 69% respectively. Questions pertaining to family violence in the 2006 and 2009 surveys were contained within a selfcompleted section. Of the respondents to the surveys, 6% did not complete the self-completed section in 2006 compared with 4% in 2009. Although there have been improvements in response rates over time, those comparing results between the latter two surveys need to be aware of the differences in response rates and the potential implications that this might have on the data presented.

3.6.2 The University of Auckland's Youth2000

The University of Auckland's Youth2000 project has so far conducted two surveys on the health and well-being of New Zealand's secondary school students, including their exposure to violence in the home and a variety of other settings [52]. Another survey is being conducted in 2012.

The study investigators have highlighted a number of limitations of the survey design or implementation that reduce comparability over time or reduce generalisability to the population of New Zealand teenagers, including changes to the questions asked. For example, some questions were changed or added in the second survey. Young people who were absent when the survey was conducted or who had left school were not included in the survey sample [52]. As the authors indicate, this may affect the age distribution of the sample. It is also likely to affect the estimates of exposure to violence in the home and other settings, as these factors are known to have an impact on school attendance [53].

3.6.3 Family violence specific surveys

Family violence specific surveys (such as Fanslow and Robinson's Violence Against Women survey [29]) also provide population specific estimates of 12 month and lifetime prevalence of victimisation from family violence in a population. Because of the nature of these surveys, and their focus on the

collection of information about violence in a family, they are designed with the safety of the respondent in mind, and employ methods to maximise reporting of family violence. As such, prevalence rates estimated from such investigations may be higher than those derived from crime or health surveys.

Population-based surveys of the perpetration of violence are also possible. An example is the Hitting Home Study conducted by the then Department of Justice, which surveyed 2000 New Zealand men on their perpetration of violence against intimate partners [54].

3.7 Research studies

Research studies are a vital cog in the wheel of understanding the dynamics of family violence, and the impact (both immediate and long-term) on victims and their families. In addition, research studies based on school or university students, cohort investigations, studies of identified victims and studies of known offenders all have the potential to provide an insight into the scale and nature of family violence from the perspective of the victim and the perpetrator [31]. Studies on perpetrators may also provide an opportunity to inform development of interventions to reduce the likelihood of further violence occurring. However, with the exception of a few population based surveys on the prevalence of violence in the community (e.g. [29]), the main limitation associated with these investigations is that they involve specific sectors of the population, and produce results that are not, nor are they intended to be, generalisable to the whole population [31].



Key Points:

- National data concerning the impact of family violence can be obtained from government and non-government agencies, as well as research studies.
- No one government or non-government agency has a responsibility to ensure consistent, reliable, complete data on family violence is collected and maintained.
- ❖ Agencies that do report family violence data are subject to internal changes (e.g. policy changes, systemic changes in identification and recording practices) and external changes (e.g. changes in societal perceptions) that limit our ability to interpret changes in the data over time.
- The use of currently available data to derive indicators of family violence will require some processing of the data to ensure that those events that are counted are done so consistently over time.
- Population-based surveys have potential, but need to be carried out consistently.
- If violence modules are to be added to a general population survey, this needs to be done with appropriate consideration to any safety and ethics issues that may arise.
- If violence-specific surveys are being undertaken, these need to be consistently carried out, in order to provide information on trends over time.



4. International experiences

Many countries throughout the world have recognised the need to develop reliable and valid counts of family violence. This section will describe activities undertaken by some of these countries in their pursuit of reliable measures of family violence.

4.1 Surveillance through linking multiple administrative data sources, from Scotland

The Scottish Violence Reduction Unit (VRU) had its beginnings in the Strathclyde police force in 2005. In April 2006, the Unit's remit was extended nationwide by the Scottish Executive, creating a national centre of expertise on tackling violent crime [55]. The VRU has taken a public health approach to tackling violence in Scotland – including defining the problem through injury surveillance. The purpose of the surveillance data is to target police resources and prevention programmes more accurately, e.g. develop more appropriate interventions and address environmental or licensing issues in identified hotspots [55].

Although based in the police department, the VRU acknowledges there is an underreporting of violence to law enforcement agencies and so has engaged with health
services to improve the data on which surveillance is based. They have done this through
engaging a 'partnership analyst', based within a health board, who has access to both
police and hospital data to enable accurate comparisons to be made and to determine
whether a crime was reported to the police. To enable hospital data to be used effectively,
an 'Assault Care Plan' was added to the emergency department patient management
system. The Assault Care Plan involves collection of information about the location of the
injury event, the perpetrator, weapons used, the motive for the attack, involvement of
drugs or alcohol and intention to report to the police [55].

The VRU initiative has the potential to improve the quality of data contained in both the police and emergency department records by providing access to the information contained in the health records. There are, however, some limitations to the system. For example, it is not clear if police data will also be used to supplement the information contained within the health records. As noted earlier, the recording of an assault in hospital records is entirely dependent upon the ability of the clinician to document this in

the patient notes. If the information is not available at the time of the hospital attendance (e.g. due to uncertainty about the cause of the event), it will not be recorded as assault. Further, in terms of public health surveillance, the system designed by the VRU has the potential to be influenced by external factors such as resource constraint and changes in admission policies [56], as do all systems reliant on administrative data. In addition, the focus of the VRU initiative is on physical harm, which leaves the potential for psychological or financial harm to go unrecognised. Such influences may impact on the trends being recorded in the system and result in inappropriate conclusions being drawn about the impact of police work on violence rates in the communities being serviced.

4.2 Enhancing data from existing sources, from the USA

Between 1994 and 2005, the US Centers for Disease Control and Prevention funded state-based surveillance of child maltreatment and intimate partner violence for nine states. This was an effort to improve the quality and comparability of surveillance data and facilitate the integration of the data with prevention activities [57]. Surveillance systems for the nine states were based on routinely available data sources (e.g. emergency department, law enforcement, child protective services, hospital discharges, death records). For those states involved in the project, there was an attempt to overcome challenges in consistency and quality across data sources. This was done through training efforts and structured guidance for collectors and those who extracted the data for inclusion in the surveillance system.

In comparison with the intimate partner violence surveillance, efforts for child maltreatment surveillance were at an earlier stage, with less consistency in the data sources used. For the intimate partner violence surveillance systems, uniform definitions were being piloted and employed, allowing the recommendation of key data elements to be included in the state based systems and a more uniform approach being employed [57].

Lessons learned from this work highlight the importance of the systems required to support and maintain data reporting and recording. Stakeholders who commented on the sustainability of surveillance efforts indicated that programmes were sustainable if they linked in with other violence prevention efforts, data was used and disseminated widely (underscoring the importance of utilising high quality data from multiple sources to identify cases), and if strong collaborative links had been established with service providers and

those who controlled the data [57]. This practical focus is an essential, but often overlooked feature of statistical reporting systems.

4.3 An example of using crime surveys, from the UK

The British Crime Survey has been in existence since 1981. Originally conducted on a two-yearly cycle, the survey has been running continuously since 2001, and provides annual data on the prevalence of crime victimisation in Britain. (More recently this has been restricted to England and Wales as Scotland is now conducting an independent survey.) Included in this survey is a self-report module on sexual victimisation. Like national victimisation surveys conducted in other countries, until recently, the British Crime Survey did not include children or young people. However, in 2009, the "British Crime Survey (10-15 year olds)" was introduced. Development of the survey for this age group, whilst attempting to maintain consistency in questionnaire design with the adult survey, highlighted a number of potential problems:

"children are frequently involved in low-level incidents which may involve an offence in law (e.g. as one child deliberately pushing over another with an intention to hurt) but not be viewed by participants, or others, as serious enough to amount to crime. Many of such incidents are unlikely to come to the attention of the police or be recorded as crimes". (pg 2 [58]).

Comparison of four methods of counting victimisation ('all in law', 'norms based', 'all in law outside school' and 'victim perceived') revealed substantially differing results. When counted as 'all in law', where any incident considered to be a criminal act by law were counted as such, 24% of 10-15 year olds reported being victimised in the previous 12 months. In contrast, only 6% of 10-15 year olds reported being victims of crime when it was recorded as 'victim perceived', while 14% reported as being a victim when crime was reported as 'norms based' [58]. Victimisation as reported in the 2010/11 survey was reported using the 'all in law' and 'norms based' approaches.

In the latest report of the British Crimes Survey, the results for 10-15 year olds were reported alongside those of the adults. (10-15 year olds do not complete the sexual violence module.) Although there is no specific module on family violence for the 10-15

year old survey, information on violence, and the relationship between the victim and the perpetrator are described. Violence is described as:

- Violence with injury includes all incidents of wounding, assault with injury and robbery which resulted in injury.
- Violence without injury includes all incidents of assault without injury and incidents of robbery which did not result in injury.

For the children, the relationships are described as:

- Stranger violence includes wounding and assaults in which the victim did not have any information about the offender(s), or did not know and had never seen the offender(s) before.
- Acquaintance violence comprises wounding and assaults in which the victim knew one or more of the offenders, at least by sight. It does not include domestic violence [59].

4.4 Including violence-specific modules in other general population surveys, from the USA

Since 1984, the US Centers for Disease Control has been operating the Behavioural Risk Factor Surveillance System (BRFSS [60]), a state-based system of health surveys that collects information on health risk behaviours, preventive health practices, and health care access primarily related to chronic disease and injury from adults aged 18 years and older. The telephone-administered survey is conducted each month in each state, as well as in the District of Columbia, Puerto Rico, the US Virgin Islands and Guam.

In addition to the 'core' questions, there are optional modules, one of which includes questions pertaining to adverse childhood experiences, including physical and sexual assault. As at 2010, there had been seven states that had added this module to their core BRFSS question set. As yet there is no readily available prevalence or trend data concerning adverse childhood experiences on the BRFSS website.

Other aspects of family violence have also been added as optional modules on the BRFSS, including intimate partner violence [61], and sexual assault [62].

4.5 Family violence specific population-based measurements, from the USA

The United States has developed the National Intimate Partner and Sexual Violence Survey, as the result of collaboration between the National Institutes of Justice, the Department of Defence, and the Centers for Disease Control and Prevention. In 2010, an ongoing, national, telephone-administered survey was initiated to generate reliable and accurate estimates of the prevalence of intimate partner violence, sexual violence, dating violence, stalking victimisation, expressive psychological aggression and coercive control, and control of reproductive or sexual health.

The National Intimate Partner and Sexual Violence Survey is limited to non-institutionalised English and/or Spanish-speaking women and men aged 18 or older in the United States, so provides limited information concerning the prevalence of child maltreatment, with the exception of what could be gathered from questions concerning lifetime prevalence of violence. There are, however, significant strengths of this survey. In addition to prevalence estimates, detailed information concerning the patterns and impact of each specific violent act is obtained. For example,

- Each individual act of violence is linked with a specific perpetrator, enabling the
 collection of data on all forms of violence committed by a specific perpetrator and
 allowing for an examination of how different forms of violence co-occur;
- The length of time and frequency of the occurrence of sexual violence, stalking, and intimate partner violence relative to specific perpetrators;
- Information on a range of negative impacts (e.g. injury, absence from school or work, need for medical care) resulting from experiences of violence by individual perpetrators;
- Information from respondents on a range of long-term physical and mental health outcomes that may be associated with the experience of violence [63].

In summary, the above examples provide an overview of the possibilities for linking data, conducting ongoing surveys of victimisation and including younger people in victimisation surveys.

Key points:

- There are international examples of family violence data collection systems.
- None of the highlighted examples collect information on the full range of family violence or from people representing the whole life span.
- Data collection from children and youth requires adaption of methods.
- New Zealand can learn from these international examples to ensure that good quality family violence data is collected at the population level.

5. Discussion

As stated, 'indicators' are intended to be simple (summary) measures to describe underlying phenomena. Since many social, health or criminal measures are very complex, and the data that describe their development over time are open to influence from extraneous factors (which may bias trends), indicators are intended to provide a simpler and more reliable estimate of trends over time. In order to enhance the likelihood they will be adopted and will continue to be routinely measured into the future, proposed indicators need to be feasible and achievable, as well as based on readily available data sources [45].

New Zealand has a range of data from which information on family violence can be drawn. However, the review of the data sources provided above showed that none of the administrative data sets in New Zealand provide a complete coverage of family violence. Each suffer from reporting biases, difficulties identifying the complete gamut of outcomes associated with family violence, or are focussed on specific sectors of the population. Further, to provide an accurate estimate of the *trends* in family violence over time, it may be necessary to link data administrative data sources, similar to what is being undertaken in Scotland. It may also be necessary to implement thresholds to ensure consistency in measurement over time, as occurs with the New Zealand Injury Outcome Indicators [64]. Such thresholds would, however, require careful consideration as threat-to-life in the context of family violence may be more complex than a description of the proportion of people who are admitted to hospital with a particular diagnosis who subsequently die. In addition, such thresholds may not capture the ongoing, disabling effects of family violence such as emotional trauma.

Difficulties associated with measuring the scale and nature of family violence have been the subject of a number of national [31] and international [47] reports. In the conclusion of their 2007 review of the data sources and literature covering family violence in New Zealand, Lievore and Mayhew questioned whether a reliable estimate of the "true" extent of family violence is achievable. While we concur that it would not be possible to routinely count *all* family violence cases, we do think it may be possible to develop indicators for family violence in which the underlying trend in family violence can be measured and

reported. This has been the compromise position established for other forms of injury [45] and other health events (e.g. [65]).

The development of reliable and valid indicators is possible. New Zealand examples of this include the New Zealand Injury Outcome Indicators, and the indicators to monitor the health of children. The New Zealand Injury Outcome Indicators [64] are solely injury outcome indicators (measures of hospital discharge and death). In the case of work related injury indicators, there was no single source of administrative data that could provide a reliable measure of work related status and injury outcome (diagnosis) information. As a result, Accident Compensation Corporation and Ministry of Health data were linked to draw on the strengths of each data set while overcoming their limitations [45]. The New Zealand injury indicators have been operationalised and their feasibility, accuracy and reliability have been described.

An alternative method is to follow the model used by the Paediatric Society of New Zealand, which developed a suite of indicators to monitor the health of children and young people in New Zealand [66]. In this case indicators for social and cultural determinants of health, risk and protective factors, and individual and whānau health and well-being are reported. Such a set of indicators may also be appropriate for family violence where information about the individual types of family violence, where valid and reliable data is available.

Insights are also available from other countries. For example, in order for a family violence surveillance system to be sustainable, it is important that New Zealand learn from experiences in other countries, such as the US Centers for Disease Control and Prevention, which has funded state-based surveillance of child maltreatment and intimate partner violence. As highlighted above, the evaluation of this system noted the importance of building strong collaborative links between service providers, those that control the data (for example agency stakeholders or NGO head offices), those that use the data, and policy developers, in order for data systems to be utilised to their full potential.

Alternatively, it may be that the development of family violence indicators requires the implementation of an ongoing community based survey. In this case it is important that there is ongoing commitment to the development and implementation of a survey that will allow consistent information to be collected over time and for these surveys to be conducted regularly (if not continuously, as occurs in the British Crime Survey).

6. Conclusion and recommendations

International impetus to improve data quality

In 2007, at the General Assembly of the United Nations, a resolution was passed to improve efforts to eliminate all forms of violence against women.

Recommendation 11 of this resolution urges member states to:

"ensure the systematic collection and analysis of data on violence against women, including with the involvement of national statistical offices".

As a follow-up to this resolution, a Framework for Action was launched with expected outcomes to be put in place by 2015. Outcome number three is

"Establishment of data collection and analysis systems on the prevalence of various forms of violence against women and girls".

Outputs that will contribute to this outcome are:

- "3.1 All countries have undertaken a dedicated population-based survey or module on violence against women and girls.
- 3.2 All countries have integrated data collection on violence against women and girls into their administrative and routine reporting systems, including for health, police and justice.
- 3.3 All countries, the international community and other actors commit to ensuring the gender disaggregation of existing data, where possible." [1]

There are good examples of reliable indicators for health and well-being in New Zealand. These include the New Zealand Injury Outcome Indicators, which are now considered Tier 1 Official Statistics, and the indicators for monitoring the health and well-being of New Zealand children and young people. There is the potential for such indicators to be developed to monitor family violence.

Reliable and valid measurement of family violence is essential if we are to answer questions such as "is the problem is getting better or worse over time?" (Or is it not changing at all?). Further, reliable and valid measure of family violence would give us the ability to identify and target resources for high risk groups or locations, and would provide us with information to assist in evaluating the effectiveness of local, regional, or national efforts to address family violence. Many other countries throughout the world have recognised the need to invest in population-based data collection on family violence. Indeed, the United Nations has mandated that all countries should undertake data collection on violence against women and girls, a significant component of which is family violence (see sidebar) [1].

In order to develop an effective surveillance system, it is possible that data from more than one source will be required. If administrative data sources are to be used, further work will be required on to establish an

acceptable theoretical definition of family violence. Without the existence of an acceptable theoretical definition, there can be no expectation of the derivation and employment of compatible operational definitions to guide the collection of family violence data by government agencies.

To progress this work, we also need a shared understanding of the purpose of data collection (what we are measuring and why we are measuring it), and a shared understanding of the strength and limitations, and threats to reliability and validity, of the data we have available. We have prepared this paper in the hope that it will provide the basis for ongoing discussions and a programme of action related to improvements in the collection and reporting of family violence data.

As a conclusion to this Issues Paper, we offer the following recommendations as steps towards the goal of developing indicators for family violence in New Zealand:

Recommendation 1: That the various definitions of family violence from the New Zealand Government Statement of Policy on Family Violence, the Domestic Violence Act 1995 and Te Rito be reviewed to determine whether they provide an adequate theoretical definition of family violence in New Zealand.

Recommendation 2: That the outcomes of the above review be used to contribute to a refined theoretical definition and that this be used as the basis for all operational definitions of family violence in national administrative data sets.

Recommendation 3: That a thorough investigation of the flow of data through national administrative data sets be conducted to identify points of influence that have the potential to reduce consistency of measurement over time, or that may introduce measurement bias.

Recommendation 4: That consideration be given to an independent body being given responsibility to ensure that reliable and complete data on family violence is collected and maintained. That this body is tasked with ensuring the introduction of systems to support and maintain data family violence data reporting and recording.

Recommendation 5: That strong collaborative links are developed between service providers, government and non-government administrators of available data sets, policy

developers and those in the family violence sector to ensure a shared understanding of the importance of the data, the strengths and limitations, and the appropriate use of the data for documenting trends in family violence over time.

In New Zealand we have sufficient family violence data to be certain that family violence remains one of our most pressing social problems, with a high prevalence in the population as a whole, and with extensive consequences in terms of health, criminal justice, social, and economic costs. However, to inform our next steps to address family violence, we need reliable information with which to monitor if our prevention and intervention efforts are being successful. This will require the development of indicators and a surveillance system to monitor trends in family violence. Achieving this will require an investment of time and money to ensure that:

- 1. The indicators are based on the best data available;
- 2. The indicators are reliable and valid; and
- 3. The surveillance system is responsive to and effective for stakeholders in the family violence field.

Importantly, there will also need to be an ongoing commitment from funders that gaps and limitations in the data on which the indicators are based are addressed.



References

- 1. United Nations, Framework for action: Programme of United Nations Activities and Expected Outcomes, 2008-2015.
- 2. Department of Business and Innovation, *Victorian Family Violence Reforms VPS Innovation Case Study.* 2012, Victoria State Government.
- 3. Department of Education and Training, *What makes a good performance indicator?*, Department of Education and Training. Queensland Government.
- 4. Pencheon, D., *The good indicators guide: Understanding how to use and choose indicators*, NHS Institute for Innovation and Improvement: Coventry.
- 5. Fanslow, J., Beyond sero tolerance: key issues and future directions for family violence work in New Zealand. 2005, Families Commission: Wellington.
- 6. Taskforce for Action on Violence within Families, *Background to the family violence indicators*. 2011, Ministry of Social Development.
- 7. Department of the Prime Minister and Cabinet, *New Zealand Government Statement of Policy on Family Violence*. 1996: Wellington.
- 8. Te Puni Kokiri, *Rangahau Tūkino Whānau: Māori research agenda on family violence*. 2009: Wellington.
- 9. Peteru, M.C., et al., *Nga vaka o Kaiga tapu: A Pacific conceptual framework to address family violence in New Zealand*. 2012, Ministry of Social Developments, Pasefika Proud, Taskforce for Action on Violence within Families: Wellington.
- 10. Barnett, O.W., C.L. Miller-Perrin, and R.D. Perrin, *Family violence across the lifespan: an introduction.* 3 ed. 2011, Thousand Oaks: Sage Publications.
- 11. Fallon, B., et al., *Methodological challenges in measuring child maltreatment*. Child Abuse and Neglect, 2010. **34**: p. 70-79.
- 12. Leeb, R.T., et al., *Child maltreatment surveillance: uniform definitions for public health and recommended data elements, Version 1.0.* 2008, Centres for Disease Control and Prevention, National Centre for Injury Prevention and Control: Atlanta (GA).
- 13. Basile, K.C. and L.E. Saltzman, *Sexual violence surveillance: uniform definitions and recommended data elements, version 1.0.* 2002, Centres for Disease Control and Prevention, National Centre for Injury Prevention and Control: Atlanta.
- 14. Tjaden, P. and N. Thoennes, *Stalking in America: Findings from the National Violence Against Women Survey.* 1998, US Department of Justice: Washington (DC).
- 15. Tjaden, P., Violence against women: a statistical overview, challenges and gaps in data collection and methodology and approaches for overcoming them, in Expert Group Meeting. 2005, UN Division for the Advancement of Women: Geneva, Switzerland.
- 16. Family Violence Death Review Committee, *First annual report to the Minister of Health: October 2008 to September 2009.* 2010: Wellington.
- 17. Health Quality and Safety Commission New Zealand, *The Family Violence Death Review Committee's second report, October 2009 to November 2011.* 2012, Health Quality and Safety Commission: Wellington.
- 18. New Zealand Family Violence Clearinghouse, *NZFVC Data Summary: Family Violence Deaths*. 2012, Auckland University: Auckland.
- 19. Taskforce for Action on Violence Within Families, *The first report.* 2006.
- 20. Institute of Environmental Science and Research Ltd, *Public Health Surveillance*. 2012, Institute of Environmental Science and Research Ltd,.
- 21. Guidelines working group, *Updated guidelines for evaluating public health surveillance systems.* MMWR, 2001. **50**(RR13): p. 1-35.

- 22. World Health Organization, *WHO report on global surveillance of epidemic-prone infectious diseases introduction*, in *Global Alert and Response*, World Health Organization, Editor. 2012.
- 23. Fanslow, J.L., *Family violence intervention guidelines: child and partner abuse.* 2002, Ministry of Health: Wellington.
- 24. Richie, M.F., Behind closed doors: Domestic violence-101. Tennesse Nursing, 2007. 70(2): p. 1-4.
- 25. Caralis, P.V. and R. Musialowski, *Women's experiences with domestic violence and their attitudes and expectations regarding medical care of abuse victims*. Southern Medical Journal, 1997. **90**(11): p. 1075-1080.
- 26. Wills, R., M. Ritchie, and M. Wilson, *Improving detection and quality of assessment of child abuse and partner abuse is achievable with a formal organisational change approach.* Journal of Pediatrics and Child Health, 2008. **44**(3): p. 92-98.
- 27. Manly, J.T., *Advances in research definition of child maltreatment*. Child Abuse and Neglect, 2005. **29**: p. 425-439.
- 28. Marcus, G. and R. Braaf, *Domestic and family violence studies, surveys and statistics: pointers to policy and practice.* 2007, University of NSW: Sydney.
- 29. Fanslow, J. and E. Robinson, *Violence against women in New Zealand: prevalence and health consequences.* New Zealand Medical Journal, 2004. **117**(1206).
- 30. Estrada, F., *Trends in violence in Scandanavia according to different indicators.* British Journal of Criminology, 2006. **46**: p. 486-504.
- 31. Lievore, D. and P. Mayhew, *The scale and nature of family violence in New Zealand: a review and evaluation of knowledge.* 2007, Crime and Justice Research Centre, Victoria University of Wellington: Wellington.
- 32. Wood, D.S., *The validity of injury surveillance system measures of assault: a lesson from the study of violence in Alaska.* Journal of Interpersonal Violence, 2010. **25**: p. 219-241.
- 33. New Zealand Police, Police enhance understanding of family violence. 2012.
- 34. Families Commission, Family violence statistics report. 2009, Families Commission: Wellington.
- 35. Statistics New Zealand, *New Zealand Recorded Crime Tables: Release notes.* 2012, Statistics New Zealand.
- 36. Newbold, G. and J. Cross, *Domestic violence and pro-arrest policy*. Social Policy Journal of New Zealand, 2008(33): p. 1-14.
- 37. Lowman, J. and T.S. Palys, *Interpreting criminal justice system records of crime.*, in *Canadian Crime: Perspectives on crime and society*, C.T. Griffiths and M.A. Jackson, Editors. 1991, Holt-HBJ: Toronto, Ontario.
- 38. Ministry of Justice, Conviction and Sentencing Statistical Bulletin 2010: Notes about the data. 2012, Ministry of Justice,.
- 39. Statistics New Zealand, *Criminal conviction and sentencing statistics: 2010. Revision of published data.* 2012, Statistics New Zealand.
- 40. New Zealand Police, Family violence policy and procedures, New Zealand Police: Wellington.
- 41. Mansell, J., *The underlying instability in statutory child protection: Understanding the system dynamics driving risk-assurance levels.* Social Policy Journal of New Zealand, 2006. **28**: p. 97-132.
- 42. Drake, B., *Unraveling "unsubstantiated"*. Child Maltreatment, 1996. **1**(3): p. 261-271.
- 43. Btoush, R., J.C. Campbell, and K.M. Gebbie, *Visits coded as intimate partner violence in emergency departments: characteristics of the individuals and the system as reported in a national survey of emergency departments.* Journal of Emergency Nursing, 2008. **34**(5): p. 419-427.
- 44. Rose, E., P. Reed, and P. Kelly, *Medical assessment for child sexual abuse: a post-code lottery.* Journal of Peaediatrics and Child Health, 2011. **online**: p. 6.
- 45. Cryer, C. and J. Langley, *Developing valid indicators of injury incidence for "all injury"*. Injury Prevention, 2006. **12**: p. 202-207.

- 46. National Centre for Classification in Health, *Volume 1 of the International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification.* Third ed. Vol. 1. 2002, Sydney: National Centre for Classifications in Health.
- 47. Martinez, M., et al., *Perspectives and standards for good practice in data collection on interpersonal violence at European level.* 2007.
- 48. Young, W., et al., *The New Zealand National Survey of Crime Victims*. 1997, Department of Justice: Wellington.
- 49. Morris, A., et al., *The New Zealand National Survey of Crime Victims, 2001.* 2003, Ministry of Justice: Wellington.
- 50. Mayhew, P. and J. Reilly, *The New Zealand Crime and Safety Survey 2006: Key Findings*. 2007, Ministry of Justice: Wellington.
- 51. Justice Sector Strategy Group, *The New Zealand Crime and Safety Survey: 2009. Main findings report.* 2010, Ministry of Justice: Wellington.
- 52. Clark, T.C., et al., *Youth'07: The health and wellbeing of secondary school students in New Zealand.* Findings on young people and violence. 2009, University of Auckland: Auckland.
- 53. Sterne, A., et al., *Domestic violence and children: A handbook for schools and early years settings.* 2010, Abington, Oxon: Routledge.
- 54. Leibrich, J., J. Paulin, and R. Ransom, *Hitting home: Men speak about abuse of women partners*. 1995, Department of Justice and AGB McNair: Wellington.
- 55. Violence Reduction Unit, Action on Violence, Violence Reduction Team, Scottish Government.
- 56. Cryer, P.C., et al., *How can we reliably measure the occurrence of non-fatal injury?* International Journal of Consumer Product Safety, 1999. **6**(4): p. 183-191.
- 57. Clinton-Sherrod, A.M., et al., *The impact of child maltreatment and intimate partner violence surveillance initiatives.* International Journal of Injury Control and Safety Promotion, 2010. **17**(3): p. 177-185.
- 58. Millard, B. and J. Flately, Experimental statistics on victimisation of children aged 10-15: Findings from the British Crime Survey for the year ending December 2009, in Home Office Statistical Bulletin. 2010, Research, Development and Statistics Directorate, Home Office: London.
- 59. Home Office, User guide to Home Office Crime Statistics, in Statistical Bulletins. 2011: London.
- 60. Centers for Disease Control and Prevention (CDC), *Behavioral Risk Factor Surveillance System Survey Data*. 2012, United States Department of Health and Human Services, Centers for Disease Control and Prevention: Atlanta, Georgia.
- 61. Vest, J.R., et al., *Multistate analysis of factors associated with intimate partner violence* American Journal of Preventive Medicine, 2002. **22**(3): p. 156-164.
- 62. Cloutier, S., S.L. Martin, and C. Poole, *Sexual assault among North Carolina women: prevalence and health risk factors*. Journal of Epidemiology and Community Health, 2002. **56**: p. 265-271.
- 63. Black, M.C., et al., *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report.* 2011, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention: Atlanta, GA.
- 64. Statistics New Zealand, *Serious injury outcome indicators: 1994-2010.* 2011, Statistics New Zealand: Wellington.
- 65. LeMessurier, J., et al., *The development of national indicators for the surveillance of osteoporosis in Canada*. Chronic Diseases and Injuries in Canada, 2012. **32**(2): p. 101-107.
- 66. Craig, E., et al., *Monitoring the health of New Zealand children and young people: literature review and framework development.* 2007, Pediatric Society of New Zealand, New Zealand Child and Youth Epidemiology Service: Auckland.
- 67. Domestic Violence Act. 1995, New Zealand Government: New Zealand.
- 68. Children, Young Persons, and their Families Act. 1989, New Zealand Government: New Zealand
- 69. Family Violence Death Review Committee, *Terms of Reference*. 2012, Health Quality and Safety Commission New Zealand,.

Appendix 1: Definitions of family violence

Family violence data derived from the Family Court is described in terms of offences against the Domestic Violence Act (1995) and offences against the Children, Young Persons, and Their Families Act (1989).

The Domestic Violence Act (1995) defines family violence as:

"Meaning of domestic violence

- (1) In this Act, domestic violence, in relation to any person, means violence against that person by any other person with whom that person is, or has been, in a domestic relationship.
- (2) In this section, violence means—
 - (a) physical abuse:
 - (b) sexual abuse:
 - (c) psychological abuse, including, but not limited to,—
 - (i) intimidation:
 - (ii) harassment:
 - (iii) damage to property:
 - (iv) threats of physical abuse, sexual abuse, or psychological abuse:
 - (v) in relation to a child, abuse of the kind set out in subsection (3).
- (3) Without limiting subsection (2)(c), a person psychologically abuses a child if that person—
 - (a) causes or allows the child to see or hear the physical, sexual, or psychological abuse of a person with whom the child has a domestic relationship; or
 - (b) puts the child, or allows the child to be put, at real risk of seeing or hearing that abuse occurring;—

but the person who suffers that abuse is not regarded, for the purposes of this subsection, as having caused or allowed the child to see or hear the abuse, or, as the case may be, as having put the child, or allowed the child to be put, at risk of seeing or hearing the abuse.

- (4) Without limiting subsection (2),—
 - (a) a single act may amount to abuse for the purposes of that subsection:
 - (b) a number of acts that form part of a pattern of behaviour may amount to abuse for that purpose, even though some or all of those acts, when viewed in isolation, may appear to be minor or trivial.
- (5) Behaviour may be psychological abuse for the purposes of subsection (2)(c) which does not involve actual or threatened physical or sexual abuse."

(Section 3 [67]).

The Children, Young Persons, and Their Families Act (1989) provides no definition of family violence [68].

Family violence deaths

Differences between definitions of family violence deaths can arise due to differences in the range of incidents and crimes which are included and the range of relationships which are considered "family".

The Taskforce for Action on Violence in Families' Indicators Report [6] cites New Zealand Police as the source of their data. They state their data are based on the Australian Standard Offence Classification grouping (now called the Australian and New Zealand Standard Offence Classification, ANZOC). The ANZOC definition of homicide includes murder (including conspiracies and attempts), manslaughter, and driving causing death.

The Family Violence Death Review Committee define a family violence death as "The unnatural death of a person (adult or child) where the suspected perpetrator is a family or extended family member, caregiver, intimate partner, previous partner of the victim, or previous partner of the victim's current partner". They exclude suicides, assisted suicide (based on pact), deaths from chronic illness resulting from sustained violence and accidental deaths related to family violence incidents [69].

New Zealand Police provide no explicit definition of those events that are included in the police recorded family violence *murders*. The data are generated from police reports and whether a family violence tick-box is flagged. Whether this tick-box is flagged is broadly based on the Domestic Violence Act 1995, sections 3 and 4. However the police acknowledge that the definitions here are used broadly and that there are grey areas.