

**Minister for Gender Equality
National Institute of Public Health
Denmark**

Men's violence against women

Extent, characteristics and the measures against violence –2007

English Summary

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**Karin Helweg-Larsen and Marie Louise Frederiksen
in co-work with the Department of Gender Equality,
The Minister for Gender Equality
Denmark**

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Extent, characteristics – and the measures against violence - 2007

Published by
National Institute of Public Health, Syddansk University
and
Minister for Gender Equality

Edited by Karin Helweg-Larsen
Statens Institut for Folkesundhed

Cover; Layout: Gitte Blå Design

Print: Reproafdelingen, University of Copenhagen
February 2008

Printed full text in Danish:
ISBN- 978-87-92142-11-5

Elektronic Summary in English:
ISBN-978-87-92142-27-6

The English Summary can be obtained from Statens Institut for Folkesundhed, Syddansk
Universitet

Tlf.: +45 39207777

E-mail: sif@si-folkesundhed.dk

Full text in Danish may be downloaded: www.lige.dk eller www.si-folkesundhed.dk

Preface

The efforts by the government following the national action plans to combat violence against women and a large number of concrete initiatives clearly state that any violence against women is a criminal act and an offence that is not acceptable – neither outside nor inside the home.

In 2004, Ministry of Gender Equality and The Danish National Observatory on violence against women under the Danish National Women's Council published a comprehensive overview of the amount and the character of physical and sexual violence against women in Denmark. Survey data demonstrated that about 65,000 women each year were victims of any form of physical violence and that 42,000 were victims to violence by a current or former partner.

Data from 2000-2003 have now been updated to include 2006. There are good and there are bad news. The number of women, who are victims of partner violence, has decreased to about 28,000. This presents a significant tendency.

But, data also shows an increase in the total prevalence of violence against women, since 2000-2004. About 70,000 women are each year victims of any form of physical violence. The risk of violence at the work place has in particular increased.

Hence, it is necessary to stress that the efforts towards preventing violence against women must continue, not only in regard to domestic violence but also work related violence. The government will continuously ensure a comprehensive support to battered women and their children, not least minority women. Prevention of violence includes treatment of the aggressors. It also includes public information campaigns and improvement of working environments.

The present report illustrates the trends in gender-based violence during the last 5-6 years and describes the government initiatives to prevent this violence. Reliable data and statistics are important tools in order to inform the strategy and target it towards preventing violence. It is therefore a great pleasure to present this comprehensive overview of the status in Denmark.

Karen Jespersen
Minster for Gender Equality

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The 2007-report and the English summary

Since 2000, on behalf of the Minister of Gender Equality, the Danish National Institute of Public Health has documented trends in gender-based violence in Denmark. In 2004, a report was published on the seven EU indicators that describe the extent and characteristics of violence against women and the measures to prevent this violence (Helweg-Larsen K. & Kruse M 2004) and a database was made available on the Internet (www.lige.dk).

The present 2007-report is a follow-up study of the seven EU indicators, and is based on the same data sources as the 2004-report. It describes the trend in gender-based violence, primarily physical violence, during the last years. The data is gathered from numerous sources, presented in the present English summary. The Danish National Patient Register and Criminal Statistics include information about both victims and offenders that may document the extent and scale of partner violence (domestic violence) and other forms of violence against women. Since 2000, the national health interview surveys include data about exposure to physical and sexual violence that enable analyses of correlations between social factors, health problems and risk of violence.

The report is structured around the seven EU indicators regarding violence against women. The present summary includes an overview of victim and perpetrator profiles, the current initiatives to support victims, the measures addressing the male perpetrator, training of professionals and the state's general measures to prevent violence against women.

The data in the report was compiled and analysed by Karin Helweg-Larsen, MD (Public Health) and Marie Louise Frederiksen. The Department of Gender Equality under the Minister of Gender Equality has contributed to the description of indicators concerning state initiatives to eliminate domestic violence and other gender-based violence.

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Copenhagen, November 2007

Perspectives

During the last decade, violence against women has been focused upon as a serious public health problem. The Danish plans of action to combat violence against women have been followed-up by a large number of measures initiated to prevent violence occurring and to mitigate its consequences for the victims.

The first Danish national plan of action to combat men's violence against women, 2002-2004, mainly targeted partner violence, i.e. physical, sexual and psychological acts of violence, which primarily occurs in women's own home, a place where they ought to feel particularly safe. The developments in this area, which can now be analysed by means of population based surveys and register data, is positive. This would seem to confirm that the decision to put violence against women on the public agenda as well as the implementation of a wide range of interventions during the last years have been effective.

The overall headline of the numerous initiatives implemented as a consequence of the action plans of 2004-2004 and 2005-2008 was "Stop violence against women - break the silence". However, every year, many women are still exposed to physical and sexual attacks and have to live in fear of violence. The increased openness about the problem and the fact that violence no longer is a private, but a public matter which we can do something about, seem to have born fruit by leading to a significant decrease in demeaning and health-endangering partner violence.

EU indicators

During the Danish EU Presidency in 2002 a decision was made to uncover the extent of the problem by focusing on 7 indicators identifying the extent and the nature of partner violence in the single member states as well as the concrete measures and methods implemented in these countries to fight violence against women. The indicators will thus be used as a tool in the surveillance and evaluation of the member states' implementation of the UN Beijing plan of action on gender equality and the battle against violence against women. The Beijing Plan also requires the various countries to regularly collect comparable data on violence against women.

The indicators are:

1. Profile of victims
2. Profile of perpetrators
3. Victim support
4. Measures addressing the male perpetrator to end the circle of violence
5. Training of professionals
6. State measures to eliminate violence against women
7. Evaluation

The present state of these 7 indicators in Denmark is described on the basis of a wide range of data sources. The report describes the current extent and scale of partner violence, but also of other forms of violence and sexual assaults against women in Denmark, and examines current measures to support the victims and the extent to which the government has implemented the fight to prevent violence according to the plans of action of 2002-2004 and 2005-2008.

In 2005, the Minister for Gender Equality presented the second plan of action (2005-2008) to prevent men's violence against women and children in the family. Its main focus still is necessary support to victims, preventing violence by measures addressing the perpetrator, the reinforcement of interdisciplinary efforts made by the authorities and the improvement of general knowledge and information about violence.

Information about the present implementation of the plan of action, 2005-2008, is available on the Internet¹. The government initiatives that have been implemented or are

¹ www.lige.dk/files/pdf/vold/statusvold120607.pdf

about to be implemented are described under Indicator 6 in the present English summary.

The following 7 sections (indicators 1-7) briefly describe the present state of each single indicator.

The descriptions of victim and perpetrator profiles, indicators 1 and 2, are mainly based on three data sources: population surveys, national registers (Central Crime Register, Causes of Death Register, National Patient Register) and statistics from shelters, centres for rape victims and measures aimed at treating the perpetrator.

The numerous data sources present various aspects of violence against women. Thus, the extent and nature of the violence as reported by the women themselves in questionnaire surveys differ significantly from the violence reported to the police or registered based on contacts to emergency departments. Women who contact shelters are mainly battered women with social problems. As a result of these factors, differing profiles of the victims as well as of the perpetrators will emerge, depending on whether their description is based on a population survey, register data or other sources.

The amount of available data about non-physical violence against women is modest. But violence against women also comprises psychological violence such as fear of assault, humiliating treatment, restricted freedom of movement, sexual harassment, other verbal harassment, abuse of financial control, threats of violence and coercion. These types of violence are predominantly carried out by a partner and are as serious a threat against women's equality and well-being as physical violence..

The present state of the remaining indicators is discussed on the basis of current victim and perpetrator treatment programmes and the measures implemented in accordance with the national plans of actions of 2002-2005 and 2005-2008.

Definitions

The UN Beijing plan of action defines “violence against women” as any gender-based violent act, resulting in or assumed to result in physical, sexual or mental injury on women, including threats of such acts, coercion, or captivity, whether it takes place in public or private premises.

The EU and Danish initiatives have focussed on violence against women in their homes, predominantly committed by a partner. Domestic violence is not completely identical with partner violence. At least 50% of partner violence is carried out by a former spouse and does not always take place in the women’s own home. To a certain degree the data obtained in questionnaire surveys can distinguish between partner violence and other types of violence, while register data only allow this to a very limited degree. Due to these limitations we are only able to present an estimate as to the development of partner violence compared to other types of violence against women in Denmark in the period 2000 to 2005.

Based on population survey data, partner violence has been defined as physical violence and/or sexual assaults against women, committed by current or former spouse, common-law spouse or boyfriend.

Based on data from the police statistics on reported violence and the victim register, and on household data from Statistics Denmark, partner violence in police-reported cases is defined as violence committed by an adult registered as part of the same household as the female victim during a defined period of time.

Partner violence may be defined by data on emergency department contacts in The National Patient Register. Most partner violence occurs in a residential area, a home, and results in head and neck lesions. Hence, female contacts registered by the WHO International Classification of Diseases, ICD10, as head or neck lesions due to interpersonal violence and occurred in a residential area may in most cases be due to partner violence.

Indicator 1, Profile of the female victims of violence

This indicator describes the current prevalence of violence against women and describes the relationship between victims and perpetrator, victims' age and marital status, ethnicity and other social factors.

During one year, about 4 % of adult women experience any form of physical violence (approximately 70,000 women aged 16-64 years). The physical violence is in about half of the cases relatively moderate, but about 32,000 women are every year victims to severe physical violence. During one year, 6,000 women consult an emergency department due to lesions by interpersonal violence and about 5,500 women report cases of violence to the police.

Young women (16-29 year-olds) have six times higher risk of violence than middle-aged women. Married women have the lowest risk of violence. Cohabiting women have higher risk than both married and single women.

During the last 5-6 years, the prevalence of intimate partner violence has decreased. In the same period, violence against women at work has increased.

Population based surveys in 2000 and 2005; self-reported exposure to violence

There exist important differences in self-reported violence dependent on the survey method. A higher prevalence is reported in surveys that ask about specific forms of violence than in those who only address violence in general.

The following data are obtained through self-administered questionnaires that were part of the national health interview surveys in 2000 and 2005.

The prevalence in exposure to physical violence

- 3.7% of all adult women (16 years +) reported at least one form of physical violence in 2000, and 3.9% in 2005. The difference is not statistically significant.
- Severe physical violence (kicked, hit with fist or item, pushed into furniture or down staircases, strangled or attacked by arms) was reported by 1.5% in 2000 and 1.6% in 2005.
- It is estimated that during one year 70,000 women aged 16-64 are exposed to any form of physical violence – and 32,000 to severe violence.

- In 2000, a former or current partner was the perpetrator in about 66% of all cases, and in 2005 in 40% of the cases.
- Partner violence among 16-64 year olds, has, thus, decreased from about 42,000 women being victimised in 2000 to about 28,000 in 2005.
- Partner violence is most prevalent among women aged 30 years and more.
- In about half of the incidents of violence against 30-49 year-olds the perpetrator was a current or former partner, corresponding to a number of 17,000 women – in two of three cases the violence had been severe.
- The percentage of work related violence among all incidents of violence against women was 10% in 2000 and has increased to 20% in 2005, corresponding to 15,000 women being exposed to violence from a colleague, a client or other person at work.

Socio-demography

- Young women (16-19 year-olds) have about six times higher risk of being exposed to physical violence compared to 45-66 year-olds.
- The risk of being exposed to severe violence is four times higher among 16-29 year olds than among 45-66 year-olds.
- The risk is lower for women with long education than for both women with medium, short or no formal education.
- Single women have about three times higher risk of exposure to any form of physical violence as well as to severe violence.
- Cohabiting women have about four times higher risk of exposure to severe violence than married women.
- Women exposed to physical violence report more often than non-exposed women:
 - Low job influence
 - Long lasting marital conflicts
 - Severe childhood problems
 - Mental problems
 - Former suicidal attempts.
- The risk of exposure to physical violence is higher for homosexual and bisexual women than for heterosexual women.

Register data

Mortality

- During the period 1990-2001, in average 25 women were annually victims of homicide.
- In 2006, the number of homicides on women was relatively low, totally 18.

Emergency department (ED) contacts due to violence

- The number of registered ED contacts among women aged 15 years and older has increased from almost 5,000 in 2000 to 6,000 in 2005.
- The increase is most pronounced among young women: 115% among 15-19 year-olds and 73% among 20-29 year-olds during the period 1995-2005.
- During one year, almost 1% of all women aged 15-19 contacts an ED due to violence.
- More than half of all lesions (60%) among female ED contacts have occurred in a residence and almost 40% of the lesions are located to head or neck.
- Intimate partner violence is characterised by head and neck lesions occurring in a residence. The number of ED contacts due to such lesions has decreased during the period 2003 to 2006. In the same period, the number of ED contacts due to violence occurring out-side a residence has increased.
- The trend in ED contacts indicates a decrease in intimate partner violence.

The general increase in the number of ED contacts registered as due to violence may in part be explained by improved registration of the reason for contact – however, it may also reflect an increase in severe violence and consequently more lesions that need medical attention, especially among young women.

Violence reported to the police

- During the period 2002 to 2006, the annual number of police reported cases of physical violence and threats of violence among women aged 15 or older has increased from 4,985 to 5,338.
- The increase is mainly related to women reporting moderate violence.
- The number of violence against female authorities has also increased.
- The number of reported attempted homicides and severe, potentially fatal violence has decreased.
- 15-19 year-olds report four times more often incidents of moderate violence than women aged 40 and more.
- Approximately one of two women, who have reported violence to the police, has also been treated at an ED.

”Intimate Partner violence”

Register data concerning police reported violence against women were linked to Denmark Statistics’ registers, which contain information about household and other factors that may be used to identify whether the victims and the perpetrator (the alleged

aggressor) have been living in the same household during a well-defined period. If so, the case is defined as “partner violence”.

- During 2004-2005, cases defined as partner violence constituted 14% of all cases of police reported violence against women, compared to 26% during 2001-2003. Hence, the proportion of partner violence among all police reported incidents of violence against women have decreased by almost 50%.
- Partner violence appears to be more severe than other form of violence against women; the percentage of ED contacts among victims of partner violence was higher than among female victims of other form of physical violence.

The social profile of victims who report violence to the police

- The victims are younger than the general female population in Denmark.
- The victims are more often unemployed or in other ways outside the labour force than the general female population, 50% compared to 25% of all women aged 16-59 in Denmark.
- The percentage of victims being single is higher (70%) than in the general female population (50%).
- 2/3 of female victims of partner violence had children living at home at the time of the incident.
- 25% of all victims of partner violence belonged to an ethnic minority group compared to 10% in the general female population.

Shelter statistics

- Each year, about 2,000 women stay for shorter or longer time in shelters.
- The number of women using these facilities has increased by 10% from 2004 to 2006.
- Most of the clients had been exposed to physical violence, 1/6 sixth to very severe violence.
- Almost 25% had reported the offence to the police.
- 40% of all clients were born in another country than Denmark.
- The perpetrator was most often a Danish male citizen. Among immigrants in 25% of all cases.
- The clients were relatively socially deprived compared to the general female population.

Sexual assaults

Survey data

The following data are based upon the self-administered questionnaire in the national health interview survey in 2005.

- Almost 2% of all women reported forced sexual experiences/sexual assaults during the last year – a total of about 26,000 women in the population.
- The prevalence is highest among young women, 10% among 16-19 year-olds compared to 1% among women aged 40 years and older.
- In half of the cases, the sexual assaults comprised rape or attempted rape.
- A former partner was the offender in half of the sexual assaults against young women – and among 30-49 year old women most often the current partner.
- Bisexual women have a higher risk than heterosexual women of being exposed to sexual assaults.

Police-reported sexual assaults

- During one year, 400 adult women (15 +) report to have been raped or attempted raped to the police.
- During the period 2002 to 2006, the annual number has been stable.
- Most police-reported cases concern 15-19 year-olds.

National centres for rape victims

- Since 2000, the national health care includes free medical examination, judicial and psychosocial counselling to all victims of rape.
- In 2006, 330 women had contacted the centre in Copenhagen, a 30% increase compared to 2001.
- 130 women contacted the centre in Aarhus, a 25% increase compared to 2001.
- 70% of the assaults were reported to the police.
- A stranger or a new acquaintance was the offender in half of the cases.
- 10% of the offenders were current or former partners.
- About 40% of offenders were close friends

Indicator 2; Profile of the perpetrator

This indicator describes male and female perpetrators in police-reported cases of threats and physical and sexual violence. Furthermore, information is gathered from perpetrator treatment programmes that describe a selected group of perpetrators. The national health interview survey and other population-based surveys may illuminate the trends in the relationship between victims and perpetrators.

The available information about perpetrators is less precise and vast than information about victims. The crime statistics and the clients of perpetrator programmes may conceal a social and ethnic bias, which in turn renders conclusions on perpetrator profile difficult to draw.

Most violence against women is committed by men. A man is the perpetrator in 85% of all police-reported cases.

During the last 5-6 years, the percentage of perpetrator having a close connection to the female victim has decreased. At present, a current or former partner is the perpetrator in 20% of all police-reported cases, but surveys indicate that this is the case in 40% of physical violence against women.

Police-reported violence

- Each year more than 3000 cases of violence against women are reported to the police, and in 85% of the cases the perpetrator is a man. This corresponds to a perpetrator share of 0.1% of the adult male population.
- In 2004 and 2005, a total of 6.599 persons were charged for violence against women, about 3.300 per year.
- Broadly 1/3 of the charges did not cause a conviction.
- During a well defined period, about 20% of the charged perpetrators had cohabited with the victim. These cases are defined as partner violence.
- Few of these cases of partner violence (2%) were committed by women.
- Cases where a woman was charged for violence against a woman most often concerned work-related violence, e.g. violence against authorities.

Male perpetrators

- Men who commit violence against women are relatively young, 36% were 16-29 year old compared to 16% of the general male population.
- In cases of partner violence, 2/3 of perpetrators were aged 20-29 year compared to 1/3 of the general male population.
- 60% of the perpetrators aged 16-59 are not in the labour force compared to 20% of all 16-59 year-old men. The perpetrators have relative short education.
- Twice as many male perpetrators are living on their own compared to the general male population.
- A larger proportion of perpetrators are immigrants compared to the general male population, 20% and 6% respectively.

Female perpetrators

- Female perpetrators of violence against women are relatively younger than the general female population in Denmark.
- A three fold higher percentage of female perpetrators are outside the labour force than among the general female population.
- Their level of education is relatively short.
- 85% are singles (not married or cohabiting) compared to 60% of women in the general female population.
- Compared to the general female population a higher proportion of female perpetrators is first or second generation immigrants.

The victim-perpetrator relationship

- In a 2005-survey, women reported that about 40% of all forms of violence was committed by a current or former partner.
- 90% of victims seeking refuge in shelters had been assaulted by a partner.
- 20% of all police-reported violence against women may be defined as partner violence.
- The relationship between victim and perpetrator is not registered at emergency department contacts.

Men receiving counselling/treatment

- During a period of four years, the main counselling and treatment centre in Denmark, "Dialog mod vold" has treated a total of 268 men.
- The majority contact the centre at the request of their female partner.
- The treatment lasts one year in average.
- About 70% of the clients have completed the treatment.

- Another centre, Alternative to violence, based on Norwegian experiences, is every year contacted by about 100 men.
- The centre, "Manderådgivningen" in Jutland has about 60 clients per year.
- The majority, 75%, of the clients in the three centres were aged 21-40.
- 20% had a higher education.
- 10% were outside the labour force.
- About 50% were living on their own.

Indicator 3; Victim support

This indicator describes current measures in support to female victims of violence.

Since March 2002, the government plans of action to combat violence against women has set in motion a number of activities, such as information campaigns, web pages, leaflets etc. in order to inform women of available options such as counselling, support and treatment.

At present, through the plan of action 2005-2008 national campaigns, a website www.voldmodkvinder.dk, a Hotline, and information leaflets translated to 8 different languages are available.

Counselling centres

The web site www.voldmodkvinder.dk includes a large number of information about how and where to get help and support in case of domestic and other form of violence against women. Among this information there are leaflets in relevant languages. The Hotline (+45 70 20 30 82) is open 24 hours all week and employs professional counsellors.

- A total of 45 shelters offer temporary residence for female victims of violence. They include about 400 places for adults and about 450 places for their children; approximately 20 places per. 100,000 women aged 16-49.
- In 2006 there were about 2000 requests for shelter, and 98% of the women got shelter.
- The shelters are almost 100 percent publicly financed through the municipalities.
- In 2006 the centres employed 156 persons fulltime, 109 part time and about 1400 volunteers for night guard and other activities.

Rehabilitation centre for ethnic minorities in Denmark (R.E.D.): A special shelter has been established for immigrant women, who have fled compulsory, forced marriage or threats of such marriage. The centre offers shelter for 12 women to a maximum of two years. The centre offers general counselling and support to help the women regaining an active social life.

Public support and counselling

- The police are generally well informed and trained, as gender-based violence is a compulsory part of the police academy curriculum.
- Everyone reporting an assault is entitled to advice and aid, free of charge, from a lawyer.
- National Commission of the Danish Police adopted in August 2007 "Comprehensive strategy for efforts against homicides due to jealousy and other serious domestic offences"².
- The ministry of social affairs provides shelter statistics and support analyses and studies of issues related to violence against women.
- The municipalities provide support for families that suffer from domestic violence. Special courses ensure the necessary training among social workers in the local municipalities.

The health care sector

- Access to emergency department, on-duty doctors and GPs is easy and free of charge.
- Most emergency departments follow specific guidelines when dealing with victims of violence. The guidelines include referral to social workers and shelters, if necessary.
- Postgraduate education is offered to different professionals in the health sector and is included in the pre-graduate education of nurses, midwives and medical doctors.
- There are 8 centres for rape victims in hospitals nationwide

Specific initiatives

During the last year, a number of initiatives have been initiated to strengthening the support to women and children, who are victims of violence.

The initiatives are fully described under Indicator 6, State measures to eliminate violence against women.

- Acute psychological aid to female victims of violence
- Improved facilities in the shelters for disabled women exposed to violence
- Nationwide information campaigns for ethnic minority women
- Networks for battered women
- Projects to facilitate the social rehabilitation of battered women and their children
- Digital network for children including chat rooms for children and adolescents

² More information about the strategy can be found: www.politi.dk/da/aktuelt/nyheder/jalousidrab_23082007.htm

- Information campaigns focusing on youth, gender and violence
- House-sharing for battered, ethnic minority women and their children
- Information campaigns on violence against children
- Preparation courses for future parents

Support for specified target groups

The national action plans have included the special needs of the following groups:

- Children of women exposed to violence in their home
- Women in ethnic minority groups
- Disabled women exposed to violence

Indicator 4; Measures addressing the male perpetrator in order to end the circle of violence

This indicator describes measures aimed at male perpetrators to prevent recurrence of the violence. Through the national action plan, 2002-2004, three public centres were opened for counselling and treatment of men who had or were in risk of using violence against women. The national action plan, 2005-2008, further supports the establishment of such centres.

Counselling

Manderådgivningen i Ålborg, (Counselling for Men Aalborg), was launched as a pilot project in 1994 and became in 1999 a permanent counselling centre supported by the municipality of Aalborg. Men who want to change their behaviour are offered free consultations. The treatment lasts 5 -12 months. In average 50 men have been treated per year.

Dialog mod vold (Dialogue against violence) was initiated in 2002 in the capital, Copenhagen, as part of the national action plan to eliminate violence against women. At present centres have opened in the three main cities, Copenhagen, Odense and Aarhus. Men are referred to counselling and treatment by shelters, social authorities, police and medical doctors. The treatment focuses on the family and the female partner is often included in the treatment. Therapy is offered for one year. During the last four years a total of 268 men have followed the programme.

Alternativ Til Vold – Roskilde (ATV-Roskilde) (Alternative to violence) was initiated in Denmark in December 2003 as a free offer of treatment based on the experiences gained by the project, Alternative to violence, in Norway

The target group is men aged 18 and older who have envisaged problems of violent behaviour towards their female partner. Individual and group therapy up to 2 years is available by four psychologists. By the end of 2007 a total of 90 men had been treated.

Herning Krisecenter - Manderådgivningen (Counselling for men in Herning) offer treatment based on cognitive principles.

Krisecenter Odense (Shelter Odense) offers a family orientated treatment programme to men who have exposed their partner to violence.

The Correctional Service

Men with a sentence due to sexual assaults towards children and adolescents are offered a combination of psychological and psychiatric treatment. The treatment started as a pilot project in the late 1990's. Since 2003, it is a permanent. It only addresses men who are sentenced to jail.

In the near future, by a co-work between Dialogue against Violence and the correctional services men with a suspended sentence concerning domestic violence will also be offered treatment.

Indikator 5; Training of professionals

This indicator describes the type of training offered to professionals working with female victims of violence.

It is a part of the government plan of action to combat violence against women, to train professionals in counselling and treating victims of violence and preventing consequences of violence against women. The nationwide campaigns regarding violence against women are also aimed at improving knowledge among decision makers and authorities.

The Commissioner of Police has by August 2007 adapted a general strategy against jealousy homicides and other severe partner related offences.

Status

Men's violence against women and children in the family; a topic integrated in relevant pre-graduate education

1. January 2006, the results of a close examination of the extent of training in the topic "violence against women" were published³.
2. The topic is at present not integrated in all relevant pre-graduate training. Hence, further training material will be developed in the near future.
3. A report from the National Organisation of Shelters for Battered Women and their Children (LOKK) named "When violence is daily life" is used in numerous training courses⁴.

Post-graduate training of personnel in municipalities

1. The activity took off at a kick-off conference in January 2006. Focus was on the judicial and social aspects of male violence against women.
1. A total of 6 project days with the participation of about 100 professionals (police, social workers in the municipalities, judicial experts etc.) has informed about legislation and regulations, e.g. expulsion of the male perpetrator from the home. The objective has been to improve the general knowledge about domestic violence among the relevant

³ "Domestic violence - an omitted or prioritised topic in training?"

⁴ www.lokk.dk

personnel in health care sector, social services and schools in order to consider the interest of female victims their children and the male perpetrator.

Training of counsellors in social housing associations

1. Training programmes on the prevention of domestic violence through the National Housing Association.
2. Intern networking among counsellors.
3. One days training about domestic violence, one about prevention and mediation and one about urban planning, in total involving 100 persons.
4. Training was performed from March 2007 to January 2008.
5. Training material has been developed.

Training to further qualify personnel in shelters about ethnic issues

1. Courses aimed at professionals and volunteers in shelters.
2. LOKK has published a number of leaflets and reports on ethnic minority women in shelters.
3. Professional guidelines aimed at personnel in the shelters.
4. LOKK has employed two persons who deal with the special problem, “honary killing and violence”.
5. LOKK’s 2 judicial consultants are engaged in training and counselling.
6. Extern consultants are employed for developing further training.
7. LOKK is involved in seminars arranged by other organisations.
8. LOKK conducts training seminars at the police academy.

Existing training of relevant professionals

1. Integrated in the curriculum of medical students, nurses, and candidates in public health science.
2. Topic in the post-graduate training in some medical specialities:
 - a. Gynecology and obstetrics
 - b. General practice
 - c. Psychiatry
3. Obligatory topic at the police academy, basic and special training courses.

Indicator 6; State measures to eliminate domestic violence against women

This indicator describes the initiatives taken by the government bodies within the past three years regarding legislation, research, and plans of action, campaigns and other political initiatives.

Legislation

According to Danish law, any assault on another person is illegal. This also applies to assaults and rape within the family and between spouses.

Political initiatives

The first Danish plan of action to combat violence against women focused on partner violence. It was published in March 2002. In December 2002, it was supplemented by a plan of action against trafficking. A new action plan to combat the trading of human beings was launched in March 2007.

The second national plan of action to combat violence against women 2005-2008 was launched in April 2005. The plan includes follow-ups on the existing activities and numerous new initiatives.

The action plan includes:

1. Victim support
2. Initiatives aimed at perpetrators
3. initiatives aimed at professionals
4. Knowledge and information

Item 1, 2 and 3 are described in Indicators 3, 4 and 5.

The government each year observe the UN international day against violence against women. On November 25th a conference on the topic is organized, in addition national campaigns, workshops etc. is set up.

The government has recently put focus on youth and violence. In this context, the results of a study on dating violence among adolescents will be published March 2008.

Knowledge and information

Financial support has been granted to enhance knowledge of the following:

1. Correlation between violence against women and marginalisation in labour market.
2. Updating of the national database on violence against women
3. Shelter statistics: updating and presentation.
4. Statistics on children at shelters.
5. Study about ethnic minority children at shelters.
6. Dating violence among adolescents.
7. Rehabilitation of ethnic minority women in country of origin.
8. Improved victim statistics in the Criminal Statistic.

Campaigns

During the last years, the following campaigns were held:

1. "Be a man – say no to violence against women" (August 2007).
2. Information campaigns aimed at improving ethnic minority women's rights concerning children, divorce, violence, economy – held at linguistic schools all over the country – Autumn 2005 to Spring 2006.
3. Revival of Information campaigns among professionals.
4. Initiatives among municipality authorities are planned.
5. Further information campaigns among ethnic minority women are planned.

Budget

1. The action plan 2005-2008 has initially a budget of 64 Mio Danish Crowns
2. 5,8 Mio. Crowns are allocated to treatment and counselling of perpetrators, Dialogue against Violence.
3. 52 Mio. Crowns are allocated to supporting and treating women and children after they leave a shelter.
4. The shelters are financed by a public grant of 77,3 Mio Danish Crowns per year (2006).
5. Different ministries have allocated budgets to projects concerning the prevention of violence against women.
6. Budgets are also allocated for the post-graduate training of professionals.

Indicator 7; Evaluation

This indicator describes the lessons learned and what lies ahead.

During December 2004 to February 2005, an evaluation of the government's national action plan, 2002-2004, was performed. The primary objectives were to document the relevance, activities and results of the strategies. Hence, the perspective was mainly retrospective. However, the evaluation included experiences that point to future activities.

The evaluation states: "The state initiatives have contributed to a process where violence against women is a central topic that is publicly debated – the problem is no longer a private, tabooed problem"

"It is estimated that central problems have been included in the state's initiatives."

"In general, women in Denmark are now well informed about different counselling facilities and measures for support and shelter in case of domestic and other forms of violence".

Measures aimed at ending the violence include legislation concerning expulsion of the perpetrator from the home and counselling and treatment of perpetrators.

The different initiatives concerning pre- and post-graduate training have improved the knowledge among relevant professionals and offer methods for intervention and improved counselling and support to victims of violence.

The Media treat increasingly violence against women as a serious public problem. The general information level in the population has improved.

The national action plan 2005-2008 will be evaluated in due time.

Data sources

In Denmark violence against women may be illuminated by three different data sources: survey data, national registers and shelter statistics. Each data source contains information on different aspects of violence. Used individually, none of the data sources can sufficiently describe the victim or perpetrator. However in combination the data sources provide a relatively complete and up to date image of the magnitude and characteristics of violence against women, as well as the victim and perpetrator profile.

The present presentation focuses on physical violence against women within and outside the domestic area, and, to a lesser extent, on sexual assaults. Threats, fear of replication, and coercion or captivity can have severe consequences for the victim. However, the latter types of violence are to a large extent immeasurable, it has not been included in the present assessment of violence against women.

Register based information on violence against women comprises the acts of violence known by public authorities, while survey data describe what women themselves experience as being violence. The two different types of data sources thus present different aspects of violence. The most severe violence is reported to the police, and leads to contact to a hospital. Several women exposed to intimate partner violence do not report the assault to the police, and do not state violence as the reason for their injuries when they contact an emergency department. This is among the reasons for the major difference in the magnitude of police reported violence and the magnitude of violence derived from survey data. It could also presumably explain the fact that the social profile of victims in police reports differs from the social profile of victims in survey data. Women with a strong network (family and friends) may need less help from public authorities than women with limited or no networks. An example of this may be immigrant women.

In combination, the Danish register data and survey data provide a detailed picture of victims of violence. The victim profile thus becomes rather precise. The knowledge regarding perpetrators is unfortunately less detailed. No survey data on perpetrators exist. The perpetrator profile is based on judicial information, from police records and conviction information. It is possible, that these data conceal a social bias.

Survey data describe women's own assessment of exposure to violence. Self-reported physical violence comprises data about both slight and serious physical violence, as well as forced sexual experiences and sexual assaults. The amount of reported violence is influenced by the interview person's own assessment, which will depend on age, social and cultural factors.

Shelter statistics primarily includes victims of violence who have relatively few social resources, e.g. immigrant women.

The national Danish registers include data can be used to describe victims of violence, the offenders, the relationship between victims and offenders and their socio-economic status.

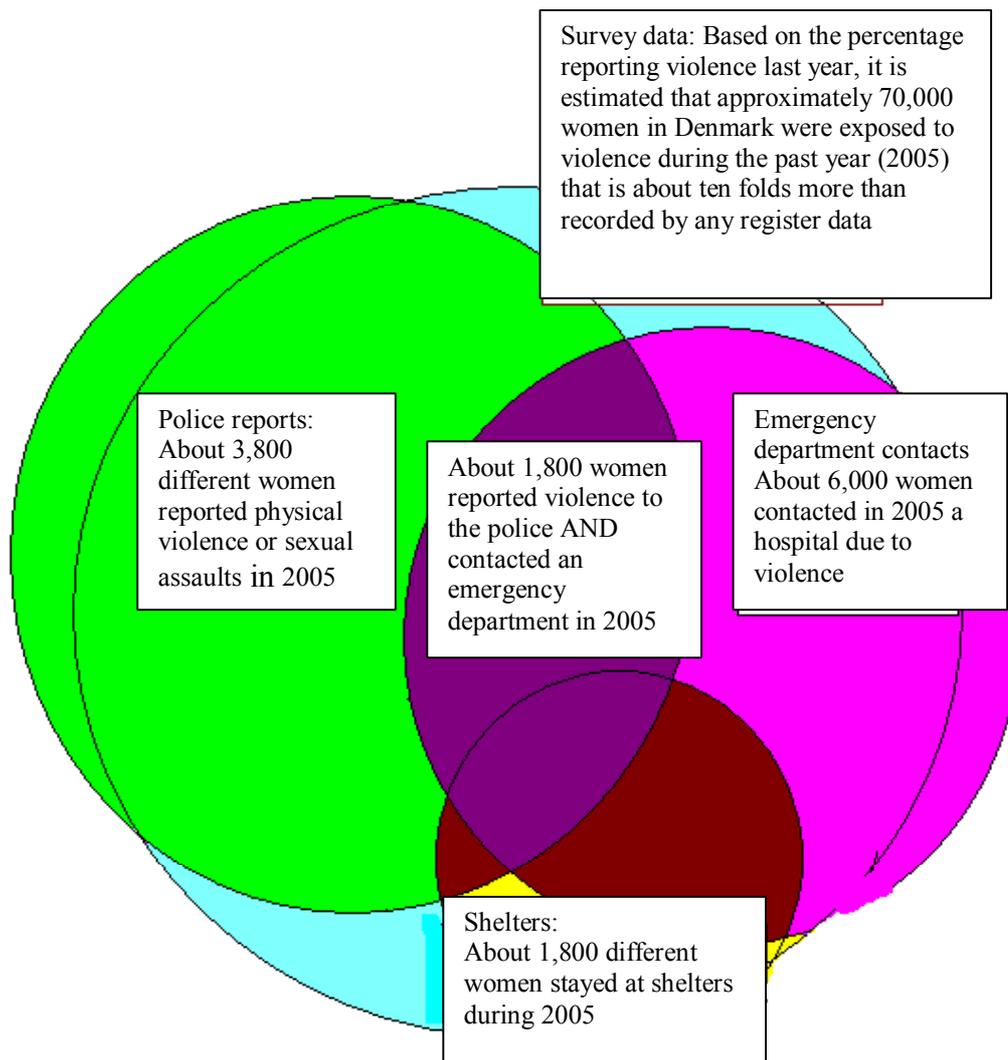
In the Central Crime Register, all police reports are registered according to the specific violation of the Penal Code. The registration includes information about the alleged perpetrator and the legal outcome. In the case of interpersonal crime, such as violence and rape, data regarding the victim is recorded as well.

Any hospital contact, including contacts to emergency department, is registered in the National Patient Register by reason of contact (illness, accident, violence or self-harm) and by specific diagnoses (e.g. fracture of mandible).

The Causes of Death Register contains information about all deaths among Danish citizens, and deaths due to violence can be identified by the specific manner and cause of death.

National register data are organized according to the personal identification number, which has made it possible to combine information from different registers, e.g. the Crime Register and the National Patient Register. In addition, data from Statistics Denmark about marital status, length of education, employment, ethnicity, household members and other socio-economic factors may be added to the profiles of victims and perpetrators.

Each of the national registers describes different aspects of violence against women. In combination, register and survey data render it possible to estimate how many women are exposed to violence, the profile of victims, and the type of violence they are exposed to and the consequences of the violence. Information from shelters and centres for rape victims put another dimension to these data.



The data used for the perpetrator profile are fewer and stem from a smaller amount of data sources. In general, crime records provide the most valuable information in this regard, whereas, survey data provide very little information. However, within the last few years, treatment programs for perpetrators collect data about the clients, and this information is included in the perpetrator profile.

There may exist a serious social bias in those data. It is obvious that socially deprived men have a higher risk of being prosecuted and sentenced to jail. On the other hand, socially well-situated men may be more prone to attend perpetrator programmes than socially deprived men. There exists in Denmark no survey data that include information of the interviewed person's self-reported violence perpetration against women.

Population based surveys

Since the early 1970's, repeated population based victim surveys have been conducted most often as telephone interviews and integrated in general surveys on living conditions.

The victim surveys by the Commissioner of Police

In 1995/96 and 2005, nationwide surveys were conducted as telephone interviews about exposure to threats and physical violence last year. A limited number of questions were included in the general living condition surveys (Omnibus surveys). The first report focused on violence at home, in the street and at work, and the next described the trend in violence towards men and women (Balvig F & Kyvsgaard B 2006b).

National survey focusing on violence against women

The first Danish survey that specifically focused on violence against women was conducted in 1991 by telephone interviews. It included less than 1,000 women (Christensen E 1992). In 2003, Denmark participated in an international survey, IVAWS (International Violence against Survey), which was conducted by Judicial Authorities in a limited number of European countries. In Denmark the survey included about 3,500 women, who were interviewed by telephone (Balvig F & Kyvsgaard B 2006a).

National health interview surveys

The National Institute of Public Health conducts nationwide health surveys on a regular basis. The objective is to follow the current health, morbidity as well as factors that influence upon the health of the adult population. The surveys are conducted by face-to-face interviews. Sensitive questions such as sexuality, attempted suicides and exposure to violence are answered by a self-administered questionnaire after the interview. The surveys in 2000 and 2005 included questions on exposure to threats of violence, different forms of physical violence and forced sexual experiences within the last year. By these questions based on internationally recommendations (Straus' conflict tactic scale) it is possible to characterise the physical violence as slight or severe. Information was obtained of the relationship between the respondent and the perpetrator of violence.

The questions pertaining to physical violence stated whether the person within the last year had been exposed to the following:

- Been pushed, shaken or slapped
- Been kicked, struck with fist or with item
- Been thrown into furniture, walls, down staircases or similar
- Been exposed to suffocation or armed attack
- Been exposed to threats of physical violence

The survey in 2000 included responses about exposure to violence from 5,483 women and the survey in 2005 responses from 2,979. Response rates were about 85%.

Shelter statistics

The Danish shelters are gathered under the National Organisation of Shelters for Battered Women and their Children (LOKK). Information regarding the shelters and LOKK can be found on the web page www.lokk.dk.

There are 45 shelters in Denmark that offer counselling and temporary accommodation to women who have been exposed to violence. An on-going survey collects information about the clients in 37 of the 45 shelters. The first one-page questionnaire is filled out on the first encounter at the shelter, and an additional 6-pages questionnaire is filled out if the woman chooses to stay at the shelter. The survey data is analysed by the Danish Centre for Research on Social Vulnerability. The latest annual report is available at the website www.lokk.dk.

The questionnaires are filled out with the woman's personal ID-number, however this is later encrypted, thus it is not possible to deduce the number of stay per woman. The first questionnaire contains questions regarding age, labour market association, marital status and nationality and whether the woman seeks accommodation in the shelter. The reason for encounter (violence or not) is not stated in this questionnaire. The 6-page questionnaire is completed when the woman chooses to stay at the shelter. It contains 36 questions at the onset and 24 at the end of the stay. Another 5 questions regard possible disabilities and are only filled out if the woman is disabled.

The precise number of women who contact the police and/or a hospital as well as the shelter is not known.

Centres for rape victims

Since late 1999, eight centres for rape victims have been established in Denmark. The centre in the State University Hospital in Copenhagen also functions as a national knowledge base, conducts education of health care professionals and performs research and communication of results regarding rape and sexual abuse.

The two largest centres, located in Copenhagen and Århus, collect information from clients by means of an ongoing survey. The questionnaires applied are standardised and comparable with the National Health and Morbidity Survey. Women contacting the centres following a rape or attempted rape are not registered in the usual administrative system of the hospital, and data can therefore not be derived from the National Patient Register.

Since 2001, the largest centres have published annual reports (www.voldtaegt.dk).

Register data

The Danish national health registers and other registers in Denmark Statistics cover the entire population. All data are registered on the personal identification number, and may be linked to by this number to data in other registers. For research purpose data are encrypted (the individual person is not identifiable) and use of data is submitted to special regulations.

Causes of Death Register

The Danish mortality statistics include all deaths occurring in Denmark among people with permanent residence in Denmark. The register information is collected from death certificates and comprises information on the means of death (disease, accident, suicide or violence), and the cause of death, that is, the disease or injury causing the death.

The Causes of Death Register in the National Board of Health covers the period from 1970 to 2006. All data are registered by the deceased's personal ID-number allowing for combination with other registers. The National Board of Health publishes the causes of death, categorised by the primary cause of death on an annual basis. In the case of violent deaths, the injuries leading to the death will appear, such as strangulation or head injuries. Also deaths caused by e.g. gunshots or sharp objects can be identified.

The number of deaths due to violence in the Causes of Death Register does not correspond exactly to the figures stated by the police. That is because the death certificate (forming the basis of the registration) is completed shortly after the death, where the decision regarding charges has not yet been made. In some cases of violent deaths, the charge will not be intended homicide but negligent homicide. The cause of death is violence in each case.

According to Danish law, all deaths due to external causes, i.e. deaths not caused by disease, must be reported to the police and an autopsy must be carried out.

National Patient Register

The National Patient register was established in 1977 as an administrative register, for the purpose of planning, monitoring and statistics. The register is organised by discharges and each discharge/patient has his/her own record.

All somatic discharges were included in the register from the onset. Since 2005, admissions in psychiatric wards are included. All information contains the personal ID-number of the patients. Since 1995, outpatient information has been a compulsory part of the registration. This includes ambulatory contacts as well as emergency department contacts. The register is updated monthly via electronic records from hospitals. The register is located in National Board of Health and the National Institute of Public Health have access to all information except the personal ID-numbers of patients.

The register contains administrative information, such as length of stay, age, etc., and clinical information such as diagnoses and procedures. In the field of violence, emergency department contacts due to violence can be identified according to the *reason for contact code*. When the patient is injured, due to an accident, violence or self-harm, the emergency department secretary records the *place of injury* (e.g. private residence), the *mechanism of injury* (blunt force, burn etc.), and the activity the patient was undertaking at the time of injury. The physician according to the WHO classification of diseases registers the actual injury.

The identification of emergency department contacts due to violence requires a precise registration of the reason for contact code. Thus it is a prerequisite for valid registration that the secretary obtain sufficient information from the patient about the circumstances leading to the injury. Another prerequisite is that the patient states that the reason for contact is violence. It is likely, that some secretaries fail to ask sufficient questions and it is also likely that some patients state a different reason for their injuries. The extent of such registration errors is not known.

The Crime register

Statistical information about criminal acts originates from the files of police records. The information is transferred to the police records register, which is administered by Statistics Denmark and the police collaboratively. Any changes in a police case e.g. change of charge, appearing during the investigation, is subsequently changed in the register via the regular update.

In relation to violence against women, the relevant sections of the penal code are: §237, homicide; §244 less severe violence; §245 more severe violence; § 246 severe violence, generally with permanent injury to the victim; and §§ 216 -217 regarding rape.

The source of the statistics presented in the presentation of the indicators is the police administrative system (POL-SAS), in function since 2001. POL-SAS combines information about the crime (section of the penal code), the perpetrator, (age and gender), and the victim (age and gender). The register contains the personal ID-number of victim and perpetrator. POL-SAS only concerns crimes of an interpersonal character, such as violence, rape and robbery. Crimes such as theft are thus not included. In addition detailed information about the crime and the perpetrator can be found in the police records register. Unfortunately, there is not a complete match between the two registers.

The crime register contains data regarding verdicts in cases of violation of the penal code. The information includes the violated section, the perpetrator and the verdict.

By linking register data using the personal ID-number, it is possible to reveal the relationship between victim and perpetrator, for example whether they have lived at the same address at some stage. Similarly, the victim statistics (of POL-SAS) can be combined with other registers in order to assess the social profile of victim and perpetrator. Finally, crime statistics can be combined with hospital information in order to analyse the number of victims having been in contact with both police and hospital due to violence.

Other registers administered by Statistics Denmark

Data in the Criminal Register were linked to data in other population based registers in Statistics Denmark. The Integrated Database for Work-related Research (IDA-database) contains a large number of socio-economic data about the entire Danish population. In the present report data about civil status, length of formal education, employment, household, number of children in the household, own and parents' birthplace and other data was included in the analyses that illuminate victims' and perpetrators' profiles.

Annex

The Seven EU-Indicators in Combating Domestic Violence.

Profile of female victims of violence

The number of victims according to criminal statistics

The number of victims according to surveys

The number of fatalities as a result of domestic violence

The proportion of domestic violence as a percentage of all violent crimes

Any other relevant statistical data concerning female victims and the existence of dependant children

Characteristics of the victim:

Relation of victim to the perpetrator

Age

Marital status

Citizenship

Any other relevant background information, e.g. educational background, labour status

Profile of male perpetrators

The number of perpetrators according to the criminal statistics

The number of perpetrators seeking assistance through official or voluntary programmes

The number of perpetrators according to surveys

Any other relevant statistical data; e.g. the number of perpetrators seeking assistance in the health system

Characteristics of the perpetrator

Relation of victim to the perpetrator

Age

Marital status

Citizenship

Any other relevant background information, e.g. educational background, labour status

Victim support

Counselling-centres

Emergency services

24-hours hotline

Women Crisis Centres

- Number of shelters per population

- Number of requests for shelter
- Number of refusals

Funding of centres

Guide on the available support

Special police-units/task forces

Legal advice for victims

Official information on the Internet

Support for victims to help re-enter the labour market

Health protocols concerning medical care and treatment

Co-ordination of the public support system

Special support services for vulnerable groups

Any other support measures

Measures addressing the male perpetrator to end the circle of violence

Counselling

Psychological/psychiatric treatment

Re-socialisation programmes during imprisonment

Male crisis centres

Any other measures

Training of professionals

Type of training

Target groups

State measures to eliminate domestic violence against women

Legislation and justice

Current status

Legislative changes within the last 5 years

Number of judgements

Number of convictions

Number of cases dismissed

Number of successful recourses to civil remedy

Any other measures

Surveys and projects

Projects initiated by the State within the last 5 years

Other projects initiated within the last 5 years

Policy

Strategy/Action Plan on VAW

Elements of an Action Plan

Awareness

Information campaigns aimed at the perpetrator

Information campaigns aimed at the victim

Information campaigns aimed at the professionals working with victims and/or perpetrators

General information campaigns

Other awareness activities

Budget

Evaluation

Progress made

Statistical changes in indicators

Progress-reports on measures taken

Any other measures to monitor progress

b. Lessons learned

References

Balvig F & Kyvsgaard B . Vold og overgreb mod kvinder. Dansk rapport vedrørende deltagelse i International Violence Against Women Survey (IVAWS). 2006a. København, Københavns Universitet; Justitsministeriets Forskningsenhed.
Ref Type: Report

Balvig F & Kyvsgaard B . Volden i Danmark 1995 og 2005. 2006b. København, Københavns Universitet; Det Kriminalpræventive Råd; Justitsministeriet; Rigspolicehøved.
Ref Type: Report

Christensen E, K.-N. I. Vold ude og hjemme (violence in and outside the home). 92:4. 1-1-1992. Socialforskningsinstituttet.
Ref Type: Report

Helweg-Larsen K. & Kruse M . Men's violence against women. The extent, characteristics and measures to eliminate violence. National Observatory on Violence against Women, National Institute of Public Health, and Minister for Gender Equality. 2004. Copenhagen.
Ref Type: Report