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Family Violence in Canada: A Statistical Profile 2003



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Family Violence in Canada:

A Statistical Profile 2003

Edited by Holly Johnson and Kathy Au Coin

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Note of appreciation

Canada owes the success of its statistical system to a long-standing partnership between Statistics Canada, the citizens of Canada, its businesses, governments and other institutions. Accurate and timely statistical information could not be produced without their continued cooperation and goodwill.

SYMBOLS

The following symbols are used in this report:

- . not available for any reference period
- .. not available for a specific reference period
- ... not applicable
- p preliminary
- r revised
- x suppressed to meet the confidentiality requirements of the Statistics Act
- E use with caution
- F too unreliable to be published

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HIGHLIGHTS

Chapter 1 - Spousal Violence

- One-quarter of all violent crimes reported to a sample of police services in 2001 involved cases of family violence. Two-thirds of these cases were violence committed by a spouse or ex-spouse and 85% of the victims were female.
- The rate of police reported incidents of spousal violence for both female and male victims increased over the six-year period 1995 to 2001. At the same time, victimization surveys suggest that victims may be more willing to report the police than in the past.
- Women aged 25 to 34 had the highest rates of spousal violence reported to the police in 2001.
- In 2001, 80% of all spousal violence cases were cleared by the police laying a charge. Accused persons were
 more likely to be charged in cases involving female victims (81%) than incidents involving male victims (69%).
- Firearm use in spousal violence resulted in 19 deaths in 2001, with 18 female victims and 1 male victim.
 Overall, the rate of firearm-related spousal homicides has declined over the period 1974 to 2001 for both female and male victims.
- While female spousal homicides overall were noticeably higher in 2001 than in 2000, male spousal homicide counts were up only slightly by 1 victim.
- In 2001, partners and ex-partners were implicated in almost half (47%) of all victims of criminal harassment offences reported to a subset of police agencies in Canada. Over half of female victims (53%) and slightly more than one-quarter (26%) of male victims were criminally harassed by a partner or ex-partner.

Chapter 2 - Family Violence Against Older Adults

- Older adults are the age group least likely to be victims of violent crime reported to police. The rate of reported violent crimes against seniors aged 65 and older in 2001 was 157 per 100,000, 14 times lower than the rate for 18 to 24 year olds (2,226 per 100,000) the age group with the highest rate of victimization reported to the police.
- Spousal homicides involving victims aged 65 and older tend to be characterized by the suicide of the accused
 in higher numbers than in cases involving younger couples: in 36% of older victims compared to 27% of younger
 victims. Nearly half (47%) of the accused in spousal homicides of older women took their own life.

Chapter 3 - Family Violence Against Children and Youth

- Children under the age of 18 represent 21% of the population and were victims in over 60% of all sexual offences and 20% of all physical assaults reported to the police.
- Parents represented 67% of family members accused of physical assault and 41% of those accused of sexual
 assault against children and youth in 2001. Siblings were more often the accused in sexual assault cases than
 in physical assaults (28% compared to 20%), as were extended family members (29% of sexual assault cases
 and in 8% of physical assaults).
- Of the 2,553 family-related sexual assaults reported to the police, girls were the victims in over 79% of cases.
 Rates of sexual assault for these girls were highest for young teenagers. Among boys, rates of sexual assault were highest for those aged 4 to 6.

Chapter 4 - Shelters for Abused Women and their Children

- In 2001/02, 101,248 women and dependent children were admitted to 483 shelters across Canada. In comparison, 96,359 women and their children were admitted to 448 shelters in 1999/2000 and 90,792 were admitted to 413 shelters in 1997/98.
- On April 15, 2002, 110 women and 64 children departed from 430 shelters across Canada. A minority of women, only 12%, returned to their spouse. One quarter (25%) left the shelter for alternate housing, 12% went to stay with friends or relatives, 8% returned home without their spouse, 19% went to other housing and for 25% of women it was not known where they were going to reside.

INTRODUCTION

This is the sixth annual Family Violence in Canada: A Statistical Profile report produced by the Canadian Centre for Justice Statistics under the Federal Family Violence Initiative. This annual report provides current data on the nature and extent of family violence in Canada, as well as trends over time, as part of this ongoing initiative to inform policy makers and the public about family violence issues.

Each year the report has a different focus. This year, the focus is on the response of the helping systems to victims and those accused of family violence, including responses of the police, courts and correctional systems and other helping agencies such as transition homes. The report also provides the most recent police-reported assault and homicide data on the prevalence of spousal violence, child abuse and abuse of older adults.

1.0 SPOUSAL VIOLENCE

by Julienne Patterson

Spousal violence in Canada is an important social issue with consequences for victims, their families and society. Statistics Canada's 1999 General Social Survey (GSS) shows that during the five years previous to the survey, 8% of women and 7% of men had experienced violence by a spousal partner (including common-law and marital partners). This represents an estimated 690,000 women and 550,000 men. For the purposes of the survey, spousal violence encompasses actions ranging from verbal threats to more serious forms of violence including physical and sexual assaults. Women reported more serious forms and more serious consequences than did men (see Pottie Bunge, 2000).

Canadians have responded to the multiple issues associated with spousal violence in a number of ways. Social systems have responded to the immediate needs of victims and their children for safety and support, and the abuser for treatment. At the same time, government and communities have planned and developed programs designed to address longer range needs through housing, counselling services and improvements to the response of the criminal justice system.

System responses to spousal violence play an integral role in the prevention, intervention, safety and security of victims, as well as addressing abusers through deterence and rehabilitation. Some forms of support have been available for some time. These include medical help, shelters and counselling services. Changes to policing protocols when dealing with family violence were initiated in 1983. More recent societal responses include specialized family violence courts and public awareness programs, as well as treatment programs for abusers in communities and inside correctional facilities (see Chapter 5 for a description of some of these initiatives).

1.1 The prevalence of spousal violence

The prevalence and incidence of spousal violence is monitored through several sources. These include yearly updates of police statistics and an in-depth homicide survey, as well as periodic victimization surveys such as Statistics Canada's 1999 General Social Survey (GSS) on Victimization.¹

Based on estimates from the 1999 GSS, the total number of victims of spousal violence over the 5 year period, prior to the survey, is estimated to be 1,239,000. Of these, only 27% or 338,000 spousal violence incidents were reported to police, either by the victim directly (71%), or by someone else (29%).

A higher proportion of female victims (37%) than male victims (15%) of spousal violence called on the police for help. Equally important, women were more likely than men to make the report themselves: 78% of all incidents of spousal violence involving female victims reported to police were reported by the female victims themselves; 50% of spousal violence incidents involving male victims were reported in the same manner.

In the 1999 GSS, victims who reported contacting the police themselves were asked how important the following reasons were in their decision to call the police:

- > to stop the violence or for protection
- felt it was their duty to notify the police
- to have their partner or ex-partner arrested or punished, and
- > being recommended to do so by someone else.

Of those who contacted the police themselves, a higher proportion of women (93%) than men (79%) called the police in efforts to stop the violence or for protection. Over half of female and male victims of spousal violence felt it was their duty to report the incident to police (55% and 58%). Women were more likely than men to report to the police in an effort to have their spouse arrested or punished (48% of female victims compared to 34% of male victims). On the recommendation of someone else, 31% of female victims and 27% of male victims reported the incident to police (Table 1.1).

The focus of this chapter is the nature and extent of spousal violence and the police response to incidents reported to them.

¹ The General Social Survey on victimization will be repeated next in 2004.

1.2 Police-reported spousal violence

The Canadian Centre for Justice Statistics collects data on spousal violence incidents from many police departments across the country. These data have been collected consistently each year since 1995 from a sub-group of police departments through the Revised Uniform Crime Reporting Survey (UCR2). Only a portion of police agencies in Canada supply UCR2 data to Statistics Canada, thus, the information provided by the survey is not nationally representative. However, the UCR2 is a valuable tool in providing a view on criminal events as reported to and recorded by the police.

The number of police agencies participating in UCR2 continues to grow each year. In 2001, 154 police departments participated in the UCR2 representing 59% of the national volume of crime in Canada in that year. For the purposes of this publication, Ontario Provincial Police rural divisions have been removed from UCR2. This is due to an absence of accurate population estimates for those areas which are needed to calculate rates. The remaining police forces used for this analysis represent 56% of the national volume of crime in 2001.

Majority of spousal violence victims are female

Based on UCR2, there were over 204,000 victimization incidents reported to these 154 police agencies in 2001 (see Table 1.2). This subset of victims of all violent crimes is composed of about 102,000 female and 102,000 male victims.

Violent crimes reported to police through the UCR2 include murder, attempted murder, sexual and physical assaults, threats, criminal harassment and other violent offences.

Relationships between the victim and accused can be grouped into three categories: violence by a friend or acquaintance, by a stranger, and violence by a family member. Nearly 40% of victims of violent crimes were victimized by a friend or acquaintance, including 37% of all female victims and 41% of all male victims. Strangers victimized 28% of the total number of victims of crime. Only 17% of all female victims were victimized by strangers, as compared to 39% of all male victims. The remaining 27% of violent crimes are accounted for by family members – 40% of all female victims of violent crime were the result of family violence compared to 12% of all male victims. Only 7% of violent crimes reported to police

involved situations where the relationship between the accused and victim was unknown.

Within this subset of family violence incidents reported to police in 2001, spousal violence is more prevalent than violence by other family members, particularly in reference to women. Spousal violence accounts for two-thirds of all family violence cases reported to this subset of police departments. Overall, women make up 85% of the victims of spousal violence, with over two-thirds of these women victimized by a current spouse.

Trends in spousal violence can only be tracked for those police departments that participated in the UCR2 survey consistently since 1995. This trend database currently includes 104 police departments representing 42% of the national volume of crime in 2001.

The rate of spousal violence cases recorded by this subset of police departments between 1995 and 2001 fluctuated but increased overall for women and men. Based on rates per 100,000 population aged 15 and older, there were 302 female victims of spousal abuse for every 100,000 women in the population in 1995, and this rate dropped to 270 in 1997. The rate of female spousal violence victims increased to 353 in 2000 and was 344 per 100,000 in 2001 (Figure 1.1).

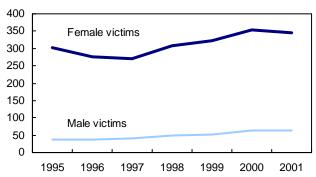
The trend in rates for male victims of spousal violence follows a different pattern. In 1995 and 1996, the rate of male victims of spousal violence remained constant at 37 men per 100,000 men in the population aged 15 and older. From 1996 to 2000, the rate almost doubled to 64 and stayed relatively unchanged at 62 male victims per 100,000 men in the population in 2001(Figure 1.1).

It is difficult to say with confidence whether this trend reflects actual changes in the incidence of spousal violence in Canadian society, the trends in these police jurisdictions only, or changes in the willingness of victims to report these crimes to the police. Comparisons between the 1993 Violence Against Women Survey and the 1999 GSS show that the percentage of female victims of spousal violence who reported to the police over the 5 years preceding each survey increased from 29% to 37%.²

² The same data are not available for men in 1993.

Figure 1.1 Trend in spousal violence incidents reported to police^{1,2,3}

Rate per 100,000 population aged 15 and older



- Data are not nationally representative. Based on data from 104 police departments representing 42% of the national volume of crime in 2001.
- ² Excludes cases where sex of victim and relationship of accused is unknown.
- ³ Spouse includes legally married, common-law, separated and divorced partners.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Trend Database.

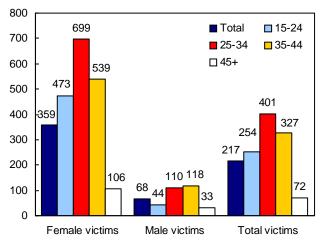
Women 25-34 have higher rates

A profile of the age of victims of spousal violence in 2001 is presented in Table 1.3 and Figure 1.2. Most of the victims in this sample, both male and female, are between the ages of 25 and 44. There is a ten percentage point gap between young female victims of spousal violence under 25 years of age and the same age group of males (21% compared to 11%). In contrast, 20% of male victims of spousal violence were aged 45 years and older, compared with 13% of female spousal violence victims.

Calculated as rates per 100,000 population in each age group, the highest rates of spousal violence were reported by women 25-34 years of age. This is different than patterns reported consistently by victimization surveys and homicide statistics, which show the youngest age group (15 to 24 year olds) at highest risk while rates decline for older women and men (see Pottie Bunge, 2000). One explanation for this lies with the populations used to calculate these rates of police-reported spousal violence. Rates of victimization and homicide typically are calculated on the basis of all adults in the population who are in a spousal relationship. In contrast, only total populations of women and men 15 years of age and over were available to calculate rates for the geographic areas matched to the UCR2 police departments. Consequently, the results

Figure 1.2 Rate of spousal violence reported to police highest for women aged 25-34, 2001^{1,2,3}

Rate per 100,000 population



- Data are not nationally representative. Based on data from 154 police departments, representing 56% of the national volume of crime in 2001.
- ² Excludes cases where sex of victim and relationship of accused is unknown.
- ³ Spouse includes legally married, common-law, separated and divorced partners. A small number of victims were under 15 years of age (45 female and 9 male) but rates were calculated on the basis of the population aged 15 years and older.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2).

of these calculations are not directly comparable to the other data sources.

Another contributing factor to the differences in rates of groups at highest risk is that younger victims are less likely to report to the police and therefore less likely to show up in police statistics. According to the 1999 GSS, 27% of female spousal violence victims under 25 reported to the police compared to 40% of women 25-44 years of age.³

Severity of spousal violence incidents

While female victims report more serious acts of spousal violence to victimization surveys when compared to male victims, incidents that are reported to police are equally likely to involve some level of injury for women and men. In 2001, 2% of both female and male victims of spousal violence either died or experienced a major injury requiring

³ Counts are too low for male victims to make the same comparison.

medical attention. According to police reports, almost half of female and male victims of spousal violence experienced minor injuries. Similar proportions from both sexes had no visible injuries.

The 1999 GSS, by contrast, indicates that female victims experience more serious assaults. Women reporting to this survey were three times more likely than men to be injured, five times more likely to receive medical attention or to be hospitalized, and five times more likely to fear for their lives. This survey also found that incidents involving injury were more likely to be reported to police than those not involving injury.

Physical force and threats most common forms of spousal violence

A variety of weapons have been used to intimidate or inflict physical injury in spousal violence incidents (see Table 1.4). The data capture only the most serious form of violence in each incident, and often, more than one form of violence occurs at a time. Physical force is used in the majority of incidents involving both female (72%) and male (64%) victims of spousal violence reported to police. Physical violence is often accompanied by verbal threats, but because the physical violence is deemed more serious, only it gets recorded when both are present. This situation may have resulted in some under-representation of the use of threats.

Threats were the most serious form of violence in 14% of cases reported to police in 2001, and were used more often against female victims than males (14% compared to 11%). Weapons, on the other hand, were used proportionally less often against females than against male victims (9% compared to 21%). Male victims most often had knives and other cutting instruments, blunt instruments and other types of weapons used against them. Firearms were rarely used against either women or men.

Common assault most frequent charge in spousal violence incidents

Common assault (level 1) is the charge most frequently laid by police against the accused (see Table 1.5). This is true for cases involving both female (65%) and male (62%) victims. Spouses of male victims are more likely to be charged with assault levels 2 and 3 than spouses of female victims. Assault level 2 is an assault with a weapon or causing bodily harm. Assault level 3 is defined as aggravated assault. Spouses of female victims are proportionately more likely than spouses of male victims to be charged with uttering threats or criminal harassment (For more on criminal harassment, see Section 1.3).

Charges laid in the majority of spousal violence cases

Pro-charging policies state that charges should be laid in spousal violence cases independent of the victim's wishes, thereby removing the responsibility for the decision from the victim and onto the police officer and the crown prosecutor. When charges are laid against a suspect, police consider it "cleared by charge." There are numerous ways of clearing an incident other than by laying a charge, including the death of either the complainant or the accused, the committal of the accused to a mental hospital, a request by the complainant that charges not be laid, admission of the accused into a diversionary program, or other situations beyond the control of the police department. In 2001, 13% of spousal violence cases were cleared otherwise (see Table 1.6).

In 2001, 80% of spousal violence cases were cleared by the laying of a charge. Accused persons were more likely to be charged in cases involving female victims (81%) than in incidents involving male victims (69%). Police were more likely to use their discretion not to lay charges at the request of male victims (14%), than female victims (7%).

1.3 Spousal homicide

In some cases, spousal violence escalates to homicide. In 59% of all spousal homicide cases between 1991 and 2001, police were aware of a history of domestic violence between the accused and victim.

In Canada, there has been an overall decline in spousal homicide rates since data collection began in 1974 (Table 1.7). At that time, the rate of females killed by a spouse or ex-spouse was 16.5 females per million couples. In 2000, this rate had dropped to 6.3, with 52 women killed by their spouse, and in 2001 the rate was 8.3 (69 in total). The rate of men killed by a spouse or ex-spouse was at its highest in 1975, at 5.9 men per million couples. By 1999 the rate had dropped to 1.4, but this rate has since increased to 2.1 in 2001, representing 17 men killed by their spouse.

Explanations for the overall decline in spousal homicides over the past 27 years centre on demographic and social changes. These include societal trends such as delayed marriage and child rearing, higher educational attainment for women, and improvements to women's economic status. Further explanations may be found in policy changes and programs implemented to respond to spousal

Using sanctions other than imprisonment or laying charges are examples of diversionary programs.

violence and provide safety for victims (see Pottie Bunge, 2002 for detailed analysis).

First degree murder charge, laid more often against male accused

Charges laid by police in spousal homicide cases can range from manslaughter to the most serious charge of first-degree murder. In the 10-year period 1991 to 2001, there were 933 persons charged with homicide involving a spouse. Of these, 54% were charged with 1st degree murder, 40% with 2nd degree murder, and only 6% were charged with manslaughter (see Table 1.8).

The type of charges laid differs according to the sex of the victim and the nature of the spousal relationship. First-degree murder charges were laid against 61% of the 735 cases where victims were female, twice as high as the proportion of cases with male victims (31%). Women were more likely than men to be charged with 2nd degree murder (55% of women and 36% of men) or manslaughter (14% of women and 4% of men). Homicides involving estranged marital partners were most likely and those involving common-law partners were least likely to result in 1st degree murder charges.

Use of firearms in spousal homicide

Firearms are used more frequently in homicides of female spouses than male spouses (see Table 1.7 and Figure 1.3). Since 1974, an average of 40% of all female victims of spousal homicides were killed with a firearm. For men, the percentage was smaller: 26%.

Rates of spousal homicide with firearms over the period 1974 to 2001 show declines for both female and male victims. Firearms resulted in 19 deaths in 2001, with 18 female victims and 1 male.

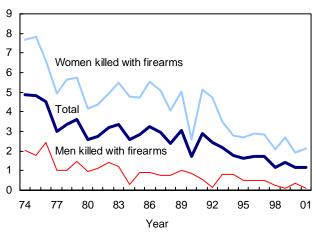
1.4 Criminal harassment

By Sara Beattie

With the passing of Bill C-126 in Canada in 1993, criminal harassement became a criminal offence. Section 264 of the *Criminal Code* defines criminal harassment as repeatedly following another person from place to place or repeatedly attempting to contact the person against their wishes (see text box: *The law on criminal harassment*). The legislation also encompasses behaviour such as watching or keeping watch over someone's home or place of business and making threats toward another person. In order for a person to be charged with criminal harassment, the victim must have reasonable cause to

Figure 1.3
Rates of spousal homicides using firearms declining 1974-2001

Rate per million couples



Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

fear for his or her safety or the safety of someone close to them and the perpetrator must know or be reckless as to whether the victim is fearful.

Prior to the enactment of this legislation, persons could have been charged with related crimes such as: threatening to cause death or serious bodily harm (s. 264.1); making harassing phone calls (s. 372); intimidation (s. 423); mischief (s. 430); trespassing at night (s. 177); and breach of recognizance (s. 811). The anti-stalking provisions that came into force in 1993 were intended to protect victims of stalking, particularly those involving intimate partners, before an assault or other act of violence was committed and to deter stalkers from engaging in threatening behaviour. Although criminal harassment is not a gender specific law, it was introduced as a response to violence against women, particularly in the context of domestic violence (Department of Justice, 1999). Under this legislation, criminal harassment is a hybrid offence⁵ with a maximum penalty of 10 years imprisonment on indictment.

A hybrid offence may be processed as a summary or indictable offence. Indictable offences require a more formal set of procedural rules and preliminary hearings and proceedings be followed (such as providing the accused the option of trial by judge or jury). A summary procedure follows simple more expeditious procedures set out in the Criminal Code. Except where otherwise stated by law, the maximum penalty for a summary conviction is a fine not exceeding \$2,000 or imprisonment for a maximum of 6 months or both.

The law on criminal harassment

Criminal Code of Canada, s. 264

- (1) No person shall, without lawful authority and knowing that another person is harassed or reckless as to whether the other person is harassed, engage in conduct referred to in subsection (2) that causes that other person reasonably, in all the circumstances, to fear for their safety or the safety of anyone known to them.
- (2) The conduct mentioned in subsection (1) consists of:
 - (a) repeatedly following from place to place the other person or anyone known to them;
 - (b) repeatedly communicating with, either directly or indirectly, the other person or anyone known to them;
 - (c) besetting or watching the dwelling-house, or place where the other person, or anyone known to them, resides, works, carries on business or happens to be; or
 - (d) engaging in threatening conduct directed at the other person or any member of their family

- (3) Every person who contravenes this section is guilty of
 - (a) an indictable offence and is liable to imprisonment for a term not exceeding ten years; or
 - (b) an offence punishable on summary conviction
- (4) Where a person is convicted of an offence under this section, the court imposing the sentence on the person shall consider as an aggravating factor that, at the time of the offence was committed, the person contravened
 - (a) the terms or conditions of an order made pursuant to section 161 or a recognizance entered into pursuant to section 810, 810.1 or 810.2; or
 - (b) the terms or conditions of any other order or recognizance made or entered into under the common law or a provision of this or any other Act of Parliament or of a province that is similar in effect to an order or recognizance referred to in paragraph (a)
- (5) Where the court is satisfied of the existence of an aggravating factor referred to in subsection (4), but decides not to give effect to it for sentencing purposes, the court shall give reasons for its decision.

Proclaimed Criminal Code Amendments: Key Milestones

- A 1996 amendment (included in Bill C-68) prohibits a person accused of criminal harassment from possessing firearms, ammunition or explosive substances if the accused is considered, at a bail hearing, to be a potential danger (s. 515 (4.1)).
- A 1997 amendment (included in Bill C-27) states that when a person is convicted of stalking while under a restraining order, the presence of this restraining order shall be considered as an aggravating factor in sentencing (s. 264 (2)). Murder committed during the commission of a stalking act could result in a first-degree murder conviction where the murderer intended to instill fear for the victim's safety (s. 231 (6)).
- A 2002 amendment (included in Bill C-15A) increases the maximum penalty for criminal harassment from five to ten years.

Source: Department of Justice Canada, 1999

Prevalence of criminal harassment

The best estimates of the prevalence of criminal harassment at the present time in Canada are available through the Incident-based Uniform Crime Reporting (UCR2) Survey with 154 police agencies participating, representing 59% of the national volume of reported crime in 2001. According to the UCR2 in 2001, there were 7,610 *incidents* of criminal harassment reported to the police,

involving 5,258 accused and 8,023 victims. Counts of criminal harassment incidents, accused and victims are based on cases where the most serious violation was criminal harassment and it does not include incidents where criminal harassment was present in conjunction with another more serious violent act. As a result, criminal harassment incidents may be undercounted.

Women at greatest risk of criminal harassment

Overall, women are at a greater risk of being a victim of criminal harassment compared to men across every age group and victim-offender relationship. The overall rate of women reporting criminal harassment in 2001 was more than 3 times higher than for men (76 per 100,000 women in the population 15 years of age and older compared to 22 per 100,000 men).

Almost half of criminal harassment victims harassed by a partner⁶

In 2001, partners represented almost half (47%) of all victims of criminal harassment offences reported to a sample of police agencies in Canada. In recent years the media have focused on a number of high profile cases of homicide involving women separating from male partners.

For the purpose of this analysis, partner includes current spouses, exspouses, and "close friends", including current or ex long-term and/or close (intimate) relationships. A small proportion may be close friends and not intimate partners.

some of which were preceded by criminal harassment. This analysis will focus on incidents of criminal harassment by partners in order to better understand these events.

Most victims of criminal harassment know their accused well, and often the victim and accused are in an intimate relationship or had a previous intimate relationship. Over half of female victims (53%) were criminally harassed by partners and 29% by acquaintances (Table 1.9). The percentages were reversed for men, almost half of whom were criminally harassed by acquaintances (48%) and slightly more than one quarter by a partner (26%). Within partner episodes in 2001, women represented the vast majority of victims (88% compared to 12% of men). Of all partner criminal harassment victims, women and men were most likely to be criminally harassed by an ex-spouse (55% and 49%) or other partner (39% and 47%). In a small percentage of cases, the harassment began while the couple was in an intact marriage (6% of women and 4% of men).

Women aged 25-34 have highest rates of partner criminal harassment

According to the UCR2, risk of criminal harassment by a partner peaks for women aged 25-34 (77 women per 100,000 population) followed by young women aged 15-24 (66 women per 100,000 population). Men aged 25-44 reported the highest rates at about 10 men per 100,000 population (Figure 1.4).

Victims often criminally harassed in their own home

Over three-quarters of criminal harassment incidents by partners take place in or around a private residence (79%) as compared to (62%) of other types of criminal harassment incidents. The large majority of these incidents occur in or around the victim's home (87%). Women and men were criminally harassed in a private residence in similar proportions (79% vs. 77%). A smaller percentage of women and men were criminally harassed in commercial/corporate places (9% and 13%), and public areas (12% and 10%).

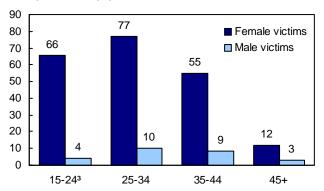
Most partners accused of criminal harassment are male

Males accounted for 90% of all those accused of criminal harassment involving partners in 2001. In 2001 (based on the population for the areas covered by the 154 police forces), 25 in every 100,000 men and 3 in every 100,000 women were accused of criminal harassement of a partner.

Among police-reported incidents of partner criminal harassment in 2001, over half (55%) resulted in charges

Figure 1.4
Rates of partner criminal harassment highest for women 25-34, 2001^{1,2}

Rate per 100,000 population



Age of victim

- 1 For the purpose of this analysis partner includes spouses, ex-spouses, and "close friends", the majority of whom are opposite sex relationships. A small proportion may be close friends and not intimate partners.
- ² Data are not nationally representative. Based on a sample of 154 police services, representing 56% of the national volume of crime in 2001.
- ³ A small number of victims (13 female and 1 male) were under 15 years of age but rates were calculated on the basis of the female and male population aged 15 years and older matched to geographic areas covered by these police services.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting

being laid by the police though this is lower than in cases involving all spousal violence (80%). Similar to spousal violence overall, charges of partner criminal harassment were more likely to be laid in cases involving female victims (57%) as compared to male victims (39%). One in six (16%) incidents resulted in the police not laying charges at the request of the victim. Male victims (27%) were more likely to request charges not be laid against the perpetrator than were female victims (15%). The police using departmental discretion chose not to lay charges for 7% of victims. The incident was cleared otherwise for 7% of victims, and for the remaining 17% of victims the incident was not cleared.

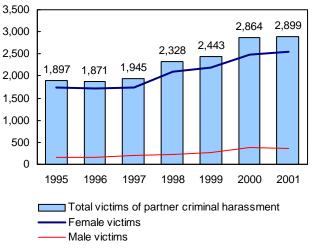
Trends in criminal harassment by partners

Trends in partner criminal harassment are based on a subset of 104 police departments that have participated in the Incident-based Uniform Crime Reporting (UCR2) Survey consistently since 1995, accounting for 42% of the national volume of crime in 2001. The number of

victims criminally harassed by a partner that came to the attention of this subset of police forces increased by 53% between 1995 and 2001, from 1,897 victims to 2,899 (Figure 1.5). While victims of criminal harassment continue to be predominantly female, there has been an increase in the proportion of male victims (8% to 12%) since 1995. It is difficult to say for certain whether the overall increase in criminal harassment reflects an actual rise in these types of incidents or an increased willingness of victims to involve the police.

Figure 1.5 Criminal harassment of partners on the rise, 1995-2001^{1,2}

Number of incidents



Data are not nationally representative. Based on data from 104 police departments representing 42% of the national volume of crime in 2001.

- 1 For the purpose of this analysis partner includes spouses, ex-spouses, and "close friends", the majority of whom are opposite sex relationships. A small proportion may be close friends and not intimate partners.
- ² Includes victims aged 12 to 89. Excludes cases where no accused was identified in connection with the case.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Trend Database.

Homicides involving criminal harassment

Studies have demonstrated that criminal harassment has the potential to progress to more serious crimes, and in some cases leads to homicide. Recent studies in Canada, the U.S., and the U.K. have found a strong association between criminal harassment and intimate partner violence (Hotton, 2001; Mechanic et al., 2000; Tjaden & Thonnes, 1998). Drawing on data from the 1996 National Violence Against Women Survey, Tjaden and Thonnes (1998) report that the vast majority (81%) of women in

the U.S. who were stalked by intimate partners were also physically assaulted by the same partner. Of those women who reported being stalked by a former partner, 21% said that the stalking occurred before the relationship had ended, 36% said that it occurred both before and after, and in the remaining 43%, stalking occurred once the relationship had ended.

McFarlane and her colleagues (1999) found a high correlation between violence and stalking for female homicide and attempted homicide victims in the United States. In their sample of women in an 11-city study who were killed or who survived a homicide attempt by their intimate partner, 76% of homicide victims and 85% of attempted homicide victims experienced at least one incident of stalking within one year of the violent incident. They also report that rates of stalking were higher for former intimate partners (88%) than for current partners (63%).

According to Statistic Canada's Homicide Survey,⁷ there were 109 women and 12 men killed by estranged partners from 1997 to 2001. Almost one in five women (17%) were known to have been criminally harassed by their estranged partners prior to being killed. There were no males known to have been criminally harassed and killed by estranged partners during this time period.

1.5 Use of informal and formal support systems

In response to spousal violence, protocols and programs have been developed by community groups and by governments to meet the needs of victims. These responses include formal services provided through crisis centres, community and family service centres, shelters, and counselling services. Other forms of help are available on a less formal basis, including talking to a priest, minister or spiritual advisor, or a doctor, seeking legal advice, and confiding in family members or friends about the violence. Once the legal system becomes involved through police action, many jurisdictions have police and court-based victim services available.

Most spousal violence victims seek support

Victims of spousal violence are more likely to call on informal networks of support than to use formal support agencies. According to the 1999 General Social Survey, during the five years preceding the survey, 81% of female victims and 56% of male victims of spousal violence reported confiding in someone close to them. For women,

Statistics Canada collects detailed information from each police force in Canada on homicides in their jurisdictions. Data collection on criminal harassment as a precipitating crime began in 1997.

the most favoured confidant was a family member, friend or neighbour (65%). Least favoured was a minister, priest or other spiritual advisor. Only 16% of female victims did not confide in anyone close to them about their experience (Table 1.10).

A much larger percentage of male victims, 41%, chose not to confide in anyone close. Like female victims, male victims of spousal violence confide in other family members (40%) or a friend or neighbour (39%). Least favoured by male victims was also confiding in a minister, priest or other spiritual advisor.

Co-workers, doctors and nurses and lawyers were contacted for support by between one-fifth and one-third of women and by smaller proportions of men.

A similar pattern is found when considering social support agencies. However, these agencies were contacted for help less often than friends or other informal supports. Male victims of spousal violence (17% in total) were less likely to seek help from formal social agencies than female victims (48%). Men were more likely to contact a counsellor or psychologist than a men's centre or support group, or a crisis centre or crisis line. Similar to men, women were also more likely to speak with a counsellor or psychologist than to use crisis centres or crisis lines, access a shelter, or use a women's centre or community or family centre.

Reluctance to disclose spousal violence to a formal agency may be grounded in several reasons: fear of complications linked to involvement in the justice system, concerns about losing custody of children if child welfare agencies become involved, fear of reprisal from the violent spouse for seeking help, not knowing what services are available and, for male victims, a lack of availability of services. Seeking help is also linked to the severity of the violence, which may help explain the higher rates of help-seeking on the part of female victims. For others, the trauma resulting from victimization may create feelings of powerlessness and an inability to seek help (Johnson, 1996).

Reasons for not calling police differ for female and male victims

The very personal and private nature of spousal violence, along with the mixed feelings brought about by the experience, is reflected in the variety of reasons victims gave for not calling the police.

The most common reasons given by both women and men for not calling the police for help in dealing with spousal violence were that the incident was dealt with another way, (61% and 67%, respectively) and that it was a personal matter that did not concern the police (54% of women and 75% of men).⁸ Half of all victims did not want to get involved with the police (47% of women and 50% of men). Many women also said they did not involve the police because of fear of reprisals from their partner (34%).⁹ Fear of reprisals was particularly important when deciding not to involve the police for women who experienced violence following marital separation (45%).¹⁰

1.6 System responses, policies, legislation and services for victims and offenders

The Final Report of the Ad Hoc Federal-Provincial-Territorial Working Group Reviewing Spousal Abuse Policies and Legislation (April, 2003) reviewed the implementation and status of the various policies, legislation and programs developed across Canada to respond to spousal abuse. According to the Working Group, the justice system needs to respond to the occurrence of spousal violence with three key objectives in mind: criminalizing spousal abuse; promoting the safety and security of the victim; and maintaining confidence in the administration of justice (p.v).

Pro-charging policies, implemented in all Canadian jurisdictions by the mid 1980's, form a cornerstone of the criminal justice response to spousal violence. These policies state that charges should be laid in spousal violence cases where there are reasonable and probable grounds to believe that an offence has been committed, regardless of whether the victim wishes to lay charges. Pro-prosecution policies require prosecutors to prosecute spousal violence incidents where the legal test is met independent of the victim's wishes. While these polices apply the same standard as is applied to all criminal conduct, they are intended to reinforce that spousal violence should be treated as a "criminal" and not a "private" matter.

The objectives of the pro-charging policies, as cited by the Working Group (p. 11) are to:

- remove responsibility for the decision to lay charges from the victim;
- increase the number of charges laid in reported spousal abuse cases;
- increase the reporting of incidents; and
- reduce re-offending

⁸ Percentages do not add to 100% due to multiple responses.

The number of men is too small to produce a statistically reliable estimate.

¹⁰ See Hotton (2001) for more on post-separation violence.

According to the Working Group, pro-charge policies have helped to strengthen the criminal justice system response to spousal violence and are supported by the majority of victims (p.vi).

The objectives of pro-prosecution policies (in place in many Canadian jurisdictions) are to:

- promote more rigorous prosecution of spousal abuse cases;
- reduce the number of withdrawal and stays of charges;
- · promote victim co-operation in the prosecution and
- reduce re-offending.

The Working Group found that properly interpreted and applied, pro-charge and pro-prosecution policies can have a positive impact in strengthening the criminal justice system response to spousal abuse (p. vi).

The criminal justice system response to spousal violence has been enhanced by a range of services, including services and support for victims, treatment for offenders, multi-agency coordinating committees, specialized domestic violence courts, and civil domestic violence legislation (see Chapter 5 and the Working Group report for details).

Elements of an effective response include, but are not limited to, the following:

- development of protocols for intervention
- intervention as soon as possible
- emergency access to a safe place
- · access and referral to a continuum of services
- clarity of roles
- offender accountability
- links between abusive partner programs and services offered to victims
- monitoring to ensure compliance with mandated treatment programs
- · ongoing training for service providers
- collaboration and co-ordination among all agencies providing services

An example of a system response which attempts to increase knowledge and awareness of domestic abuse amongst front-line professionals is detailed below.

Care and Assessment of Women in Abusive Relationships Workshop

At Queen's University, a group of professors from the Faculties of Health Sciences and Law have jointly developed and implemented an innovative team teaching workshop addressing the care and assessment of women in violent spousal relationships. The main objective of the workshop is to create learning through collaborative teamwork and integration of services that may seem unrelated at times. A secondary objective is to develop a forum that facilitates the study of sensitive issues, in this case domestic abuse, in order for the students to develop a best practice plan for their own communities in the future.

These workshops, conducted annually since 1998, have evolved out of an identified need for gateway professionals to become educated in the issues of domestic violence. Participation in the workshops by upper year medical and law students increases their awareness of the signs and symptoms of spousal violence. This helps better prepare the future professionals to identify the presence of spousal violence in the lives of their clients and patients, and provide appropriate care and service. Over the past 5 years, approximately 550 students have participated in the workshops.

Workshop organizers, presenters, and facilitators are drawn from both the academic and front-line service provider communities to provide an integrative, collaborative information day including lectures, video presentations, small group and panel discussions.

¹ Tan, A. Eastabrook, S., Edmonds, E., Pentland., and Bala, N. "A Multi-disciplinary Team Approach to Domestic Violence Education for Students in Diverse Professions of Health Sciences and Law." Faculty of Health Sciences and Faculty of Law, Queen's University.

Table 1.1

Reporting to police and reasons given by spousal violence victims for calling police, past 5 years¹

Departing and research		Sex of victim								
Reporting and reasons	Total		Fem	nale	Male					
	No. (000)	%	No. (000)	%	No. (000)	%				
Total victims of spousal violence	1,239	100	690	100	549	100				
Total spousal violence reported to police	338	27	256	37	82	15				
Reported to police by someone else	97	29	57	22	41	50				
Reported to police by victim	240	71	199	78	41	50				
Reasons given for self-reporting spousal violence to police										
To stop the violence or for protection	217	90	185	93	32	79				
Felt it was their duty to notify police	133	55	109	55	24	58 ^E				
To arrest or punish current or ex-partner	109	45	95	48	14	34 ^E				
Recommended to do so by someone else	72	30	61	31	11	27 ^E				

Respondents aged 15 years or older who have experienced violence from a current or ex-partner. Data refer to the 5 years prior to 1999.
use with caution

Note: Percentages exceed 100% due to multiple responses. Source: Statistics Canada, General Social Survey, 1999.

Table 1.2 Victims of violent crime reported to a subset of police departments by sex of victim and relationship to accused, 2001 1,2,3

	Sex of victim								
Relationship of accused to victim	Total		Fema	ile	Male				
	No.	%	No.	%	No.	%			
Total	204,262	100	101,926	100	102,336	100			
Total family members	54,691	27	41,243	40	13,448	13			
Total spouse	34,609	17	29,263	29	5,346	5			
Spouse ⁴	23,409	11	19,881	20	3,528	3			
Ex-spouse	11,200	5	9,382	9	1,818	2			
Total other family	20,082	10	11,980	12	8,102	8			
Parent ⁵	6,924	3	4,058	4	2,866	3			
Child ⁵	4,066	2	2,705	3	1,361	1			
Sibling ⁶	5,537	3	3,195	3	2,342	2			
Extended family ⁷	3,555	2	2,022	2	1,533	1			
Total friends/acquaintances	80,039	39	38,036	37	42,003	41			
Close friend	17,398	9	12,948	13	4,450	4			
Business relationship	15,487	8	5,656	6	9,831	10			
Casual relationship	47,154	23	19,432	19	27,722	27			
Stranger	56,117	27	17,481	17	38,636	38			
Unknown ⁸	13,415	7	5,166	5	8,249	8			

¹ Excludes cases where sex of victim was unknown.

Note: Percentages may not total 100% due to rounding.

Data are not nationally representative. Based on data from 154 police departments representing 56% of the national volume of crime in 2001.

³ Violent crime includes violations causing death, attempting the commission of a capital crime, sexual assaults, assaults, violations resulting in the deprivation of freedom and other violations involving violence or the threat of violence.

Spouse includes legally married and common-law partners, separated and divorced also.

Includes some cases where age or the relationship between the accused and the victim may have been miscoded.

⁶ Sibling includes natural, step, half, foster or adopted brother or sister.

⁷ Extended family includes others related to the victim either by blood or by marriage, e.g. aunts, uncles, cousins and in-laws.

Unknown includes cases where the relationship between the victim and the accused is unknown.

Table 1.3 Number and rate of spousal violence reported to a subset of police departments by age of victim, 2001^{1,2,3}

A				S	sex of victim				
Age groups		Total			Female			Male	
	No.	%	Rate per 100,000	No.	%	Rate per 100,000	No.	%	Rate per 100,000
Total	34,609	100	217	29,263	100	359	5,346	100	68
Under 25	6,649	19	254	6,055	21	473	594	11	44
25 to 34	11,779	34	401	10,140	35	699	1,639	31	110
35 to 44	11,147	32	327	9,120	31	539	2,027	38	118
45 and older	5,034	15	72	3,948	13	106	1,086	20	33

¹ Rates based on population aged 15 and older.

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 1.4 Type of weapon used in spousal violence incidents reported to a subset of police departments, 2001^{1,2,3,4}

Time of weepen		Sex of victim								
Type of weapon	Total		Fem	nale	Male					
	No.	%	No.	%	No.	%				
Total	29,894	100	25,326	100	4,568	100				
Physical force	21,093	71	18,172	72	2,921	64				
Threat	4,071	14	3,581	14	490	11				
Unknown or no weapon ⁵	1,413	5	1,215	5	198	4				
Weapons	3,317	11	2,358	9	959	21				
Knife, other cutting, piercing instrument	1,288	4	850	3	438	10				
Club/blunt instrument	741	2	527	2	214	5				
Automatic weapons, and long guns	100	0	92	0	8	0				
Handguns	59	0	57	0	2	0				
Other weapons ⁶	1,129	4	832	3	297	6				

¹ Excludes Toronto and cases in which sex of the victim and relationship to accused was unknown.

² Data are not nationally representative. Based on a sample of 154 police departments, representing 56% of the national volume of crime in 2001.

³ Spousal violence refers to violence committed by legally married, common-law, separated and divorced partners.

² Data are not nationally representative. Based on data from 153 police departments, representing 49% of the national volume of crime.

³ Due to data quality issues that result in physical force being coded as "other", Toronto is excluded from the analysis on methods of violence.

⁴ Spousal violence refers to violence committed by legally married, common-law, separated and divorced partners.

⁵ The weapon used was not known, or no weapon was found at the incident.

⁶ Other weapon includes any instrument used as a weapon that does not fit into the other categories, such as explosives and any device used to garrote, poison or whip.
Note: Percentages may not total 100% due to rounding.

Table 1.5 Type of charge laid by victim's sex in spousal violence cases reported to a subset of police departments, 2001^{1,2,3}

T			Sex of	victim		
Type of charge	Total		Fem	ale	Male	
	No.	%	No.	%	No.	%
Total	34,609	100	29,263	100	5,346	100
Common assault	22,269	64	18,932	65	3,337	62
Assault levels 2 and 3	4,456	13	3,319	11	1,137	21
Uttering threats	4,371	13	3,803	13	568	11
Criminal harassment	2,262	7	2,025	7	237	4
Other violent offences ⁴	1,251	4	1,184	4	67	1

Excludes cases in which the sex of the victim was unknown.

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 1.6 Incident clearance status of spousal violence cases reported to a subset of police departments, 2001^{1,2}

			Sex of	victim		
Incident clearance status	Tota	Total		ale	Male	
	No.	%	No.	%	No.	%
Total spousal violence cases	34,609	100	29,263	100	5,346	100
Not cleared ³	2,391	7	1,919	6	472	9
Cleared by charge	27,566	80	23,863	81	3,703	69
Cleared otherwise - total	4,652	13	3,481	12	1,171	22
Complainant requests charges not be laid	2,783	8	2,045	7	738	14
Departmental discretion	838	2	623	2	215	4
Other ⁴	1,031	3	813	3	218	4

Data are not nationally representative. Based on a sample of 154 police departments, representing 56% of the national volume of crime in 2001.

Note: Percentages may not total 100% due to rounding.

Data are not nationally representative. Based on a sample of 154 police departments, representing 56% of the national volume of crime in 2001. Spousal violence refers to violence committed by legally married, common-law, separated and divorced partners.

Other violent offences include sexual assault, discharging a firearm with intent to cause bodily harm, kidnapping, hostage-taking, robbery, extortion, homicide and attempted homicide, criminal negligence and other offences causing death, unlawfully causing bodily harm and other assaults.

Spousal violence refers to violence committed by legally married, common-law, separated and divorced partners.

[&]quot;Not cleared" refers to cases where an accused has not been identified in connection with the incident.

Other includes suicide of accused, death of accused, death of the complainant, reasons beyond the control of the department, diplomatic immunity, accused is less than 12 years old, committal of the accused to a mental hospital, accused is involved in other incidents, accused is already sentenced, and admittance into a diversionary program.

Table 1.7 Spousal homicides and use of firearms, 1974-2001^{1,2}

		Female v	ictims		Male victims				
Year	Total female spousal homicides	Rate per million couples	Female spousal homicide with firearms	Rate per million couples	Total male spousal homicides	Rate per million couples	Male spousal homicide with firearms	Rate per millior couples	
1974	90	16.5	42	7.7	24	4.4	11	2.0	
1975	91	16.2	44	7.8	33	5.9	10	1.8	
1976	83	14.4	38	6.6	27	4.7	14	2.5	
1977	80	13.6	29	4.9	29	5.0	6	1.0	
1978	78	13.0	34	5.7	23	3.9	6	1.0	
1979	90	14.7	35	5.7	22	3.7	9	1.5	
1980	61	9.8	26	4.2	17	2.8	6	1.0	
1981	82	12.9	28	4.4	27	4.3	7	1.1	
1982	76	11.7	32	4.9	22	3.5	9	1.4	
1983	83	12.6	36	5.5	27	4.2	8	1.2	
1984	63	9.4	32	4.8	17	2.6	2	0.3	
1985 ^r	86	12.7	32	4.7	26	3.9	6	0.9	
1986	70	10.2	38	5.5	19	2.8	6	0.9	
1987	79	11.5	35	5.1	34	5.0	5	0.7	
1988	72	10.4	28	4.1	21	3.1	5	0.7	
1989	76	10.9	35	5.0	22	3.2	7	1.0	
1990	74	10.6	18	2.6	26	3.8	6	0.9	
1991	87	12.4	36	5.1	25	3.6	4	0.6	
1992	87	12.1	34	4.7	18	2.6	1	0.1	
1993	63	8.5	26	3.5	24	3.3	6	8.0	
1994	66	8.7	21	2.8	20	2.7	6	8.0	
1995	71	9.2	21	2.7	21	2.8	4	0.5	
1996	63	7.9	23	2.9	19	2.5	4	0.5	
1997	63	7.9	23	2.9	14	1.8	4	0.5	
1998	57	7.0	17	2.1	13	1.7	2	0.3	
1999	60	7.3	22	2.7	11	1.4	1	0.1	
2000 ^r	52	6.3	16	1.9	16	2.0	3	0.4	
2001	69	8.3	18	2.2	17	2.1	1	0.1	
Total/Average rate Percentage	2072 100	11.0	819 40	4.4	614 100	3.3	159 26	0.9	

revised

Rates are based on population estimates per 1,000,000 couples, including married, common-law, separated and divorced women and men. CANSIM II, Demography Division, February, 2003.

Spousal refers to legally married, common-law, separated, divorced or ex-spouse.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Table 1.8 Charges laid in spousal homicides, 1991-2001

		Charges laid against accused ¹									
Relationship of accused to victim	To	Total		1st degree murder		ee murder	Manslaughter				
	No.	%	No.	%	No.	%	No.	%			
Total spousal homicides	933	100	508	54	370	40	55	6			
Married	345	100	203	59	127	37	15	4			
Common-law	364	100	134	37	193	53	37	10			
Separated	203	100	153	75	48	24	2	1			
Divorced	16	100	16	100	0	0	0	0			
Same sex partner	5	100	2	40	2	40	1	20			
Total female victims	735	100	447	61	261	36	27	4			
Married	283	100	176	62	101	36	6	2			
Common-law	252	100	114	45	117	46	21	8			
Separated	182	100	140	77	42	23	0	0			
Divorced	16	100	16	100	0	0	0	0			
Same sex partner	2	100	1	50	1	50	0	0			
Total male victims	198	100	61	31	109	55	28	14			
Married	62	100	27	44	26	42	9	15			
Common-law	112	100	20	18	76	68	16	14			
Separated	21	100	13	62	6	29	2	10			
Divorced	0	0	0	0	0	0	0	0			
Same sex partner	3	67	1	33	1	33	0	0			

Represents charges laid at the time of the initial investigation and does not include revisions following court appearance or conviction.
Notes: Excludes cases where sex of victim was unknown.
Homicide numbers for 1999 and 2001 are revised.

Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Table 1.9 Criminal harassment reported to a subset of police departments by sex of victim and relationship to accused, 2001^{1,2}

	Sex of victim								
Relationship of accused to victim	Tota	al	Fen	nale	Male				
Total victims	No. 8,023	% 100	No. 6,271	% 100	No. 1,752	% 100			
Total partner ³	3,786	47	3,335	53	451	26			
Spouse ⁴	223	3	207	3	16	1			
Ex-spouse	2,039	25	1,818	29	221	13			
Other partner ⁵	1,524	19	1,310	21	214	12			
Other family	356	4	222	4	134	8			
Parent	98	1	65	1	33	2			
Child	58	1	33	1	25	1			
Sibling ⁶	119	1	72	1	47	3			
Extended family ⁷	81	1	52	1	29	2			
Total acquaintances	2,653	33	1,804	29	849	48			
Business relationship	530	7	364	6	166	9			
Casual acquaintance	2,123	26	1,440	23	683	39			
Stranger	746	9	563	9	183	10			
Unknown ⁸	482	6	347	6	135	8			

Excludes cases where sex of victim was unknown.

Note: Percentages may not add up to 100% due to number rounding.

Data are not nationally representative. Based on a sample of 154 police services, representing 56% of the national volume of crime. For the purpose of this analysis total partner includes spouses, ex-spouse, and other intimate partners.

Spouse includes legally married and common-law partners.

Other partners is derived from the UCR2 category "close friends", the majority of whom are opposite sex relationships. A small proportion may be close friends and not intimate

Sibling includes natural, step, half, foster or adopted brother or sister.

Extended family includes others related to the victim either by blood or by marriage, e.g. aunts, uncles, cousins and in-laws.

Unknown includes cases where the relationship between the victim and the accused is unknown.

Table 1.10 Use of informal and formal services by victims of spousal violence, previous 5 years

Two of conden			Sex of	victim			
Type of service	Tota	al	Fem	nale	Male		
	No. (000)	%	No. (000)	%	No. (000)	%	
Total victims of spousal violence	1,239	100	690	100	549	100	
Informal support							
Confided in someone close to them	869	70	560	81	309	56	
Family members	665	54	445	65	220	40	
Friend, neighbour	663	54	451	65	212	39	
Co-worker	290	23	185	27	105	19	
Doctor or nurse	270	22	212	31	58	11	
Lawyer	218	18	160	23	58	11	
Minister, priest, clergy or other spiritual advisor	109	9	76	11	33	6 ^E	
Did not confide in someone close to them	333	27	110	16	223	41	
Don't know/refused	37	3 ^E	19	3 ^E	18	3 ^E	
Formal support							
Used a social service agency	425	34	334	48	91	17	
Crisis centre or crisis line	128	10	116	17	12	2 ^E	
Counsellor or psychologist	343	28	261	38	82	15	
Community centre or family centre	123	10	103	15	20	4 ^E	
Shelter or transition home ¹	73	11	73	11			
Women's centre ¹	74	11	74	11			
Men's centre or support group ²	12	2 ^E			12	2 ^E	
Police-based or court-based victim services	42	3 ^E	40	6	F	F	
Did not use a social service agency	774	62	334	48	440	80	
Don't know/refused	40	3 ^E	22	3 ^E	18	3 ^E	

... not applicable

E use with caution
F too unreliable to be published

Only asked of women.

Only asked of men.

Note: Totals exceed 100% due to multiple responses.

Source: Statistics Canada, General Social Survey, 1999.

2.0 FAMILY VIOLENCE AGAINST OLDER ADULTS¹¹

by Kathy Au Coin

In 2001, there were an estimated 4 million persons aged 65 years and older constituting 13% of the Canadian population (57% were women and 43% men). It is estimated that this age group will continue to grow in the coming decades. By 2026, it is expected that close to 8 million (21%) of the population will be 65 years of age or over (Statistics Canada, 2001). The growth of this segment of the population in size and proportion is due to the aging of the baby boom generation (those born between 1946 and 1965), lower fertility rates and increased longevity.

According to the 2001 Census of population, the majority (95%) of Canadian seniors live in private households. In fact, only 5% of seniors live in institutions, a slight decline from 20 years ago. While 35% of seniors lived alone in 2001, a large percentage of seniors lived with a spouse (and with no children) (37%) or lived with their children (13%). There has also been an increase in the number of seniors living on their own: in 2001, 35% of women 65 years of age or over and 16% of senior men lived by themselves. This is true even amongst the oldest seniors. The proportion of older senior women (85 and over) living alone grew from 25% in 1981 to 38% in 2001. More older senior males are also residing on their own: 23% in 2001, up from 16% in 1981 (Statistics Canada, 2002).

Needs of an aging population

Regardless of their living arrangements, whether living alone, with their spouse or with adult children, seniors may at some point require help with their day-to-day activities. This help may take the form of providing personal care, helping with shopping or cooking, or assistance with medication. This assistance may be required due to a short or long-term illness, disability, or simply as a result of decreasing independence resulting from aging. According to the 2001 Census, 21% of the population over age 15 provided some form of informal care and assistance to seniors. Thirty-one percent of women and 21% of men between the ages of 45 and 54 reported helping out with an elderly person (Statistics Canada, 2003).

Caregivers who spent the most time providing care to seniors reported the highest levels of psychological and emotional burden as well as personal consequences such as extra expenses and postponed job opportunities. According to results from the 1996 General Social Survey of Social and Community Support, both women and men reported feeling stressed meeting the needs of elderly parents in addition to their other responsibilities. A significant proportion of caregivers stated that they felt the extra burden created both role conflict as well as feelings of anger towards the person whom they were helping: 23% of women reported high burden and 54% reported some burden, while 14% of males reported high burden and 49% reported some burden (Keating et. al., 1999).

The aging of the population has a number of implications for Canadian society, including the fact that increasing numbers of adults will be responsible for the care of elderly relatives in the years to come. Two potential effects are increasing stress levels at home and rising work-home conflicts, both of which may negatively affect the caregiver's ability to perform these functions. As stress levels increase, there may be a rise in the incidence of abuse towards seniors. In the coming years, it will become even more important to understand the nature and extent of senior abuse and to measure changes over time.

This chapter will focus on violence and homicides committed against older adults reported to the police across Canada in 2001 as well as trends over time. In addition, the criminal justice system and other system responses to the problem of family violence against seniors are examined.

¹¹ For the purposes of this chapter, the terms "older adults" and "seniors" are used interchangeably and refer to Canadians aged 65 years or older.

Defining abuse against older adults

As with other forms of family violence, abuse and neglect of seniors may not always come to the attention of authorities. Some researchers have referred to seniors as "hidden victims" (Baker, 2000) as they may be more likely than younger people to become isolated from the rest of society as a result of having fewer social networks, decreased mobility, poor physical and mental health, or financial and emotional dependencies.

Some seniors may be reluctant to report instances of family violence because of disbelief, shame, a fear of further victimization or fear of being removed from their home and placed in an institution (McDonald and Collins, 2000). In addition, financial abuse such as theft or fraud may occur without the older person's knowledge. Consequently, reported instances of abuse do not reflect the actual number of occurrences.

There is little agreement on a clear definition of senior abuse. Abuse can take many forms including physical assault, emotional/psychological abuse, financial exploitation or manipulation, sexual assault and neglect. As well, definitions vary according to whether the abuse takes place in an institution or in a private home (McDonald and Collins, 2000). Finally, there is also some debate about who should be included in the definition of "abuser" which may consist of all or some of the following; family members, caregivers, or other persons in positions of power or authority.

Several theories have been advanced to explain the causes of abuse against older persons. While there is no one causal factor that explains abuse against seniors, explanations have focused on caregiver stress and dependency issues (either the caregiver's or the senior's). A second theory perceives the abuse of older family members as a result of learned behaviour, that is, the abuser is acting in a manner which he/she has learned either within or outside of the family unit. Other theorists perceive that abuse is simply spousal abuse grown old. Finally some researchers argue that abuse of older family members is a result of emotional and psychological problems of the abuser (McDonald and Collins, 2000).

2.1 Prevalence of violence against older adults

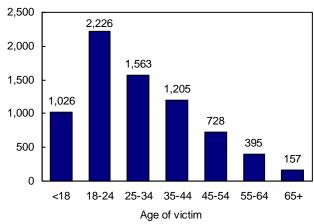
One of the principal sources of information on the prevalence of violence against older adults is police statistics. Many cases of senior abuse are crimes for which charges can be laid. While police statistics capture only a portion of all cases of violence committed against seniors, this information provides important insights as it likely represents the most serious cases in those jurisdictions

that responded. Detailed police data on the frequency and type of violent crime, including information on the characteristics of victims and accused persons, is available from the Incident-based Uniform Crime Reporting (UCR2) Survey.¹²

In 2001, older Canadians were the least likely age group to be victims of violent crime. The rate of reported violent crimes against seniors in 2001 was 157 per 100,000, 14 times lower than the rate for 18 to 24 year olds (2,226 per 100,000) the age group with the highest rate of victimization reported to the police (Figure 2.1).

Figure 2.1 Older persons least likely to be victims of violent crime, 2001^{1,2,3}

Rate per 100,000 population



- Data are not nationally representative. Based on data from 154 police departments representing, 56% of the national volume of crime in 2001.
- ² Excludes cases where age of victim was unknown.
- ³ Rate per 100,000 population per age group. Rates are based on postcensal estimates, Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Overall, violent victimization against older Canadians was perpetrated almost equally against older women (49%) and men (51%). However, while just over half (55%) of older female victims were victimized by someone outside the family, this was the case for 72% of older male victims (Table 2.1). Calculated as a rate per 100,000 seniors in the population, the rate of reported non-family related

The UCR2 represents 59% of the national volume of crime, however, for this publication, Ontario Provincial Police rural divisions have been eliminated from the UCR2 due to a lack of population estimates. Therefore, 56% is an accurate representation for this analysis.

violence against older men was 138 per 100,000, almost double the rate for older women (72 per 100,000).

Older women are more likely than older men to be victims of family violence. In 2001, 38% of older female victims and 21% of older males were victims of family violence. There were 49 reported victims of family-related violent crime for every 100,000 older women in the population while the rate for older men was 40 per 100,000.

Common assault most frequent offence for older victims of family violence

In 2001, police most frequently recorded family-related incidents against seniors as common assault (56%). Common assault includes behaviors that do not result in serious injury including pushing, punching, and slapping, and threatening to apply force. Many older adults were also victims of uttering threats (20%) and assaults with a weapon or assaults causing bodily harm (15%). This pattern is similar for male and female victims (Table 2.2).

Offences committed by non-family members against older persons were slightly different than those committed by family members. While common assault was also the offence most often committed against seniors (34%), 29% of older adults were victims of robbery. Four out of ten offences against older women by non-family perpetrators were robberies (40%). In contrast, older men were more likely to be victimized by common assault (37%) and uttering threats (23%) (Table 2.2).

Physical force most common method of violence^{13,14}

In 2001, for 60% of older adult victims, physical force was the most serious method used. For 16% of victims, weapons were the most serious forms of violence present with firearms accounting for only 1% of cases. For one-in-five victims, threats were used and no weapon was present. More common were blunt instruments, knives and other weapons (15%) (Table 2.3).

Methods of committing violence differed slightly depending on the sex of the victim. Older women were more likely to have physical force used against them (62% compared with 57% of men), while older men were more likely to be subjected to weapons (18% compared with 14% of women) (Table 2.3).

Level of injury higher for older victims

According to police-reported statistics in 2001, nearly half (46%) of older victims of family violence suffered no injuries and 38% suffered minor injuries. Major injuries or death occurred 4% of the time in violent crimes committed by

family members (compared to 2% for spousal violence victims). Women (44%) were slightly more likely than men (40%) to suffer injuries or death (Table 2.4).

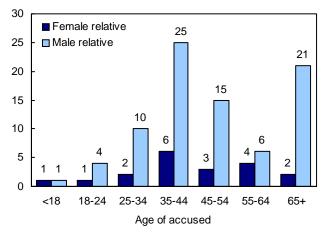
Characteristics of accused¹⁵

Police-reported data show that males are the most likely perpetrators of family-related violence. This is also the case when the victim is a senior. In 2001, 82% of people accused of violently victimizing an older family member were men and 18% were women.

Male adults between the ages of 35 and 54 were the accused in 40% of abuse cases against seniors. Male relatives over the age of 65 were the accused in 21% of cases, all of which were instances of spousal violence. Female relatives between the ages of 35 to 44 represented the largest group of female offenders (6%) (Figure 2.2).

Figure 2.2 Males aged 35-54 accounted for 40% of all family violence crimes against older victims, 2001^{1,2}

Percentage of family members accused



Percentages may not total 100% due to rounding.

- ¹ Excludes cases where age of accused was unknown.
- ² Data are not nationally representative. Based on data from 154 police departments representing 56% of the national volume of crime in 2001.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

incidents from the UCR2 Survey which itself represents 56% of the national volume of crime.

Toronto is excluded from the analysis on methods of violence (168 cases)

Based on the most serious weapon present, not necessarily used.
 Analysis of accused characteristics is based only on those incidents for which there was a single accused and are derived from a subset of

Among older victims of family violence, senior women were most likely to be victimized by a spouse (38%), or an adult child (34%), followed by extended family members (14%), siblings (9%), and parents (4%). In contrast, older men were more likely to be victimized by an adult child (46%), followed by a spouse (21%), extended family (14%), siblings (13%) and parents (6%) (Table 2.1).

Hospitalizations of older adults for assaults and other violence

Hospitalization records for intentional injuries resulting from assaults or other forms of violence are an additional source of information on the medical and physical consequences of violence against seniors. These data detail the number of patients who have been admitted to hospital (staying a minimum of one night) and who have sustained a violent injury. A limitation of these data is that they cannot take into account patients that were treated at walk-in clinics, nor can it differentiate between victims of family violence and victims of other types of violence.

According to the Hospital Morbidity Database, 292 seniors in 2000/01 were treated in hospitals for an injury resulting from some form of assault. More men were admitted to hospital during this 12 month period than women (173 men and 119 women). Older women were most likely to be admitted to hospital for assaults (38%), fights, brawls and rape (30%), followed by maltreatment (25%). In contrast, older men were treated most frequently for fights and brawls (50%), followed by assaults (24%) and injuries from cutting and piercing (14%) (Table 2.5).

2.2 Family homicides against older adults

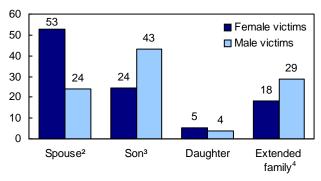
In 2001, there were 35 homicides of older Canadians, representing 6% of the total homicides in Canada. A family member committed 19 of these. Considering only family-related incidents, there were 8 homicides of older women murdered by a spouse, 3 by an adult son and one by another family member. In 7 cases, older men were victims of homicides perpetrated by either an adult son or daughter.

Looking over a larger time span, between 1974 and 2001, 391 seniors were killed by family members. The majority (53%) of older women were killed by a spouse or exspouse. In contrast, older males were most often killed by an adult son (43%) and other family members (29%) in family-related homicides (Figure 2.3).

Spousal homicides involving older victims (aged 65 and older) tend to be characterized by the suicide of the accused in higher numbers than in cases involving younger victims. Examining data from 1974 to 2001 from the

Figure 2.3
Older women killed by spouses, older men killed by sons, 1974-2001¹

Percentage of victims (age 65+)



Relationship of accused to victim

Percentages may not total 100% due to rounding. Homicide numbers for 2000 are revised.

- 1 Excludes cases where sex or age of victim was unknown or in cases where relationship between victim and accused was unknown.
- ² Includes legally married, common-law, separated, and divorced partners.
- ³ Includes natural and step-sons.
- Includes all others related to the victim by blood or marriage e.g., aunts, uncles, cousins, sister/brother-in-laws, etc.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Homicide Survey, in 36% of spousal homicides in which the victim was over 65, the accused committed suicide, in contrast to 27% of spousal homicides involving younger victims (under 65) whose spouse committed suicide.

Nearly half (47%) of accused in spousal homicides of older women took their own life. In addition, in all of the homicidesuicides involving older victims, the accused and victim were living together at the time of the incident compared to 69% of those under 65.

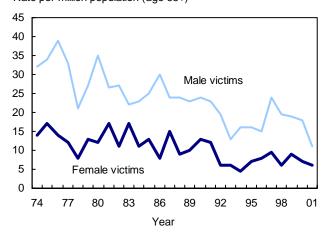
Higher homicide rates against older men

Overall, older men are victims of homicide at a higher rate than older women: 11 per million, compared to a rate of 6 per million for older women in 2001. However, with respect to homicides committed by family members, rates were similar for older men and women (5 compared with 4 per million).

Homicide rates for older men have declined from a high in 1976 of 39 homicides per million for older men to a rate of 11 per million in 2001. During this same period the homicide rate for older women declined from 17 per million in 1976 to 6 in 2001. The rates for family-related homicides

during the same time period have fluctuated from year-to-year with a smaller decline in overall rates (Figures 2.4 and 2.5). The gap between rates of family and non-family homicides of seniors has declined due mostly to the drop in non-family homicides.

Figure 2.4
Homicide rates (family and non-family) for older women and men on the decline, 1974-2001^{1,2}
Rate per million population (age 65+)

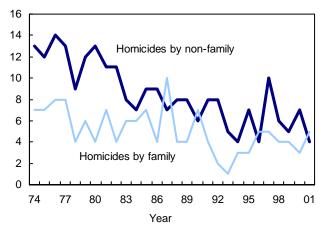


- ¹ Homicide numbers for 2000 are revised.
- ² Rates are based on postcensal estimates. Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Figure 2.5
Gap in rates of family and non-family homicides of seniors on the decline, 1974-2001^{1,2}

Rate per million population (age 65+)



- ¹ Homicide numbers for 2000 are revised.
- ² Rates are based on postcensal estimates. Demography Division, Statistics Canada.

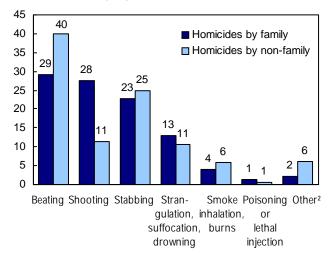
Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Beating most common cause of death

The most common cause of death from 1974 to 2001 for older victims of family related homicides was beating (29%) and shooting (28%) followed by stabbing (23%) (Figure 2.6).

Figure 2.6
Beating most common cause of death, in family-related homicides against seniors, 1974-2001¹

Percent of victims (65+)



Percentages may not total 100% due to rounding. Homicide numbers for 2000 are revised.

- ¹ Excludes cases where cause of death was unknown and relationship between victim and accused was unknown.
- ² Other includes exposure and hypothermia.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Prior history of domestic violence present in some family homicides of seniors

Information on prior history of domestic violence has been collected in the Homicide Survey since 1991. From 1991 to 2001, 31% of persons accused of committing a homicide against a senior family member had a prior history of family violence with that victim. This is lower than was the case in spousal homicides (58%) for victims under 65 but similar to those involving children (30%). Homicides of seniors involving a history of domestic violence were similar for female and male victims (30% and 33%).

2.3 System responses to family violence against older adults

Societal responses to senior abuse have included the development and implementation of training programs for criminal justice professionals, support and advocacy programs for victims, and public education programs aimed

at changing attitudes and ensuring that senior abuse is perceived as unacceptable. In addition, education programs have been developed to increase awareness among the senior population.

Seniors may be reluctant to report abuse committed by family members. They may fear possible retaliation, being institutionalized or losing contact with a family member, even though that person may be their abuser. In addition, many of today's seniors are from a generation where family members were discouraged from seeking outside help in intervening in family problems (Kerby Centre, 2000).

System responses to senior abuse have taken many forms, but the primary focus has been on educational

programs to train front-line workers in the assessment and detection of abuse and neglect. Police, social workers, home care workers, nurses and other professionals have been involved in multi-disciplinary teams to determine how best to meet the needs of seniors who have been the victims of abuse. Kerby Rotary House described below represents an example of a system response developed specifically to meet the needs of older victims of abuse.

Health care system response

Health care professionals may be among the first to respond to seniors who have been the victims of abuse. System responses in this domain include detecting, intervening and treating the older victim. However, health

Kerby Rotary House, transition house for older victims of violence

According to Statistic Canada's Transition Home Survey¹, which provides a one-day snapshot of persons residing in shelters for reasons of abuse, about 80 women aged 55+ were residing in shelters on snapshot day in 2002. This represents approximately 3% to 4% of all women in shelters for reason of abuse on that day.

Some researchers believe that senior victims of family violence are not generally well served by safe houses for victims of domestic violence (Bergeron, 2000). It is argued that there are several factors that may inhibit an older victim from seeking help from a shelter. First, these homes are generally not structurally designed to accommodate the needs of an older population. That is, the shelters are not wheelchair accessible and most bedrooms are on second floors, which makes it difficult for some seniors to move around. In addition, the environment of the shelter, which should bring about a sense of security and respite, in fact, may increase the stress level of seniors, due to the noise and activity level within the shelter. Coupled with the lack of peer support, the traditional shelter is not conducive to bringing about a calm and secure environment for the victimized senior. Finally, many seniors may arrive at a shelter with their spouse as both are escaping the abuse of a family member – but the shelter is not designed to accommodate the needs of a couple (Bergeron, 2000).

The Kerby Rotary House in Calgary Alberta is a shelter that was designed to meet the needs of older victims of family violence by providing residential service to both female and male seniors over the age of 50. In the first two years after opening their doors in June 1999, they have provided shelter to 131 older adults between the ages of 50 and 92, (112 women, and 19 men) with the average length of stay 38 days in 1999-2000 and 32 days in 2000-2001.²

According to Kerby Rotary House's annual reports, these seniors had the following relationship with their abusers:

Relationship to abuser	1999/2000	2000/01 ^{3,4,}		
	%	%		
Spouse	48	42		
Adult Child	33	30		
Adult-in-law	11	10		
Grandchild	4	2		
Other (friend, roommate)	4	17		

Victims often experienced multiple types of abuse. The most frequently reported form of abuse was verbal/psychological (114 incidents) followed by physical (74 incidents) and financial abuse (66 incidents).

The Kerby Rotary House also operates a crisis line that responds to calls from seniors. In the past year, they have answered an average of 40-50 calls per month. The major focus of these calls are issues of family violence and the seeking of information and emotional support. The average age of callers to the telephone line is 67.

- ¹ Transition Home Survey, 1998, 2000, 2002.
- ² Figures are for the period June 1999 until May 31, 2001
- ³ Kerby Centre. 2000. Kerby Rotary House Shelter for Abused Seniors, Report on First Year of Operation June 1999-June 2000.
- ⁴ Kerby Centre. 2001. Kerby Rotary Shelter, Second Year Report, May 31, 2000 May 31, 2001.
- Percentages may not total 100% due to rounding.

care workers face many challenges regarding how to deal with the situation and to confirm that abuse has taken place. The situation is complicated by the fact that the senior as well as the abuser, who may be the caretaker, frequently deny that abuse is occurring. In addition, the older victim may acknowledge that the abuse has taken place but refuse intervention or treatment (Lithwick et.al, 1999). As a result of this denial, the health care professional must determine how to offer the victim confidentiality, dignity and respect while at the same time watching out for the safety of the patient (Krueger and Patterson, 1997).

Once abuse is diagnosed, the next step in the system response is to implement a program to ensure the safety of the senior. Removing the senior from their home is not always seen as a positive approach. Many community care workers and hospitals have developed a multidisciplinary approach to the problem in order to both alleviate the problem and to bring about change. A multidisciplinary model encourages co-ordination among

professionals from various disciplines, such as family physicians, nurses, social workers, lawyers, and law enforcement personnel. These teams address not only the physical consequence of the abuse, but will also ensure that programs are put in place to reduce stress for the caregiver, provide emotional support as well as relief from the care-giving tasks (Watson et. al., 1995).

Government and community system responses

In addition to the health care system response, the community at large as well as various levels of government (federal, provincial and regional) have implemented programs designed to reduce the incidence of abuse against older adults. Monies spent researching the problem, developing training manuals and educating the public are all means of reacting to the problem. Finally, the creation of legislation, which penalizes abusers, and imposes a fine on professionals who fail to report abuse, are additional system responses (see Adult protection legislation on page 29).

Provincial and federal initiatives

Over the past few years, both the federal and provincial governments have initiated many programs to combat senior abuse. These government-funded initiatives designed to reduce the prevalence of abuse differ widely in scope and delivery, - some are police-based while others are system-based or community-based. These initiatives range from dissemination of training manuals and best practices to training justice personnel and funding transition homes.

Health Canada has produced a document entitled, *Directory of services and programs addressing the needs of older adult victims of violence in Canada*. It is a comprehensive list of services and programs for seniors in each province and territory. These programs and services are provided through health and social service agencies, legal agencies, community organizations, seniors' groups as well as government organizations. The services illustrate the wide variety of programs that are available to seniors - crisis shelters, interventions programs, assessment and screening programs, legal advice, referrals, public awareness initiatives and training programs for health professionals, and peer and counseling support groups (National Clearinghouse on Family Violence, 1999).

Some provincial governments have also announced recent initiatives to combat abuse against seniors. For example, in March 2002, the Ontario provincial government announced \$4.33 million in funding for a new "elder abuse strategy" to address and prevent the abuse of seniors. The five-year plan focuses on three priorities: the co-ordination and enhancement of community services, training and education of front-line workers who serve the needs of seniors, and public education. This project focuses on the creation of a community effort to combat abuse. Professionals who serve seniors will be trained to detect abuse and will be given the appropriate training to help victims.

Seniors in Manitoba have had access to a Senior's Abuse telephone line since early 1999. The telephone line directs seniors, professionals as well as concerned family members to services that are available to seniors in Manitoba. Since 1999, they have received over 300 calls from seniors. The majority of these calls concerned emotional abuse, and financial abuse (Senior Abuse Line Statistics, April, 1999 to March 21, 2002).

Services to help educate seniors as to the pitfalls and frauds of telemarketers have also emerged over the past few years. Older Canadians have been prime subjects of financial abuse from tele-marketers. In Ontario in 1999 seniors lost \$3.5 million to telephone fraud. According to the Ontario Provincial Police, 85% of Ontario consumers who have lost more than \$5,000 are seniors. SeniorBusters is an extension of the Phonebusters program and operates to provide emotional and moral support to older victims of financial abuse. The program provides educational information on how to avoid theses types of crimes, and lends support to victims of abuse.

The range of initiatives available to prevent and combat abuse of seniors is varied, but a common theme runs through all initiatives. Virtually all programs focus on increasing awareness through education and training of health care professionals, members of the justice community, caregivers, older adults and the public at large. Public education is perceived as being an essential tool in the recognition and treatment of all forms of senior abuse.

Sources: Senior Abuse Line Statistics, April 1999 to March 21, 2002, Manitoba Seniors Directorate.

International response to the abuse of older adults

Senior abuse as a social problem is gaining recognition worldwide. In 2002, the World Health Organization (WHO), in partnership with the International Network for the Prevention of Elder Abuse (INPEA), launched initiatives to increase the awareness of senior abuse as a human rights issue. In addition, they are in the process of developing a global strategy to create programs to combat the abuse of seniors. The primary aim of their project is to increase awareness among health care professionals and the public about the issue of senior abuse and to develop a strategy to be employed by health care professionals to recognize and combat abuse.

The first phase of the WHO project commenced with focus group studies carried out in eight countries, Argentina, Austria, Brazil, Canada, India, Kenya, Lebanon and Sweden. Each country conducted focus group sessions with six groups of seniors and two groups of health care professionals and seniors. The topics discussed in these groups covered many aspects of the problem of senior abuse including perceptions of abuse and its many forms, the consequence of abuse for elderly victims, perceptions of the prevalence of abuse in their respective communities, and the possibility of a seasonal pattern of abuse.

According to these focus group studies, there was a significant amount of commonality in responses among groups and countries in how seniors define and describe the many forms of abuse. Responses from these focus group discussions were coded and a definition of abuse emerged which fell within the following three categories;

Neglect – isolation, abandonment and social exclusion Violation – of human, legal and medical rights Deprivation – of choices, decisions, status, finances and respect¹

A second component of the project was a conference of health care professionals and senior advocacy groups held in Geneva in October 2001. The objective of this conference was to devise a plan for future research and policy directions based on the result of the information collected from the focus group research. The global approach recommended by conference participants was to focus on increasing education and training of all members of the community, from health care professionals to members of the justice community and the public. Below is a summary of their recommendations:

To develop a screening and assessment tool for use in primary care settings
To develop an education package on the abuse of seniors for primary care health workers
To develop and distribute a research "kit" to study senior abuse
Ensure that research findings are disseminated to journals
Promote and develop an inventory of best practices
Increase awareness of the prevalence of senior abuse²

Legislation

There are three models of adult protective legislation in Canada. The first model is found in the Atlantic provinces and it assigns personnel to investigate suspected cases of abuse (Gordon, 2001). Some researchers have described this approach as being influenced by child welfare models as the legislation has the legal clout to investigate and intervene, and may require the mandatory reporting of suspected cases of senior abuse (McDonald and Collins, 2000). This form of legislation has been criticized for taking away the independence and decision-making power of older victims (McDonald and Collins 2000).

The second model of legislation affecting older victims is found in Ontario. It incorporates adult protection provisions as part of adult guardianship legislation. The act calls for the investigation of allegations that an older person is unable to manage their property or personal care and are at risk of suffering negative effects due to their lack of abilities. The Public Guardian and Trustee will investigate instances of abuse but they will not provide other services to victims.

The third model, found in British Columbia, provides for intervention in instances of abuse, neglect and self-neglect. The legislation also provides community-based service networks to help seniors. (Gordon, 2001)

^{1, 2} Missing Voices; views of older persons on elder abuse. Geneva, World Health Organization, 2002.

Adult protection legislation in the provinces and territories									
Province/Territory Legislation	Types of abuse specified	Penalties against abusers	Penalties for failure to report						
Labrador and Newfoundland, The Neglected Adults Welfare Act, S.N. 1973, No. 81	Neglect but not abuse	Neglect is a specific offence that can result in a fine of up to \$200, a sentence of imprisonment for up to two months, or both fine and imprisonment	Fine up to \$200, or if fine is defaulted, sentence of imprisonment for up to two months, or both fine and imprisonment.						
Prince Edward Island, Adult Protection Act, R.S.P.E.I. 1988, CA-5	Continuous or repeated abuse (includes sexual, physical or material), or endangerment by a person responsible for supervision	A protective intervention order requires that the abuser follows one or more requirements. Failure to do so is an offence that can result in a fine of up to \$1,000, imprisonment for up to six months, or both	No penalties for failure to report, since reporting is voluntary.						
Nova Scotia, Adult Protection Act, R.S.N.S. 1985, c.2, s.1	Neglect and abuse	A protective intervention order may require that the abuser follows certain provisions. Violation of the order can result in a fine of up to \$1,000, imprisonment for up to one year, or both	Fine of up to \$1,000, or sentence of imprisonment up to one year, or both.						
New Brunswick, Family Services Act, S.N.B. 1980, c. F-2.2 (formerly Child and Family Services and Family Relations Act, c.c2.1)	Neglect and abuse	A protective intervention order may require that the abuser complies with certain provisions. Failure to comply is an offense that may result in a fine of up to \$1,000, imprisonment for up to six months, or both.	None						
Quebec, Civil Code of Quebec S.Q. 1991, c.64, Book One, Title 4, Chapter 3	Provisions for neglect and abuse	N/A	N/A						
Ontario, Substitute Decisions Act, S.O. 1992, C. 30	Part of the act deals with neglect and abuse	N/A	No penalties for failure to report, since reporting is voluntary						
Manitoba, <i>Health Care</i> <i>Directives Act</i> , S.M. 1992, c.33	Provisions for neglect and abuse	N/A	N/A						
Saskatchewan, Dependant Adult Act, S.S. 1989-1990, c.D-25.1	N/A	N/A	N/A						
Alberta, <i>Dependant Adults Act</i> , S.A. 1976; C. 63; now R.S.A. 1980, D-32	N/A	N/A	N/A						
Protection for Persons in Care Act, 1998, R.S.A. cP-19.5 (Note: applies only to abuse perpetrated by agencies against older adults)	Provisions for neglect and abuse including emotional harassment, physical harm or/and prescribing medication for inappropriate reasons	Agency may lose funding from Crown or Crown Agency, abuser must pay or contribute toward adult's maintenance or services to be provided for and fulfill any other order the court deems fit. Agency involved must take disciplinary action against employee or service provider who conducted the abuse	A fine up to \$2,000, and in default of payment, imprisonment for up to 6 months						
British Columbia, Adult Guardianship Act, S.B.C. 1993, c. 35	Provisions for abuse (mental, physical, emotional harm or damage to or loss of assets) and neglect	N/A	Voluntary reporting but agencies have a duty to report						
Yukon, N/A	N/A	N/A	N/A						
Northwest Territories, Guardianship and Trusteeship Act S.N.W.T. 1994 Bill 3	Provisions for neglect and abuse	N/A	N/A						
Source: Adapted and updated from G	ordon and Verdun-Jones, 1995.	I	1						

Table 2.1 Number and proportion of older adult victims (65+) of violent crime by sex of victims and relationship to accused, 2001^{1,2}

Relationship of accused to victim		Sex of victim							
	Total		Fem	nale	Male				
	No.	%	No.	%	No.	%			
Total ³	3,814	100	1,857	100	1,957	100			
Non-family	2,427	64	1,022	55	1,405	72			
Family	1,108	29	698	38	410	21			
Unknown	279	7	137	7	142	7			
Total family	1,108	100	698	100	410	100			
Spouse ⁴	351	32	264	38	87	21			
Parent ⁵	56	5	31	4	25	6			
Adult Child ⁵	427	39	239	34	188	46			
Sibling ⁶	116	10	64	9	52	13			
Extended family ⁷	158	14	100	14	58	14			

Percentages may not total 100% due to rounding.

Includes others related to the victim either by blood or by marriage, e.g. aunts, uncles, cousins and in-laws.
Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 2.2 Number and proportion of older adult victims (65+) of violent crime, by family/non-family, selected offence categories and sex of victims, 2001^{1,2}

		Victimizations by family Sex of victim					Victimizations by non-family Sex of victim					
Type of violent crime												
	To	tal	Female Male		Total		Female		Male			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total	1,108	100	698	100	410	100	2,427	100	1,022	100	1,405	100
Common assault	617 226	56 20	405 134	58 19	212 92	52 22	820 439	34 18	297 118	29 12	523 321	37 23
Uttering threats Assault with weapon or												
causing bodily harm	166	15	97	14	69	17	229	9	53	5	176	13
Criminal harassment	46	4	26	4	20	5	109	4	66	6	43	3
Kidnapping	12	1	9	1	3	1	38	2	19	2	19	1
Robbery	9	1	4	1	5	1	700	29	406	40	294	21
Extortion	4	0	3	0	1	0	16	1	5	0	11	1
Other ³	28	3	20	3	8	2	76	3	58	6	18	1

Excludes cases where sex or age of victim was unknown or in cases where relationship between victim and accused was unknown.

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Data are not nationally representative. Based on data from 154 police departments representing 56% of the national volume of crime in 2001.

Violent crime includes violations causing death, attempting the commission of a capital crime, sexual assaults, assaults, violations resulting in the deprivation of freedom and other violations involving violence or the threat of violence.

Excludes cases where sex or age of victim was unknown.

Includes legally married, common-law, separated, and divorced partners.

Includes a small number of cases where age or the relationship between the accused and the victim may have been miscoded.

Sibling includes natural, step, half, foster or adopted brother or sister.

Data are not nationally representative. Based on data from 154 police departments, representing 56% of the national volume of crime in 2001.

Other violent offences includes negligence causing bodily harm, unlawfully causing bodily harm, arson, aggravated assault, sexual assault, murder and attempted murder and other violent violations.

Table 2.3 Method of family violence towards older adults (65+), 2001^{1,2,3}

Moth ad of violence			Sex of	victim		
Method of violence	Tota	al	Fem	nale	Male	
	No.	%	No.	%	No.	%
Total	934	100	573	100	361	100
Physical Force Threat No weapon Unknown Total Weapons	562 175 14 36 147	60 19 1 4 16	356 106 6 23 82	62 18 1 4 14	206 69 8 13 65	57 19 2 4 18
Club, blunt instrument Knife ⁴ Firearm Other weapon ⁵	43 47 10 47	5 5 1 5	21 29 8 24	4 5 1 4	22 18 2 23	6 5 1 6

Excludes cases where sex or age of victim was unknown.

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 2.4 Level of injury by sex of older adult victims (65+) of family violence, 2001^{1,2}

Level of injury			Sex of	victim		
Level of injury	Tot	al	Fem	nale	Male	
	No.	%	No.	%	No.	%
Total	1,108	100	698	100	410	100
No injury Minor injuries ³ Major injuries or death Unknown Not applicable ⁴	505 424 48 80 51	46 38 4 7 5	308 279 28 54 29	44 40 4 8 4	197 145 20 26 22	48 35 5 6 5

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Data are not nationally representative. Based on a sample of 153 police departments, representing 49% of the national volume of crime in 2001.

Due to data quality issues that result in physical force being coded as "other", Toronto is excluded from the analysis on methods of violence (168 cases).

Knife includes "other cutting/piercing instrument".

Examples of "other weapon" includes explosives, poison and whips.

Excludes cases where sex or age of victim was unknown.

Data are not nationally representative. Based on a sample of 154 police departments, representing 56% of the national volume of crime in 2001. No visible injury was observed at the time of the incident though weapons or physical force was used against the victim.

⁴ The violation did not involve the use of weapons or physical force against the victim. Note: Percentages may not total 100% due to rounding.

Table 2.5 Admissions to hospital by cause of violent injury and by sex of older victims (65+), 2000/01

Course of injury		Sex of victim							
Cause of injury	Total		Fem	nale	Male				
	No.	%	No.	%	No.	%			
Total	292	100	119	100	173	100			
Fight, brawl, rape	123	42	36	30	87	50			
Poisoning Assault by hanging and strangulation	5 4	1	2	3	3 2	2			
Cutting, piercing instrument	27	9	3	2	24	14			
Maltreatment	40	14	30	25	10	6			
Assault ¹	86	29	45	38	41	24			
Late effects of injury	7	2	1	1	6	3			

Includes unspecified firearm.
 Note: Percentages may not total 100% due to rounding.
 Source: Canadian Institute for Health Information, Hospital Morbidity Database, 2000/01.

3.0 VIOLENCE AND ABUSE AGAINST CHILDREN AND YOUTH BY FAMILY MEMBERS

by Kathy Au Coin

Child abuse or maltreatment includes a range of negative behaviors including physical assault, sexual assault, emotional/psychological abuse, neglect and witnessing family violence. One of the first steps in developing protective services and prevention programs for child abuse is to document the incidence and prevalence of maltreatment. Statistical data are needed to help detail the risks associated with abuse and its outcomes. In addition, these data help to develop both policy and legislation, which addresses the problem of child maltreatment. Finally, health care practitioners, educators and child welfare services can employ these data to develop effective intervention programs, diagnostic tools, and protocols for treatment to better meet the needs of abused children.

Comparable and reliable estimates of the true incidence of child abuse and maltreatment in Canada are not currently available due to several reasons. First, how child abuse is defined, the age at which a child is legally defined by child welfare legislation and the manner in which abuse statistics are reported and collected varies among provinces and territories (Latimer, 1998). Second, child abuse is often cited as an under-reported entity. Due to lack of understanding, children may not perceive that they are being abused or that the violence they have experienced is a crime. Alternatively, they may recognize that the behavior is inappropriate but due to fear, shame or concern for the abuser choose not to speak of the abuse or seek help. In addition, professionals who are in contact with children and who may be suspicious of the abuse may not report these suspicions (Loo et. al., 2001). Consequently, data detailing the incidence of abuse against children and youth is presently based on police and child welfare agencies and therefore do not provide a complete picture of child abuse in Canada.

The Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) has collected data from child welfare agencies across the country as a means of tracking the incidence of child maltreatment and characteristics of both the abused child and their family. This study provides national estimates of child abuse and neglect reported to and investigated by welfare agencies. The definition of abuse used in this study included 21 categories that fall into four main groups of physical abuse, sexual abuse, neglect and emotional maltreatment. Results indicate that in 1998, neglect was a main reason for reported investigations making up 40% of cases followed by physical abuse (31%), emotional maltreatment (19%) and sexual abuse (10%) (Trocmé et. al., 2001).

This chapter will focus on physical and sexual assaults and homicides committed against children and youth (under the age of 18) and reported to police forces across the country in 2001. In addition, system responses to the problem of child maltreatment will be examined, including child welfare/protection legislation, child welfare services, and reporting protocols for professionals who work with children.

3.1 Prevalence of family violence against children and youth reported to police

A main source of information on the prevalence of violence against children and youth is police statistics. While physical and sexual offences are crimes for which charges can be laid, emotional abuse or witnessing family violence are not. Police statistics therefore capture only a portion of all cases of child maltreatment, but do provide important details of the most serious cases of child abuse. Information on the characteristics of victims and accused persons is collected from the Incident-based Uniform Crime Reporting (UCR2) Survey.

In 2001, children and youth under the age of 18 were victims in 33,017 violent incidents brought to the attention of police departments reporting to this survey. The rate of reported violence against children and youth is 1,026 per 100,000 population under 18 years of age, which is half the rate for individuals between the ages of 18 and 24, the age group at highest risk of victimization (see Figure 2.1, in chapter 2).

Children and youth primary victims of sexual offences

While children and youth under the age of 18 represent only one-fifth of the population, (21%) they were victims in over 60% of all reported sexual offences (Table 3.1). The number of reported physical assaults against children and youth far outnumber the incidence of sexual offences at a rate of 3:1 (24,846 compared to 8,171) (Table 3.2).

Children and youth were victimized by acquaintances in about half of all reported physical assaults and sexual offences (52%), followed by family members (23%) and strangers (18%) (Table 3.2). Acquaintances were responsible for close to half of all sexual offences against children and youth (48%) while family members were the accused in almost one-third (31%). These patterns were similar for girls and boys.

In the cases of physical assault, again, the majority of accused were acquaintances (53%) followed by family members (21%) and strangers (19%). Yet, young males were more likely than females to be physically assaulted by strangers (23% compared to 13%) while girls were more often assaulted by family members (30% compared to 15%).

Children under the age of 12 were victims in 9,686 incidents in 2001. Again, acquaintances were more likely to be the accused (43%) followed by family members (37%) then strangers (13%). Female children are more likely to be victimized by a family member (43%) followed by an acquaintance (38%) while the opposite was true for young boys as they were assaulted by acquaintances in 48% of reported cases and by family members in 31% of cases.

As children age, there is an increase in total assaults and the accused are more often from outside the family. Youth (12 to 17 years old) were assaulted in 23,331 incidents in 2001, the majority of which were physical assaults (81%). In contrast to children, the number of family related incidents is lower (18%) while the number of assaults perpetrated by acquaintances is more than half (55%).

Sexual offences constitute only 19% of all assaults against youth of which the majority (89%) of victims are female. Male youth are more likely to be physically assaulted (60%) than females.

Majority of family-related assaults involve a parent

In cases of family violence, parents are most often accused of assault against children and youth (58% of reported

cases). Parents represented 67% of family members accused of physical assault and 41% of those accused of sexual offences against children and youth (Table 3.3). Siblings were more often the accused in sexual offence cases than in physical assaults (28% compared to 20%), as were extended family members (29% compared to 8%) (Table 3.3).

Victimization surveys suggest that young couples are at highest risk of spousal violence (Hotton, 2001). Even though few youth are living in conjugal relationships, among youth reporting family-related violence to police, 8% were perpetrated by a spouse. Fourteen percent of young female victims between the ages of 12 and 17 reported physical assault by a spouse and 4% reported sexual assaults. This was the case in 1% of young male physical assaults and 2 % of sexual assaults reported by young males (Table 3.3).

Male relatives primary accused

Males were accused of assault against youth and children in the majority of cases, regardless of the type of abuse or the age of the child. Fathers were accused in 44% of reported cases, followed by brothers (19%), male extended family members (12%) and spouses or ex-spouses (6%). Mothers were the accused in 13% of incidents of assault against their children and other females in the remaining 5%.

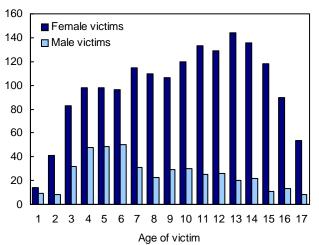
Patterns in sexual offences

Female children and youth are more likely to be sexually assaulted than are male children in police-reported cases. Of the 2,553 family-related sexual offences reported to this sample of police departments, girls were the victims in over 79% of cases. Rates of sexual assault for these girls were highest for young teenagers. The highest rate of reported family-related sexual offences were for girls aged 11 to 14 and peaks at 144 for girls 13 years of age. After the age of 13, rates decline with the largest drop occurring between ages 16 and 17 (90 and 54 per 100,000 respectively) (Figure 3.1).

Male children aged 4 to 6 are at a highest risk of being sexually assaulted, according to police statistics. Rates for boys increased until the age of 6 where the rate peaks at 50 sexual offences per 100,000 boys in that age group and then declined steadily to a low of 8 per 100,000 for seventeen year olds (Figure 3.1).

Figure 3.1 Rate of family-related sexual assaults highest for teenaged girls and young boys, 2001^{1,2,3}

Rate per 100,000 population per age



- Data are not nationally representative. Based on data from 154 police departments, representing 56% of the national volume of crime in 2001.
- ² Excludes cases where sex or age of victim was unknown or in cases where relationship between victim and accused was unknown.
- ³ Rate per 100,000 population per age group, based on postcensal estimates. Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

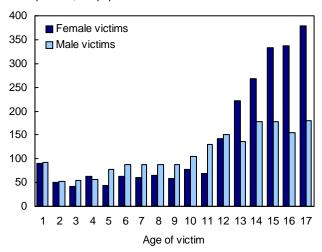
Patterns in physical assaults

Children and youth were victims in 20% of physical assaults reported to police in 2001. Of these assaults, youth between the ages of 12 to 17 were victims in 76% of cases (Table 3.1).

Boys under the age of 12 are more likely than girls of the same age to be victims of family-related physical assault. However, after the age of 12, rates for girls more than doubled from 143 per 100,000 at the age of 12 to a high of 379 at the age of 17. The rates of physical assaults for young boys after the age of 12 also increased but not with the same magnitude, rising from 150 per 100,000 to a high of 181 per 100,000, a 20% increase (Figure 3.2).

Figure 3.2 Rate of family-related physical assaults increases with age, 2001^{1,2,3}

Rate per 100,000 population



- Data are not nationally representative. Based on data from 154 police departments, representing 56% of the national volume of crime in 2001.
- ² Excludes cases where sex or age of victim was unknown or in cases where relationship between victim and accused was unknown.
- ³ Rate per 100,000 population per age group, based on postcensal estimates. Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

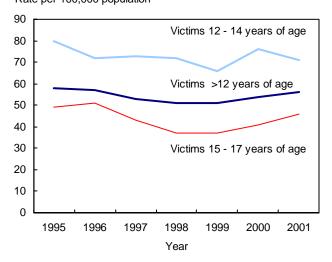
Trends in sexual offences and physical assaults against children and youth, 1995-2001

A subset of 104 police forces that have consistently reported to the Incident-based Uniform Crime Reporting (UCR2) Survey since 1995 are examined on the basis of trends in sexual and physical assaults against children and youth (Table 3.4).

Between 1995 and 2001, the number of sexual offences reported to police, involving family and non-family accused, has decreased slightly. Rates of sexual offences against children and youth were highest in 1995 - 60 per 100,000 for family-related incidents and almost double that for non-family related assaults (117 per 100,000) (Table 3.4).

Children between the ages of 12 and 14 have consistently had the highest rate of family-related sexual offences while the rate for youth aged 15-17 have been substantially lower. There have been slight fluctuations in the rate of sexual offences reported to police for these age groups (Figure 3.3).

Figure 3.3
Fluctuations in rates of family-related sexual assaults reported to the police, 1995 -2001^{1,2,3}
Rate per 100,000 population



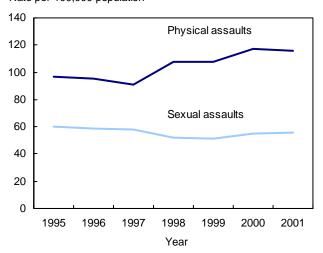
- Data are not nationally representative. Based on data from 104 police services accounting for 42% of the national volume of crime in 2001.
- ² Excludes cases where age of victim was unknown or in cases where relationship between victim and accused was unknown.
- ³ Rate per 100,000 population per age group, based on postcensal estimates. Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Trend Database.

Reported physical assaults rising

Physical assaults against children and youth have been on the rise from 1997 to 2000, decreasing slightly between 2000 and 2001. In 1997, rates of physical assault perpetrated by a non-family accused were 340 per 100,000 and 380 in 2001. Family related rates of physical assault have increased at a greater magnitude than non-family related physical assaults and sexual assaults - close to 28% increase in the same time period from a low of 91 per 100,000 in 1997 to 116 per 100,000 in 2001 (Table 3.4).

Figure 3.4
Rate of family-related physical assaults rising, sexual assaults remain stable, 1995 - 2001^{1,2,3}
Rate per 100,000 population



- Data are not nationally representative. Based on data from 104 police departments, representing 42% of the national volume of crimes in 2001.
- ² Excludes cases where age of victim was unknown or in cases where relationship between victim and accused was unknown.
- ³ Rate per 100,000 population based on postcensal estimates. Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Trend Database.

This large increase in reported family-related physical assaults is largely due to an increase in physical assaults reported by youth aged 15 to 17. Since 1997, this age group has had a steady rise in the rates of physical assaults reported to police from a low of 184 per 100,000 population to a high of 247 in 2000, a 34% increase over a three year period. The 12 to 14 year-old age group experienced a similar increase during the same period, rising 28% from a rate of 133 to 170 per 100,000 population. The rates for each of these age groups have lowered slightly in 2001 (Figure 3.5).

3.2 Homicides of children and youth

There were 69 children under the age of 18 murdered in 2001, representing 12% of the total homicides in Canada. Most of these young victims (62%) were killed by family members - primarily parents. In 2001, step and biological fathers were responsible for 20 homicides while step and

Child maltreatment reported to hospitals in Canada

Hospitalization records for intentional injuries resulting from assaults or other forms of violence are an additional source of information on the medical and physical consequences of violence against children and youth. These data detail the number of patients who have been admitted to hospital (staying a minimum of one night) and who have sustained a violent injury. One limitation of the data is that it cannot take into account patients that were treated at walk-in-clinics or doctors' offices nor can it differentiate between victims of family violence and victims of other types of violence.

There are two age groups which have significantly higher rates of hospitalizations relative to other age groups under 20 years of age. The age group with the highest rate is teenagers between the ages of 15 –19 who were admitted at a rate of 57 per 100,000, followed by infants (defined as children under the age of 1), who were admitted at a rate of 43 per 100,000.

Child battering and other forms of maltreatment were the primary cause of injury for children under 10 years of age.

Table 3.8 Childhood hospitalizations for assault and other maltreatment, Canada, 2000-2001 (Annual number and annual rate per 100,000 population)

				A	Age of victir	n			
Cause of injury	-	Total			< 1			1-4	
	N	%	Rate	N	%	Rate	N	%	Rate
Total	1,694	100	21	140	100	43	116	100	8
Fight, brawl, rape	758	45	10	3	2	1	9	8	1
Poisoning, strangulation ¹	21	1	0	1	1	0	6	5	0
Firearm ²	49	3	1	0	0	0	0	0	0
Cutting, piercing instrument Child battering and other	256	15	3	0	0	0	0	0	0
maltreatment	276	16	3	123	88	38	76	65	5
Assault by other and unspecified means ³	334	20	4	13	9	4	25	22	2
		5-9			10-14			15-19	
	N	%	Rate	N	%	Rate	N	%	Rate
Total	65	100	3	177	100	8	1,196	100	57
Fight, brawl, rape	17	26	1	88	50	4	641	54	31
Poisoning, strangulation ¹	3	5	0	3	2	0	8	1	0
Firearm ²	0	0	0	6	3	0	43	4	2
Cutting, piercing instrument Child battering and other	1	1	0	15	8	0	240	20	11
maltreatment Assault by other and unspecified	25	38	1	29	16	1	23	2	1
means ³	19	29	1	36	20	1	241	20	12

Includes poisoning, hanging, strangulation and submersion.

Note: Percentages may not total 100% due to rounding.

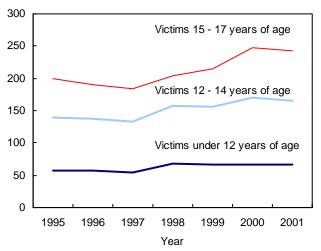
Source: Canadian Institute for Health Information, Hospital Morbidity Database 2000-2001.

Includes other specified explosives.

³ Includes late effects of injury purposely inflicted by other person.

Figure 3.5 Increases in family-related physical assaults of children and youth, 1995 - 2001^{1,2,3}

Rate per 100,000 population



- Data are not nationally representative. Based on data from 104 police services accounting for 42% of the national volume of crime in 2001.
- ² Excludes cases where age of victim was unknown or in cases where relationship between victim and accused was unknown.
- ³ Rate per 100,000 population per age group, based on postcensal estimates. Demography Division, Statistics Canada.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Trend Database.

biological mothers were the accused in 17 with 6 cases perpetrated by other family members (Table 3.5). These figures are lower than the annual average over the period 1974 to 2000.

Between 1974 and 2001, 1,324 children under 18 were killed by family members, 1,128 (85%) by parents. Among these were 8 young females killed by spouses (Table 3.6).

Children under the age of six often beaten to death, others shot

The method of killing in family-related homicides of children and youth varies by the age of the victim. Between 1974 and 2001, children under age six were more likely to have been killed as a result of strangulation or a beating than by other means. In contrast, older victims were increasingly likely to die as the result of a shooting, from 32% of victims aged 6 to 8 to over half of victims between the ages of 15 and 17 (Table 3.7).

3.3 System responses to family violence against children and youth

System response to family violence against children and youth involve many initiatives developed within the judicial, educational and primary health care systems. Many types of interventions have been developed and implemented to meet the needs of child and youth victims of family violence. These interventions include child welfare legislation, procedures and protocols to protect young victims from violent family members, and counseling services and education programs for health care professionals and educators who come into contact with children on how to recognize abuse and respond to it.

Child welfare/protection legislation

Child welfare/protection legislation is a responsibility of the provinces and territories and each has adopted legislation that provides child welfare agencies with the authority to investigate alleged or suspected instances of child neglect and abuse. Some provinces have legislative provisions which delegate the delivery of services for First Nations children to Aboriginal child protection agencies. Investigations of suspected offences are carried out by the police force as well as child protective agencies. Police investigate any suspected *Criminal Code* infractions while child protective agencies investigate the living arrangements of the child to determine whether the child's needs are being adequately met.

Physical and sexual assault against children and youth are offences under the *Criminal Code of Canada*. A criminal investigation is carried out according to criminal law and procedures, while a child protection investigation will adhere to the rules of the jurisdiction. Generally, an investigation is conducted in partnership between police and local child welfare officials. This approach helps to reduce the number of times a young victim must go through the interview process as part of the investigation. In addition, these interviews are frequently videotaped in hopes of reducing the stress experienced by the victim throughout the investigation process (Secretariat to the Federal/Provincial/Territorial Working Group on Child and Family Services Information, 2002).

Children in protective services

In addition to investigating suspected cases of abuse, child welfare agencies also provide a wide range of protective and preventive services including counseling and support to the child and the family, and/or removal of a child from the home if circumstances require such action. National statistics on the number of children who are reported to

Ch	ild Protection Legislation	in the Provinces and Territories
Child Protection Legislation in the Provinces/Territories	Age of Protection/ Extended Care Provisions	Mandatory reporting and penalties for failing to report
Newfoundland and Labrador, Child Youth and Family Services Act (CYFSA)	Age of protection - under 16 years. Extended care provisions - 21 years	Mandatory reporting and failure to report child abuse or neglect may lead to a fine of up to \$10,000 or possible imprisonment of up to six months.
Prince Edward Island Child Protection Act, proclaimed April, 2003, C-5.1	Age of protection - 16 years. Extended care provisions - 18 years.	Mandatory reporting with a penalty of up to \$2,000, for failing to report neglect or abuse. Only exception is privileged solicitor-client relationships.
Nova Scotia Children and Family Services Act (CFSA) 1990	Age of protection - under 16 years. Extended care provisions - 21 years.	Mandatory reporting with a possible fine of up to \$2,000 or/and imprisonment of up to 6 months. A professional or official who has been involved with the child but fails to report any abuse may face a fine of up to \$5,000 and/or possible imprisonment of up to 1 year.
New Brunswick Family Services Act, S.N.B. 1980, c. F-2.2	Age of protection - 16 years and included disabled persons under the age of 19. Extended care provisions - beyond 19 years.	Mandatory reporting in instances of abuse under the age of 16, penalties for not reporting for professionals who fail to report subject to fine of up to \$7,500 or jail term of up to 90 days.
Québec Loi sur la protection de la jeunesse (Youth Protection Act), R.S.Q. c. P-34.1	Age of protection - 18 years. Extended care provisions - 21 years.	Mandatory reporting for professionals, employees of an institution, teachers or police officers who in the performance of their duties have grounds for reporting abuse. A penalty for not reporting is a fine between \$250 to \$2,500 and/or may lead to an offence.
Ontario The Child and Family Services Act	Age of protection - 16 years. Extended care provisions - 21 years crown wards only.	Mandatory reporting and any professional who refuses to do so is liable on conviction to a fine of up to \$1,000.
Manitoba The Child and Family Services Act	Age of protection - 18 years. Extended care provisions - 20 years.	Mandatory reporting, failure to do so results in the person committing an offence punishable on summary conviction, possible fine of up to \$500 and/or six month jail term.
Saskatchewan The Child and Family Services Act (CFSA)	Age of protection - unmarried person under 16 years. Extended care provisions - 21 years permanent wards or long term agreement.	Mandatory reporting and failure to report is punishable by a prison term of up to 24 months and/or a maximum fine of up to \$25,000
Alberta Child Welfare Act (CWA)	Age of protection - 18 years. Extended care provisions - 20 years.	Mandatory reporting and failure to do so is an offence liable to a fine of no more than \$2,000 and, in default of payment, to imprisonment for up to 6 months.
British Columbia Child, Family and Community Service Act	Age of protection - 19 years.	A person who fails to report a child in need of protection or knowingly reports false information commits an offence and is liable to a fine of up to \$10,000 and/or imprisonment term of up to 6 months.
Northwest Territories Child and Family Services Act	Age of Protection - 16 years. Extended provisions – 19 years.	A person failing to report is guilty on a summary conviction to a fine not exceeding \$5,000 or/and imprisonment for a term not exceeding six months.
Yukon Children's Act	Age of protection - 18 years. Extended care provisions - 19 years.	False or malicious reporting may result in a fine of up to \$5,000 and/or imprisonment of up to 6 months.
Nunavut Child and Family Services Act (CFSA)	Age of Protection - 16 years. Extended provisions – 19 years.	A person failing to report is guilty on a summary conviction to a fine not exceeding \$5,000 and/or imprisonment for a term not exceeding 6 months.
Source: Secretariat to the Federal/P	Provincial/Territorial Working Group on C	Child and Family Services Information, 2002.

child protection authorities are difficult to provide as the manner in which this information is collected and reported varies among provinces and territories. According to the Canadian Incidence Study (CIS) in 1998, there were an estimated 135,573 child maltreatment investigations. Of these, 45% were substantiated, 22% were suspected and the remainder were unsubstantiated (Trocmé et.al, 2001). The CIS collected data on referrals made for both the child and other family members. Sixty percent of cases required referrals beyond the services provided by the child welfare agency, and of these, 28% were referred for other family and/or parent counseling, 21% for a parent support group program, 10% for caregiver drug/alcohol counseling and 6% for domestic violence counseling. The most frequent child referrals were made for other types of child counseling (16%) and psychiatric or psychological services (15%) (Trocmé et.al, 2001).

The Child and Family Services Statistical Reports between 1996 and 1999 have compiled data from the provinces and territories on the number of children in care. "Children in need of care" refers to a child who has been deemed in need of protection under the respective provinces/ territories child protection legislation (Secretariat to the Federal/Provincial/Territorial Working Group on Child and Family Services Information. 2002a). As stated earlier, this legislation varies according to the age of the child/youth and what deems an appropriate action. The number of children placed in care has risen between 1997 and 1999 by 15%. According to CIS, 8% of child maltreatment cases in 1998 resulted in a child being placed in child welfare care.

Year	Total number of children ¹⁶ in need of care
1997	35,171
1998	38,098
1999	40,220

(Secretariat to the Federal/Provincial/Territorial Working Group on Child and Family Services Information, 2002a)

Protocols for reporting child maltreatment

According to data from the CIS, 59% of all referrals to child welfare agencies in 1998 were made by professionals who encountered children through their employment. Of this group, school personnel made the largest number of referrals (21%) followed by police (12%) and health care

professionals (5%) (Trocmé et.al, 2001). A primary service response to maltreatment of children is to provide these professionals with the tools and knowledge to recognize, document and report suspected instances of maltreatment.

Protocols provide professionals with standard procedures to follow and to adhere to in cases of child maltreatment. They detail the steps to take in order to properly diagnose and document a problem, coordinate services with other health care professionals, share information with child welfare services and the police, and prepare the necessary documentation for the courts.

Health care practitioners and other professionals, such as teachers, are required by law to report any cases of suspected child maltreatment. This process involves four steps. First the health practitioner assesses and evaluates the injury. The injury may be physical, emotional or psychological or a combination of all three. Once the assessment is complete, the practitioner then must report whether or not the injury is a result of abuse/maltreatment. If abuse is suspected, then the appropriate child welfare organization must be contacted. In the event that the health practitioner is uncertain, they are obliged to report the case to authorities. It is only when the practitioner is certain that maltreatment has not occurred that authorities are not contacted. The last stage of the process is a full investigation by the child welfare agency.

Children in shelters

Another system response which addresses the needs of abused children, is shelters for abused women. These institutions provide respite for women who are escaping an abusive relationship. They frequently arrive with their children, who may have witnessed violence which in many jurisdictions is considered a form of maltreatment. According to the Transition Home Survey, 2,999 children were residing in shelters with their mothers on a single day in 2002. Over half of the 482 transition homes surveyed reported that they provide programs for children who have witnessed violence or who are victims of violence. Other programs offered in many shelters are group and individual counseling, school classes or tutoring, indoor and outdoor recreation areas as well as culturally sensitive services for aboriginal and visible minority children. (For more information on services provided by shelters for children, see Chapter 4).

¹⁶ These figures do not include Quebec or Nunavut.

Kids Help Phone

Kids Help Phone is a national, bilingual confidential help line for children and youth. The service is available 24 hours a day, 7 days a week. Professional counselors respond to young callers who call with concerns on numerous issues that affect today's youth. Counselors then refer callers to programs and services in the caller's neighborhood that will help them deal with the issues they are facing. On average, the Kids Help Phone receives 1,000 calls per day.

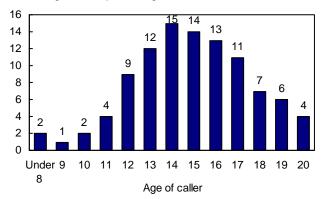
In 2001, the Kids Help Phone responded to approximately 315,000 calls from over 3,000 communities. The most common concern expressed by callers was in regard to their personal relationships (42%), followed by abusive behavior/violence (12%), health and medical issues (12%), sexuality (8%), substance abuse (5%), and lastly suicide (4%). The Kids Help Phone statistics include physical, verbal and emotional abuse in the category of abusive and violent behaviors, and includes all acts of violence whether it occurs inside or outside the home.

Those most likely to call with problems related to abusive behavior and violence, were between the ages of 12 and 17 (Figure 3.5) and were calling from the Prairie provinces or Nova Scotia (Table 3.9).

Figure 3.6

Percentage of callers with problems concerning abuse and violence issues for each age group

Percentage of calls presenting abuse/violence issues1



1 The category of abusive and violent behaviors includes physical, verbal and emotional abuse (and is not limited to abuse by a family member).

Source: Kids Help Phone 2001.

Table 3.9

Type of calls received by Kids Help Phone, 2001

Province/Territory	Relationships	Abusive behaviours/ violence ¹	Health Medical	Sexuality	Substance Abuse	Suicide	Other ²
				%			
Canada	42	12	12	8	5	4	17
Newfoundland and Labrador	37	13	18	8	7	5	13
Prince Edward Island	42	12	18	3	4	4	17
Nova Scotia	40	15	14	9	4	4	14
New Brunswick	45	9	11	11	6	5	13
Ontario	40	13	13	7	4	4	19
Quebec	49	9	8	9	5	4	16
Manitoba	42	15	13	7	6	3	15
Saskatchewan	41	16	11	7	6	4	15
Alberta	39	15	11	7	6	6	17
British Columbia	39	14	12	6	5	4	20
Yukon	42	10	5	0	8	3	33
North west Territories	46	10	7	8	11	6	13
Nunavut	48	10	4	6	7	8	17

¹ Abusive behaviors/violence includes physical, sexual, verbal and emotional abuse and is not limited to abuse by family members.

Source: Kids Help Phone, 2001

Kids Help Phone also maintains a comprehensive computer database to assist in referring callers to health and social services. At present, this database contains over 30,000 listings in over 2,300 communities. These services range from crisis intervention, nutrition, child abuse counseling, hostelling associations to poison control services. Their comprehensive database ensures that their counselors are well equipped to refer callers to community resources.

In May 2000, Kids Help Phone launched another service called Parent Help Line. This service is similar in format but with a different client group. Parents call the service for a multitude of reasons including parenting skills, health concerns, and discipline issues. The phone line has received a four-fold

increase in the numbers of calls they responded to in the past three years. In 2001, 7% of calls received by the Parent Help Line concerned abuse and violence.

Year	Total Number of Calls
1999	2,554
2000	4,441
2001	11,960

The toll free number for Kids Help Phone is 1-800-668-6868. They can also be reached online at http://kidshelp.sympatico.ca. To reach the Parent Help Line parents can call 1-888-603-9100, online at http://parentsinfo.sympatico.ca.

Other includes calls about feelings, practical issues, self-concept, social adjustment and other issues.

Table 3.1 Victims of sexual and physical assault by age group, 20011,2

Type of assault	Total victims	Total victims	Total child and youth victims	Total adult victims (18+)	Age breakdown as a proportion of total children and youth victims (under age 18)				
			victims (<18)	(18+)	Total	<3	3-11	12-17	
	No.	%	%	%	%	%	%	%	
Assault – Total	140,006	100	24	76	100	2	27	71	
Sexual offences – Total	13,494	100	61	39	100	2	44	54	
Aggravated sexual assault	101	100	38	62	100	3	34	63	
Sexual assault with a weapon	186	100	23	77	100	0	26	74	
Sexual assault	11,594	100	58	42	100	2	42	56	
Other sexual crimes ³	1,613	100	85	15	100	2	57	42	
Physical assault – Total	126,512	100	20	80	100	2	22	76	
Aggravated assault	1,700	100	12	88	100	14	11	74	
Assault with weapon/causing bodily harm	26,518	100	19	81	100	2	20	78	
Common assault	92,891	100	21	79	100	2	22	76	
Discharge firearm with intent	66	100	30	70	100	0	20	80	
Assault against peace-public officer	3,667	100	0	100	0	0	0	100	
Other assaults ⁴	1,670	100	15	85	100	7	26	67	

Excludes cases where age was unknown.

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 3.2 Relationship of accused to child and youth victims of assault, 20011,2

Delationahin of accused					Sex of vic	tims and offen	ce type			
Relationship of accused to victim, by age of victim		Total assault			S	exual offences	3	Physical assault		
		Total	Female	Male	Total	Female	Male	Total	Female	Male
Total	No. %	33,017 100	16,042 100	16,975 100	8,171 100	6,546 100	1,625 100	24,846 100	9,496 100	15,350 100
Family	%	23	30	17	31	31	33	21	30	15
Acquaintance ⁴	%	52	50	53	48	48	49	53	52	54
Stranger	%	18	14	22	14	15	11	19	13	23
Unknown	%	7	6	8	7	6	8	7	6	8
Relationship of accused to victim, child under 12										
Total	No. %	9,686 100	4,638 100	5,048 100	3,765 100	2,643 100	1,122 100	5,921 100	1,995 100	3,926 100
Family	%	37	43	31	43	46	37	33	40	29
Acquaintance ⁴	%	43	38	48	40	37	46	45	40	48
Stranger	%	13	11	14	9	10	9	15	12	16
Unknown	%	7	7	7	8	7	8	7	8	7
Relationship of accused to victim, youth 12-17										
Total	No. %	23,331 100	11,404 100	11,927 100	4,406 100	3,903 100	503 100	18,925 100	7,501 100	11,424 100
Family	%	18	25	11	21	20	25	17	27	11
Acquaintance ⁴	%	55	55	56	55	55	53	55	55	56
Stranger	%	20	15	25	18	19	15	21	13	26
Unknown	%	7	5	8	6	6	7	7	5	7

Excludes cases in which the sex of the victim was unknown.

Data are not nationally representative. Based on data from 154 police departments, representing 56% of the national volume of crime in 2001. Other sexual offences include sexual interference, invitation to sexual touching, sexual exploitation, incest and anal intercourse. Other assault combines unlawfully causing bodily harm and criminal negligence causing bodily harm, etc., into one category.

Data are not nationally representative. Based on data from 154 police departments representing 56% of the national volume of crime in 2001.

Sexual offences includes all sexual assaults and "other sexual crimes" category which includes sexual interference, sexual touching, sexual exploitation and incest.

Acquaintance includes any relationship in which the accused and the victim are familiar with each other, such as close friend, business relationship, teacher, coach, doctor or caregiver. Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 3.3 Child and youth victims of assault by family members, 2001^{1,2}

Deletionship of accuse	ما				Sex of	victim			
Relationship of accuse to victim, child and you		Total assault		Sexual offences ⁶		Physical assault			
			Total	Female	Male	Total	Female	Male	
Total	No. %	7,733 100	2,553 100	2,012 100	541 100	5,180 100	2,805 100	2,375 100	
Parent ³	%	58	41	43	35	67	63	71	
Sibling ⁴	%	23	28	28	30	20	20	20	
Extended family ⁵	%	15	29	28	35	8	7	9	
Spouse	%	4	1	2	0	6	10	1	
Child victims under 12	2								
Total	No. %	3,563 100	1,629 100	1,213 100	416 100	1,934 100	797 100	1,137 100	
Parent ³	%	61	40	41	36	80	81	79	
Sibling ⁴	%	21	31	31	30	12	13	12	
Extended family ⁵	%	18	29	28	34	8	6	9	
Spouse	%	0	0	0	0	0	0	0	
Youth victims, 12 - 17									
Total	No. %	4,170 100	924 100	799 100	125 100	3,246 100	2,008 100	1,238 100	
Parent ³	%	55	43	45	30	59	56	64	
Sibling ⁴	%	24	25	24	30	24	23	27	
Extended family ⁵	%	12	29	27	38	7	7	9	
Spouse	%	8	4	4	2	9	14	1	

Data are not nationally representative. Based on data from 154 police departments representing 56% of the national volume of crime in 2001.

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 3.4 Child and youth victims of sexual and physical assault by accused-victim relationship, 1995 to 2001^{1,2,3}

			Relationship of accused to victim									
Year	Total		Sexual offences ⁴				Physical assault					
		Fai	Family		family ⁵	Family Non		Non-fa	ı-family ⁵			
	No.	No.	Rate	No.	Rate	No.	Rate	No.	Rate			
1995	20,802	1,980	60	3,841	117	3,181	97	11,800	358			
1996	20,130	1,946	59	3,734	113	3,133	95	11,317	341			
1997	19,892	1,825	55	3,696	111	3,030	91	11,341	340			
1998	21,192	1,748	52	3,702	111	3,599	108	12,143	363			
1999	20,981	1,715	51	3,667	110	3,604	108	11,995	359			
2000	22,804	1,848	55	3,853	115	3,902	117	13,201	395			
2001	22,056	1,879	56	3,680	111	3,847	116	12,650	380			

Data are not nationally representative. Based on data from 104 police departments representing 42% of the national volume of crime in 2001.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Excludes cases where sex of the victim was unknown.

Includes a small number of cases where age or the relationship between the accused and the victim may have been miscoded.

⁴ Sibling includes natural, step, half, foster or adopted siblings.

⁵ Extended family includes others related by blood, marriage, adoption or foster care.

⁶ Sexual offences includes all sexual assaults and "other sexual crimes" category which includes sexual interference, sexual touching, sexual exploitation and incest.

² Excludes cases where the age of the victim was unknown.

Rates per 100,000 persons under the age of 18, based on postcensal estimates. Demography Division, Statistics Canada.

⁴ Sexual offences includes all sexual assaults and "other sexual crimes" category which includes sexual interference, sexual touching, sexual exploitation and incest.

Non-family includes close friends, acquaintances of a business nature, casual acquaintances and strangers.

Table 3.5 Solved homicides of victims under the age 18 by accused-victim relationship, 2001^{1,2}

Relationship of accused to victim	20	001	Annual averag	e 1974-2000 ^r
	No.	%	No.	%
Total family homicides	43	62	49	63
Total fathers	20	29	24	30
Biological fathers	16	23	22	28
Step-fathers	4	6	3	4
Total mothers	17	25	18	23
Biological mothers	16	23	17	22
Step-mothers	1	1	0	0
Sibling	3	4	3	4
Spouse	0	0	0	0
Other family ³	3	4	4	5
Total non-family homicides	26	38	29	37
Acquaintance ⁴	10	14	21	26
Stranger	11	16	8	10
Unknown	5	7	0	0
Total solved homicides	69	100	78	100

r revised

Note: Percentages may not total 100% due to rounding.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Table 3.6 Family homicides of children and youth by sex of victim, 1974 - 2001^{1,2}

Deletional de contration		Sex of victim							
Relationship of accused to victim	Tota	al	Fem	nale	Male				
	No.	%	No.	%	No.	%			
Total family homicides	1,324	100	611	100	713	100			
Biological father	581	44	268	44	313	44			
Step-father	71	5	31	5	40	6			
Biological mother	469	35	222	36	247	35			
Step-mother	7	1	5	1	2	0			
Brother	68	5	29	5	39	5			
Sister	7	1	3	0	4	1			
Husband	8	1	8	1	0	0			
Other family ³	113	9	45	7	68	10			

¹ Includes only homicide incidents in which there are known suspects. If there was more than one suspect, only the closest relationship to the victim is recorded.

Note: Percentages may not total 100% due to rounding.

Homicide numbers for 2000 are revised.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

¹ Includes only homicide incidents in which there are known suspects. If there was more than one suspect, only the closest relationship to the victim is recorded.

Includes only victims with known age.

³ Includes all other family members related through blood, marriage, adoption or foster care.

⁴ Acquaintance includes close friend, business relationship and casual acquaintance.

² Includes only victims with known age and sex.

³ Includes all other family members related through blood, marriage, adoption or foster care.

Table 3.7 Cause of death for child and youth homicides committed by family members, 1974-20011

0									Age of	victim						
Cause of death	Total victims		Infant		1-2		3	3-5	6-8		9-11		12	12-14	15-	-17
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total	1,326	100	379	100	254	100	236	100	136	100	110	100	105	100	106	100
Shooting	267	20	12	3	24	9	40	17	43	32	46	42	47	45	55	52
Stabbing	121	9	20	5	19	7	20	8	20	15	13	12	8	8	21	20
Beating	324	24	130	34	94	37	56	24	13	10	10	9	10	10	11	10
Strangulation Shaken Baby	346	26	118	31	64	25	80	34	34	25	25	23	14	13	11	10
Syndrome ³	30	2	21	6	8	3	1	0	0	0	0	0	0	0	0	0
Other ⁴	218	16	67	18	42	17	38	16	26	19	14	13	24	23	7	7
Unknown	20	2	11	3	3	1	1	0	0	0	2	2	2	2	1	1

Includes only those cases in which victim age and cause of death are known.

Includes only those cases in which victim age and cause of death are known.
 Strangulation includes all deaths caused by asphyxiation, e.g., suffocation and drowning.
 Shaken Baby Syndrome (SBS) was added to the Homicide Survey as a cause of death in 1997.
 Other includes poisoning, smoke inhalation and burns, motor vehicle, causing a heart attack, exposure, etc.
 Note: Percentages may not total 100% due to rounding.

 Homicide numbers for 2000 are revised.

 Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

4.0 SHELTERS FOR ABUSED WOMEN AND THEIR CHILDREN¹⁷

by Ruth Code

The seriousness of family violence, and its consequences to women and their children has mobilized community groups and governments to undertake actions and strategies aimed at the reduction of violence within the family. The shelter system is a vital part of the response to family violence. Currently, shelters exist in every province and territory and provide services to women and children victims of abuse. Shelters are intended to provide abused women and their children a safe place to live.

The purpose of this chapter is to provide information on the shelter system. A profile of the characteristics of the facilities who serve abused women and their children will be provided as will a profile of the characteristics of the clients served on April 15, 2002. In addition, information on the number of women and their children, who sought refuge for reasons of abuse during the 12 month period ending March 31, 2002, will be provided.

Since its inception in 1992, the Transition Home Survey has gathered data on the characteristics of residential agencies serving women victims of abuse in each province and territory. Information is gathered from all residential facilities (shelters) for abused women in each province and territory on the characteristics of the facilities and the services dispensed during the previous 12 months, as well as a one-day snapshot of the characteristics of women and children residents. In order to provide an accurate picture of the facilities that provide services to abused women and their children and range of services offered, the survey includes provincially funded shelters for abused women and their children as well as agencies that provide services that are not exclusive to abused women and children. For these reasons, shelters such as YWCA's, safe home networks and general emergency shelters are included within the survey.

Between 1992 and 2002, the number of shelters in Canada grew from 376 to 524. However, some consisted of adding new shelter types onto existing facilities. Counting only openings of new facilities and excluding those housed in existing shelters, the number of shelter closures in 2001/02 exceeded new shelter growth for that reporting year (19 closures compared to 14 new facilities).

Types of shelters

The term shelter is used broadly to refer to all residential facilities for abused women and their dependent children. The types of shelters are defined by the Transition Home Survey as:

Transition Home - Short or moderate term (1 day to 11 weeks) first stage emergency housing.

Second Stage Housing - Long-term (3-12 months) secure housing with support and referral services designed to assist women while they search for permanent housing.

Safe Home Network – A network of private homes in rural or remote areas where there is no full-fledged operating shelter. It offers subsidiary very short-term (1-3 days) emergency housing.

Women's Emergency Centre/Shelter - Short-term (1-21 days) respite (temporary relief) for women and their dependent children.

Emergency Shelter - Short-term (1-3 days) respite for a wide population range, not exclusively abused women. Some facilities may provide accommodation for men as well as women. This type of facility may accommodate residents who are not associated with family abuse but are without a home due to an emergency situation (e.g., eviction for non-payment of rent). Other than residential (room and board) services, these shelters offer few additional client services.

Family Resource Centre - An Ontario government initiative that serves a wide range of clients and provides clients with an extensive array of information and referrals as well as residential services.

Other - All other facilities/shelters not otherwise classified. This category may include Rural Family Violence Prevention Centres in Alberta, Interim Housing in Manitoba, and other types of emergency shelters, such as YWCA's. These services may not be exclusive to abused women.

¹⁷ For further information please refer to Code, R. (2003) "Canada's Shelters for Abused Women, 2001/02" Juristat. Catalogue no. 85-002. Vol. 23 no. 4.

4.1 Shelters in Canada: An overview

The number of shelters steadily increased since the 1970's in part through capital funding assistance for shelters provided by Canada Mortgage and Housing Corporation (CMHC) under the non-profit housing program of the National Housing Act, and operating funds from provincial and territorial programs (SPR Associates Inc., 1997). CMHC's capital funding continued with Project Haven. This program spent \$22 million between 1988 and 1992 to establish or add transition homes with special priority to communities without transition homes (such as rural or remote areas and reserves), and shelters for immigrant women and women with disabilities.

Between 1992 and 1995, CMHC's Next Step Program funded the creation of 34 second stage housing projects and 23 first stage shelters (transition homes) across Canada. Second stage housing financing was targeted to communities where first stage shelters existed but women needed secure housing for a longer period as they searched for permanent housing in the community. From 1997/98 to 2001/02, CMHC approved 50 additional shelters for victims of family violence, creating 677 new shelter spaces. In addition to the efforts of federal agencies, there are many provincial, territorial and community programs that provide services and alternatives for women who have experienced abuse. These programs include expenditures for the on-going operation and maintenance of shelters, counselling and prevention programs, legal services and public awareness programs.

Several recent Canadian evaluations examined how effectively shelters provide assistance to abused women and their children. An evaluation conducted by CMHC in 1997 reported that a high proportion of the 9,000 residents of the 77 shelters studied during a one-year period rated the shelter support and services as "valuable." Similarly, the 1993 Violence Against Women Survey reported that 81% of the women who used a shelter found it helpful (Rodgers, 1994). In addition, an evaluation of 68 second-stage shelters funded by CMHC Canadian Next Step Program concluded that the availability of second-stage housing was a critical factor in the decision not to return to an abusive partner (SPR Associates, 1997).

In 1999/2000 and 2001/02 there were no shelters in Canada that provided residential services exclusively to adult male victims of family abuse. However, some shelters do provide some services to men abused by their family.

Shelters are a primary resource for protecting abused women and their children from abusive partners. In the year ending March 31, 2002, 18 55,901 women and 45,347 children were admitted to 482 shelters (482 of a total of 524 responded to the Transition Home Survey). The majority of women and children residing in shelters were there to escape abuse. Abuse takes on many forms including sexual and physical abuse, threats, harassment and financial and psychological abuse. In a snapshot taken as of noon on April 15, 2002, 73% of women and 84% of children in shelters were fleeing abusive situations. Of these, 54% were women with dependent children, 71% of whom were under than ten years old.

Most shelters for abused women and their children are transition homes (54% of all shelters), followed by emergency type shelters (20% of all shelters) and second stage housing (16%). In 2001/02, 90% of shelters served urban areas. Providing services to rural or remote communities and culturally sensitive service for aboriginal communities living on-reserve is one of the continuing challenges for shelters. In 2001/02, 42% of shelters served rural areas and 28% provided services to reserves.

Types of services offered by shelters

In addition to providing secure and safe accommodation, the majority of shelters offer a variety of services both to residents and women living in the community. Services are aimed at assisting women to deal with complicated choices about leaving abusive partners and supporting themselves and their children, and provide help negotiating court processes and dealing with the consequences associated with the violence. Results from the latest Transition Home Survey indicate that 89% of shelters provided individual short-term counselling to women residents, followed by advocacy (87%), specialized services for women aged 55 and older (84%), housing referral (83%), parenting skills (76%), group counselling (65%), and culturally sensitive services for Aboriginal women¹⁹ (63%). Over half of all shelters (56%) reported providing mental health services and 42% reported providing addiction counselling to women residents.

¹⁸ The precise reporting period may vary. Shelters were asked to provide information for the twelve-month period ending March 31, 2002 or their own twelve-month fiscal period.

¹⁹ Culturally sensitive services for Aboriginal women were such services as recognition of traditional healing methods, use of spiritual elders and teachers, accessibility to language and interpreters and Aboriginal language materials, and recognition and understanding of Aboriginal cultural norms and beliefs.

Providing services to non-residents and ex-residents is also an important aspect of a shelter's overall workload. Shelters offer assistance to ex-resident women in need of on-going support in order to deal with a variety of factors including further threats of abuse, safe long term housing, employment and legal assistance. On April 15, 2002, shelters had 1.4 times as many requests for assistance from ex-residents and non-residents as there were women residing in shelters. Shelters provided assistance to nonresidents²⁰ through a 24-hour crisis telephone line (69%). individual short-term counselling (65%), advocacy (59%), and legal services (51%). The majority of facilities provided ex-resident women with services such as individual shortterm counselling (71%), a 24-hour crisis line (66%), advocacy (69%), legal services (54%), and group counselling (48%).

Services provided to children victims and witnesses of family violence are an important component of the services provided by shelters. In 2001/02, 80% of shelters provided indoor recreational space and 76% provided outdoor recreational space to child residents. Shelters also provided group counselling (56%) and programs for children who have witnessed or experienced abuse (68%), a drop from 75% in 1999/2000.

Shelters also rely on other agencies within the community, often working together in multi-agency co-ordination committees, to provide services to their residents. The majority of facilities were able to obtain services in the community for their residents in the areas of job training or employment search, mental health services (71% each), financial assistance or welfare (68%), medical services (69%), and individual long-term counselling (57%).

Accessibility

Sixty-nine percent of shelters reported at least one building entrance that was wheelchair accessible. About one half of shelters reported having bedrooms and bathrooms that were wheelchair accessible (52% and 58% respectively). It should be noted that since the mid-1990s, many shelters have improved accessibility through CMHC's Shelter Enhancement Program. In 2001/02, 20% of shelters provided TDD\TTY (telephone device for deaf) services for people who are hearing impaired, and 23% provided sign language communication or interpretation services. Eighteen percent of shelters provided large print reading materials to people who are visually impaired and 5% of shelters provided Braille reading materials.

A profile of residents in shelters on snapshot day – April 15, 2002

A woman's decision to leave an abusive partner is often motivated by factors related to the severity of the abuse, reporting to police and having children who witness the violence. Of the women residing in shelters for reasons of abuse, 85% were escaping emotional/psychological abuse, 74% physical violence, 53% threats, 36% harassment and 29% sexual abuse. According to available data, many women make the decision to leave when the violence begins to affect their children. Of those women with parenting responsibilities on snapshot day in 2002, 57% were protecting their children from witnessing the abuse of their mother, 43% were protecting them from psychological abuse, 23% from physical abuse, 21% from threats, 12% from neglect, and 6% from sexual abuse.²¹

Of the women residing in shelters for reasons other than abuse, the majority (57%) were unable to find affordable housing and 31% were experiencing short-term housing problems.

According to the Transition Home Survey, the largest proportion of abused women residing in shelters on snapshot day were aged 25 to 34 (35% in 2001/02 and 1999-1998), while those aged 35 to 44 accounted for 26% in 2001/02 (28% in 1999/2000). Women aged 45 and over made up the smallest proportion of shelter users, as they accounted for only 13% of residents, not surprising given their relatively lower rates of spousal violence (see Chapter 1 for spousal rates of violence). Age was unknown for 7% of women.

The majority of children accompanying their mother to a shelter were under age 10. Children under 5 years of age constituted 39% of all children admitted and an additional 32% were aged 5 to 9. Children aged 10 to 15 made up 21%, while the smallest group (3%) was aged 16 and over. For 4% of children, the age was not known.

Many women and children referred elsewhere

While shelters are one source of help for abused women, they cannot serve all those that come to their door. On snapshot day in 2002, 115 shelters reported that they

²⁰ A non-resident was someone who never resided in the shelter but was receiving services, while an ex-resident was someone who had resided in the shelter in the past and was receiving follow-up services.

²¹ Total exceed 100% due to multiple responses.

referred 295 women and 257 children elsewhere. A full three-quarter of these shelters (75%) could not accommodate the women and children because the shelter was full. In 8% of shelters the reason for the referral was drug or alcohol issues, 9% because of mental health problems, 3% because of non-admit or caution list, and 17% because of other reasons.

Safe housing upon departure

On April 15, 2002, 110 women and 64 children departed before noon from 430 shelters across Canada. A minority of women (12%) returned to their spouse (comparatively, 28% of women on snapshot day 1998 returned to their spouse). One quarter (25%) left the shelter for alternate housing, 12% went to stay with friends or relatives, 19% went to other housing, 8% returned home without their spouse and for 25% of women it was not known where they were going to reside.

4.2 Trends in Shelter Usage²²

Since the characteristics of shelters and women and children residents change over time and the number of shelters continues to change (through the development of new shelters, shelter closures, and changes in designation), one way to measure change over time is to compare the results of survey cycles by holding constant the shelters studied. For this reason, a trend data file was created that contains only those facilities that responded to the 1998, 2000 and 2002 cycles of the survey. Shelters that did not respond to all three cycles were excluded. Information presented in this section is representative of the trends of a subset made up of 359 shelters that meet these requirements.

Decrease in the number of children residing in shelters

In the year ending March 31, 1998, 74,813 residents (38,920 women and 35,893 children) were admitted to the 355 shelters that responded to that question in all three survey cycles. In the year ending March 31, 2000, the number of residents admitted to these same facilities dropped to 67,995 (36,736 women and 31,259 children) and then increased slightly to 71,273 (38,738 women and 32,535 children) on March 31, 2002 (Table 4.1). A 10% decrease in the number of children in shelters contributed the most to the overall decline in annual admissions to these facilities, from 1998 to 2002. This compares to a 2% decrease in the number of women admitted from 1998 to 2002.

Snapshot day trend data indicates results similar to annual admission data, whereby there has been a decrease in the number of children accompanying their mothers to shelters over time. From April 20, 1998 to April 15, 2002, there was an 8% decrease in the number of children residents. There was also a decrease in the percentage of abused women admitted with their children on respective snapshot days over the three reporting periods.²³ The percentage of abused women admitted with their children declined from 58% to 56% and further to 54%. Despite the decline in the number of children admitted to shelters, overall there have been increases in the number of women who brought their children to shelters to protect them from physical abuse, threats, psychological abuse, and witnessing the abuse of their mothers (Table 4.2).

The decrease in the number of children accompanying their mothers to shelters coincided with amendments to provincial child welfare policies whereby it is possible for children to be apprehended by child welfare authorities when their mothers have been abused. The decrease may also be explained by the changing profile of shelters in the survey whereby transition homes are declining while the number of emergency shelters has grown.

Decrease in the percentage of transition homes

The types of shelters available have also changed overtime. The trend data controls for the influence of shifts in response rates over time on the breakdown of shelter types. In 1998, 237 (66%) of the 359 shelters that make up the subset consisted of transition homes. This number dropped over time to 225 (63%) in 2000 and 218 (61%) in 2002. Over the same time period, the number of emergency shelters and women's emergency centres grew from 40 (11%) in 1998 to 48 (14%) in 2000 to 58 (16%) in 2002. This suggests that some shelters changed designation from transition homes to emergency shelters. The number of second stage homes remained stable at 14% of the total from 1998 to 2002. While there has been a decrease in the number of transition homes, on average almost 9 in 10 women (88%) residing in transition homes and second stage homes over the three reporting periods were there for reasons of abuse. Comparatively, on average, 6 in 10 women (62%) in emergency shelters (women's emergency shelters and general emergency shelters) were there for reasons of abuse (Table 4.3).

When presenting trend data information, the 1997/98, 1999/2000 and 2001/02 Transition Home Survey will be referred to as if they pertained solely to the year in which they were conducted. In reality, annual information for the 1997/98 Transition Home Survey covered the period April 1, 1997 to March 31, 1998 while the snapshot was April 20, 1998. The 1999/2000 cycles covered the period April 1, 1999 to March 31, 2000 for annual information and the snapshot day was April 17, 2000. The 2001/02 cycle covered the period April 1, 2001 to March 31, 2002 for annual information and the snapshot day was April 15, 2002.

²³ A total of 357 shelters provided responses to this question in 1998, 2000 and 2002.

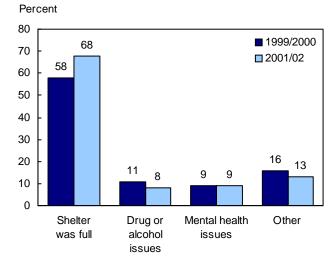
Increase in the percentage of shelters that referred women and children elsewhere because the shelter was full

Results from the trend data file also indicates an increase in the number of women and children referred elsewhere over the two reporting periods, 2000 and 2002. On snapshot day 2000, the 90 shelters that responded to this question referred 374 women and children elsewhere (191 women and 183 children). On snapshot day 2002, these same 90 shelters referred 426 women and children elsewhere (223 women and 203 children). In addition, the number of shelters that referred women and children elsewhere because the shelter was full increased by 10 percentage points over the two reporting periods (58% in 2000 and 68% in 2002). The number of shelters that referred women and children elsewhere because of drug or alcohol issues dropped from 11% in 2000 to 8% in 2002. The number of shelters that had to refer women and children elsewhere because of mental health issues remained consistent (9% in 2000 and 2002), as did the number of shelters that referred women and children elsewhere because of other reasons (16% in 2000 and 13% in 2002).

Trends in criminal justice system involvement

Most provinces and territories have guidelines and procedures in place to respond to family violence. Key amendments to the *Criminal Code* are directed at improving the criminal justice response by offering better protection for the safety and security of victims of family violence. Shelters however, are not required to report

Figure 4.1 Reasons for referrals elsewhere, 1998-2002



Source: Statistics Canada, Canadian Centre for Justice Statistics, Transition Home Survey, Trend Data File, 1998-2002

abuse of adults to police. The percentage of women who reported the most recent incident of abuse to the police remained consistent over the three reporting periods. However, according to the trend data file, the proportion of cases in which charges were laid has decreased (64% in 1998, 62% in 2000 and 60% in 2002). It is not known whether earlier incidents of abuse resulted in charges being laid.

Table 4.1 Annual admission¹ to shelters by facility, 1998-2002²

	Total					Children			
Canada	1998	2000	2002	1998	2000	2002	1998	2000	2002
Total	74,813	67,995	71,273	38,920	36,736	38,738	35,893	31,259	32,535
Transition Home	55,373	45,791	45,484	28,669	24,583	24,326	26,745	21,208	21,158
Second Stage Housing	1,879	1,997	1,881	772	871	839	1,107	1,126	1,042
Safe Home Network	393	370	605	199	189	333	194	181	272
Women's Emergency Centre	7,607	8,672	11,798	3,692	4,270	6,269	3,915	4,402	5,606
Emergency Shelter	5,963	7,162	7,816	3,533	4,754	4,859	2,430	2,408	2,957
Family Resource Centre	1,968	1,899	1,438	1,068	999	804	900	900	634
Other	1,107	1,417	2,251	734	733	1,293	373	684	866

¹ A person may be admitted more than once during the reporting period.

Table 4.2 Women in shelters protecting their children from abuse, 1998-2002

Year	1	998	20	00	2002	
	No.	%	No.	%	No.	%
Total women with parenting responsibilities	1,410	100	1,338	100	1,307	100
Protection of children from:						
Physical abuse	271	19	252	19	297	23
Sexual abuse	76	5	74	5	60	5
Threats	257	18	243	18	276	21
Psychological abuse	547	39	533	40	553	43
Neglect	172	12	146	11	139	11
Witnessing abuse of mother			675	50	703	54

^{..} not available for a specific reference period

Total exceeds 100% due to multiple responses.

Source: Statistics Canada, Canadian Centre for Justice Statistics, Transition Home Survey Trend Data File, 1998-2002.

Table 4.3 Women residing in shelters for reasons of abuse on snapshot day, by shelter type¹, 1998-2002

Year	Transition ear homes		Women residing in shelter for reasons of abuse		Second stage shelters		Women residing in shelter for reasons of abuse		Emergency type shelters		Women residing in shelters for reasons of abuse	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1998	237	66	1,004	91	49	14	368	96	40	11	388	67
2000	225	63	963	88	51	14	363	97	48	14	327	67
2002	218	60	1,048	87	51	14	373	95	58	17	344	60

¹ Figures relate only to the 359 shelters that responded to these questions in the 1998, 2000 and 2002 cycles of the Transition Home Survey. **Source:** Statistics Canada, Canadian Centre for Justice Statistics, Transition Home Survey Trend Data File, 1998-2002.

² Figures relate only to the 359 shelters that responded to this question in both the 1998, 2000 and 2002 cycles of the survey. Source: Statistics Canada, Canadian Centre for Justice Statistics, Transition Home Survey, Trend Data File, 1998-2002.

5.0 RESPONSE OF COURTS AND CORRECTIONAL SYSTEMS TO FAMILY VIOLENCE

The following views are those of the authors and do not necessarily represent the opinions of the Canadian Centre for Justice Statistics or Statistics Canada. The evidence and data presented by the authors does not originate from Statistics Canada unless otherwise stated.

Major initiatives have been undertaken by courts and correctional systems across Canada to improve the response to victims and offenders of family violence. This chapter highlights initiatives in place in four jurisdictions to develop specialized domestic violence court programs: Ontario, Winnipeg, Calgary and the Yukon. It also outlines activities by the Correctional Service of Canada to identify offenders at risk of family violence and provide treatment programs for them.

5.1 Ontario Domestic Violence Courts Program

by Daniel Mark, Assistant Crown Attorney, Domestic Violence Work Team, Victim Services Division, Ministry of the Attorney General, Government of Ontario

As of January 2003, the province of Ontario had Domestic Violence Court (DVC) programs in 22 cities. The province is in the process of expanding the DVC program to every court jurisdiction in the province, for a total of 54 sites by 2004.

The Ontario DVC program has the following objectives:

1) to intervene early in domestic abuse situations; 2) to provide better support to victims of domestic abuse throughout the criminal justice process; and 3) to hold offenders accountable for their behaviour if they are found guilty of a domestic violence-related offence.

Ontario's DVC program includes two approaches to prosecuting domestic violence cases: early intervention and coordinated prosecution.

Early intervention

This component of the DVC program is designed to provide first-time offenders with an opportunity to learn non-abusive ways of resolving conflict (provided the victim agrees and certain conditions are met). To be eligible, the accused must meet the following criteria: 1) no prior conviction for a domestic violence—related offence;

2) no use of a weapon in the commission of the offence and; 3) no significant harm caused to the victim.

A domestic violence Crown Attorney screens the case for eligibility, and Victim Witness Assistance Program (VWAP) consults with the victim to seek her/his input and provide information and support. If eligible, the accused can opt to plead guilty, and be ordered by the court to attend a Partner Assault Response (PAR) program as a condition of bail. Upon completion of the PAR program, the accused returns for sentencing where the court receives a report of his/her progress in the program. In some sites, the accused is ordered to attend a PAR program as part of probation in which case there is no formal report back to the court.

The PAR program is a 16-week counselling/education program for people who have abused their partners. The program provides clients with an opportunity to examine the beliefs and attitudes that they have used to justify the abuse. The program teaches abusers how to develop relationships that are based on respect, autonomy and equality. A critical component of the PAR program involves communication with the victim. Program staff contact the victim while the abusive partner is in the program to improve the victim's safety by providing outreach and referrals to other community agencies.

If PAR program attendance is a condition of bail, during the 16 weeks, the Crown may consent to a request to vary, on an interim basis, the non-contact/non-communication bail conditions. In weighing the request, the Crown considers the impact on safety and the circumstances of the individual case. The victim must consent to any change to the non-contact/non-communication conditions.

The PAR program provides a follow-up report to the Crown once the accused has completed the program. When the accused returns to court for sentencing, the satisfactory

completion of the program can be considered as a mitigating factor in sentencing. Often, the Crown will recommend a conditional discharge. If the offender does not attend, does not participate fully, or re-offends during the course, the person can be considered to have breached bail conditions, and may be charged and processed through the Coordinated Prosecution stream.

If the PAR program is a condition of probation, the court does not receive a report once the accused has completed the program. However, if a further offence were committed (e.g. breach of probation charge), the accused would have to return to court.

Coordinated prosecution

The DVC program is designed to ensure that domestic violence cases are prosecuted where there are reasonable grounds to secure a conviction. Traditionally, the ability to proceed with a prosecution has largely depended on the victim's testimony. Because of fear or intimidation, victims often recanted their original statement to the police or refused to testify altogether.

As part of the DVC program, in addition to taking the victim's statement, the police obtain copies of 911 tapes, medical reports, and photographs of injuries, interviews with family and neighbours, and audio and / or video-taped victim statements. The police also lay charges where there are reasonable grounds to believe the offender has breached conditions of bail or probation. Specially trained domestic violence Crown Attorneys rely on the "enhanced evidence" to proceed with the prosecution, and to provide support to the victim.

Components of the DVC program

Regardless of size, all court jurisdictions in Ontario will have a specialized Domestic Violence Court program with the following components:

- an advisory committee of justice and community representatives to support the work of the Domestic Violence Court program;
- interpreters (to assist victims who do not speak English or French to communicate with police, Crown Attorneys and victim support staff);
- enhanced investigative procedures by police (including use of a risk indicator tool);
- designated Victim/Witness Assistance Program staff specially trained to give support, information and referrals to victims;

- designated Crown Attorneys specially trained in the prosecution of domestic violence cases, in order to produce consistency and continuity;
- specialized counselling programs for abusive partners with an outreach component for victims; and
- specialized processing to expedite cases and ensure coordination of services.

Implementation of the DVC program is done at the local level. It requires the involvement of justice sector participants working closely with leaders from the community. While the DVC program has a justice focus, community involvement is important to ensure that victims and their children have access to appropriate services.

Training for Crown Counsel

The training for Crown counsel in the area of domestic violence has become specialized. All new Crown Attorneys and those seeking to be specialists in domestic violence prosecutions must complete a one-week mandatory course on domestic violence. In the last four years, over 300 Crown Attorneys have completed this course.

Education conferences regularly include issues related to domestic violence. In the fall of 2002, Crown Attorneys from across the province participated in a Specialized Bail Advocacy Training Program to focus on issues related to bail preparation, bail advocacy and practice.

Police training

Ontario has developed a curriculum to train Domestic Violence Investigators, which involve community and justice system experts. The 3 to 5 day course profiles local services and expertise while also facilitating coordination and dialogue. Some of the topics include:

- Investigating domestic violence incidents
- Community and court resources
- Dynamics of domestic violence, including understanding the pressures on victims and their children
- Issues facing immigrant victims and victims with disabilities
- Impact of violence on children
- Legal issues (dual charging, evidence collection, statement taking, child witnesses)
- Intervention programs
- · Family Law issues and implications

Other training

Training at the local level, by local experts is one way to promote community coordination and involvement. Extensive materials have been developed for training of police officers, duty counsel, probation officers and other justice personnel.

5.2 Using the justice system in Winnipeg

by Jane Ursel, RESOLVE,24 University of Manitoba

Throughout 1990s, most jurisdictions in Canada introduced policies and legislation to provide greater protection to victims of family violence. Some jurisdictions have enacted civil legislation to extend protection to victims and to facilitate access to protection orders. The province of Manitoba began specialization within the criminal justice system through implementation of the Winnipeg Family Violence Court (FVC) in 1990 and later through the introduction of civil legislation in 1999.²⁵

The intent of civil domestic violence legislation in all jurisdictions is to expand the number of options available to victims to secure their safety. This section will provide an update on the progress of specialization in the criminal justice system in Winnipeg and will explore the impact of the introduction of civil protection orders on utilization of the criminal courts.

Program update

Manitoba was the first jurisdiction in Canada to develop a specialized criminal justice response for family violence cases. This response is composed of five components of specialization: 1) a pro-arrest policy; 2) women's advocacy and child victim witness advocacy programs; 3) a specialized prosecutorial unit, now consisting of 13 Crown Attorneys; 4) specifically designated court rooms and 5) a special unit in the probation office to deliver court mandated treatment programs. A number of new components have also been added to policing and correctional services.

Winnipeg Police Service

Innovations in policing in Winnipeg are twofold. First, the Winnipeg Police Service has introduced two special investigative teams to follow up on domestic violence incidents after police have first attended and filed a report. Activities include further investigation for cases going to trial and searching for missing accused who are accused persons who have fled. The second innovation is a pilot project launched in Winnipeg in 2000, consisting of two

early intervention teams. These teams consist of an officer and a social worker who work with couples in pre-arrest circumstances. Their mandate is to follow up on domestic cases in which a call was received, police responded and did not have sufficient evidence to make an arrest but reported that the couple involved were at risk for escalation. The program is designed to be pro-active, and to provide a team who will work to ensure that the couple is connected to services so that future potential escalation and arrest can be avoided.

Correctional services

Further specialization in correctional services includes the introduction of a domestic violence unit (DVU) in the Headingly Correctional facility in September 2000. This unit was designed with the intent of creating a focused therapeutic environment. It has a capacity for 76 offenders and an area for offenders with mental health disorders. The current program is adaptable to the wide range of sentences offenders may receive so that, at a minimum, they will receive a 5-day short-term program. Since opening, the DVU has completed 34 short-term programs with an average of 12 participants per group and 400 registrants. Of the 400, 395 successfully completed the program. The unit also has the capacity to provide a longerterm program – the Partner Abuse Intensive Group (PAIG). This 12-week program runs two groups concurrently, with 8 participants per group attending 9 hours per week. On days when groups are not in session, one-on-one counseling occurs. The longer program focuses on developing empathy for the victim(s) and learning non-violent methods of dealing with anger. In total, 12 long-term programs have been completed with 148 registrants of whom 126 successfully completed.

Statistical update on spouse abuse cases in family violence court²⁶

Between 1992 and 1999, 20,406 cases of spouse abuse came to the attention of the Winnipeg Family Violence Court (FVC). Among these, 84% of the accused were men and 84% of the victims were women. The majority (71%) of the cases involved ongoing relationships, while estranged partners accounted for 24% of the cases that came to court. In 80% of cases, the victim called the

²⁴ RESOLVE is tri-provincial family violence research network, with offices at the Universities of Manitoba, Saskatchewan and Calgary.

The Domestic Violence and Stalking Protection, Prevention and Compensation Act was introduced in Manitoba in October, 1999.

Spouse abuse includes all cases of intimate relations in which the victim is between the ages of 18 and 59 years. This includes same sex and estranged intimate relations (eg. ex spouse).

police, while in 4% of cases it was another family member who called (e.g. child, parent or relative). The proportion of accused with a prior record for crimes against persons has been rising, from 63% in 1992 to 80% in 1999.

Type of offence

The majority (85%) of spousal abuse cases appearing in the Winnipeg FVC between 1992 and 1999 involved physical assault, ranging from common assault (63%), assault causing bodily harm (11%), assault with a weapon (12%), aggravated assault (1%) and 23 cases of murder. Sexual assault and criminal harassment constituted a small percentage of the caseload, 2% and 1% respectively. However, there were a significant number of cases (34%) that involved breaches of court orders or probation orders.

Case outcome

The sentencing pattern in the Winnipeg FVC has been consistent over this 7-year period (1992-1999). Conditional sentences, introduced in 1996, remains the least frequent sentence in spousal abuse cases. The most frequent disposition is probation (49%) followed by incarceration of any type (37%) (Table 5.1). These sentences help send the message that spouse abuse is a serious crime that will have serious consequences for offenders. Together with this message is a strong commitment to rehabilitation. Sixty-two percent of all convicted offenders had supervised probation as one of their sentencing outcomes and 68% of these were mandated to batterers' treatment groups. In addition, the overwhelming majority (98%) of offenders sentenced to incarceration were sentenced to less than 2 years and as a result are in the provincial system which now has the special domestic violence unit (DVU) described above. The emphasis in this unit is on programming and treatment to break the cycle of violence.

Civil legislation

To date in Canada, there are six jurisdictions that have implemented civil legislation to provide protection to persons at risk of abuse by a family member: Saskatchewan (in 1994), Prince Edward Island (in 1996), Yukon (in 1997), Alberta (in 1998), Manitoba (in 1999), Nova Scotia (in 2003), and Ontario (passed in 2000 but not yet proclaimed). These civil recourses include emergency protection orders, orders providing temporary exclusive possession of the family home, civil restraining orders and other provisions designed for the protection of victims and their children. One primary advantage of civil domestic violence legislation is the immediacy of protection and practical intervention it offers by way of remedies to victims and children.

While the legislation is civil, a breach of a protection order constitutes a criminal offence. The Manitoba legislation differs from that in other jurisdictions because it also provides protection in cases of stalking. These orders are available on an emergency basis, are granted *ex partie*²⁷ and the respondent has 20 days to contest the order. In Manitoba, the orders do not have a time limit, while in other jurisdictions they are time limited.

This legislation is not intended to replace criminal prosecutions but is designed to provide individuals with another option to protect themselves. However, if the order is breached, the criminal justice system becomes involved. Table 5.2 indicates the number of applications for protection orders in Winnipeg in the year following implementation in October 1999.

Table 5.1 Sentencing patterns for spousal violence cases in Winnipeg Family Violence Court, 1992-1999¹

Type of sentence	Number	% of cases proceeding to sentence
Total	9,488	100
Probation (alone)	4,610	49
Incarceration of any type ²	3,495	37
Incarceration & probation	2,067	22
Fine	1,586	17
Conditional discharge	1,489	16
Absolute discharge	177	2
Conditional sentence	37	0

¹ Total exceeds 100% due to multiple outcomes per sentence.

Source: RESOLVE Manitoba

Without the respondent being present and without notice to the respondent that a hearing is taking place.

Includes incarceration, intermittent incarceration and time in custody.

Table 5.2 Protection Orders in Winnipeg, October 1999 to September 2000

Date	Applications	Orders G	ranted	Applications Dismissed		
	No.	No.	%	No.	%	
Total	1,199	848	71	351	29	
1999 4th Quarter	262	207	79	55	21	
2000 1st Quarter 2nd Quarter 3rd Quarter	275 324 338	208 216 217	76 67 64	67 108 121	24 33 36	

Missing 2% of cases which were withdrawn.

Source: RESOLVE Manitoba.

Between October 1999 and September 2000, there was an average of 92 applications per month and 71% of applicants were successful in having protection orders granted. As in the case of criminal court, the majority of victims/applicants were women (84%). Preliminary data for the year 2002 suggests that the average number of applicants has declined to between 50 and 60 per month.

Despite the high application rate for civil protection orders in Manitoba the existence of this option does not appear to have reduced the number of criminal cases appearing before the Family Violence Court in Winnipeg. They may have served to increase criminal matters because if the order is breached and the breach is reported, the police lay charges and the accused then appears before the criminal justice system. Comparing two years prior to the implementation of the civil legislation and two years after implementation, the volume of cases in FVC increased.²⁸

In conclusion, evidence suggests that a large number of victims of spousal violence in Manitoba are calling on the justice system for assistance in domestic violence cases. Statistics Canada's Transition Home Survey (Locke and Code, 2000) documented that in 2000 women in shelters in Manitoba were more likely to call police than women in

any other jurisdiction in Canada and the police were more likely to arrest when called (Transition Home Survey 1999/2000, Manitoba Fact Sheet). The introduction of civil protection legislation in September 1999 does not appear to have altered this pattern, although the application rate for these orders is among the highest in Canada.

5.3 HomeFront – Calgary's Coordinated Community Response to Domestic Violence

by Kevin McNichol, Trainer & Communications Officer, Government of Alberta

HomeFront is a four-year demonstration project that began in Calgary in May 2000 with the opening of a specialized domestic violence docket court. The project collaboratively works with 60 partner agencies that form a coordinated approach to domestic violence with a combination of law enforcement, criminal justice and community agency interventions.

Number of incidents resulting in arrest and number of court cases in Winnipeg Family Violence Court

Court year	Number of incidents	Number of court cases ¹		
1996/97	4,427	3,390		
1997/98	4,718	3,496		
1998/99	4,879	3,519		
1999/00	6,248	4,356		
2000/01	5,968	4,105		

The number of incidents exceeds the number of court cases because multiple incidents involving a single accused will be dealt with in a single hearing. Source: RESOLVE Manitoba.

An alternative explanation is that in February of 1999 there was a double domestic homicide that resulted in extensive media coverage. Such broad media coverage can help elevate public awareness of family violence and may result in increased willingness to report to police.

HomeFront is the culmination of 10 years of community development beginning with the Mayor's Task Force Against Violence in 1990. The project receives funding from all three levels of government and significant contributions from community and private donors. This varied financial support has allowed HomeFront and the Calgary community to develop a number of unique responses to domestic violence.

Unique features

The Domestic Conflict Unit of the Calgary Police Service consists of 10 constables and one Sergeant who handle all high risk and chronic domestic violence cases in the city. They review all files and provide risk assessment information to the criminal court. A specialized unit of probation officers monitors all persons under supervision for domestic violence related offences. The probation service works closely with treatment agencies to ensure that offenders comply with court mandated treatment programs. A specialized prosecutions unit handles all docket court domestic violence cases. HomeFront provides Domestic Court Case Workers with background information, risk assessments and information about victims' wishes regarding their case. They ensure victims have a voice in the court process and are provided with updates regarding the progress of their cases. Legal Aid provides full-time Duty Counsel to the specialized court. Many of the partner agencies within Calgary have begun screening for domestic violence with their clients. This has lead to an increasing number of referrals to both community intervention and law enforcement services.

A central component of HomeFront is a court team that sits every day in the specialized docket court. The team consists of members from each of the special units described above as well as Defence Counsel or Duty Counsel who discuss the possibility of resolving each case before the court. A discussion occurs on every case regarding the history, concerns and goals of the victim and accused allowing the court to arrive at effective dispositions and conditions with serious consideration given toward rehabilitative sentences involving mandated treatment. The team ensures that victim safety is a priority and accused are held accountable for their behaviour. Further, they encourage efficient and early resolutions of cases in order to interrupt the cycle of violence as close to the abusive incident as possible.

Calgary's Domestic Violence Court

Demographics

As part of the independent evaluation of HomeFront, 817 cases were tracked between May 1, 2001 and March 1, 2002. Eighty-four percent of accused were male and 82% of victims were female. The average age of the accused was 35 while the victims were on average 34 years. Twenty-one percent of the accused were unemployed while 17% of victims were unemployed. In 62% of the cases, children and youth under 18 years of age were involved in the family relationship.

Offences

The five most common charges laid in Domestic Violence Court were common assault (78%), uttering threats (21%), assault with a weapon (12%), breach of recognizance/failure to comply (11%), and mischief (7%).

Court process

The docket court handles on average 117 cases per week and settles 62% of all cases. Most (70%) of the cases appear within one month of the offence and 73% are processed within one month of first appearance. On average, cases are adjourned twice with 80% adjourned three times or less.

Docket Court resolutions

The majority of resolutions involve community supervision through peace bonds (58%) or supervised probation (28%). Offender treatment was the most frequent condition (84%), followed by alcohol/substance abuse treatment (52%), other counselling as directed (27%), abstaining from alcohol (39%), and no contact/communication with the victim (25%).

Trial Court resolutions

If the case was not resolved in docket court, it was then placed into a trial court, 122 cases were followed to trial. Of these cases 32% were resolved via peace bond (vs. 58% docket court). Twenty-five percent pled or were found guilty at trial (vs. 27%) and 34% were withdrawn for want of prosecution (vs. 4%). Sixty four percent received domestic violence treatment (vs. 84%), 60% a no contact order (vs. 25%), 22% alcohol/ substance abuse assessment and treatment (vs. 52%), 21% not to attend residence of complainant (vs. 30%) and 14% abstain from alcohol (vs. 39%).

Treatment

One of the unique features of HomeFront is that it provides for treatment of domestic violence offenders who have been ordered into counselling through the criminal justice system. This aims to break the cycle of violence as legal sanctions on their own often do little to change abusive behavior. Accused are referred to treatment programs directly from court and most enter treatment within one week of receiving their sentence. Eighty–four percent of all dispositions include offender treatment as a condition. Sixty-four percent of those referred to treatment successfully completed their programs.

5.4 Domestic Violence Treatment Option Court (DVTO)

A Yukon perspective on domestic violence and the courts

by Leah White, Counsellor Spousal Abuse Program, Victim Services/Family Violence Prevention Unit, Government of Yukon

The Domestic Violence Treatment Option Court (DVTO) was developed two years ago in response to the limitations of the traditional court processes in meeting all of the needs of battered women or other victims of family violence. The development of the DVTO involved a working group which included representatives from Probation Services, the Family Violence Prevention Unit, defense counsel, Royal Canadian Mounted Police, Community and Correction Services, Victim Services, the Victoria Faulkner Women's Centre, Kaushee's Place and the judiciary. The intention was to explore an alternative system for complainants of family violence which would be responsive to their needs and wishes and encourage offenders to accept responsibility at the earliest opportunity. In addition this program would make available treatment, counseling and programming for both offenders and complainants prior to final court adjudication.

Yukon DVTO Court

The Yukon Domestic Violence Treatment Option Court recognizes that family violence is a serious criminal act. It also recognizes that due to the impact on the entire family, a response combining the judicial system, treatment and victim related supports and services is needed. Rather than engaging merely in a court process, the DVTO is a therapeutic treatment alternative designed to play an important role in the rehabilitation of offenders.

Unlike traditional courts, this process can also provide victims with the choice to be involved in the court process or not. Very often, victims of domestic violence do not want to invoke the justice system - they simply want the violence

to stop. For that reason, it was important to develop and make available a variety of alternatives.

The DVTO Court operates on several principals: 1) family violence is a learned behavior that can be changed; 2) offenders need to take responsibility for their actions and be held accountable, while also being supported with counseling; 3) early intervention by a multi-disciplinary team is essential; 4) initial and ongoing support must be offered to victims and their families; and 5) community based programs, counseling and supervision are more effective than incarceration in treating this type of behavior.

The DVTO court has specially designated judges and defence lawyers. In addition, resource people such as Probation Officers, counselors from the Spousal Abuse Program (SAP) and Victim Services regularly attend Court to provide assistance. The DVTO court also provides support to victims in safety planning, referrals for counseling for victims and their children, updates on the offender's progress, assistance with court attendance and preparation of victim impact statements. All of the domestic violence cases are fast tracked and counselors provide the Court with monthly progress summaries.

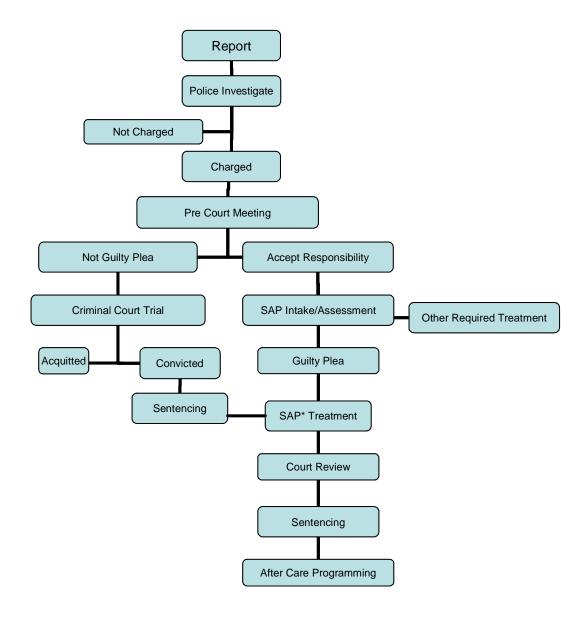
How does the accused enter the DVTO Court?

After the RCMP has laid a charge that involves allegations of domestic violence, a Court date is issued for the accused to attend DVTO Court. The assigned Defence Counsel will review the case with the accused and explain the DVTO Court Process. If the accused chooses to proceed with the case through DVTO Court, the matter will be adjourned for approximately two weeks so that the Spousal Abuse Program (SAP) counselors can complete an assessment and determine if the accused is eligible for treatment through the SAP. If it is concluded that the accused is eligible for the program and chooses to proceed through the DVTO Court process, they will appear in court and indicate that they are accepting responsibility for the charge(s). The sentencing hearing will then be postponed for several months to allow the accused to complete the Spousal Abuse Program and address any other treatment needs. The accused will be required to attend Court on a monthly basis to check in and report on their treatment progress. Following the completion of SAP or other treatment, a written report on the accused's progress will be completed by the counselor. A copy of the report will be given to the accused, Defence Counsel, the Crown and the Court. The sentencing judge will review the report and impose a sentence that reflects the accused's progress, while also addressing any future counseling and safety issues.

As part of its maintenance the Yukon DVTO is undergoing an independent evaluation conducted by the Canadian Research Institute for Law and the Family, with funding

through the Department of Justice Canada. This evaluation is expected to be completed in March, 2004.

Processing on Cases in the Domestic Violence Treatment Option Program *SAP Spousal Abuse Program



5.5 Correctional Service of Canada's Response to Family Violence

by Nicole Allegri, Program Assistant, CSC

In the Correctional Service of Canada (CSC), identifying risk for spousal violence is a two-part process, administered through the Family Violence Risk Assessment (FVRA). The first step involves a screening tool that identifies offenders who have perpetrated or are suspected of perpetrating family violence. If the offender is screened in using the initial criteria, they will receive the Spousal Assault Risk Assessment (SARA; Kropp, Hart, Webster, & Eaves, 1995) to determine their risk level. The SARA is a risk assessment tool used to assess the risk of spousal violence and identify factors to monitor or manage family violence risk. Based on results from the SARA using a sample of federal offenders, it was found that 20% of offenders are at high risk for future family violence and an additional 20% are at moderate risk. A moderate or high risk rating indicates the need to provide treatment for the offender.

CSC has provided family violence treatment interventions to offenders since 1989/90. In 2001/02, a total of 909 offenders received family violence treatment at CSC. Of these offenders who received treatment, 68% received treatment while incarcerated and 32% received treatment upon release into the community.

Offenders are referred to programs based on their risk level and demonstrated pattern of violence. Two programs are delivered nationally: the High Intensity Family Violence Prevention Program (HIFVPP) and the Moderate Intensity Family Violence Prevention Program (MIFVPP). The focus of these programs is to teach offenders skills that may prevent future violence.

High risk offenders have been identified as having a range of specific skills deficits (Andrews & Bonta, 1998). As such, offenders are taught communication, social and thinking skills and they are given the opportunity to practice and

rehearse these skills in order for them to avoid violence within their relationships. In addition to the two national programs, there is a maintenance program for offenders who have successfully completed moderate and high intensity programs. As well, there is a treatment primer given to resistant offenders who are initially reluctant to participate in programming to address their risk for spousal violence perpetration.

High Intensity Family Violence Prevention Program (HIFVPP)

The HIFVPP is designed for male offenders who have demonstrated a pattern of violence against intimate female partners (at least two incidents) and are assessed as High Risk on the SARA guide. The program targets problems in thinking (irrational beliefs and negative attitudes), emotional control, social skills and self-regulation related to intimate partner violence and abuse. The HIFVPP is a high intensity cognitive-behavioural reintegration program for federal offenders. The HIFVPP consists of about 75 2.5 hour group sessions delivered over a period of approximately 15 weeks. There are also 8 to 10 individual counselling sessions scheduled with each participant's primary counsellor. The high intensity program is delivered by a team, one of whom is a psychologist, and the other a trained program facilitator.

Approximately 140 offenders have entered the HIFVPP between November 1999 and December 2002. Of these 140, 76% have successfully completed the program, 6% attended all sessions but were unproductive or failed to meet full program requirements, and 18% received an early departure from the program due to a variety of reasons.

Offenders enrolled in the HIFVPP ranged in age from 20 to 64; almost half were 30-39 years of age (Table 5.4). This group, and the few offenders who were 50 and over, had the highest completion rates, while the youngest men had the lowest.

Table 5.4

Age and status of offenders enrolled in the High Intensity Family Violence Prevention Program, 1999-2002

Age at start of program	Successful completion	Failed to complete	Completed unsuccessfully	Total	Percent successful
20-29	26	10	3	39	67
30-39	52	10	3	65	80
40-49	24	5	3	32	75
50+	4	0	0	4	100
Total	106	25	9	140	76

Source: Correctional Service of Canada

Half of all offenders enrolled in the HIFVPP were single at the start of the program, although the proportion living in common-law relationships prior to admission was higher than in the Canadian population aged 18 years or older overall (14%). Completion rates were similar across marital status groups (Table 5.5). sessions scheduled with each participant's primary counsellor. The moderate intensity program is delivered by two trained program facilitators.

Approximately 160 offenders have entered the MIFVPP between November 2001 and December 2002. Of these

Table 5.5

Marital status of offenders enrolled in the High Intensity Family Violence Prevention Program (HIFVPP), 1999-2002

Marital status	Successful completion	Failed to complete	Completed unsuccessfully	Total	Percent successful
Single ¹ Common law Married	54 39 13	10 11	5 4	69 54	78 72 76
Total	106	25	9	140	76 76

¹ Single includes divorced, separated, widowed, and dating. **Source**: Correctional Service of Canada.

Moderate Intensity Family Violence Prevention Program (MIFVPP)

The MIFVPP is designed for male offenders who are assessed at Moderate Risk on the SARA and have committed at least one incident of violence against an intimate partner. The program is cognitive-behavioural based and targets problems in thinking, emotional control, social skills and self regulation related to intimate violence and abuse. The MIFVPP consists of about 24 2.5 hour group sessions delivered 2 to 5 times a week over a period of 5-13 weeks. There are also 3 individual counselling

160, 80% successfully completed the program, 4% attended all sessions but were unproductive or failed to meet full program requirements, and 16% received an early departure from the program due to a variety of reasons.

The lowest completion rates for offenders in the MIFVPP were shown for those under 30 years of age (70%) (Table 5.6). Again, completion rates were similar across marital status groups (Table 5.7).

Table 5.6

Age and status of offenders enrolled in the Moderate Intensity Family Violence Prevention Program (MIFVPP), 2001-2002

Age at start of program	Successful completion	Failed to complete	Completed unsuccessfully	Total	Percent successful
20-29 30-39 40-49 50+	35 54 31	12 12 2	3 1 2 0	50 67 35	70 81 89 100
Total	129	26	6	161	80

Source: Correctional Service of Canada.

Table 5.7

Marital Status of offenders enrolled in the Moderate Intensity Family Violence Prevention Program (MIFVPP), 2001-2002

Marital status	Successful completion	Failed to complete	Completed unsuccessfully	Total	Percent successful
Single ¹ Common law Married	71 43 15	13 10 3	4 2 0	88 55 18	81 78 83
Total	129	26	6	161	80

¹ Single includes divorced, separated, widowed, and dating

Source: Correctional Service of Canada.

Maintenance Program

The Maintenance Program is a follow-up intervention that is intended for offenders who have completed a national family violence prevention program. The Maintenance Program is to be delivered to offenders in institutions and in the community. Each of the Maintenance sessions is oriented towards a review of the relapse prevention plan in light of the participants' current life circumstances, followed by a review of important skills and concepts introduced in the treatment program. The program may be delivered one-on-one or in a group format on a continuous entry basis. In institutional settings, participants are required to attend the maintenance program for at least six months or until their release to the community. In the community, offenders will continue their participation for six sessions after which the need to continue will be re-evaluated by the facilitator in conjunction with the case management team.

Treatment Primer - "Roadways to Change"

The Roadways to Change treatment primer for male offenders with histories of intimate partner violence is a self-help guide. The Primer does not replace family violence programs offered in institutions or in the community. Instead, it uses stage-matched principles and processes of change to prepare offenders to participate in, and benefit from, standard programs. For example, clients who may not be ready to benefit from a traditional

treatment program which expects active commitment are more likely to benefit from consciousness raising, education and additional awareness material. This is implemented with offenders who meet the referral criteria to participate in one of the family violence prevention programs, but are currently unmotivated to take a program, or with offenders with long sentences who have to wait a year or more to attend a family violence prevention program.

Family violence prevention programs focus primarily on male offenders who have been abusive in their intimate relationships with female partners. Culturally specific programs are being designed for Aboriginal offenders in federal institutions.

Female Perpetrators of Family Violence

Currently, family violence programs for women emphasize issues related to their victimization. However, 15% of federal women offenders (136 out of 897) in a recent examination were identified as perpetrators of spousal violence. Although this proportion is about half that of male inmates, there is a need for accurate risk assessment and intervention for women offenders. A treatment protocol for women perpetrators of intimate partner violence is currently under development by the Correctional Service of Canada.

DATA SOURCES

Homicide Survey

The Homicide Survey provides police-reported data on the characteristic of all homicide incidents, victims and accused persons since 1974. When a homicide becomes known to the police, a survey questionnaire is completed. The count for a particular year represents all homicides reported in that year, regardless of when the death actually occurred. The survey remained unchanged until 1991 at which time more detailed information was collected. A question regarding the history of domestic violence between the accused and victim was added to the survey in 1991. Data on Shaken Baby Syndrome as a cause of death was captured beginning in 1997.

Incident-based Uniform Crime Reporting (UCR2) Survey

The Uniform Crime Reporting (UCR) Survey was developed by Statistics Canada with the co-operation and assistance of the Canadian Association of Chiefs of Police. The aggregate UCR Survey, which became operational in 1962, collects crime and traffic statistics reported by all police agencies in Canada. UCR survey data reflect reported crime that has been substantiated through police investigation.

Police-reported incident-based crime statistics are collected through the UCR2 Survey. This survey allows detailed examination of accused and victim characteristics, and characteristics of the incident itself. Collection began in 1988; by 2001, 154 police agencies in 9 provinces, representing 59% of the national volume of reported crime were responding to the UCR2 Survey. The data are not nationally representative and therefore it is not possible to calculate rates of occurrence. The incidents contained in the 2001 database were distributed as follows: 40% from Ontario (Ontario Provincial Police rural detachments are excluded, which account for 13% of reported crime in Ontario), 31% from Quebec, 10% from Alberta, 5% from British Columbia, 5% from Manitoba, 5% from Saskatchewan, 2% from Nova Scotia, 1% from New Brunswick, and 1% from Newfoundland & Labrador. With the exception of Quebec, data are largely from urban areas.

The UCR2 Trend Database contains historical data that permits the analysis of trends in the characteristics of incidents, accused and victims, such as victim/accused relationships. This database currently includes 104 police services that have reported to the UCR2 survey consistently since 1995. These respondents accounted for 42% of the national volume of crime in 2001.

Transition Home Survey

The Transition Home Survey was developed under the federal government's Family Violence Initiative in consultation with provincial/territorial governments and transition home associations. The objectives of the survey are to collect information on residential services for abused women and their children during the previous twelve months of operation as well as to provide a one-day snapshot of the clients being served on a specific day. In 1991-1992, Statistics Canada began collecting basic information on transition home services and clientele. The survey was repeated with some changes in 1992-1993, 1994-1995, 1997-1998, 1999-2000 and 2001-2002.

The Transition Home Survey is a mail-out/mail-back census survey of all residential facilities providing services to abused women and their children. In 2001-2002, of the 524 residential facilities providing services to abused women and their children, 482 returned their questionnaires for a response rate of 92%. Separate questionnaires were completed for facilities that had two or more residences under the same name or address.

General Social Survey on Victimization (GSS)

Criminal victimization surveys are undertaken by Statistics Canada on a cyclical basis. Statistics Canada conducted a victimization survey as part of the General Social Survey (GSS) in 1988. The survey was repeated in 1993 and 1999. Individuals 15 years and older were asked about their experiences with crime and their opinions concerning the justice system. The GSS measures victimization for 8 types of crime, according to *Criminal Code* definitions. The 1999 survey included special modules to measure spousal violence and violence against older adults by family members.

Police services reporting to the Incident-based Uniform Crime Reporting (UCR2) Survey, 2001

Newfoundland and Labrador

RNC Corner Brook RNC Labrador RNC St. John's

Nova Scotia

Halifax

New Brunswick

B.N.P.P. Regional Caraquet

Edmundston

Fredericton

Grand Falls Miramichi

Rothesay Regional

Sackville

St. Stephen-Miltown

Woodstock

Quebec

Sûreté du Québec

Gatineau Laval Longueuil Montréal Québec City Sherbrooke

Almost all other Québec municipal police services

Ontario

Brantford Guelph Kingston

London

Niagara Regional

Ottawa-Carleton Regional

Peel Regional Stratford Thunder Bay Toronto

Waterloo Regional

Windsor York Regional

Manitoba

Winnipeg

Saskatchewan

Moose Jaw Prince Albert Regina Saskatoon

Alberta

Calgary Edmonton Hobbema Lethbridge Medicine Hat

British Colombia

Vancouver Port Moody

The GSS 1999 measures the severity and range of spousal violence through the use of a module of 10 questions. These questions are ranked from least severe violence to most severe violence. The questions ask about specific behaviours, rather than focusing on one or two questions about whether or not the respondent experienced spousal violence.

Households in the 10 provinces were selected using random digit dialling techniques. Once a household was chosen, any individual 15 years or older was randomly selected to respond to the survey. Households were excluded from the survey when they had no telephone or when the chosen respondent could not speak English or French. Also excluded were individuals living in institutions.

The sample size in 1999 was 25,876 persons, up significantly from 10,000 for the previous two cycles.

Hospital Morbidity Database

The Hospital Morbidity Database provides a count of inpatient cases separated (discharge or death) during the data year from general and allied special hospitals in Canada, including acute care, convalescence and chronic facilities (with the exception of Ontario), by primary diagnosis. Data do not include outpatients or patients treated in psychiatric hospitals. The collection and publication of national hospital morbidity statistics began in 1960. As of the 1994-1995 data year, the Canadian Institute for Health Information has taken over from Statistics Canada the responsibility of collection,

production and custody of the Hospital Morbidity Database.

Canadian Incidence Study of Reported Child Abuse and Neglect (CIS)

The CIS was conducted by the Bell Canada Child Welfare Research Unit at the Faculty of Social Work, University of Toronto, through funding from Health Canada. All provinces and territories participated in the study. British Columbia, Ontario, Quebec, and Newfoundland and Labrador provided additional funds to increase the size of the sample in their jurisdictions.

The CIS captured information about children and their families as they came into contact with child welfare services over a three-month sampling period, from

October to December 1998. A multi-stage sampling design was used, first to select a sample of child welfare offices across Canada, and then to select cases within these offices. Fifty-one sites, including three agencies providing services primarily to Aboriginal people, were selected from a pool of 327 child welfare services areas in Canada. All but four sites were randomly selected.

Information was gathered on all investigated cases of child maltreatment at the study sites. The CIS included 22 forms of maltreatment under four main categories: physical abuse, sexual abuse, neglect, and emotional maltreatment. The final sample of 7,672 child maltreatment investigations was used to derive national estimates of the annual incidence of investigated child maltreatment in Canada in 1998.

DEFINITIONS

Older adults and seniors are used interchangeably in this report and refer to Canadians aged 65 years or older.

Family and non-family - The nature of the relationship between the victim and the accused is determined by establishing the identity of the accused relative to the victim. Family members include spouses, children, siblings, parents or other persons related to the victim by blood, marriage or another legal relationship (e.g. adoption). All other relationships are considered to be non-family.

Homicide includes first and second degree murder, manslaughter and infanticide. Deaths caused by criminal negligence, suicide, accidental or justifiable homicides are not included in this classification.

Minor injuries are defined as those that do not require professional medical treatment or only some first aid. **Major injuries** are those that require professional medical treatment or immediate transportation to a medical facility.

Criminal Harassment is defined as repeatedly following another person from place to place or repeatedly attempting to contact the person against their wishes causing that person to reasonably fear for their personal safety or the safety of anyone known to them.

Assault refers to:

- Common assault, (section 265). This includes the Criminal Code category assault (level 1). This is the least serious form of assault and includes pushing, slapping, punching, and face-to-face verbal threats.
- Assault levels 2 and 3, (sections 267, 268). This
 includes more serious forms of assault, i.e. assault with
 a weapon or causing bodily harm (level 2) and
 aggravated assault (level 3). Assault level 2 involves
 carrying, using or threatening to use a weapon against
 someone or causing someone bodily harm. Assault
 level 3 involves wounding, maiming, disfiguring or
 endangering the life of someone.

In this report, **sexual assault** includes the following *Criminal Code* offences:

- **Sexual assault level 1**, (section 271). This involves minor physical injuries or no injuries to the victim.
- Sexual assault level 2, (section 272). This includes sexual assault with a weapon, threats or causing bodily harm.
- Aggravated sexual assault level 3, (section 273). This
 results in wounding, maiming, disfiguring or endangering the life of the victim.
- Other sexual offences include a group of offences that are primarily meant to address incidents of sexual abuse directed at children. The *Criminal Code* offences that are included in this category are:
 - Sexual interference (Section 151) is the direct or indirect touching (for a sexual purpose) of a person under the age of 14 years using a part of the body or an object.
 - Invitation to sexual touching (Section 152) is the inviting, counseling, or inciting of a person under the age of 14 years to touch (for a sexual purpose) the body of any person directly or indirectly with a part of the body or with an object.
 - Sexual exploitation (Section 153) occurs when a person in a position of trust or authority towards a young person or a person with whom the young person is in a relationship of dependency, commits sexual interference or invitation to sexual touching. In this section "young person" refers to a person between 14 and 18 years of age.
 - Incest (Section 155) occurs when an individual has sexual intercourse with a person that has a known defined blood relationship with them.
 - Anal intercourse (Section 159) and Bestiality (Section 160) are also included in this category of offences. These offences may be directed at children, but not always.

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