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Family Violence in Canada: A Statistical Profile 2002

Canadian Centre for Justice Statistics



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Family Violence in Canada:

A Statistical Profile 2002

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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 a specific reference period
- ... not applicable
- r revised
- E use with caution
- F too unreliable to be published

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HIGHLIGHTS

Chapter 1 – Spousal Violence

- One—year rates of spousal violence from the 1999 General Social Survey indicate that an estimated 220,000 women (3%) and about 177,000 men (2%) with a current spouse or ex-spouse had been the victim of some form of spousal violence in the past twelve months. Men and women are exposed to this risk in almost the same proportions.
- In 2000, victims of spousal violence represented 18% of all victims of violent offences reported to a subset of police agencies in Canada and 64% of family violence victims. Of the victims of spousal violence reported to this subset of police departments in 2000, women accounted for the majority of victims (85%).
- In 2000, police recorded common assault (63%) as the most serious offence for the majority of victims of spousal violence. A slightly greater proportion of women (63%) were victims of common assault than were men (59%).
- Since 1974, nearly 2,600 spousal homicides have been recorded in Canada, the majority of which have been against women.
- Spousal homicide rates for both women and men have declined between 1974 and 2000. In this time period, the homicide rate for women decreased by 62%, from 16.5 to 6.3 women per million couples. The homicide rate for men dropped by more than half over this period, from 4.4 to 2.0 men per million couples.
- There is a combined effect of age and marital status on the risk of spousal homicide. Between 1991 and 2000, young (15-24 years) separated women were killed at a rate of 113.4 women per million separated couples compared to 9.5 women per million separated couples 55 years and older.
- According to police statistics in 2000, nearly half (47%) of victims of spousal violence who reported to the police suffered minor injuries (an injury that required either no professional medical treatment or only minor first aid).
 Forty-five percent of victims had no injury, 2% either died or suffered serious bodily harm.
- According to the 1999 GSS, women victims of spousal violence over the five-year period covered by the 1999 GSS were twice as likely as men in similar situations to have used medication in the previous month to help them sleep (20% compared with 9%), to calm down (19% compared with 8%) and to help get them out of depression (17% and 7% respectively). Female victims were also more likely than male victims to regularly have problems going to sleep or staying asleep (39% compared with 29%).
- According to the 1999 GSS, female victims of spousal violence were three times as likely as male victims to
 take time off as a result of the violence (33% compared to 10%) and five times more likely to have received
 medical attention (15% versus 3%) and to have been hospitalized as a result of the violence (11% versus 2%).

Chapter 2 – Family Violence Against Older Adults

- According to police-reported statistics in 2000, adults aged 65 years or older had the lowest risk of being a victim of violent crime compared to other age groups. The rate of older adults reporting violent crime (162 per 100,000 population) was 2.5 times lower than that for the 55-64 years age group (403 per 100,000 population), the next lowest rate. Older adults were twice as likely to be victimized by non-family than family members (107 compared with 45 per 100,000 older adults), the highest proportion of which were strangers (51% of non-family members).
- Among cases of family violence towards seniors, adult children and spouses were the most likely perpetrators
 accounting for almost three-quarters (71%) of the victimizations. Older men were most often victimized by their
 adult children (43%) whereas older women were almost as likely to be victimized by their spouses (36%) as
 their adult children (37%).
- Among those senior homicides committed by family members between 1974 and 2000, older women were
 much more likely than older men to be victims of spousal homicide more than half (52%) of the older female
 victims of family homicide were killed by their spouses compared to one-quarter (25%) of older male victims. In
 contrast, older men were almost twice as likely as older women to be killed by their adult sons (42% versus
 24%).
- In 2000, according to police-reported data, a considerable proportion of older victims suffered minor injuries (37%) and major physical injuries or death (2%) in violent crimes committed by family members. However, no physical injury was reported for the majority of older victims (52%).
- Hospitalization data for intentional injuries resulting from assaults or other forms of violence from 1999-2000 indicate that 281 seniors aged 65 years or older were admitted to hospital for an injury resulting from an intentional violent incident. Fights were the most frequent cause of injury requiring admission to hospital among older men (41%) followed by assaults (36%), whereas women were most likely to be admitted to hospital for assaults (36%) followed closely by fights (35%). Women were more likely than men to require hospitalization for maltreatment (20% versus 5% respectively).

Chapter 3 – Violence Against Children and Youth

- In 2000, children and youth under the age of 18 years represented 23% of the Canadian population and comprised 23% of the victims of sexual and physical assault reported to a subset of 166 police agencies.
- According to police-reported statistics in 2000, young children aged 5 years and under were more than twice as
 likely to be physically assaulted by family than non-family members (48 and 63 compared with 20 and 31 per
 100,000 children). The reverse is true for older children where children aged 6 years and older were more likely
 to be physically assaulted by non-family than family members.
- The majority of child and youth victims of assaults reported to this subset of police forces in 2000 were assaulted by acquaintances (52%) followed by family members (23%) and strangers (19%). Within families, parents were the most likely perpetrators in assaults against children and youth.
- There were 55 homicides of children and youth in 2000. Thirty-one victims (4.4 per million persons under 18 years of age) were killed by family members.
- According to police-reported data, almost six in ten (59%) child and youth victims in 2000 reported suffering
 minor physical injury due to physical assaults by family members. Two percent had a major physical injury and
 the remaining victims had no visible injuries.
- Hospitalization records for injuries to children indicate that the youngest children are most often injured as the
 result of child battering and other maltreatment, while older youth are most frequently injured as a result of
 fights. In 1999-2000, 38 in 100,000 children under the age of 1 year were reported by doctors to have suffered
 injuries requiring hospitalization as the result of child battering or other maltreatment. This rate dropped to 2 in
 100,000 for teenagers aged 15-19 years.

INTRODUCTION

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

Each year, the report has a different focus. This year, the focus is on the impacts and consequences of family violence, including the consequences of spousal violence, violence against older adults and violence against children and youth. The report also provides the most recent police-reported and homicide data on the prevalence of spousal violence, abuse of older adults and child abuse as well as an examination of the decline in rates of spousal homicides.

MEASURING FAMILY VIOLENCE

Family violence is a problem that can have lasting impacts on both the individual and the larger society. Along with the physical, psychological, social and economic consequences on individuals directly affected, family violence can have significant social and economic costs on health care systems, civil and criminal justice systems, housing and shelter services and community services.

In Canada, various data sources can be utilized to examine the nature, extent and impact of family violence. These fall into two general categories: those based on incidents reported to the police, hospitals, coroners, child welfare or other social agencies; and victimization survey data based on victims' accounts of their experiences of family violence collected through household surveys. It is important to note that while neither of these sources can definitively establish causal links between family violence and specific outcomes, they are very useful in attempting to understand the characteristics of victims and perpetrators.

In the area of family violence research, definitions can have an effect on the estimates derived from both victimization surveys and officially reported incidents. The term *family violence* can encompass a wide range of experiences. Definitions vary according to the type of relationships considered under the definition of "family" (e.g., marriage, common-law, blood, adoption, foster care, step and blended family arrangements and same-sex relationships) and the type of experiences to be included under the definition of "violence" (e.g., *Criminal Code* offences, threatening, psychologically controlling and emotionally abusive behaviour). Obviously, more all-encompassing definitions of family violence will produce higher estimates of the extent of the problem.

Family violence estimates based on incidents reported to police and other agencies are impacted by additional factors such as the secrecy surrounding the issue, the dependency of the victim on the perpetrator, the lack of knowledge about available help, and the fear of repercussions for reporting the event. All of these factors tend to lead to underreporting and consequently to an underestimate of the extent of the problem (Johnson, 1996; Della Femina, Yeager, and Lewis, 1990; Stein and Lewis, 1992; and Widom, 1988). The number of reported incidents may also be affected by shifts in the level of scrutiny that official agencies maintain in suspected cases as a result of legislative or policy changes or the changing availability of resources. For example, a change in legislation (Bill C-127, amendments to the *Criminal Code* related to assault and sexual assault) and the implementation of mandatory charging policies by many police agencies in the early 1980s marked the beginning of year-over-year increases in assaults reported to the police through to the early 1990s (Kingsley, 1993). Similarly, most provinces have legislated mandatory coroner inquests into deaths of children less than two years of age, leading to the increased reporting and reclassification of some deaths that previously would have been classified as natural or accidental deaths (Fedorowycz, 2000).

Victimization surveys tend not to be as susceptible to the same factors that lead to underestimates in data from official agencies since they include both reported and unreported incidents. Thus, estimates derived from household-based victimization surveys are substantially higher. Victimization surveys do have limitations, however. They rely on respondents to recall and report events accurately. As well, they address only certain crimes. In addition, these surveys are sensitive to question wording, definitions of victimization, interviewer effects and the underlying approach (for example, a survey dedicated to violence against women versus one that focuses more generally on all forms of victimization).

In the past, traditional victimization surveys have been criticized for their inability to measure the more sensitive kinds of victimizations that occur within families. This is due to a number of factors including a reluctance on the part of victims to report their experiences to survey interviewers, a focus in the early stages of the interview toward crime in one's neighbourhood (which may reduce reporting of family violence if it is not considered by respondents to be a crime), narrow question wording, and little or no specialized training for interviewers.

The 1993 Violence Against Women Survey (VAWS) was a specialized survey using the victimization survey approach. The 1999 General Social Survey (GSS) was the first attempt by Statistics Canada to measure spousal violence through detailed questions on a traditional victimization survey. Steps were taken to improve question wording and provide special training for interviewers in order to improve the measurement of violence in the family. The first analysis of spousal assaults for both women and men captured through the 1999 GSS was presented in *Family Violence in Canada: A Statistical Profile, 2001* presented subsequent analysis on spousal violence among Aboriginal peoples and post-separation spousal violence.

This publication further explores the impacts and consequences of family violence on victims using police-reported data, the 1999 GSS and other data sources.

1.0 SPOUSAL VIOLENCE

by Catherine Trainor, Mylène Lambert and Mia Dauvergne

Much research has been conducted on the prevalence, characteristics and consequences of spousal violence. In addition to the physical consequences, spousal violence has been associated with a range of symptoms such as increased fears and phobias, recurring nightmares, sleeping disorders and anxiety and depression (Johnson, 1996). This chapter focuses on spousal violence and homicides reported to the police across Canada in 2000, declines in spousal homicides over time as well as on the physical and emotional consequences and the societal impacts of spousal violence.

1.1 Police-reported spousal violence¹

The Canadian Centre for Justice Statistics has been collecting information on crimes reported to the police since 1962 through the Uniform Crime Reporting Survey. In 1988, the method of data collection was expanded to include the relationship between victims and accused, their age and sex and other details of criminal incidents. There are currently 166 police forces in 9 provinces that participate in this Incident-based Uniform Crime Reporting (UCR2) Survey, representing 53% of the national volume of reported crime. Although UCR2 data are not nationally representative, they provide useful descriptive information about the types of crimes that come to the attention of the police.

In 2000, victims of spousal violence represented 18% of all victims of violent offences reported to this subset of police agencies in Canada and 64% of family violence victims (Table 1.1). Of the almost 34,000 victims of spousal violence reported to this subset of police departments in 2000, women accounted for the majority of victims (85%), a total of 28,633 victims. For both women and men, spousal violence generally involved current spouses (66% and 63% respectively).

Women victims the majority in all types of spousal violence

Women made up the vast majority of victims of all categories of spousal violence reported to the police

(Figure 1.1). This was particularly the case for kidnapping/hostage taking and sexual assault where women made up 99% and 98% respectively of all spousal violence victims. These were rare events however, and accounted for only 914 total incidents in 2000. Larger proportions of male victims were noted for offences such as homicide and attempted murder, assault levels 2 and 3, and other violent violations (28%, 25% and 24% respectively).

Common assault most serious offence for majority of victims

In 2000, police recorded common assault (63%) as the most serious offence for the majority of victims of spousal violence. A slightly greater proportion of women (63%) were victims of common assault than were men (59%) (Figure 1.2). Uttering threats (14%), assault with a weapon or causing bodily harm and aggravated assault (13%), criminal harassment (7%) and other violent offences² (4%) were the other most common forms of spousal violence.

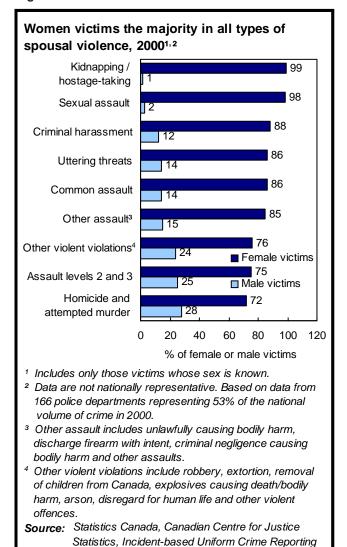
Among these categories of offences, assault with a weapon or causing bodily harm and aggravated assault (assault levels 2 and 3) were more common among male victims than among female victims (20% compared to 11%). This is due in part to the greater tendency for female aggressors to use weapons rather than to rely on their own physical strength.

For the other remaining types of spousal violence offences, similar proportions of both female and male victims were victims of uttering threats, criminal harassment (stalking) and other violent offences.

Spousal violence refers to Criminal Code violent offences committed against women and men. Spouses include common-law and legal spouses and ex-spouses and ex-partners.

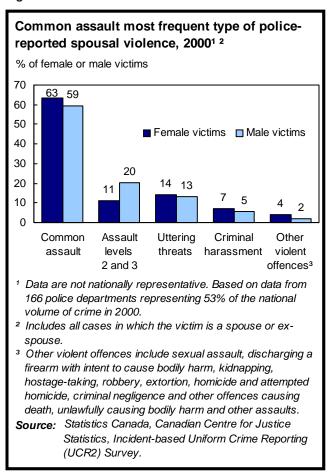
Other violent offences include sexual assault, discharging a firearm with intent to cause bodily harm, kidnapping, hostage-taking, robbery, extortion, homicide and attempted homicide, criminal negligence and other offences causing death, unlawfully causing bodily harm and other assaults.

Figure 1.1



One—year rates of spousal violence from the 1999 GSS indicate that an estimated 220,000 women (3% of women) and about 177,000 men (2% of men) with a current spouse or ex-spouse had been the victim of some form of spousal violence in the past twelve months. Men and women are exposed to this risk in almost the same proportions. The over-representation of women in police statistics may be partly explained by data that indicate women are more likely to report incidents of spousal violence to the police. According to the 1999 GSS, 37% of cases of spousal violence involving female victims were reported to the police in the previous five-year period compared to 15% involving male victims.

Figure 1.2



Women under 25 years of age and men aged 25-34 years at highest risk³

Overall, younger people have a greater risk of experiencing spousal violence than older people. According to the 1999 GSS, young women under 25 years of age reported the highest one-year rates of spousal violence (5%) compared to 1% of women 45 and over. Similarly, younger men aged 25-34 years reported higher rates of violence (4%) than their older counterparts (1%). Too few men in the under 25 age category reported spousal violence to produce reliable estimates. One-year rates of spousal violence for both women and men declined with age. Homicide statistics also confirm the higher risk for young women. As shown in section 1.2, young separated women are at higher risk of spousal homicide.

(UCR2) Survey.

³ Police-reported data from the UCR2 Survey are based on a subset of 166 police agencies representing 53% of the national volume of crime in 2000 and are not nationally representative. It is not possible at this time to calculate rates for spousal violence victims in the UCR2 database. Thus, in this section, 1999 GSS data are presented.

Physical force most common method of violence^{4,5}

In 2000, for 72% of spousal violence victims, physical force⁶ was the most serious form of violence present followed by threats (15%). For 11% of victims, weapons, such as firearms, knives or blunt instruments, were the most serious form of violence present with firearms accounting for less than 1%.

Methods of spousal violence differed for male and female victims. Women were more likely than men to have physical force (73% compared with 63%) as the most serious form of violence present, while men were more likely than women to have weapons present (22% compared with 9%). The greater presence of weapons such as knives, blunt instruments and other weapons for male victims, as indicated earlier, may be explained in part by the relative differences in strength between men and women.

Majority of victims saw charges laid by police

When a criminal investigation leads to the identification of a suspect and a charge is laid, the incident is recorded by the police as "cleared by charge". When an accused has not been identified in connection with an incident, the incident is classified as "not cleared". If there is not enough evidence or if the police decide not to lay a charge for a variety of other reasons (e.g., the victim requests that charges not be laid or refuses to co-operate with the police or the police recommend pre-charge diversion), the incident is recorded as "cleared otherwise".

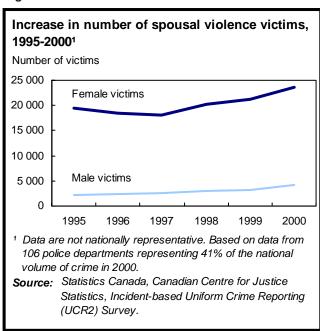
Of the police-reported spousal violence victims in 2000 where an accused was identified, the majority of victims (82%) saw charges laid by the police (Table 1.2). This was more often the case for female victims (84%) than male victims (69%) of spousal violence. For the remaining 18% of victims, their incident was cleared otherwise. For 13% of spousal violence victims, the police did not lay charges at the request of the victim. This happened more frequently with male victims (21%) than female victims (11%). For 3% of total victims, the police did not lay charges at their own discretion. The police used departmental discretion on charging offenders for 5% of male victims and 2% of female victims.

Trends in spousal violence

Based on a subset of 106 police agencies that have consistently participated in the Incident-based Uniform Crime Reporting (UCR2) Survey since 1995 and accounting for 41% of the national volume of crime in 2000, it is possible to examine some emerging trends in spousal violence reported to the police.

The total number of spousal violence victims that came to the attention of this subset of police forces increased 27% between 1995 and 2000, from 21,733 victims in 1995 to 27,663 in 2000. However, the number of victims has varied within these years. Between 1995 and 1997, the number of spousal violence victims that came to the attention of the police declined to reach 20,541 victims in 1997 and then rose each year from 1998 to 2000. Both the numbers of female and male victims of spousal violence increased between 1998 and 2000 (Figure 1.3).

Figure 1.3



Variation in police-reported spousal assaults between 1995 and 2000 may have been influenced by many factors including changes in victims' willingness to report to the police, changes in reporting practices by the police to the Canadian Centre for Justice Statistics, and the impact of new initiatives such as changes in legislation, policing or enforcement practices. According to the 1999 GSS, there were significant increases in the percentages of female spousal assault victims from 1993 to 1999 who reported these incidents to the police. The 1993 Violence Against Women Survey (VAWS) found that 29% of wife assault cases were reported to the police in the 5 years preceding the survey compared to 37% recorded by the 1999 GSS.

⁴ Due to data quality issues that result in physical force being coded as "other", Toronto is excluded from the analysis on methods of violence.

⁵ Based on the most serious weapon present, not necessarily used.

Involves the use of one's own body strength and/or action (choking, pushing or punching) that is intended to cause bodily injury or death.

Only 15% of the spousal violence incidents involving male victims were reported to the police during the same time period. Data are not available for male victims for 1993.

This increase in reporting to the police on the part of women may be due to a number of factors including a reduction in the social stigma of being a victim of spousal violence and seeking help, increased public awareness, improved training of police- and court-related victim support services, and, consequently, increased public confidence in the ability of the criminal justice system to deal effectively with spousal violence cases (Johnson and Hotton, 2001). The lower percentage of men reporting spousal violence to the police may be due to the less severe nature of the violence experienced by male victims.

1.2 Declines in spousal homicide⁷

By Valerie Pottie Bunge and Julie Sauvé

Spousal homicides account for a substantial proportion of all homicides in Canada. In 2000, victims of spousal homicide⁸ accounted for 17% of all victims of solved homicides and 52% of family homicides. In 2000, a total of 67 persons were killed by a spouse and three in four of these spousal homicide victims were female. Thirty-seven women were killed by a current spouse (legal and common-law spouses), and 14 by a spouse from whom they were separated or divorced. Of the 16 men killed by a female spouse in 2000, 13 were killed by the spouse with whom they were living and 3 by a spouse from whom they were separated (Table 1.3).

The spousal homicide rate in 2000 was 6.3 wives and 2.0 husbands per million couples. In 2000, young wives were at the greatest risk of being victims of spousal homicides: women under the age of 25 years were killed at a rate of 21.3 per million couples. There were no male victims killed in this age category. Women under the age of 25 years had a rate slightly more than twice that for women aged 35-44 years (9.4 per million couples).

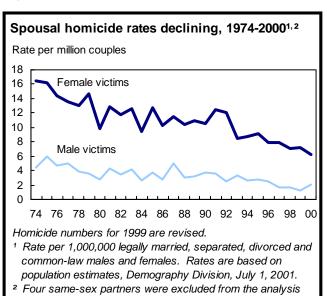
Since 1974, there has been a decline in the overall rate of family homicides recorded in Canada and in family homicides as a percentage of total homicides. Looking at the initial three years of this period (1974 to 1976) compared to the final three (1998 to 2000), the number of family homicides as a percentage of total homicides in Canada has decreased from 35% to 27% (Table 1.4). Spousal homicides decreased from 18% to 13% of the total between these two time periods and other family homicides decreased from 17% to 14% of total homicides.

Since 1974, nearly 2,600 spousal homicides have been recorded in Canada, the majority of which have been against women (Table 1.5).

Patterns in spousal homicide rates

While spousal homicide rates for both women and men have fluctuated over the past two decades, they have generally declined between 1974 and 2000¹⁰ (Figure 1.4). In this time period, the homicide rate for women decreased by 62%, from 16.5 to 6.3 women per million couples and the homicide rate for men dropped by more than half from 4.4 to 2.0 men per million couples.

Figure 1.4



Statistics, Homicide Survey.

Source: Statistics Canada, Canadian Centre for Justice

and therefore rates cannot be calculated.

because Census data on same-sex couples are unavailable

For further information, see Pottie Bunge, 2002. "National Trends in Intimate Partner Homicides, 1974-2000". Juristat.

⁸ Includes legally married, common-law, divorced and separated spouses.

⁹ Because of the small number of spousal homicides recorded each year and in order to create a more robust sample, three-year time periods were used.

¹⁰ Both the male and female spousal homicide rates showed statistically significant decreases over the period 1974 to 2000 (p ≤ .01). The difference between the female and the male spousal homicide rate is also statistically significant. This indicates that the rate of decline in the female spousal homicide rate is significantly higher than the rate of decline for the male spousal homicide rate.

Between the first (1991-1995) and second (1996-2000) halves of the 1990s, there was a noticeable decline in the overall number and rate of most forms of spousal homicide (Table 1.6).¹¹

Over the ten-year period, homicide rates were highest among separated (37.4 wives per million separated couples) and common-law women (29.5 wives per million common-law couples). While rates of homicide decreased for separated women, one of the biggest declines was in the rate for women in common-law relationships, which decreased from 35.8 to 24.2 women per million common-law couples. The rate at which divorced women were killed decreased from 2.3 to 1.2 women per million divorced couples, however this involved a very small number of cases, 15 over the ten-year period.

For men, rates of spousal homicide were highest in common-law relationships and the largest decline occurred for this group. Homicide rates of men in common-law relationships decreased from 17.9 to 7.8 men per million common-law couples. 14 Over this time period, there was a non-significant change in the rate at which separated husbands were killed.

Young separated women at highest risk

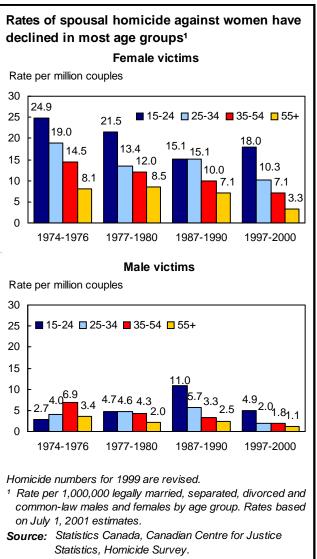
In the past 27 years, women under the age of 25 were killed at a rate of 21.2 women per million couples compared to 6.6 for male victims in the same age category. Over this time period, there were declines in the rates at which women and men were killed in most age groups (Figure 1.5). Declines among women were shown in most age groups, ¹⁵ while for men, those 15-24 experienced a slight increase ¹⁶ in spousal homicide rates and those 35 and older ¹⁷ showed a steady decline in rates.

There is a combined effect of age and marital status on the risk of spousal homicide. Between 1991 and 2000, young (15-24 years) separated women were killed at a rate of 113.4 women per million separated couples compared to 9.5 women per million separated couples 55 years and older (Table 1.7). Homicide rates of young (15-24 years) separated men were also high (44.1 men per million separated couples 15-24 years old). This figure should be used cautiously as it is based on very low counts.

Provincial spousal homicide rates declining

As with rates of overall violent crime in Canada, the Western provinces have the highest rates of spousal homicide. From 1974 to 2000, rates of spousal homicides involving men and women have been higher in the Prairie provinces (Figure 1.6). For women, rates were highest in

Figure 1.5



Manitoba (16.1 women per million couples), while men's rates were highest in Saskatchewan (7.1 men per million couples). The lowest rates of spousal homicide involving women were recorded in Newfoundland and Labrador (4.1 women per million couples) and in Prince Edward Island for homicides involving men (1.0 men per million

In 1991, the Homicide Survey underwent a major revision and police began identifying relationship types in greater detail. A short-term perspective is therefore available on a wider range of intimate partner homicides including common-law, separated and divorced partners.

This is a significant year-to-year decline (p \leq .01).

¹³ This is a significant year-to-year decline (p \leq .05).

This is a significant year-to-year decline ($p \le .01$).

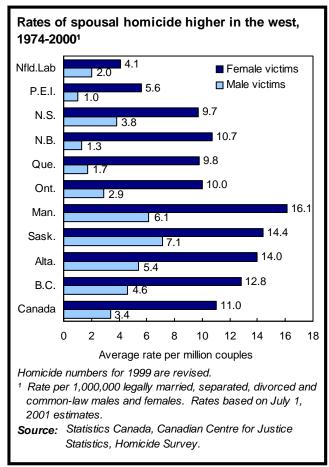
The decline in homicide rates among 15-24 year old women was nonsignificant, however the declines among women in all other age categories were significant (p ≤ .01).

This is a significant increase ($p \le .10$).

¹⁷ These were significant declines ($p \le .01$).

couples). Over this time period, rates of spousal homicide have decreased in some provinces, partly due to small counts in many.18

Figure 1.6



Rates highest in the territories

Although few spousal homicides are committed in the three territories, small populations elevate the rates to the highest in the country. The 27-year homicide rate for women in the Northwest Territories was seven times the national average (77.8 women per million couples) and four times the national average in the Yukon (47.3 women per million couples). Similarly, male spousal homicide rates were fourteen times higher in the Northwest Territories (48.0 men per million couples) and six times higher in the Yukon (21.5 men per million couples). There have been two spousal homicides in Nunuvut since 1999.

Shooting and stabbing the most common causes of death

In 2000, knives or sharp objects and firearms were the most frequently used weapons in the commission of spousal homicides, accounting for two-thirds of cases (66%). Male spouses, who made up the majority of accused, tended to use knives or sharp objects (31%), followed by firearms (29%), while the majority of cases in which women killed their husbands involved knives or other sharp instruments (63%). Firearms were the second most often used weapon by women (19%). As was the case with police-reported assaults, homicide data show that men were more likely than women to use physical force. Thus, beatings and strangulation were more frequently the cause of death used by husbands (20%) than by wives (6%).

Between 1974 and 2000, firearms were the most frequently used weapon in the commission of spousal homicides, accounting for the death of more than one in three victims (Table 1.8). Women were more likely than men to be killed with firearms (40% versus 26%). In contrast, men were more likely than women to be killed with knives or sharp objects (58% versus 23%). Women were also more likely than men to die as a result of physical force: beatings and strangulation were more frequently the cause of death for wives (32%) than husbands (10%).

Decline in the use of firearms and force

Significant decreases have been observed in the use of firearms in spousal homicides. While firearms are the most frequently used weapons in the commission of homicides of wives, the rate at which both wives and husbands have been killed by firearms declined between 1974 and 2000 (Figure 1.7). The proportion of spousal homicides involving firearms also declined over this time period.

In 1974, 7.7 wives per million couples were murdered with a firearm compared to 1.8 in 2000, a decrease of 77%.19 Similarly, the rate at which husbands were murdered with a firearm over this time period decreased from 2.0 husbands per million couples to 0.4, a decrease of 80%.²⁰

Previous domestic violence a factor in spousal homicides

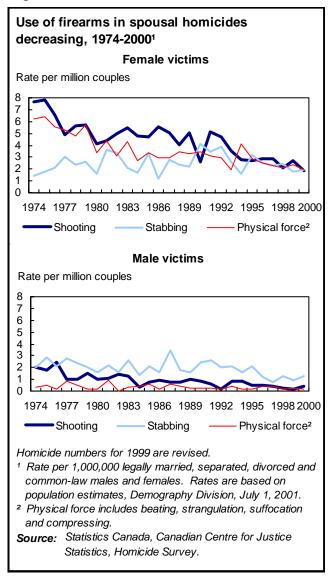
In 2000, there was a history of reported domestic violence between victims and perpetrators in over two-thirds (67%) of spousal homicides. A slightly higher proportion of cases in which husbands were the victims had a reported history of domestic violence (81%) than did cases in which wives were the victims (63%). Although it cannot be determined

¹⁸ Declines for women were significant in Quebec ($p \le .01$), Ontario $(p \le .01)$, Manitoba $(p \le .10)$, Alberta $(p \le .05)$, and British Columbia $(p \le .01)$. Declines for men were significant in Ontario $(p \le .01)$ and British Columbia ($p \le .05$). All others were non-significant. Numbers are too small in many provinces to present annual rates in a table.

¹⁹ This is a significant decline (p \leq .01).

This is a significant decline (p \leq .01).

Figure 1.7



who was the initiator in the previous cases of the domestic violence, in some cases the accused may have been the battered partner (Browne, 1986).

Between 1991 and 2000, there was a history of reported domestic violence between victims and perpetrators in 58% of spousal homicides. A slightly higher proportion of cases in which husbands were victims had a reported history of domestic violence (63%) compared to cases in which wives were victims (56%). The percentage of cases citing a history of domestic violence known to the police has increased over the past 10 years, from 53% to 67%. It is not known whether this is due to an actual increase, improved reporting and recording practices among police, or to a change in police awareness due to changes in charging policies.

Male victims more likely to be the first to use force in spousal homicides

In many cases of spousal homicide, men were more likely than women to initiate violent incidents that resulted in their death. Although information was missing in 41% of cases overall, male victims (25%) were eight times more likely than female victims (3%) to be the first to use force in incidents resulting in homicide.

Arguments and jealousy motivate the majority of spousal homicides

In cases of spousal homicides, the most frequently cited motive was an argument (47%) followed by jealousy (21%). Jealousy was more often the motivating factor in cases involving women (25% versus 8% of cases involving male victims).

1.3 Why the decline in spousal homicides?

Bv Valerie Pottie Bunge

Research in the United States

A number of reasons have been advanced to explain declining spousal homicide rates. The majority of this research, to date, has occurred in the United States (Dawson, 2001) and explanations point primarily to exposure reduction. For example, marriage rates among young adults, the age group at highest risk of homicide victimization, have been declining. As the proportion of young people getting married has declined, exposure to violence in the highest-risk age groups may be reduced. Furthermore, the increase in the age of first marriage may reflect greater selectivity among would-be spouses. Both lower rates of marriage and delayed entry into marriage may result in an overall reduction in both lethal and non-lethal violence in relationships (Rosenfeld, 1997; Dugan et al., 1999).

Increasing gender equality over the past several decades, including rising income levels and labor force participation rates among women, are linked to both delayed marriage and improvements to women's economic status. These factors may have helped expand women's alternatives to either entering into or remaining in a violent relationship (Rosenfeld, 1997; Dugan et al., 1999).

Finally, the rising availability of domestic violence services and policy responses to the issue of domestic violence have also been advanced as possible explanations for declining spousal homicide rates in the U.S. (Browne and Williams, 1989; Dutton-Douglas and Dionne, 1991).

The Canadian context

In Canada, similar changes have occurred. There has been a change in living arrangements between women and men over the past 27 years. The rate of marriage, especially among young adults, has been declining. In 1980, 61% of 20-24 year olds had never been married, increasing to 81% by 2000 (Statistics Canada, CANSIM Table 051-0010). The age at first marriage has increased: in 1974, the average age of first marriage for women was 22 years (24 years for men), and in 1997, it was 28 years (30 years for men) (Villeneuve and Geran, 2001). On the other hand, the percentage of women and men living with commonlaw partners has also increased from 3.8% of women in 1981 (4.0% of men) to 8.0% in 1996 (8.4% for men) (Statistics Canada, 2000), which theoretically would increase the risk of spousal violence and homicide given the higher rates among women and men living in commonlaw relationships.

Furthermore, average annual earnings among employed women and men increased between 1980 and 1999 (Statistics Canada, 2001); a higher percentage of both women and men have been pursuing post-secondary education; and, women's labour force participation rate has increased from 46% in 1974 to 60% in 2000 (Statistics Canada, 2002). Women are also waiting longer before entering into child-rearing, and are having, on average, fewer children which may result in greater financial independence. Birth rates among younger women (15 to 29) have decreased and the average age at the birth of first child has increased by three years, from 24 years in 1974 to 27 years in 1997 (Almey, 2000). All of these social changes have provided both women and men with increased opportunities for economic independence which may help provide alternatives to remaining in abusive situations which, in turn, may help avoid escalation of violence to homicide.

Resource Availability

Over the past 27 years, governments and community groups have invested considerable effort and resources in addressing the problem of family violence. The resulting innovations in policy, legislation and services for victims may have made important contributions toward reducing spousal homicide. The literature suggests that these changes may have also had secondary effects so that both sanctioning agencies and the general public respond with greater negativity to such crimes than in the past (Dawson, 2001). The following section outlines some of the major initiatives undertaken over the past two decades.

Zero-tolerance and no-drop policies

Commencing in 1983, all jurisdictions in Canada adopted mandatory or "pro"-charging and prosecution policies for spousal violence. Generally, these policies require the police to charge in cases of spousal violence where there are reasonable and probable grounds to do so, and the Crown to prosecute where there is a reasonable likelihood of conviction. These policies were introduced as a response to concerns that victims of spousal violence were not receiving adequate protection from the criminal justice system. Transferring the onus of laying charges and of prosecuting to the police and Crown was intended to remove pressure to drop charges from victims and to ensure that spousal violence is treated as a criminal offence.

Legislative and policy changes

In 1993, the offence of criminal harassment, also known as "stalking," was introduced to the *Criminal Code*. Section 264 of the *Criminal Code* defines criminal harassment as behaviour that causes a person to fear for their safety such as repeatedly following them, communicating with them, and or watching them continually, against their wishes.

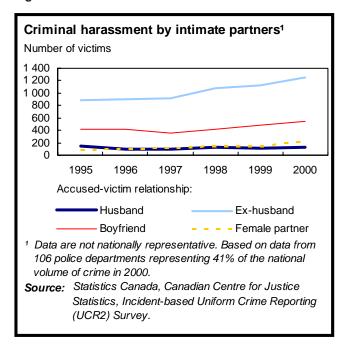
Although criminal harassment is not gender-specific, the legislation was mainly introduced as a response to violence against women, in particular domestic violence against women (Department of Justice, 1999). Several highly publicized cases of women being stalked and killed by estranged partners in the early 1990s provided the impetus for this legislation, with the idea that early intervention in response to stalking behaviour might prevent the escalation of violence.

In 2000, three-quarters of incidents of criminal harassment reported to the police were directed at female victims.²¹ In half of these incidents, women were stalked by persons who were, for example, male ex-spouses (including excommon-law partners) and boyfriends. The number of male ex-spouses and boyfriends known to police for stalking has risen in recent years (Figure 1.8). The number of females accused of stalking their partners has also increased over this time period (1995-2000). However, females continue to represent a small percentage of those accused of criminal harassment. It is difficult to know whether these trends are a reflection of increased police attention to these crimes or increased willingness on the

²¹ These data are based on a subset of 106 police agencies that reported to the UCR2 Survey from 1995-2000. These 106 forces accounted for 41% of all Criminal Code Incidents reported to the police in 2000 and the data are not nationally representative.

part of victims to report to police, as can happen following implementation of a new law. Research in the U.S. suggests that in a majority of stalking cases involving estranged male partners there were previous assaults by those same partners (Tjaden and Thoennes, 1998).

Figure 1.8



Court decisions like *R.v. Lavallee* in 1990 that established the Battered Women's Defence recognized that some battered women kill abusive husbands following escalating violence in order to protect themselves from perceived imminent death. This was part of a societal change that recognized the difficulty in leaving some violent relationships.

Civil legislation

In addition to charging or prosecution policies, several jurisdictions have enacted, or are about to enact, domestic violence legislation. This legislation is intended to provide protection to victims of domestic violence.

The component most common to all family violence acts is the emergency intervention/protection order, which is essentially a short-term order, available immediately, with the victim's consent, where family violence has occurred and the situation is urgent or serious. Also available in most jurisdictions are victim assistance orders which are longer-term. These orders can address issues such as visitation and financial matters and may replace emergency intervention orders.

Specialized Domestic Violence Courts

Some jurisdictions have specialized domestic violence courts. A specialized criminal justice system response was first developed in Winnipeg in 1990. Similar programs in Ontario, Calgary and Whitehorse were implemented more recently. The principal aim of these courts is to expedite domestic violence cases for the safety of the victim, introduce early intervention for the first time offender, allow for effective investigation and prosecution of those cases and ensure accountability of the offender. Most of these courts have specialized prosecutorial units; specially designated courtrooms and dockets for intake, screening and trials; and special units in the probation office to deliver court-mandated treatment programs.

1.4 Consequences and impacts of spousal violence

By Catherine Trainor, Mylène Lambert and Mia Dauvergne

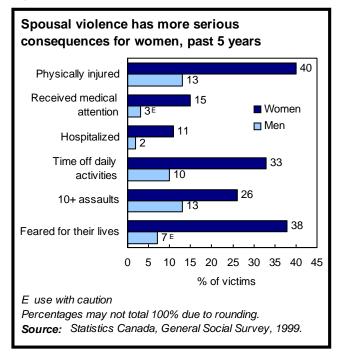
Nearly half of spousal violence victims who reported to police suffered minor injuries

The physical consequences of spousal violence can range from no injury up to the death of the victim. According to police statistics in 2000, nearly half (47%) of victims of spousal violence who reported to the police suffered minor injuries, that is, an injury that required either no professional medical treatment or only minor first aid. Forty-five percent of victims had no injury, 2% either died or suffered serious bodily harm (requiring professional medical attention at the scene or transportation to a medical facility) while for the remaining 6%, the presence of an injury was unknown (Table 1.9). Forty-nine percent of female and 48% of male victims of spousal violence suffered injuries. However, due to the larger number of female spousal violence victims, 85% of all spousal violence victims suffering injuries were women. This is consistent with the results of the 1999 GSS that found that women were three times more likely than men to report being physically injured in assaults by spouses.

The 1999 GSS found that in many cases of spousal violence, the violence or threat of violence was so severe that victims said that they feared for their lives. According to the survey, almost one-quarter (24%) of adults living in violent relationships during the five-year period preceding the survey feared that their lives were in danger. Fear was more prevalent among women than men: approximately four women in ten feared for their lives because of the violence, while the rate for men was less than one in ten. In addition, the 1999 GSS also found that 26% of women in violent relationships reported being assaulted ten or more times by a spousal partner during the five-

year period preceding the survey compared to 13% of men (Figure 1.9).

Figure 1.9



Spousal violence victims more likely to have physical health problems

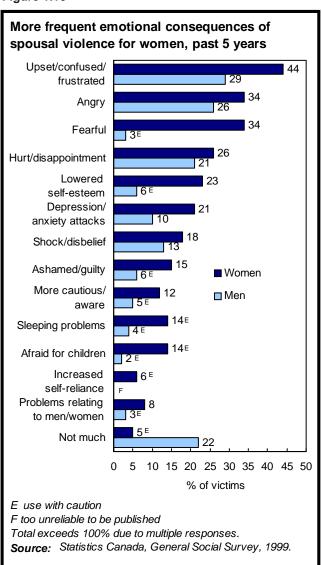
Research on the physical and mental impacts of spousal violence has focused on women and shown that female victims of spousal violence are more likely than non-victims to have physical impairments and mental health problems (Allard et al., 1997; Barusch et al., 1999; Bassuk et al., 1996). According to the 1999 GSS, of those who had reported spousal violence in the five-year period prior to the survey interview, 28% reported either a physical or mental condition or problem that affected their activities²² compared to 21% of non-victims, a statistically significant difference. Differences between female and male victims and non-victims of spousal violence were not statistically significant.

More frequent emotional consequences of spousal violence for women

In addition to physical consequences, emotional consequences can result from spousal violence and can have both short- and long-term impacts on the victim. According to the 1999 GSS, of those who reported spousal violence by a partner in the five-year period prior to the survey interview, the most commonly reported emotional consequence for both women and men was being upset, confused and frustrated (Figure 1.10). Anger and hurt/

disappointment were also frequently cited. Twenty-two percent of men who reported spousal violence incidents in the past five years stated that the violence had not greatly affected them compared with only 5% of women. Women were much more fearful than men as a result of the violence (34% versus 3%) and were more likely to state that they feared for the safety of their children (14% versus 2%). Women were also more likely than men to experience sleeping problems (14% versus 4%), depression or anxiety attacks (21% versus 10%) and were much more likely to report reduced self-esteem (23% versus 6%).

Figure 1.10

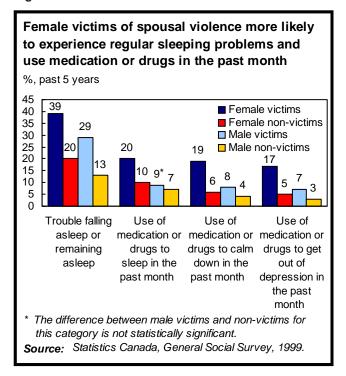


²² Questions measuring physical and mental health in the 1999 GSS were: "Do you have any difficulty hearing, seeing, communicating, walking, climbing stairs, bending, learning, or doing any similar activities?" and "Does a long term physical or mental condition or health problem reduce the amount or the kind of activity that you can do at home, at school or at work?"

Female victims of spousal violence report twice as much use of medications and drugs as male victims

While female non-victims of spousal violence were more likely than male non-victims to regularly have problems going to sleep or staying asleep, to have used medication in the previous month to help them sleep, to calm down and to help get them out of depression, these differences were more pronounced between female and male victims of spousal violence. Women victims of spousal violence over the five-year period covered by the 1999 GSS were twice as likely as men in similar situations to have used medication in the previous month to help them sleep (20% compared with 9%), to calm down (19% compared with 8%) and to help get them out of depression (17% and 7% respectively). Female victims were also more likely than male victims to regularly have problems going to sleep or staying asleep (39% compared with 29%) (Figure 1.11). These differences between female and male victims were all statistically significant.

Figure 1.11



The impacts of spousal violence on society, in terms of supplying and maintaining medical services, counselling and shelter services, and criminal justice services are greater for female spousal violence victims than male victims. Women were more likely than men to take time off from daily activities as a result of violence, to receive medical attention, to require and to use the services of social services agencies, and to look to the police for protection from a violent spouse.

Time away from everyday activities and requiring medical attention as a result of spousal violence are two indicators of the severity of spousal violence and the impact it has on society. According to the 1999 GSS, 22% of spousal violence victims had to take time off from their daily activities because of the violence they had experienced. Female victims of spousal violence were three times as likely as male victims to take time off as a result of the violence (33% compared to 10%) (Figure 1.9).

Approximately 119,000 Canadians, according to the 1999 GSS, received medical attention as a consequence of the spousal violence they experienced in the five-year period preceding the survey. Women living in violent relationships were five times more likely than men in similar situations to have received medical attention (15% versus 3%). One-quarter of women victims did not receive any medical attention while 57% were not injured, compared to 10% and 84% respectively for men. In addition, women living in violent relationships were more likely than male victims to have been hospitalized in the past five years as a result of the violence (11% versus 2%) (Figure 1.9).

Reliance on formal and informal support networks more common among female victims

Various actions were taken by women and men who had been abused by a marital partner, including keeping the event secret, confiding in those close to them, reporting the incident to the police or using social services. Female victims, according to the 1999 GSS, were more likely to confide in someone close to them (81%), use social services (48%) and report incidents to the police (37%) than male victims (56%, 17% and 15% respectively) (Table 1.10). These differences may be somewhat attributable to the more serious nature of spousal violence experienced by women.

When victims of spousal violence confide in someone close to them, they generally turn to family members or friends and neighbours (54%). More than one in five spousal violence victims reported having confided in a co-worker (23%), a doctor or a nurse (22%), a lawyer (18%) and 9% spoke to a minister, priest, clergy or spiritual advisor. Similar patterns were observed for both women and men, although women were likely to do so in greater proportions (Table 1.10).

In addition to informal sources of support, there are also various types of social services available to women and men experiencing spousal violence, including counsellors, crisis lines, community centres, women's centres, men's centres and support groups. A total of 48% of women and 17% of men abused by a marital partner used a social

Public attitudes towards family violence

A national public opinion survey was conducted by EKOS Research Associates to collect baseline information on public attitudes towards family violence in Canada. This national telephone survey, using a random sample of 2,053 Canadians aged 16 or older, was conducted between December 2001 and January 2002. Other partners in this study included the Federal Family Violence Initiative, Justice Canada, Canadian Council on Social Development, Royal Canadian Mounted Police and the University of Toronto. The margin of error of this sample was ± 2.2 %, based on a 95% confidence interval. Following data collection, the data were weighted by age, gender and region based on the latest population figures.

According to the survey, the majority of Canadians (62%) felt that the problem of family violence in our society is more serious today than it was ten years ago. Three in ten Canadians (29%) rated family violence as being the same as ten years ago, while 7% believed that family violence was less serious. Yet, the majority of Canadians stated that family violence did not occur very often or only a fair bit (39% respectively) in their own community. Only 7% believed that family violence does not take place in their community while 10% said that family violence takes place a lot. Over three-quarters of Canadians, however, felt that family violence should be an urgent priority for both the federal government (77%) and for their community (76%).

Understanding of family violence

When asked to think about violence occurring in the immediate family, the majority of Canadians tended to think of violence between spouses (67%) followed by violence between parents and children (59%). Violence among siblings was less likely to be mentioned (33%) while abuse of the elderly was rarely stated (1%).

Two in five Canadians (41%) viewed violence toward children as the greatest cause for concern while one in five (19%) cited spousal violence. One in ten (10%) were most concerned about violence toward the elderly or disabled. Fewer than one in twenty identified violence against a parent by their teenage or adult child, dating violence or sibling violence to be the greatest cause for concern, while one in five (20%) indicated that all of the types of violence are cause for concern. Similarly, children under 12 years of age were perceived to be at greatest risk of experiencing family violence (57%). Fewer than one in ten Canadians identified younger women, teenagers or elderly people.

When asked why violence occurs in some families, Canadians were most likely to identify stress in the family (e.g., money problems and unemployment) (54%), alcohol and drugs (33%), and a history of violence in the life of the individual or learned behaviour in childhood (23%). Negative psychological effects were considered to be the most common impact upon people who directly experience or witness family violence (44% and 54% respectively).

Personal exposure to family violence

The majority of Canadians have known someone who has experienced family violence (61%). The nature of the most recent incident of family violence was most likely to have been spousal violence (51%) or violence towards children (30%) and to have involved physical and emotional abuse (37%), physical abuse only (31%) or emotional abuse only (22%).

Perceptions on criminal justice responses to family violence

A high percentage of Canadians did not believe that the traditional legal system was necessarily the most appropriate response in cases of family violence. While 70% of Canadians stated that spousal violence is a crime, the majority of Canadians recommended counselling and treatment as the most appropriate response to situations of spousal violence (62%) followed by time in jail (20%). In cases of child abuse involving a parent kicking or hitting a child with a fist, the most appropriate response, stated by 75% of Canadians, was counselling and treatment. Only 12% of Canadians believed that jail would be an appropriate response.

The Canadian public generally views the court system as somewhat unresponsive toward family violence. Almost two-thirds of Canadians (61%) said that the courts treat cases of family violence too lightly. Also, fewer than one in three see the courts as being supportive and responsive to victims and 44% of Canadians believed that the police treat cases of family violence too lightly. Approximately half of Canadians, however, felt that the police were supportive and responsive to victims. (EKOS Research Associates, 2002).

service (Table 1.10). Overall, women were more likely than men to report using all types of social services. This may reflect the less severe nature of the violent incidents experienced by men, and the fact that social services for male victims are not as widely available (Pottie Bunge, 2000a; Johnson and Pottie Bunge, 2001).

The most frequently used social service by both women and men was a counsellor or psychologist (28%), crisis centre or crisis line (10%) and community centre or family centre (10%). Transition homes were used by 11% of female victims of violence, while men's centres or support groups were used by about 2% of male victims (Table 1.10).

Many victims, both male (80%) and female (48%), did not use a social service. Similar proportions of female and male victims (44% and 49%) reported not using social services because they did not want or need help. An additional 26% of male victims and 17% of female victims reported the incident was too minor to require social services. Equal but small proportions of men and women (6%) who did not use a social service stated that they were not aware of any available social services (Pottie Bunge, 2000a).

Female victims of spousal violence more likely to report to the police

As discussed earlier in this chapter, results of the 1999 GSS show that 37% of spousal violence involving female victims and 15% involving male victims were reported to the police in the 5 years preceding the survey. This may be due in part to the fact that women experience more severe, injurious and more frequent violence than men. In cases of wife assault, the police were more likely to find out about the incident from the woman herself (29% of female spousal violence victims) (Table 1.10), while police were equally likely to find out about cases of husband abuse from the man himself or from someone else (7% of male spousal violence victims).

The majority of women and men who reported an incident of spousal violence to the police stated that they did so in order to stop the violence or receive protection (93% of women and 79% of men) or because it was their duty (55% of women and 58% of men). Women were more likely to report the incident so the abuser would be arrested and punished (48% of abused women and 34% of abused men who self-reported spousal violence to the police). For 31% of abused women and 27% of abused men, another person encouraged them to notify the police.

Police most likely to visit scene in cases of reported spousal violence²³

In cases of reported spousal violence according to the 1999 GSS, the police came to the scene in 54% of incidents. Other actions taken by the police in incidents of spousal violence included making a report or conducting an investigation (49%), taking the spouse/partner away (25%) arresting or laying charges (25%) and giving a warning to the spouse/partner (24%). In 8% of incidents, the police took no action. Differences between female and male victims were not statistically significant.

Use of shelters for abused women

One measure taken to assist abused women and their children leaving violent situations has been the development of shelters. Currently, shelters exist in every province and territory and provide services to women and child victims of various types of abuse. On April 17, 2000, there were 508 shelters for abused women²⁴ across Canada. Of these, only 18 existed prior to 1975 and 57 began operations between 1975 and 1979. The largest period of growth came in the 1980's as the issues of violence against women and family violence gained attention at all levels of government (Rodgers and MacDonald, 1994). Much of the growth between 1989 and 1998 was due to the development of shelters in Aboriginal communities and in rural areas.

An admission into a shelter is the official acceptance of a woman or child into a shelter with the allocation of a bed. A person can be admitted more than once during the year. According to the 1999-2000 Transition Home Survey, there were 96,359 admissions reported by 448 shelters from April 1, 1999 to March 31, 2000: 57,182 women and 39,177 children. This has increased from 78,429 women and children in 1991-1992.

In a snapshot taken on April 17, 2000, there were 2,826 women in 464 shelters across Canada. Eighty-one percent of women living in shelters that day were there for reasons of abuse. These women were escaping from psychological abuse (77%), physical abuse (68%), threats (50%), financial abuse (40%), harassment (36%) and sexual assault (30%). The vast majority of abused women on April 17, 2000 (80%) were seeking shelter from an abusive spouse or ex-spouse (Code, 2001).

²³ Readers are cautioned not to compare figures cited here to the 1993 Violence Against Women Survey (VAWS). While the same question was asked in both the VAWS and the 1999 GSS, the answer categories were not read to respondent in 1999, a major change from 1993. This will result in an under-estimation of the actions of police reported in the GSS compared to the VAWS.

²⁴ In 1999-2000, of the 508 residential facilities providing services to abused women and their children, 467 responded to the Transition Home Survey for a response rate of 92%.

Social costs of violence against women

Although the economic costs of violence are difficult to quantify, three recent Canadian studies have estimated that the economic costs of violence against women are substantial. Day (1995) estimated that the total annual measurable costs relating to health and well-being alone amount to over \$1.5 billion (Day, 1995). A second study estimated partial social services/education, criminal justice, labour/employment and health/medical costs of violence against women to be at least \$4.2 billion (Greaves et al., 1995). Kerr and McLean (1996) estimated that the partial economic costs of violence against women in British Columbia alone were \$385 million, and that with the addition of the missing costs of health care, child services, court costs and intergenerational effects were added, the total would approach one billion dollars per year (Kerr and McLean, 1996).

Another partial measure of the cost of violence against women is to examine the cost of operating shelters for abused women. In the 1997-1998 Transition House Survey, the 409 Canadian shelters that provided detailed revenue breakdowns had a total combined income of \$170 million and reported receiving 82% of these revenues from government sources. These shelters reported that they had received a total of \$140 million from federal, provincial/territorial, regional, municipal governments and Indian bands. In addition, they received a total of \$30 million from non-governmental sources such as donations, fund raising, provincial/territorial lotteries, resident fees, loans and grants (for major repairs and improvements) and the United Way (Trainor, 1999).

Table 1.1 Victims of violent crime reported to the police by sex of victim and relationship to accused, 2000^{1,2}

Deletionship of accused to victim			Victim	sex		
Relationship of accused to victim	Tot	al	Fema	le	Male	е
	No.	%	No.	%	No.	%
Total family members	52,384	28	39,783	42	12,601	13
Total spouse	33,775	18	28,633	30	5,142	5
Spouse ³	22,267	12	19,005	20	3,262	3
Ex-spouse	11,508	6	9,628	10	1,880	2
Other family	18,609	10	11,150	12	7,459	8
Parent ⁴	6,449	3	3,688	4	2,761	3
Child ⁴	3,675	2	2,464	3	1,211	1
Sibling ⁵	5,226	3	3,089	3	2,137	2
Extended family ⁶	3,259	2	1,909	2	1,350	1
Total acquaintances	77,556	41	36,380	38	41,176	44
Close friend	15,597	8	11,610	12	3,987	4
Business relationship	15,249	8	5,586	6	9,663	10
Casual acquaintance	46,710	25	19,184	20	27,526	29
Stranger	58,593	31	18,550	20	40,043	43
Total number of victims	188,533	100	94,713	100	93,820	100

¹ Excludes cases where sex of victim and relationship of accused to victim was unknown.

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

Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

³ Spouse includes both married and common-law partners.

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

⁵ Sibling includes natural, step, half, foster or adopted brother or sister.

⁶ Extended family includes others related to the victim either by blood or by marriage, e.g. aunts, uncles, cousins and in-laws.

Table 1.2 Incident clearance status by sex of victim in police-reported spousal violence, 2000^{1,2}

In the state of th			Victin	n sex			
Incident clearance status	Tota	Total		Female		Male	
	No.	%	No.	%	No.	%	
Total cleared	30,806	100	26,207	100	4,599	100	
Cleared by charge	25,192	82	22,012	84	3,180	69	
Cleared otherwise total	5,614	18	4,195	16	1,419	31	
Charges not laid at complainant's request	3,934	13	2,959	11	975	21	
Discretionary power exercised by police	842	3	603	2	239	5	
Other ³	838	3	633	2	205	4	

Percentages may not total 100% due to rounding.

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

Table 1.3 Solved spousal homicides according to accused-victim relationship, 1999^r and 2000¹

Victims killed by:	2000	1999	1999 ^r		
	No. of victims	%	No. of victims	%	
Husband (legal and common-law)	37	55	38	54	
Husband (separated/divorced)	14	21	20	28	
Same-sex partner	0	0	3	4	
Wife (legal and common-law)	13	19	8	11	
Wife (separated/divorced)	3	4	2	3	
Total spousal homicides	67	100	71	100	

Percentages may not total 100% due to rounding.

Excludes cases where no accused was identified in connection with case.

² Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

³ Other includes suicide or death of accused, death of complainant, reasons beyond control of the department, diplomatic immunity, committal of the accused to a mental institution, accused is involved in other incidents, accused is already sentenced, and admittance into a diversionary program.

r revised

¹ Includes only homicide incidents for which there are known suspects. If there were more than one suspect, only the closest relationship to the victim would be recorded.

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

Table 1.4 Total homicides by relationship of victim to accused, 1974-2000

	1974-2	2000	1974-1	976	1998-2	2000
	Total vi	ctims	Total vio	etims	Total victims	
	No.	%	No.	%	No.	%
Total family homicides Total spousal ¹	5,296 2,598	31 15	687 348	35 18	445 208	27 13
Husband	2,596 594	3	84	4	200 39	2
Wife	2,000	12	264	13	166	10
Same-sex spouse	4	0	0	0	3	0
Total other family	2,698	16	339	17	237	14
Child	1,172	7	131	7	114	7
Parent	535	3	69	4	56	3
Sibling	364	2	51	3	22	1
Other family	627	4	88	4	45	3
Total acquaintance ²	6,525	38	652	33	597	36
Stranger	2,168	13	277	14	198	12
Other	12	0	0	0	11	1
Unsolved	3,147	18	353	18	380	23
Unknown relationship	46	0	0	0	7	0
Total Homicides	17,194	100	1,969	100	1,638	100

Homicide numbers are revised for 1999.

Includes common-law, married, legally separated, separated common-law and divorced spouses.
 Includes common-law, married, legally separated, separated common-law and divorced spouses.
 Includes boyfriends, girlfriends, extra-marital lovers, estranged lovers, same sex relationships, neighbours, legal and illegal business relationships and others.
 Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Table 1.5 Rates of spousal homicides, 1974-2000^{1,2}

Veen		No.	Rate per m	illion couples
Year	Wife victim	Husband victim	Wife victim	Husband victim
1974	90	24	16.5	4.4
1975	91	33	16.2	5.9
1976	83	27	14.4	4.7
1977	80	29	13.6	5.0
1978	78	23	13.0	3.9
1979	90	22	14.7	3.7
1980	61	17	9.8	2.8
1981	82	27	12.9	4.3
1982	76	22	11.7	3.5
1983	83	27	12.6	4.2
1984	63	17	9.4	2.6
1985	86	25	12.7	3.8
1986	70	19	10.2	2.8
1987	79	34	11.5	5.0
1988	72	21	10.4	3.1
1989	76	22	10.9	3.2
1990	74	26	10.6	3.8
1991	87	25	12.4	3.6
1992	87	18	12.1	2.6
1993	63	24	8.5	3.3
1994	66	20	8.7	2.7
1995	71	21	9.2	2.8
1996	63	19	7.9	2.5
1997	63	13	7.9	1.7
1998	57	13	7.1	1.7
1999 ^r	58	10	7.2	1.3
2000	51	16	6.3	2.0
Total/Average rate	2,000	594	11.1	3.4

r vevised.
 Rates per 1,000,000 legally married, separated, divorced and common-law men and women.
 Rates are based on population estimates, Demography Division, July 1, 2001.
 Four same-sex partners were excluded from the analysis because Census data on same-sex couples is unavailable and therefore rates cannot be calculated.
 Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

Table 1.6 Intimate partner homicide rates by relationship of victim to accused, 1991-2000¹

	19	1991-2000 1991-1995		1-1995	1996	6-2000	Percentage change in rate 1991-1995	
	No.	Rate per million	No.	Rate per million	No.	Rate per million	and 1996-2000	
Total spousal homicides	845	5.7	482	6.6	363	4.8	-27	
Total wife victims	666	8.5	374	9.7	292	7.3	-25	
Married	255	4.4	150	5.2	105	3.7	-29	
Common-law ²	258	29.5	142	35.8	116	24.2	-32	
Separated	138	37.4	73	42.1	65	33.2	-21	
Divorced	15	1.7	9	2.3	6	1.2	-48	
Total husband victims	179	2.6	108	3.1	71	2.0	-35	
Married	60	1.0	34	1.2	26	0.9	-25	
Common-law ²	110	12.4	72	17.9	38	7.8	-56	
Separated	9	3.0	2	1.4	7	4.4	214	
Divorced	0	0.0	0	0.0	0	0.0	0	

Homicide numbers for 1999 are revised.

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

Table 1.7
Rates of spousal homicide by marital status and age, 1991-2000

			Victim age		
	15-24	25-34	35-54	55+	Total
		F	Rate per million couples		
Total female victims	22.2	10.7	8.8	4.4	8.6
Married	7.6	4.6	4.5	4.1	4.4
Common-law ¹	28.7	23.5	37.1	21.4	29.5
Separated	113.4	51.5	37.1	9.5	37.4
Divorced ²	18.3	3.1	2.3	0.5	2.0
Total male victims	8.9	3.5	2.8	1.1	2.6
Married	0.0	1.2	1.2	0.8	1.0
Common-law ¹	13.1	10.4	14.6	9.7	12.4
Separated ³	44.1	1.8	3.6	0.0	3.0
Divorced	0.0	0.0	0.0	0.0	0.0

Homicide numbers for 1999 are revised.

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

¹ Rate per 1,000,000 legally married, separated, divorced and common-law males and females. Rates based on population estimates, Demography Division, July 1, 2001.

² For the purposes of this study a small number of separated common-law cases originally coded by police as separated have been recoded as common-law. These were identified using the police narratives.

¹ For the purposes of this study, a small number of separated common-law cases originally coded by police as separated have been recoded as common-law. These were identified using the police narratives.

² Rates are based on a total of 15 cases.

³ Rates are based on a total of 9 cases.

Table 1.8 Cause of death in spousal homicides, 1974-2000

Cause of death	Total vi	Total victims		Female victims		Male victims	
	No.	%	No.	%	No.	%	
Shooting	956	37	800	40	156	26	
Stabbing	809	31	463	23	346	58	
Physical force ¹	707	27	646	32	61	10	
Other ²	108	4	78	4	30	5	
Unknown	14	1	13	1	1	0	
Total ³	2,594	100	2,000	100	594	100	

3 Excludes four same-sex couples.

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

Table 1.9 Level of injury by sex of victim in police-reported spousal violence, 2000^{1,2}

Land of Salara			Victin	1 Sex		
Level of injury	Tot	Total		ale	Male	
	No.	%	No.	%	No.	%
Total	33,033	100	27,979	100	5,054	100
No injury ³	14,883	45	12,577	45	2,306	46
Minor injuries	15,446	47	13,162	47	2,284	45
Major injuries or death	774	2	610	2	164	3
Unknown	1,930	6	1,630	6	300	6

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

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

Percentages may not total 100% due to rounding.

Homicide numbers for 1999 are revised.

Physical force includes beating, strangulation, suffocation and compressing.

Other includes smoke inhalation, burns, exposure, hypothermia, poisoning and lethal injection.

Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

No visible injury was observed at the time of the incident though weapons or physical force was used against the victim.

Table 1.10 Use of formal and informal services by those who experienced spousal violence, past 5 years

	Victim sex					
	Total		Female		Male	
	No. (000s)	%	No. (000s)	%	No. (000s)	%
Total violence by any spouse	1,239	100	690	100	549	100
Confided in persons close to them	869	70	560	81	309	56
Family members	665	54	445	65	220	40
Friend or 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, spiritual advisor	109	9	76	11	33	6 ^E
Did not confide in persons close to them	333	27	110	16	223	41
Don't know/refused	37	3 ^E	19	3 ^E	18	3 ^E
Used a social service	425	34	334	48	91	17
Crisis centre or crisis line	128	10	116	17	12	2 ^E
Counselor 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 ^E	F	F
Did not use a social service	774	62	334	48	440	80
Don't know/refused	40	3 ^E	22	3 ^E	18	3 ^E
Reported to police	338	27	256	37	82	15
By respondent	240	19	199	29	41	7
By another person	97	8	57	8	41	7
Not reported to police	864	70	414	60	450	82
Not stated/don't know	37	3 ^E	20	3 ^E	17	3 ^E

Percentage may not total 100% due to multiple responses or rounding.

Percentage may not total 100% due to multiple responsi ... not applicable E use with caution F too unreliable to be published

Asked only if respondent was female.

Asked only if respondent was male.

Source: Statistics Canada, General Social Survey, 1999

2.0 FAMILY VIOLENCE AGAINST OLDER ADULTS²⁵

by Mia Dauvergne

Persons aged 65 years and older constitute one of the fastest growing segments of the Canadian population. In 2000, there were an estimated 3.8 million older men and women representing 13% of the country's total population, up from 9% just 20 years earlier. Declining fertility rates and increased longevity, due primarily to improved health care, have contributed to this rapid growth. And as the baby boom generation (those born between 1946 and 1965) begins to reach the age of 65 early in the next decade, the absolute number of older adults, as well as their share of the total population, is expected to grow even more quickly. Indeed, by 2021, population projections estimate that older Canadians will number close to 6.7 million or about one-fifth of the total population (George et al., 2001).

The oldest of Canada's seniors are growing at a particularly fast rate. In 2000, there were almost 416,000 people aged 85 and older, more than double the number in 1980. ²⁷ This segment of the older population is expected to continue rising at a fairly rapid pace with projections indicating that the number will double again by 2021 (George et al., 2001).

The majority of older adults are women. In 2000, women comprised 57% of all seniors 65 and older and 70% of seniors 85 and older. ²⁸ Life expectancies for both women and men are continuing to rise.

One potential effect from Canada's "greying" population is a possible rise in the incidence of abuse towards seniors. Shrinking health and social services in the early 1990's, as well as the shift away from institutional care for the aged, will likely increase the demand on family members to provide care for their older relatives (McDaniel and Gee, 1993) causing a greater number of seniors to be at risk for domestic abuse. With each passing year, the need to quantify and understand abuse against older adults by family members will become increasingly important. In this chapter, the focus will be on violence and homicides committed against older adults reported to the police across Canada in 2000 as well as trends over time. In

addition, the physical and medical consequences and social impacts of violence against seniors are examined.

Defining abuse against older adults

As with all forms of family violence, abuse and neglect of older adults is largely a hidden problem. And since seniors are vulnerable to frailty, poor physical or mental health, and financial or emotional dependency, they may be more at risk for mistreatment. Further, the physical, psychological, social, and economic consequences of abuse and neglect can be devastating for older adults who may be isolated, on fixed incomes and lack the ability to seek help.

Currently, there is no uniform definition of 'abuse against seniors'. Abuse can take many different forms and include such actions or inactions as physical assault, emotional/psychological abuse, financial manipulation or exploitation, and neglect. Other forms of abuse include sexual abuse, medicinal abuse (e.g. withholding medication or overmedicating), systemic abuse (i.e. procedures and processes within institutions that allow harmful situations to be created or maintained), violation of civic/human rights (e.g. denial of privacy, denial of visitors, restriction of liberty, mail censorship) and abandonment. Abuse can occur in private dwellings or in institutions at the hands of spouses, children, other relatives, caregivers or other persons in situations of power and/or trust (McDonald and Collins, 2000).

Several theories have been advanced to try to explain the existence of abuse against older adults (McDonald and Collins, 2000; Phillips, 1986). The most widely accepted explanation suggests that stressful situations (usually the physical or mental impairment of the older person) cause

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

²⁶ Rates are based on postcensal estimates, Demography Division, July 1, 2001.

²⁷ Rates are based on postcensal estimates, Demography Division, July 1, 2001.

²⁸ Rates are based on postcensal estimates, Demography Division, July 1, 2001.

the caregiver to be abusive. Others contend that abuse against older adults occurs because of learned behaviour: abusers model violence after witnessing or suffering from abuse. Some theorists assert that physical, emotional and financial dependencies between the victim and the abuser contribute to abuse. Still others believe that abuse against older adults is spousal abuse "grown old" and question whether spousal abuse is ever first-time abuse in old age. Finally, some researchers and practitioners believe that mistreatment of older adults reflect, at least in some part, ageist societal attitudes and beliefs (Harbison, 1999).

2.1 Prevalence of abuse against older adults

Estimates of the extent of abuse against older adults are available from two types of data sources: (1) victimization surveys based upon self-reported accounts of violence; and (2) police statistics. Although each method has its relative advantages, both also have some drawbacks in terms of capturing information on the abuse of older adults that may result in an under-representation of the problem. Victimization surveys capture only what victims themselves disclose and some may choose not to report incidents or underestimate the frequency. Also, the telephone survey method, frequently used to gather this type of information, fails to reach respondents who do not have access to a telephone or who are infirm, suffer from hearing difficulties, live in institutions or who may be isolated in some other way.

The major weakness of data drawn from police records is that they cannot provide information on abuse that fails to come to the attention of police. Several reasons might prevent an older person from reporting a criminal offence. Older people who are mentally or physically impaired may not be capable of reporting a victimization or describing its details. Or, if a report is made, it may not be believed. Victims may be dependent upon abusive caretakers and fear of reprisals from the aggressor or other negative consequences such as being removed from their home and placed in an institution if they file a report. Financial abuse, such as fraud or theft, may occur without the older person's knowledge.

Victimization data on abuse against older adults

The most recent self-reported data on the prevalence of abuse against older adults comes from the General Social Survey (GSS) on Victimization conducted in 1999 by Statistics Canada.²⁹ The GSS interviewed more than 4,000 older Canadians about their experiences regarding emotional and financial abuse as well as physical and sexual violence by children, caregivers and spouses.³⁰ In total, approximately 7% of seniors reported that they had

experienced some form of emotional or financial abuse by an adult child, caregiver or spouse in the five-year period preceding the survey. Emotional abuse was reported most frequently (7%) followed by financial abuse (1%). Very little physical or sexual violence was reported to the GSS (1%). Almost 2% of older Canadians reported experiencing more than one type of abuse.

Results from the 1999 GSS indicate that emotional and financial abuse against older adults cuts across all socio-demographic lines.³¹ Both males and females from all income levels and educational backgrounds reported incidents of abuse. However, some characteristics of older adults were associated with higher rates of emotional and financial victimization. These included being male, being divorced or separated, having an income between \$30,000 and \$39,999 or \$60,000 or higher, having some post-secondary schooling and living in a rural area (Pottie Bunge, 2000b).

Police-reported data on violence against older adults

The other source of information on the prevalence of violence against older adults comes from administrative data provided by police. Many instances of abuse and neglect are crimes for which charges can be laid, such as uttering threats or assault. While *Criminal Code* statistics only capture a portion of all instances of violence suffered by older adults, this type of information does yield important analytical results as it likely represents the most serious cases. Detailed police data on the frequency and type of violent crime, including information on victims and accused persons, is available from the Incident-based Uniform Crime Reporting (UCR2) Survey.

According to police-reported statistics in 2000, adults aged 65 years or older had the lowest risk of being a victim of violent crime compared to other age groups.³² The rate of older adults reporting violent crime (162 per 100,000 population) was 2.5 times lower than that for the 55-64 years age group (403 per 100,000 population), the next

For a more detailed analysis of the results from the GSS on Victimization, see Pottie Bunge, V. 2000b. "Abuse of Older Adults by Family Members". Family Violence in Canada: A Statistical Profile, 2000. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics

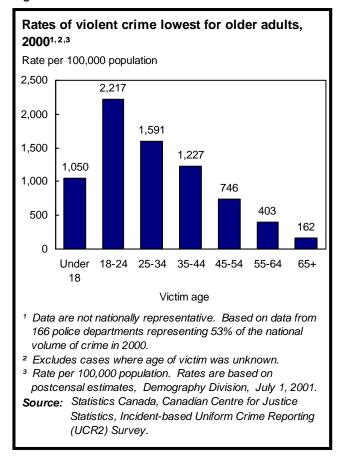
³⁰ Older adult respondents were not asked about sexual assaults by children. A caregiver is defined as anyone, either paid or unpaid, who provides assistance or healthcare in the respondent's home. This includes meal preparation, personal care or medical assistance. Spouses include current, former and common-law partners.

There were too few cases of physical and sexual violence against older people reported to the GSS to permit a detailed analysis by personal characteristics of victims.

³² In 2000, there were 166 police forces in 9 provinces that participated in the Incident-based Uniform Crime Reporting (UCR2) Survey representing 53% of the national volume of reported crime.

lowest rate. Violent crime reported to the police was most likely to be perpetrated against those aged 18-24 years (2,217 per 100,000 population) and those aged 25-34 years (1,591 per 100,000) (Figure 2.1). Among those cases where the relationship between the victim and the accused was known, older adults were twice as likely to be victimized by non-family than family members (107 compared with 45 per 100,000 older adults), the highest proportion of which were strangers (51% of non-family members).

Figure 2.1



Common assault most frequent offence experienced by older adults in 2000

Within the general population, the largest category of violent crime that is reported to police and committed by family members is assault, the vast majority of which is common assault. Common assault includes such behaviours as pushing, slapping, punching and threats to apply force. According to police-reported data in 2000, common assault was also the most frequent offence experienced by older adults from family members (54%) but in lower proportions than in the case of spousal

violence (See Figure 1.2). Many older adults were victims of uttering threats (21%) and assault with a weapon or causing bodily harm (13%). This pattern was the case regardless of whether the victim was female or male (Table 2.1).

Offences committed by non-family members upon older adults were slightly different than those committed by family members. Whereas common assault was also the offence most often perpetrated upon older victims by non-family members (32%), almost one-third were victimized by robbery (30%).

Older victims of family-related violence tend to be female

Police-reported data indicate that females, across all major age groups, are more often the victims of all categories of family violence than males. This also holds true among the senior population - in 2000, women accounted for almost two-thirds (65%) of the total number of older victims of family violence. Conversely, over half of older victims of violence between non-family members were men (56%) (Table 2.1).

Physical force most common method of violence^{33,34}

In 2000, among all assault victims, physical force³⁵ was the most serious form of violence present and this was also true for senior victims of assaults by family members. However, older women were more likely than older men to have physical force (67% compared with 56%) as the most serious form of violence present (Figure 2.2), while older men were more likely than older women to have weapons present (20% compared with 14%).

Males most likely perpetrators of family violence against older adults³⁶

In general, police-reported data indicate that males are the most likely perpetrators of family violence. This is also the case when the victimized person is an older adult. In 2000, 80% of people accused of violently victimizing an older family member were men.³⁷

³³ Due to data quality issues that result in physical force being coded as "other", Toronto is excluded from the analysis on methods of violence.

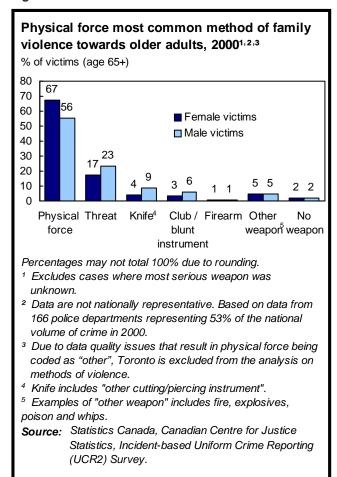
³⁴ Based on the most serious weapon present, not necessarily used.

³⁵ Involves the use of one's own body strength and/or action (choking, pushing or punching) that is intended to cause bodily injury or death.

³⁶ Analysis of accused characteristics is based only on those incidents for which there was a single accused and are derived from a subset of incidents from the UCR2 Survey which itself only represents 53% of the national volume of crime

³⁷ The number of accused persons differs from the number of victims since one accused may be responsible for multiple victimizations.

Figure 2.2

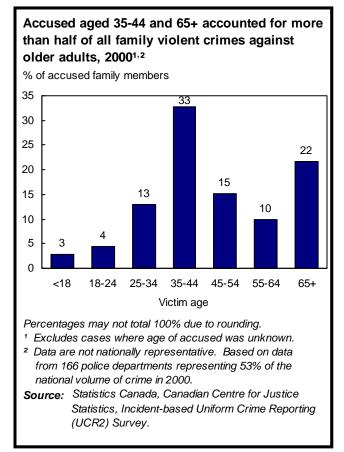


Adult children and spouses most likely perpetrators

Among cases of family violence towards seniors, adult children and spouses were the most likely perpetrators, accounting for almost three-quarters (71%) of the victimizations. Some differences were found between male and female victims. Older men were most often victimized by their adult children (43%) whereas older women were almost as likely to be victimized by their spouses (36%) as their adult children (37%) (Table 2.2).

Most accused persons fall into one of two age categories: 35 to 44 years and 65 years or older. Accused persons in these two age categories accounted for more than half (54%) of those family members accused of violent offences against older adults (Figure 2.3).

Figure 2.3



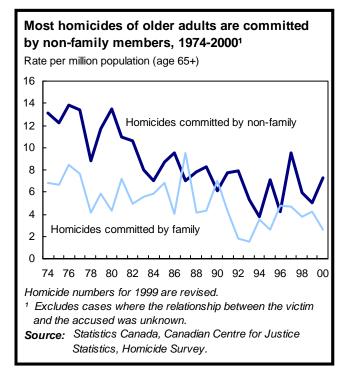
2.2 Family homicides against older adults

Between 1974 and 2000, the overall average annual homicide rate against seniors was 17 per million or about 45 older victims per year. The rate peaked during the 1970s and has been gradually declining (with some fluctuations) over the past 20 years. In 2000, the rate was 12 per million population aged 65 and over.

Majority of homicides of older adults committed by non-family members

The family homicide rate against older adults tends to be lower than the rate committed by non-family members. In 2000, family members killed three out of every one million seniors or a total of 10 older people, representing about one-quarter (26%) of all senior homicides in Canada. Non-family members, primarily casual acquaintances, were responsible for the other 74% of senior homicides. Between 1974 and 2000, the homicide rate against seniors has been lower for family members than non-family members in all but three years (1987, 1990, 1996) (Figure 2.4).

Figure 2.4



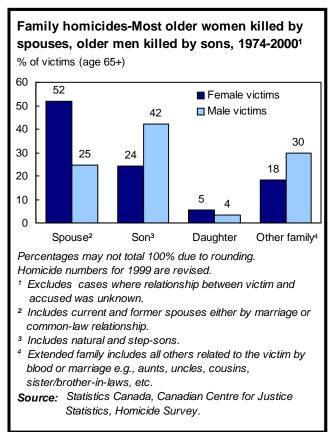
Spouses and children most likely perpetrators of family homicides of older adults

Among those senior homicides committed by family members between 1974 and 2000, spouses were the most likely perpetrators (39%), followed by adult children (37%) and extended family members (24%). Older women were much more likely than older men to be victims of spousal homicide – more than half (52%) of the older female victims of family homicide were killed by their spouses compared to one-quarter (25%) of older male victims. In contrast, older men were almost twice as likely as older women to be killed by their adult sons (42% versus 24%) (Figure 2.5).

Beatings, shootings and stabbings most common causes of death in family homicides of older adults

Between 1974 and 2000, methods of homicide committed by family and non-family members towards seniors were somewhat different. Older victims of homicide by nonfamily members were most likely to have been beaten to death (41%) while older victims of family homicide were almost as likely to have been shot (28%), beaten to death (29%) or stabbed (23%) (Figure 2.6).

Figure 2.5



Prior history of family violence is a risk factor for homicide

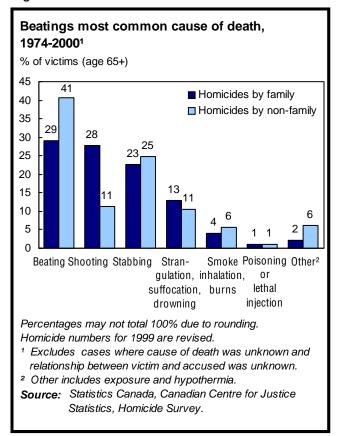
A prior history of family violence has been identified in the literature as a risk factor for family homicide. In a case control study in 1997, a history of family violence was identified as a particularly strong predictor of female homicide at the hands of a spouse (or other intimate) or another family member (Bailey et al., 1997). According to data from the Homicide Survey between 1997 and 2000,³⁸ 43% of persons accused of committing homicide against a senior family member had a history of family violence with that victim. These homicide victims were equally likely to be women and men (53% and 47%).

2.3 Consequences of family violence against older adults

Older adults who are victims of family violence may be more vulnerable to complications resulting from physical violence than younger victims. For instance, physical injuries could exacerbate pre-existing health problems or

³⁸ Data prior to 1997 on history of domestic violence between the accused and victim are largely unavailable.

Figure 2.6



chronic conditions and/or inhibit an older person's ability to function independently.

In 2000, a considerable proportion of older victims suffered minor injuries (37%) and major physical injuries or death (2%) in violent crimes committed by family members. However, no physical injury was reported for the majority (52%) of older victims. There were no differences in level of injury between female and male victims of family violence (Table 2.3).

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 towards seniors. These data record the number of patients admitted to hospital (staying at least one night) who have sustained a violent injury. The primary limitation of hospitalization statistics is that they can only account for those injuries that come to the attention of a physician and are determined to have resulted from violence. Also, they do not include individuals who are treated on an outpatient basis. It is important to note that these data represent all hospitalizations for violent injuries and are not limited to those inflicted by family members.

Hospitalization data from 1999-2000 indicate that 281 seniors aged 65 years or older were admitted to hospital for an injury resulting from an intentional violent incident (Table 2.4). Fights were the most frequent cause of injury requiring admission to hospital among older men (41%) followed by assaults (36%), whereas women were most likely to be admitted to hospital for assaults (36%) followed closely by fights (35%). Men represented slightly more than half (52%) of older adult admissions for injuries resulting from violent incidents. Women were more likely than men to require hospitalization for maltreatment (20% versus 5% respectively).

Use of services for abused women

The Transition Home Survey, which gathers information on the characteristics of facilities and the residents who access the services, reported in a snapshot taken on April 17, 2000, almost 2,300 women were living in shelters for reasons of abuse and approximately 1% of these women were aged 65 or older.

In an effort to recognize the unique needs of this population, many facilities offer specialized programming or outreach services for older women (age 55 years and over). Of the 467 shelters in Canada providing data for 2000, 84% offered services specifically designed to address the needs of older women.

Legal responses and impacts

Most Canadian provinces and territories have introduced special adult protection or guardianship legislation designed to protect seniors from abuse and neglect (Gordon, 2001). However, considerable controversy surrounds the issue (Robertson, 1995). Proponents of the legal approach argue that legislative interventions safeguard the rights and improve the level of functioning of older adults. Critics, on the other hand, maintain that legislative responses promote ageism and fail to respect older people's independence by assuming that they are incapable of seeking help on their own.

Abuse and neglect of seniors also has widespread social and economic costs on the civil and criminal justice systems, the health care system, community services, and business and labour market institutions (Spencer, 1999). Assessing the full extent of the costs is a complex and difficult task. Some Canadian studies, as examined in Chapter One, have attempted to estimate the cost of violence against women (Day, 1995; Greaves et al., 1995; Kerr and McLean, 1996) but none have yet attempted to single out the costs associated with violence against older adults.

Table 2.1

Number and proportion of older adult victims of violent crime, by family/non-family, by selected offence category and sex, 2000^{1,2}

		Vi	ctimization	s by family	1		Victimizations by non-family					
Type of violent crime			Victim	sex			Victim sex					
	To	Total Female Male		ale	To	Total		Female		ale		
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Total	1,006	100	649	100	357	100	2,407	100	1,052	100	1,355	100
Common assault	547	54	373	57	174	49	772	32	305	29	467	34
Uttering threats	211	21	119	18	92	26	436	18	140	13	296	22
Assault with weapon or causing	100	40	00	40	Ε0	4.4	004	0	F4	_	170	40
bodily harm	132	13	82	13	50	14	221	9	51	5	170	13
Criminal harassment	51	5	37	6	14	4	91	4	49	5	42	3
Kidnapping	18	2	12	2	6	2	28	I	15	- 1	13	I
Robbery	14	1	10	2	4	1	732	30	421	40	311	23
Extortion	14	1	8	1	6	2	20	1	6	1	14	1
Other ³	19	2	8	1	11	3	107	4	65	6	42	3

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 of violent crime by sex of victims and relationship to accused, 2000¹

Deletionship of accused to victim	Victim sex								
Relationship of accused to victim	Tota	ıl	Fem	nale	Male				
	No.	%	No.	%	No.	%			
Total² Unknown Non-family Family	3,627 214 2,407 1,006	100 6 66 28	1,792 91 1,052 649	100 5 59 36	1,835 123 1,355 357	100 7 74 19			
Total family ³ Spouse ⁴ Parent ⁵ Adult Child ⁵ Sibling ⁶ Extended family ⁷	1,006 312 53 398 110 133	100 31 5 40 11 13	649 236 28 243 60 82	100 36 4 37 9 13	357 76 25 155 50 51	100 21 7 43 14 14			

Percentages may not total 100% due to rounding.

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

¹ Includes only those cases where sex of victim and relationship between victim and accused was known.

² Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

³ Other violent offences includes negligence causing bodily harm, unlawfully causing bodily harm, arson, aggravated assault and other assaults, sexual assault, murder and attempted murder and other violent violations.

Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

Excludes one case where sex of victim was unknown.

Excludes cases where relationship between victim and accused was unknown.

Includes current and former spouses, either by legal marriage or common-law relationship.

Includes a small number of 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.

Table 2.3 Level of injury by sex of older adult victim of family violence, 2000^{1,2}

Lovel of injury			Victim	ı sex		
Level of injury	Т	otal	Fem	ale	Male	
	No.	%	No.	%	No.	%
Total	1,006	100	649	100	357	100
Unknown No injury Minor injuries ³ Major injuries or death	92 519 370 25	9 52 37 2	58 339 239 13	9 52 37 2	34 180 131 12	10 50 37 3

Table 2.4 Admissions to hospital by cause of violent injury and by sex of older adult victims, 1999-2000

Course of injury			Victin	n sex		
Cause of injury	Tota	al	Fem	ale	Male	
	No.	%	No.	%	No.	%
Total	281	100	135	100	146	100
Fight, brawl, rape Poisoning ¹	107 2	38 1	47 1	35 1	60 1	41 1
Firearm ² Explosive	3 2	1 1	0 2	0 1	3 0	2 0
Cutting, piercing instrument Maltreatment Assault Late effects of injury	23 35 101 8	36 3	27 48 2	20 36 1	15 8 53 6	10 5 36 4

Percentages may not total 100% due to rounding.

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

Includes only those cases where sex of victim was known.

Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

³ No visible injury was observed at the time of the incident though weapons or physical force was used against the victim.

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

Includes assault by corrosive and caustic substances.

² Includes handgun, hunting rifle and other unspecified firearm.

3.0 VIOLENCE AGAINST CHILDREN AND YOUTH

by Daisy Locke

Over the past two decades, the negative consequences of child maltreatment have been extensively studied. Sexual and physical assault, emotional abuse and neglect can have a tremendous impact on the lives of victims and lead to physical health complications, long term mental health issues, and problems with relationships or social functioning (Latimer, 1998). Increasingly, exposure to spousal violence is being recognized as harmful and as putting children at risk for long-term negative effects. The impacts of child maltreatment are experienced not only during childhood and adolescence but also in adulthood.

Maltreatment is difficult to define and measure as little consensus exists on definitions of maltreatment other than serious assaults (Dorne, 1997 and Straus, 1994). Clinical physicians emphasize physical injury whereas social workers or psychotherapists emphasize emotional effects (Dorne, 1997). As well as definitional problems, clinical sample studies generally have small sample sizes and are not representative of the general population (Garbarino and Plantz, 1984; cited in Gelles, 1985). Two main national data sources can be used to examine violence against children and youth: police-reported and child welfare data. The Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) (Trocmé and Wolfe, 2001a) was the first national study on the incidence of child abuse and neglect reported to and investigated by child welfare services. Information on substantiated cases of child maltreatment from this study was featured in Family Violence in Canada: A Statistical Profile, 2001. This chapter focuses on child and youth sexual and physical assaults and homicides reported to the police across Canada in 2000 as well as trends over time. In addition, the consequences of child and youth maltreatment are examined.

3.1 Prevalence of sexual and physical assaults against children and youth

While police-reported data on violence against children and youth provide only a partial image of the extent of such violence, they provide an opportunity to profile the cases of physical and sexual assaults that are investigated by a subset of police agencies in Canada.

Nearly a quarter of victims of police-reported assaults were children and youth

In 2000, children and youth under the age of 18 years represented 23% of the Canadian population and comprised 23% of the victims of sexual and physical assault reported to a subset of police agencies (Table 3.1). Overall, children and youth made up a much larger proportion of sexual assault victims (61%) than physical assault victims (19%). Nevertheless, due to the higher overall prevalence of physical assaults, there were three times as many physical assault victims under the age of 18 years as sexual assault victims (22,628 versus 7,489).

Over half of child and youth victims assaulted by an acquaintance

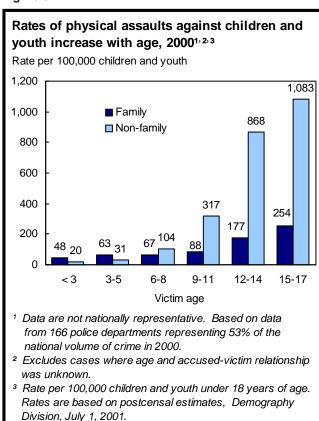
The majority of child and youth victims of assaults reported to the police in 2000 were assaulted by acquaintances (52%), followed by family members (23%) and strangers (19%) (Table 3.2). For cases of sexual assault, acquaintances were the perpetrators for almost half (49%), followed by family members (30%) and strangers (15%). Similarly, more than half (53%) of the child and youth victims of physical assaults were assaulted by acquaintances, followed by family members (21%) or strangers (20%). Male victims of sexual assault were somewhat more likely than girls to be victimized by a family member, but less likely in the case of physical assaults.

Within families, parents were the most likely perpetrators in assaults against children and youth. Thirty-nine percent of children and youth who were sexually assaulted by a family member were victimized by parents, followed by siblings (32%), extended family members (28%) and spouses (1%). Children and youth who were physically assaulted by a family member were victimized by parents (67%), siblings (18%), extended family members (8%) and spouses (6%) (Table 3.3). Most spousal assaults involved physical assaults against girls aged 16-17 years.

Rates of physical assaults against children and youth increase with age

In 2000, according to police-reported data, the risk of physical assault for children and youth by both family and non-family members increases as children get older. However, as children age and become more independent, their sphere of relationships expands and the rate of physical assaults committed by non-family members becomes significantly higher than the rate for family members. Comparing physical assaults committed by family and non-family members, young children aged 5 years and under were more than twice as likely to be physically assaulted by family than non-family members (48 and 63 compared with 20 and 31 per 100,000 children). The reverse is true for older children where children aged 6 years and older were more likely to be physically assaulted by non-family than family members (Figure 3.1). Sexual assaults followed the same general trend except that for both non-family and family assaults, rates for child and youth victims peaked at 12-14 years of age and fell for children aged 15-17 years.

Figure 3.1



Source: Statistics Canada, Canadian Centre for Justice

Statistics, Incident-based Uniform Crime Reporting

Victims of family assaults tend to have a younger average age than victims of non-family members. Child and youth victims who were sexually assaulted by family members were, on average, 9 years old compared to 12 years old for victims of non-family members. For child victims of physical assault, the average age of a young person physically assaulted by family members was 12 years compared to 14 years for victims of non-family members.

Male victims younger than female child and youth victims

Differences also exist between the ages at which boys and girls are at greatest risk of assault. Sexually assaulted male children and youth were younger than females, regardless of the relationship to the accused (family versus non-family). Males were, on average, 8 years of age when sexually assaulted by a family member, while females were an average of 10 years of age. For non-family sexual assaults, males were an average of 10 years of age while females were 12 years of age. Males were also slightly younger when they were physically assaulted by family members, 11 years of age versus 12 years of age for females. However, male and female children and youth had the same average age for physical assault by non-family members (14 years).

Males more often victims of physical assault and females more often victims of sexual assault

In 2000, males made up 51% of Canada's population under 18 years of age and 51% of child and youth victims of assaults reported to the police that same year. However, boys are more likely to be victims of physical assault than girls. In 2000, 62% of victims of physical assault were males while 38% were females (Table 3.2). Female children and youth made up a significantly higher proportion of sexual assault victims than males (80% compared with 20%).

Physical force most common method of violence^{39,40}

In 2000, physical force⁴¹ was the most serious form of violence present for child and youth victims of physical and sexual assaults. Similar proportions of child and youth victims of sexual assaults by family and non-family members (94% compared with 92%) had physical force as the most serious form of violence present. Child and youth victims of family and non-family physical assaults had similar proportions of physical force (83% and 82% respectively) as the most serious form of violence present.

(UCR2) Survey.

³⁹ Due to data quality issues that result in physical force being coded as "other", Toronto is excluded from the analysis on methods of violence.

⁴⁰ Based on the most serious weapon present, not necessarily used.

⁴¹ Involves the use of one's own body strength and/or action (choking, pushing or punching) that is intended to cause bodily injury or death.

Family accused of child assaults older than nonfamily 42

In 2000, according to police-reported data, the average age of a person accused of sexually assaulting a child or youth was 31 years. This data is supportive of the findings of a study of almost one hundred convicted sex offenders (Bifulco and Moran, 1998). According to this study, the average age of accused at conviction was 31 years, but all offenders had committed their first offences as juveniles. According to the police statistics, the average age of those accused of physically assaulting a child or youth was much lower at 24 years of age.

Family members accused of the sexual assault of children and youth were older than non-family members accused of the same crime (34 years versus 29 years of age). The difference was even more pronounced for physical assaults as family members were, on average, 33 years of age compared to 20 years of age for non-family members.

The highest percentage of those accused of sexually assaulting a child or youth were casual acquaintances (38%) who had an average age of 29 years (Table 3.4). Fathers and other immediate family members were the next largest group (12% each) and their average ages were 39 and 31 years respectively. Casual acquaintances were most often accused of physical assault (44%) and their average age was 18 years followed by strangers at 14% with an average age of 26 years.

Males majority of accused family members

Among family members accused of physically or sexually assaulting a child or youth, males made up the majority (84%) according to police-reported data. While 98% of family members accused of sexually assaulting children and youth were males, males accounted for a smaller percentage of family members (78%) accused of physically assaulting children and youth.

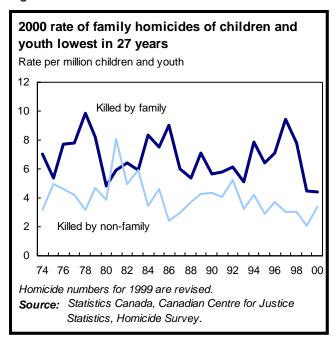
Trends in sexual and physical assaults against children and youth, 1995-2000

Based on available data from police forces that have consistently reported to the Incident-based Uniform Crime Reporting (UCR2) Survey since 1995, the number of assaults against children and youth by non-family has been consistently higher than the number of assaults by family members from 1995 to 2000. There were twice as many sexual assaults against children and youth by non-family members compared with family members from 1995 to 2000. Furthermore, almost four times more children and youth were physically assaulted by non-family members as family members each year (Table 3.5).

3.2 Homicides of children and youth

There were 55 homicides of children and youth in 2000. Thirty-one victims (4.4 per million persons under 18 years of age) were killed by family members, the lowest number and rate in 27 years (Figure 3.2). Almost all child and youth victims of family homicide in 2000 were killed by parents (29) (Table 3.6). Of these, 14 were killed by biological fathers and 5 by stepfathers accounting for 66% of parental homicides. Biological mothers were the accused of the remaining 34% of parental homicides against their children under 18 years of age. Twenty-four victims or 3.4 per million children and youth were killed by non-family members in 2000, the highest number and rate since 1996 when 27 victims or 3.7 per million children and youth under 18 years of age were killed by non-family members.

Figure 3.2



From 1974 to 2000, almost two-thirds (63%) of the homicides of children and youth were perpetrated by family members and over one-third (37%) by non-family members. The proportion remained the same regardless of the victim's sex. For children and youth killed by family members, proportions of males and females were similar (Table 3.7). For those children and youth killed by a nonfamily member, casual acquaintances were most often the accused (37%) followed by strangers (27%) and close friends (20%).

⁴² Data are based on a subset of cases in which there is only one accused and one victim per case representing 55% of all sexually and physically assaulted victims under 18 years of age.

International comparisons of child maltreatment

Child maltreatment is an international phenomenon. According to the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS), the main reasons for child maltreatment investigations were neglect (40% of all investigations), followed by physical abuse (31%), emotional maltreatment (19%), and sexual abuse (10%) (Trocmé and Wolfe, 2001b). In 1999, 42% of the children on the child protection registers, according to the Department of Health in the United Kingdom, were registered for neglect, 31% for physical injury, 19% for sexual abuse and 16% for emotional abuse (Department of Health, 2001). In the United States in the same year, 58% of investigated victims suffered neglect, 21% were victims of physical abuse, 11% were victims of sexual abuse and 36% were victims of other types of abuse (U.S. Department of Health and Human Services, 2001). 43

Child Maltreatment in the United Kingdom44

The National Society for the Prevention of Cruelty to Children (NSPCC) conducted a survey of 2,869 young people, aged 18-24 years, from September 1998 to February 1999 in order to explore the childhood experiences of young people in the United Kingdom, including their experience of abuse and neglect. The study focused on the extent and effects of child maltreatment in the total population rather than the children reported to the police or social services.

One-quarter of the respondents had at least one violent experience which was defined as being hit on the bottom with a hard implement, hit on another part of the body with a hard implement, shaken, hit with the fist/kicked hard, thrown/knocked down, beaten up/hit over and over again, grabbed round the neck and choked, burned or scalded on purpose or threatened with a knife or gun. Parents were responsible for the majority of violent experiences. Forty-nine percent of respondents who reported abuse were abused by a biological mother and 40% were abused by a biological father. The remaining respondents identified stepfathers (5%), stepmothers (3%), grandparents (3%), and other relatives (1%) as their abuser. Over 20% of respondents who had experienced violence had experienced violence on a regular basis and 60% reported receiving injuries, mostly bruising, but also head injuries, broken bones and burns.

Seven percent of the sample were assessed as seriously physically abused by parents as there had been violence regularly over the years or violence which caused physical injury frequently lead to physical effects lasting at least until the next day. Fourteen percent experienced intermediate abuse by parents but with no serious injury and regular but less serious abuse such as slaps, smacks and pinches.

The study found that neglect formed a complex interrelationship with physical, social and psychological well being. It also found that neglect could be particularly damaging in the long term. Six percent of the sample experienced serious absence of care which included frequently going hungry, frequently having to go to school in dirty clothes, not being taken to the doctor when ill, regularly having to look after themselves because parents went away or parents had problems with drugs or alcohol, being abandoned or deserted or living in a home with dangerous physical conditions.

In addition, the survey found that 6% of respondents had experienced emotional maltreatment by their families. Also, more than a quarter of respondents (26%) had witnessed violence between parents and for 5%, this was a "constant" or "frequent" occurrence.

Contrary to the other types of child maltreatment which were most often carried out by family members, the NSPCC Survey found that most of the sexually abused respondents were abused by non-family members. The majority of the 6% of the sample who were sexually abused were most often abused by their boyfriend/girlfriend. A small number of the sample were sexually abused by family members, usually male relatives, such as a brother, uncle or father. Most events took place at the home of the victim or the home of the offender.

Examining only those children and youth killed by parents, 42% of infants were killed by biological fathers and this proportion increased to 73% for 15-17 year-old victims (Figure 3.3). In contrast, more infants were killed by biological mothers (56%) than biological fathers and this percentage declined for older victims.

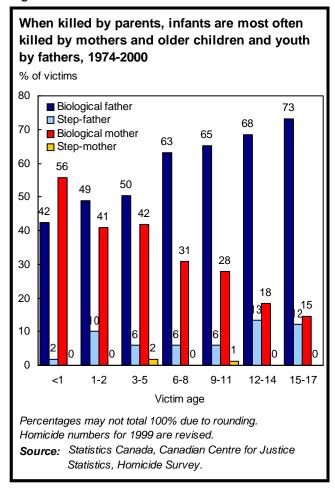
Victims of family homicide younger than victims of non-family homicide

The average age for child and youth victims of homicide from 1974 to 2000 varied by the relationship of the accused to the victim. Child and youth victims of family homicides tended to be very young with an average age of 5 years

⁴³ Percentages total more than 100% because children may have been victims of more than one type of maltreatment.

⁴⁴ Cawson, P., Wattam, C., Brooker, S. and Kelly, G. 2000. Child Maltreatment in the United Kingdom: a study of the prevalence of child abuse and neglect. London: National Society for the Prevention of Cruelty to Children.

Figure 3.3



whereas victims of non-family homicides were, on average, 12 years old. There was no difference by the sex of the victim.

Children killed by family most likely to die from strangulation, suffocation or drowning

From 1974 to 2000, most children and youth killed by family members. were killed by strangulation, suffocation or drowning (27%), beating (25%), and shooting (20%) (Table 3.8). Five percent of murdered infants died of Shaken Baby Syndrome. In 1997, due to the added public interest in the reasons for infant⁴⁵ deaths, Shaken Baby Syndrome (SBS) was added to the Homicide Survey as a cause of death. From 1997 to 2000, the highest cause of death for infants killed by family members was Shaken Baby Syndrome (36%). Strangulation, suffocation or drowning was the next highest category of cause of death at 29%. The remaining infants died from beatings (21%), stabbings (4%), exposure/hypothermia (2%), poisoning or lethal injection (2%), shooting (2%), smoke inhalation or burns (2%) or other causes (2%).

Infant homicides

Infants under one year of age had the highest rate of homicide in 2000. Infants were killed at a rate of 6 per 100,000 children under one year of age. In comparison, the next closest rate was for youths aged 17 years who had a rate of 3. In 2000, 14 infants were killed by family members; 8 (57%) were killed by fathers, 5 (36%) by mothers and 1 (7%) by a brother.

The figure for infant homicides may be under-reported since some claims of accidental childhood deaths such as falls or "sudden infant deaths" could actually be due to child abuse. Since 1995, however, most provinces have legislated mandatory coroner inquests into deaths of children under two years of age. This may have resulted in the increased reporting and classification of these cases as homicides in recent years (Fedorowycz, 2001). A review in Ontario of all deaths of children under the age of two suggested that as many as 10% of deaths prior to 1995 that were attributed to causes such as Sudden Infant Death Syndrome may have been due, in fact, to homicide (Trocmé and Brison, 1997).

3.3 Consequences of child and youth maltreatment

The consequences of child sexual, physical and emotional abuse and neglect can go far beyond immediate visible injuries. Victims can experience negative physical, psychological and behavioural consequences not only during childhood and adolescence but in adulthood as well. The immediate physical consequences of abuse may include bruising, bone fractures, cuts and burns. Permanent injury such as brain damage and visual and hearing impairment may result from beatings to the head or Shaken Baby Syndrome (Dorne, 1997).

According to police-reported data, almost six in ten (59%) child and youth victims in 2000 reported suffering minor physical injury due to physical assaults by family members. Two percent had a major physical injury and the remaining victims had no visible injuries.

The psychological consequences of abuse can be more harmful than the physical impact of abuse. While physical injury may not be apparent in sexual abuse cases, incidents of child sexual abuse often have long-lasting effects on children. According to the Canadian Incidence Study of Reported Abuse and Neglect (CIS), emotional harm was noted in nearly one-half of substantiated sexual abuse cases that came to the attention of child welfare agencies. In many of these cases, the emotional harm

⁴⁵ An infant is considered to be less than one year of age.

Child maltreatment reported to hospitals in Canada

Hospitalization records for injuries to children resulting from assaults or other violence provide a national estimate of the number of children and youth who are admitted to hospitals (staying at least one night) and have sustained an injury as a result of one of the forms of violence listed in Table 3.9. These data are limited to the extent that they included only those injuries that come to the attention of a physician and are acknowledged as having resulted from violence and exclude cases where the child or youth is seen on an outpatient basis.

Information from these hospitalization records indicate that the youngest children are most often injured as the result of child battering and other maltreatment, while older youth are most frequently injured as a result of fights. In 1999-2000, 38 in 100,000 children under the age of 1 year were reported by doctors to have suffered injuries requiring hospitalization as the result of child battering or other maltreatment. This rate dropped to 2 in 100,000 for teenagers aged 15-19 years.

Table 3.9 **Childhood hospitalizations for assault and other maltreatment, Canada, 1999-2000**¹ (Annual number and annual rate per 100,000 population)²

Cause of injury 3									Victim	age								
Cause of injury ³		Total			<1			1-4			5-9			10-14		1	5-19	
	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	%	Rate	No.	% l	Rate
Total	1,731	100	22	154	100	45	131	100	9	65	100	3	190	100	9	1,191	100	58
Fight, brawl, rape	761	44	10	1	1	0	4	3	0	13	20	1	107	56	5	636	53	31
Poisoning, strangulation ⁴	15	1	0	1	1	0	4	3	0	1	2	0	2	1	0	7	1	0
Firearm ⁵	47	3	1	0	0	0	1	1	0	1	2	0	6	3	0	39	3	2
Cutting, piercing instrument Child battering and other	258	15	3	2	1	1	0	0	0	1	2	0	13	7	1	242	20	12
maltreatment	320	18	4	128	83	38	102	78	7	26	40	1	30	16	1	34	3	2
Other ⁶	330	19	4	22	14	6	20	15	1	23	35	1	32	17	2	233	20	11

Percentages may not total 100% due to rounding.

- ¹ Period April 1, 1999 to March 31, 2000.
- ² Rates based on revised July 1 figures from Annual Demographic Statistics 2000.
- Based on the International Classification of Diseases 9th revision (ICD-9) codes E960-E969.
- ⁴ Includes corrosive and caustic substances, poisoning, hanging, strangulation and submersion.
- 5 Includes codes E965.1-E965.4
- 6 Includes codes E965.5-E965.9, E968-E969

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

was severe enough to require treatment (Trocmé and Wolfe, 2001b).

In addition, the CIS found that in 58% of the substantiated sexual abuse cases, children had problems with child functioning, including depression or anxiety (29%), age-inappropriate sexual behaviour (17%), behaviour problems (14%), negative peer involvement (13%), and irregular school attendance (10%). In over one-half (56%) of substantiated physical abuse cases, behaviour problems (39%), negative peer involvement (15%), depression or anxiety (15%), violence to others (11%), and developmental delay (9%) were the most often indicated concerns (Trocmé and Wolfe, 2001a).

Research has shown that child maltreatment can lead to many problems that appear in adolescence such as teenage pregnancy, multiple sex partners (Luster and Small, 1997), depression (Brown, Cohen and Johnson, 1999), self-mutilation, delinquency, prostitution, alcohol and substance abuse, eating disorders and suicide attempts. Other studies have shown a relationship between childhood sexual abuse and coping mechanisms such as drug use, alcoholism, eating disorders such as anorexia nervosa or bulimia and self-mutilation (Harrison, 1989; Groenveld and Shain, 1989; Miller, 1987; Bass and Davis, 1988; and Briere, 1989; all cited in Hill, 1993). Furthermore, adolescents and young adults who were maltreated as children were shown to have depressive disorders at a rate of 3.4 to 4.5 times higher than non-maltreated children (Brown, Cohen and Johnson, 1999).

Various psychological consequences in adulthood have also been found to be associated with child maltreatment including poor self-esteem, depression, anxiety disorders, somatization, insomnia, dissociative disorders, borderline personality disorder, post-traumatic stress disorder, substance abuse, suicide attempts and problems with interpersonal and sexual relations (McCauley et al, 1997, Beitchman et al, 1992 and Briere, 1989; cited in Hill, 1993).

There has also been a contention that those who have been maltreated in childhood often suffer from poor coping skills and, coupled with low self-esteem, are not as able to cope with crisis situations as others with better support systems or coping mechanisms. As well, a strong relationship between sexual abuse by family members and

later experiences of sexual assault, wife abuse and other forms of sexual victimization has been suggested (Russell, 1986; cited in Hill, 1993). In fact, it has been found that 50% of those who reported having been abused as children also reported being abused as adults (McCauley et al, 1997).

Table 3.1 Victims of sexual and physical assault by age group, 2000^{1,2}

Type of assault	Total victims	Total victims	Total child and youth	Total adult victims			s a proportion of total victims (under age 18)				
			victims (<18)	(18+)	Total	<3	3-11	12-17			
	No.	%	%	%	%	%	%	%			
Sexual assault – Total	12,243	100	61	39	100	2	43	55			
Aggravated sexual assault	101	100	42	58	100	10	33	57			
Sexual assault with a weapon	200	100	40	60	100	1	19	80			
Sexual assault	10,353	100	58	42	100	2	41	57			
Other sexual crimes ³	1,589	100	85	15	100	2	53	44			
Physical assault – Total	116,202	100	19	81	100	2	22	76			
Aggravated assault	1,532	100	14	86	100	17	13	70			
Assault with weapon/causing bodily harm	24,330	100	18	82	100	2	20	78			
Common assault	86,063	100	21	79	100	2	23	75			
Discharge firearm with intent	62	100	10	90	100	0	33	67			
Assault against peace-public officer	2,988	100	0	100	0	0	0	0			
Other assaults ⁴	1,227	100	12	88	100	7	27	66			
Assault – Total	128,445	100	23	77	100	2	27	71			

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, 2000^{1,2}

B. L. P L C					Vict	ims		
Relationship of accused to victim		Total assault		Sexual assault ³			Physical assault	
			Total	Female	Male	Total	Female	Male
Total	No. %	30,117 100	7,489 100	6,017 100	1,472 100	22,628 100	8,693 100	13,935 100
Family	%	23	30	29	35	21	29	16
Acquaintance ⁴	%	52	49	49	48	53	51	54
Stranger	%	19	15	16	12	20	15	24
Unknown	%	6	6	6	4	6	5	6

Percentages may not total 100% due to rounding.

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

¹ Excludes cases where age was unknown.

² Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

Other sexual offences include sexual interference, invitation to sexual touching, sexual exploitation, incest and anal intercourse.

⁴ Other assault combines unlawfully causing bodily harm and criminal negligence causing bodily harm, etc., into one category.

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

² Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

Sexual assault includes the "other sexual crimes" category which includes sexual interference, sexual touching, sexual exploitation and incest, etc.

⁴ Acquaintance includes any relationship in which the accused and the victim are familiar with each other, but not related, such as close friend, business relationship, teacher, coach, doctor or caregiver.

Table 3.3 Child and youth victims of assault by family members, 20001,2

Dalatianahin of ann				Victim sex					
Relationship of accused to victim		Total assault	Sexual assault				Physical assault		
			Total	Female	Male	Total	Female	Male	
Total	No. %	7,020 100	2,270 100	1,748 100	522 100	4,750 100	2,538 100	2,212 100	
Parent Sibling ³ Extended family ⁴	% % %	58 23 15	39 32 28	39 33 27	39 30 30	67 18	62 19 8	72 17 9	
Spouse	%	5	1	1	1	6	11	1	

Table 3.4 Average age of accused in cases of child and youth physical and sexual assault, 20001

Deletionship of acquired	Sexual as	ssault	Physical assault		
Relationship of accused to victim	Average age of accused	% of accused	Average age of accused	% of accused	
Total	31	100	24	100	
Total family	34	33	33	26	
Spouse	F	F	F	F	
Ex-spouse	F	F	F	F	
Mother	F	F	36	4	
Father	39	12	39	13	
Other immediate family member	31	12	21	5	
Extended family	34	9	33	2	
Total non-family	29	63	20	69	
Close friend	27	10	19	7	
Business relationship	29	7	22	4	
Casual acquaintance	29	38	18	44	
Stranger	35	9	26	14	
Unknown	27	4	24	4	

Percentages may not total 100% due to rounding.

Data are not nationally representative. Based on data from 166 police departments representing 53% of the national volume of crime in 2000.

Excludes cases where sex of the victim was unknown.

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

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

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

Too unreliable to be published.

Based on cases in which there is only one accused and one victim per case representing 55% of all sexually and physically assaulted victims less than 18 years of age. Source: Statistics Canada, Canadian Centre for Justice Statistics, Incident-based Uniform Crime Reporting (UCR2) Survey.

Table 3.5 Child and youth victims of sexual and physical assault by accused-victim relationship, 1995 to 2000^{1,2}

					Relat	tionship of ac	cused to victim				
Year	Tot	Total		Sexual assault				Physical assault			
			Fan	nily	Non-family ³ Family		Family Non-fami			ımily	
	No.	%	No.	%	No.	%	No.	%	No.	%	
1995 1996 1997 1998 1999 2000	20,795 20,018 19,827 21,139 20,970 22,761	100 100 100 100 100 100	1,995 1,933 1,823 1,745 1,721 1,832	10 10 9 8 8	3,864 3,719 3,687 3,683 3,659 3,844	19 19 19 17 17	3,180 3,122 3,020 3,585 3,596 3,896	15 16 15 17 17	11,756 11,244 11,297 12,126 11,994 13,189	57 56 57 57 57 58	

Data are not nationally representative. Based on data from 106 police departments representing 41% of the national volume of crime in 2000.

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

Table 3.6 Solved homicides of victims under age 18 by accused-victim relationship, 2000^{1,2}

Relationship of accused to victim	20	000	Average 19	974-1999 ^r
	No.	%	No.	%
Total family homicides	31	56	48	63
Total fathers	19	34	24	31
Biological fathers	14	25	21	28
Step-fathers	5	9	2	3
Total mothers	10	18	17	23
Biological mothers	10	18	17	22
Step-mothers	0	0	0	0
Sibling	1	2	3	4
Spouse	0	0	0	0
Other family ³	1	2	4	5
Total non-family homicides	24	44	28	37
Acquaintance ⁴	19	35	21	27
Stranger	5	9	8	10
Unknown	0	0	0	0
Total solved homicides	55	100	77	100

Percentages may not total 100% due to rounding.

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

Excludes cases where the age of the victim was unknown.

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

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

Includes intimate relationships such as boyfriend/girlfriend as well as business associates, criminal associates and casual acquaintances.

Table 3.7 Family homicides of children and youth by sex, 1974-2000^{1,2}

Relationship of accused			Victin	ı sex		
to victim	Total	Female	Male	Total	Female	Male
		No.			%	
Total family homicides	1,281	588	693	100	100	100
Biological father	565	261	304	44	44	44
Step-father	67	30	37	5	5	5
Biological mother	453	213	240	35	36	35
Step-mother	6	4	2	0	1	0
Brother	66	27	39	5	5	6
Sister	6	3	3	0	1	0
Spouse	8	8	0	0	1	0
Other family ³	110	42	68	9	7	10

Homicide numbers for 1999 are revised.

Table 3.8 Cause of death for child and youth homicides committed by family members, 1974-20001

Cause of death			Victim age														
	Total victims		Infant		1-2		3-5		6-8		9-11		12-14		15-17		
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	
Total	1,283	100	367	100	247	100	230	100	134	100	105	100	99	100	101	100	
Shooting	262	20	12	3	24	10	40	17	42	31	45	43	46	46	53	52	
Stabbing	111	9	19	5	17	7	17	7	20	15	11	10	8	8	19	19	
Beating	316	25	127	35	93	38	56	24	12	9	9	9	9	9	10	10	
Strangulation ² Shaken Baby	343	27	117	32	64	26	80	35	34	25	24	23	13	13	11	11	
Syndrome ³	24	2	17	5	6	2	1	0	0	0	0	0	0	0	0	0	
Other ⁴	210	16	66	18	41	17	35	15	26	19	14	13	21	21	7	7	
Unknown	17	1	9	2	2	1	1	0	0	0	2	2	2	2	1	1	

Percentages may not total 100% due to rounding.

Homicide numbers for 1999 are revised.

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 and sex.

Includes all other family members related through blood, marriage, adoption or foster care.
Source: Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

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.

⁴ Other includes poisoning, smoke inhalation and burns, motor vehicle, causing a heart attack, exposure, etc. **Source:** Statistics Canada, Canadian Centre for Justice Statistics, Homicide Survey.

DATA SOURCES

Homicide Survey

The Homicide Survey provides police-reported data on the characteristic of all homicide incidents, victims and accused persons since 1961. 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 from 1961 to 1974 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.

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.

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 2000, 166 police agencies in 9 provinces, representing 53% 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 largest proportion of cases originates in Ontario and Quebec. 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 106 police services that have reported to the UCR2 survey constantly since 1995. These respondents accounted for 41% of the national volume of crime in 2000.

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 and 1999-2000.

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 1999-2000, of the 508 residential facilities providing services to abused women and their children, 467 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.

Households in the 10 provinces were selected using random digit dialing 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.

Violence Against Women Survey

The Violence Against Women Survey (1993) provided detailed national data on all forms of sexual and physical violence perpetrated by men against women. Households in the 10 provinces were selected using random digit dialing techniques. Once a household was chosen a female 18 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. A total of 12,300 women 18 years of age and older were interviewed about their experiences of physical and sexual violence since the age of 16.

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 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.

Assault refers to:

- Common assault. 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. 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. This involves minor physical injuries or no injuries to the victim.

- **Sexual assault level 2**. This includes sexual assault with a weapon, threats or causing bodily harm.
- Aggravated sexual assault level 3. 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.

REFERENCES

Allard, M.A., Albelda, R., Colten, M.E. and Cosenza, C. 1997. "In harm's way? Domestic violence, AFDC receipt, and welfare reform in Massachusetts". Boston: University of Massachusetts, McCormack Institute and Center for Survey Research.

Almey, M. 2000. "Family Status". In *Women in Canada, 2000: a gender-based statistical report.* Catalogue no. 89-503. Ottawa: Statistics Canada, Housing, Family and Social Statistics Division.

Bailey, J.E., Kellermann, A.L., Somes, G.W., Banton, J.G., Rivara, F.P., and Rushforth, N.P. 1997. "Risk factors for violent death in the home". *Archives of Internal Medicine*. Vol. 157:777-782.

Barusch, A., Taylor, M.J. and Derr, M. 1999. *Understanding families with multiple barriers to self-sufficiency*. Salt Lake City: University of Utah, Social Research Institute.

Bassuk. E.L., Weinreb, L.F., Buckner, J.C., Browne, A. Salomon, A. and Bassuk, S.S. 1996. "The characteristics and needs of sheltered homeless and low income housed mothers". *Journal of the American Medical Association*. Vol. 276, no. 8:640-646.

Bifulco, A. and Moran, P. 1998. Wednesday's Child: Research into women's experience of neglect and abuse in childhood, and adult depression. New York: Routledge.

Brown, J., Cohen, P. and Johnson, J.G. 1999. "Childhood abuse and neglect: specificity of effects on adolescent and young adult depression and suicidality". *Journal of the American Academy of Child and Adolescent Psychiatry*. Vol. 38, no. 12:1490-1496.

Browne, A. 1986. "Assault and Homicide at Home: Women Battered Women Kill". *Advances in Applied Social Psychology*. Vol. 3: 57-79.

Browne, A. and Williams, K. 1989. "Exploring the effect of Resource Availability and the Likelihood of Female-Perpetrated Homicides". *Law and Society Review.* 23(1): 75-94.

Cawson, P., Wattam, C., Brooker, S. and Kelly, G. 2000. Child Maltreatment in the United Kingdom: a study of the prevalence of child abuse and neglect. London: National Society for the Prevention of Cruelty to Children.

Code, R. 2001. "Children in shelters for abused women". In Trainor, C. and Mihorean, K. (eds.). Family Violence in Canada: A Statistical Profile, 2001. Catalogue no. 85-224. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Dawson, M. 2001. Examination of Declining Intimate Partner Homicide Rates: A Literature Review. Ottawa: Department of Justice Canada.

Day, T. 1995. The Health-Related Costs of Violence Against Women in Canada: The Tip of the Iceberg. London, Ontario: Centre for Research on Violence Against Women and Children.

Della Femina, D., Yeager, C.A., and Lewis, D.O. 1990. "Child abuse: Adolescent records vs. Adult recall". *Child Abuse and Neglect.* 14: 227-231.

Department of Health. 2001. *Children and Young People on Child Protection Registers Year ending 31 March 1999.* London, England: Department of Health, National Society for the Prevention of Cruelty to Children.

Department of Justice Canada. 1999. A Handbook for Police and Crown Prosecutors on Criminal Harassment. Ottawa: Communications and Executive Services Branch, Department of Justice Canada.

Dorne, C.K. 1997. *Child Maltreatment: A Primer in History, Public Policy and Research.* Albany, New York: Harrow and Heston.

Dugan, L., Nagin, D. and Rosenfeld, R. 1999. "Explaining the Decline in Intimate Partner Homicide: The Effects of Changing Domesticity, Women's Status and Domestic Violence Resources". *Homicide Studies*. 3(3): 187-214.

Dutton-Douglas M., and Dionne, D. 1991. "Counseling and Shelter Services for Battered Women". In Steinman, M. (ed.). *Woman Battering: Policy Responses*. Cincinnati, Ohio: Anderson. p.113-130.

EKOS Research Associates. 2002. Public Attitudes Towards Family Violence: A Syndicated Study, Final Report. Ottawa: EKOS Research Associates.

Fedorowycz, O. 2000. "Homicide in Canada - 1999". *Juristat.* Catalogue no. 85-002, Vol. 20, no. 9. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Fedorowycz, O. 2001. "Homicide in Canada - 2000". *Juristat.* Catalogue no. 85-002, Vol. 21, no. 9. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Gelles, R. 1985. "Family Violence". *Annual Review of Sociology*. Vol. 11: 347-367.

George, M.V., Loh, S., Verma, R.B.P. and Shin, Y. E. 2001. *Population Projection for Canada, Provinces and Territories*. Catalogue no. 91-520. Ottawa: Statistics Canada, Demography Division.

Gordon, R.M. 2001. "Adult Protection Legislation in Canada: Models, Issues and Problems". *International Journal of Law and Psychiatry*. Vol. 24: 117-134.

Greaves, L., Hankivsky, O. and Kingston-Riechers, J. 1995. *Selected Estimates of the Costs of Violence Against Women*. London, Ontario: Centre for Research on Violence Against Women and Children.

Harbison, J. 1999. "Models of Intervention for Elder Abuse and Neglect: A Canadian Perspective on Ageism, Participation, and Empowerment". *Journal of Elder Abuse and Neglect*. Vol. 10, no 3/4:1-17.

Hill, K.A. 1993. Adult Survivors of Child Sexual Abuse, Information from the National Clearinghouse of Family Violence. Catalogue no. H72-22/12-1993. Ottawa: Health Canada, The National Clearinghouse on Family Violence.

Johnson, H. 1996. *Dangerous Domains: Violence against Women in Canada*. Scarborough: Nelson Canada.

Johnson, H. and Hotton, T. 2001. "Spousal violence". In Trainor, C. and Mihorean, K. (eds.). *Family Violence in Canada: A Statistical Profile, 2001*. Catalogue no. 85-224. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Johnson, H. and Pottie Bunge, V. 2001. "Prevalence and consequences of spousal assault in Canada". *Canadian Journal of Criminiology.* January 2001: 27-45.

Kerr, R. and McLean, J. 1996. *Paying For Violence – Some of the Costs of Violence Against Women in B.C.* British Columbia Ministry of Women's Equality.

Kingsley, B. 1993. "Common assault in Canada". *Juristat*. Catalogue no. 85-002, Vol. 13, no. 6. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Latimer, J. 1998. The Consequences of Child Maltreatment: A Reference Guide for Health Practitioners (Online). Ottawa: Available: http://www.hc-sc.gc.ca/hppb/familyviolence/html/98p057e0.html [January 14, 2002].

Luster, T. and Small, S.A. 1997. "Sexual Abuse History and Number of Sex Partners among Female Adolescents". *Family Planning Perspectives*. Vol. 29, no. 5: 204-211.

McCauley, J., Kern, D., Kolodner, K., Dill, L., Schroeder, A.F., DeChant, H.K., Ryden, J., Derogatis, L.R. and Bass, Eric B. 1997. "Clinical Characteristics of Women with a History of Childhood Abuse". *The Journal of the American Medical Association*. Vol. 277, no. 17: 1362-1368.

McDaniel, S. A. and Gee, E.M. 1993. "Social policies regarding caregiving to elders: Canadian contradictions". *Journal of Aging and Social Policy*. Vol. 5, no. 1-2:57-72.

McDonald, L and Collins, A. 2000. Abuse and Neglect of Older Adults: A Discussion Paper. Ottawa: Health Canada, The National Clearinghouse on Family Violence.

Phillips, L.R. 1986. "Theoretical explanations of elder abuse: Competing hypotheses and unresolved issues". In Pillemer, K.A. and Wolf, R.S. (eds). *Elder Abuse: Conflict in the Family*. Dover, MA: Auburn House Publishing Company.

Pottie Bunge V. 2000a. "Spousal violence". In Pottie Bunge V. and Locke, D. (eds.). *Family Violence in Canada: A Statistical Profile, 2000.* Catalogue no. 85-224. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Pottie Bunge, V. 2000b. "Abuse of Older Adults by Family Members". In Pottie Bunge V. and Locke, D. (eds.). *Family Violence in Canada: A Statistical Profile, 2000.* Catalogue no. 85-224. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Pottie Bunge, V. 2002. "National Trends in Intimate Partner Homicides, 1974-2000". *Juristat*. Catalogue no. 85-002, Vol. 22, No. 5. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

R. v. Lavallee. 1990. 1 S.C.R. 852-900.

Robertson, G.B. 1995. "Legal Approaches to Elder Abuse and Neglect in Canada". In *Abuse and Neglect of Older Canadians: Strategies for Change*. Toronto: Thompson Educational Publishing.

Rodgers, K. and MacDonald, G. 1994. "Canada's Shelters for Abused Women". *Canadian Social Trends*. Ottawa: Statistics Canada.

Rosenfeld, R. 1997. "Changing relationships between men and women, A note on the decline in intimate partner homicide". *Homicides Studies*. Vol. 1, no.1: 72:83.

Spencer, C. 1999. "Exploring the Social and Economic Costs of Abuse in Later Life". Unpublished report. Family Violence Prevention Unit, Health Canada.

Statistics Canada. CANSIM Table 051-0010. Estimates of population, by marital status, age group and sex, Canada, provinces and territories. Ottawa: Statistics Canada.

Statistics Canada. 2000. Women in Canada, 2000: a gender-based statistical report. Catalogue no. 89-503. Ottawa: Statistics Canada, Housing, Family and Social Statistics Division.

Statistics Canada. 2001. *Income Trends in Canada*. [CD-ROM]. Catalogue no. 13F0022. Ottawa: Statistics Canada, Income Statistics Division.

Statistics Canada. 2002. *Labor Force Historical Review*. [CD-ROM]. Catalogue no. 71F0004. Ottawa: Statistics Canada, Labor Statistics Division.

Stein, A. and Lewis, D.O. 1992. "Discovering physical abuse: insights from a follow-up study of delinquents". *Child Abuse and Neglect.* 14: 523-586.

Straus, M. A. 1994. *Beating the Devil Out of Them: Corporal Punishment in American Families*. Toronto: Maxwell Macmillan Canada.

Tjaden, P. and Thoennes, N. 1998. Stalking in America: Findings from the National Violence against Women Survey. U.S. Department of Justice.

Trainor, C. 1999. "Canada's Shelters for Abused Women". *Juristat.* Catalogue no. 85-002, Vol. 19, no. 6. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

Trocmé, N. and Brison, R. 1997. "Homicide and injuries due to assault and to abuse and neglect". In Beaulne, G. (ed.). For the safety of Canadian children and youth: from data to preventive measures. Ottawa: Health Canada, Minister of Public Works and Government Services Canada.

Trocmé, N. and Wolfe, D. 2001a. Child Maltreatment in Canada: Selected Results from the Canadian Incidence Study of Reported Child Abuse and Neglect. Ottawa: Minister of Public Works and Government Services Canada.

Trocmé, N. and Wolfe D. 2001b. "The Canadian Incidence Study of Reported Child Abuse and Neglect". In Trainor, C. and Mihorean, K. (eds.). *Family Violence in Canada: A Statistical Profile, 2001*. Catalogue no. 85-224. Ottawa: Statistics Canada, Canadian Centre for Justice Statistics.

U.S. Department of Health and Human Services. 2001. *Child Maltreatment 1999*. Washington, DC: U.S. Government Printing Office.

Villeneuve G and Geran, L. 2001. *Marriages - Shelf Tables,* 1998. Catalogue no. 84-212. Ottawa: Statistics Canada, Health Statistics Division.

Widom, C.S. 1988. "Sampling biases and implications for child abuse research". *American Journal of Orthopsychiatry*. Vol. 58(2): 260-270.