ASEAN Regional Guidelines on Violence against Women and Girls
Data Collection and Use
Acknowledgements

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### Acronyms and abbreviations

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<td>ASEAN</td>
<td>Association of Southeast Asian Nations</td>
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<td>ACW</td>
<td>ASEAN Committee on Women</td>
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<td>ACWC</td>
<td>ASEAN Commission on the Promotion and Protection of the Rights of Women and Children</td>
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<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Forms of Discrimination against Women</td>
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<td>CSO</td>
<td>Civil Society Organization</td>
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<td>DFAT</td>
<td>Department of Foreign Affairs and Trade</td>
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<td>DHS</td>
<td>Demographic and Health Survey</td>
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<td>EVAWG</td>
<td>Eliminating violence against women and girls</td>
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<td>GBV</td>
<td>Gender-based violence</td>
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<td>GBVIMS</td>
<td>Gender-based Violence Information Management System</td>
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<td>GDP</td>
<td>Gross domestic product</td>
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<td>GRB</td>
<td>Gender-responsive budgeting</td>
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<td>FGM/C</td>
<td>Female genital mutilation/cutting</td>
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<td>IAEG-SDG</td>
<td>Inter-Agency Expert Group on Sustainable Development Goal Indicators</td>
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<td>ICCS</td>
<td>International Classification of Crime for Statistical Purposes</td>
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<td>Intimate partner violence</td>
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<td>MPES</td>
<td>Minimum package of essential services</td>
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<td>NGO</td>
<td>Non-governmental organization</td>
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<td>RPA</td>
<td>Regional Plan of Action</td>
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<td>Regional Office for Asia and the Pacific</td>
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<td>SDGs</td>
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<td>UN</td>
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<td>United Nations Population Fund</td>
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<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
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<td>UNSD</td>
<td>United Nations Statistics Division</td>
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<td>UN Women</td>
<td>United Nations Entity for Gender Equality and the Empowerment of Women</td>
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<td>VAW</td>
<td>Violence against women</td>
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<td>VAWG</td>
<td>Violence against women and girls</td>
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<td>WHO</td>
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Foreword by ASEAN Committee on Women (ACW)

The ASEAN Committee on Women (ACW) is committed to leading the efforts to eliminate violence against women in the ASEAN region. The ASEAN Regional Guidelines on Violence against Women and Girls Data Collection and Use represent an important step in the implementation of the ASEAN Regional Plan of Action of Elimination on Violence against Women (ASEAN RPA on EVAW), particularly the guidelines being a key deliverable in the first five years of the regional plan’s implementation. The elimination of violence against women and girls (VAWG) has been identified as a priority area of work in the ACW Work Plan 2016-2020. The ASEAN RPA on VAW highlights data as a priority and recognises that better data and evidence are required to truly understand the extent and impact of VAWG, ensure that prevention and response strategies are grounded in evidence and can monitor and evaluate the impact and effectiveness of the responses, to see if they are working for survivors of violence. To effectively eliminate VAWG, data and evidence are critical to inform evidence-based prevention and responses efforts.

The ASEAN Regional Guidelines on Violence against Women and Girls Data Collection and Use can be used to advise and guide ASEAN Member States on how to collect and use prevalence, administrative and costing data. The guidelines are a useful tool to strengthen national VAWG data methods and systems of Member States. These guidelines aim to provide clarity on the differences between the types of data related to VAWG that are usually collected and used and their different purposes and uses, for instance that administrative data cannot substitute prevalence data. Important issues such as confidentiality, safety and ethical principles when dealing with data on VAWG are also underlined. The values of good quality, reliable administrative data on VAWG are highlighted as administrative data on VAWG can provide critical information on women’s access to essential services, such as health care, social services, policing and justice, and the quality of the services provided. Administrative data on VAWG can inform policy making processes and budgets to ensure that funding for services for VAWG survivors is adequate.

The guidelines will assist ASEAN Member States in measuring and reporting on ASEAN’s initiatives to eliminate violence against women and girls as articulated in the ASEAN Community Vision 2025 and the ASEAN Socio-Cultural Community (ASCC) Blueprint 2025. The guidelines will also support ASEAN Member States on reporting the achievements towards meeting the Sustainable Development Goals (SDGs) targets and indicators related to VAWG. They will support ASEAN Member States’ efforts to ensure no one is left behind and to track and compare progress on the elimination of VAWG overtime. These guidelines contribute to promoting sustainable and inclusive development in ASEAN with a clear focus on “leaving no one behind”.

Ms. Pornsom Paopramot
Chair of ASEAN Committee on Women
Deputy Director-General, Department of Women’s Affairs and Family Development
Ministry of Social Development and Human Security
Thailand
Foreword by ASEAN Commission on the Promotion and Protection of the Rights of Women and Children (ACWC)

The elimination of violence against women and violence against children is one of the priority thematic areas of work in the five-year work plan of the ASEAN Commission on the Promotion and Protection of the Rights of Women and Children (ACWC). Violence against women and girls (VAWG) not only has devastating, life-long consequences and costs for those who suffer it, but also for their children, their families, the community, businesses, national economies and the whole society. Violence against women and girls is an impediment to social and human development of ASEAN Member States and the achievement of the Sustainable Development Goals. ACWC recognises the importance of data and evidence to ensure appropriate responses to violence against women and violence against children.

Data and evidence are necessary to better understand the intersections between violence against women and violence against children. Violence against women has serious inter-generational effects that often perpetuate a cycle of violence for the next generation. For instance, boys who witness their mothers being abused or have been abused in childhood are more likely to grow up and become perpetrators later in life. Data and evidence are critical to better understand these interlinkages, as well as the factors that can help to prevent violence from happening in the first instance.

The ASEAN Regional Guidelines on Violence against Women and Girls Data Collection and Use make guidance available for ASEAN Member States to better collect and use data on violence against women and girls. It presents an opportunity to strengthen prevalence, administrative and costing data on VAWG. Doing so can help us understand this epidemic far better in each country and setting, since it does vary by location. Generating evidence on the number of women and girls who experience violence, if they are accessing the services they need, factors contributing to violence, the costs estimates anticipated of violence and the costs to respond and prevent to VAWG enables a robust response that takes into account our shared vision for a world free from violence against women and children. Better data and evidence, including on the risk factors, will inform interventions and strategies to prevent the repeated cycles of violence, and its avoidable social, economic and human rights costs. Ultimately, data and evidence are crucial to effectively prevent and respond to VAWG, for women and girls to realise their rights, for social and human development of ASEAN Member States and for the achievement of ASEAN’s vision of an inclusive ASEAN Community where the rights of peoples of ASEAN are promoted and protected.

Ms. Sri Danti Anwar
Indonesia Representative to the ACWC for Women’s Rights
Chair of ASEAN Commission on the Promotion and Protection of the Rights of Women and Children
Senior Advisor to the Minister for Family Development and Acting Deputy Minister for Gender Equality, Ministry of Women’s Empowerment and Child Protection
Indonesia
Foreword by UN Women Regional Office for Asia and the Pacific

Violence against women and girls (VAWG) is a grave violation of human rights and, despite great efforts and commitments, remains pervasive and deeply damaging in the Association of Southeast Asian Nations (ASEAN). An estimated 6 to 44 per cent of women and girls in ASEAN have experienced physical and/or sexual violence at the hands of their partners. VAWG affects not only women, but their children, families, communities, workplaces and the wider society.

Data have transformed the way we understand violence in country after country. Data and evidence are critical to inform the policies and programmes required to effectively prevent and respond to VAWG and to inform budget making. Rigorous data and evidence on VAWG have proven to be a powerful advocacy tool when used to lobby for better laws and policies and for increased resources to respond to survivors who have bravely stepped forward.

Evidence collected in ASEAN Member States in the recent years has shown that, in addition to being a painful violation of human rights, violence against women is also an economic issue which carries significant costs for women, their families, for businesses, the economy and society at large. VAWG results in loss of income and personal costs for women who experience violence, due to the cost of seeking assistance and days off work. In Viet Nam, the persistence of domestic violence has resulted in a total loss of earnings equivalent to an estimated 3 per cent of the country’s gross domestic product, according to a 2012 costing study. In Cambodia, 20 per cent of the women who experienced domestic violence reported that they missed work and their children missed school, according to a 2012 study.

Because of its drag on women and society, VAWG prevents sustainable development. Violence negatively impacts women’s health, education, incomes and their opportunities. To achieve the Sustainable Development Goals, we need to eliminate all forms of VAWG. These guidelines respond to ASEAN’s commitment to end VAWG, and the acknowledgement that VAWG cannot be reduced effectively without data to mark the changes.

The ASEAN Regional Guidelines on Violence against Women and Girls Data Collection and Use (ASEAN VAWG Data Guidelines) are part of UN Women’s support to ASEAN for the implementation of the ASEAN Regional Plan of Action of Elimination on Violence against Women (ASEAN RPA on VAW). The development of the ASEAN VAWG Data Guidelines is a main priority in the ASEAN RPA on VAW. This priority comes from recognition that data gaps are frequent, pathways to improved data are not always clear, and the evidence of the impact of VAWG programming is limited.

We need data to estimate the scale of the problem, patterns and trends, survivors’ needs and experiences when they do seek help, the overall impact on women, communities, businesses, society and to be able to effectively prevent and respond to VAWG. Since the experts on violence against women are the survivors themselves, it is important that we ask women if the assistance and treatment they have received met their needs and was sensitive to the dangerous and painful nature of violence they experience.
Studies to estimate the costs of violence in Cambodia, Lao People’s Democratic Republic and Viet Nam, have revealed that providing essential services to respond to the needs of women facing violence are in fact affordable and cost less than responding to the impact of violence on women and the economy. The findings from costing exercises have encouraged governments to invest in essential services, as well as coordinated quality services for survivors of violence. This underlines once again how evidence gleaned from data is crucial in the movement to end violence against women.

The guidelines are generously funded by the Australian Department of Foreign Affairs and Trade. They are a product of the collaboration between the ASEAN Committee on Women, the ASEAN Commission on the Promotion and Protection of the Rights of Women and Children, ASEAN Secretariat and UN Women, working together to develop practical guidelines to strengthen the ability of ASEAN Member States to better collect, analyse, store, share and use data. Doing so will help to ensure that VAWG prevention and response programmes are informed by current evidence and women’s and girls’ realities. Monitoring the impact and effectiveness of services creates a feedback loop which enables a continuous elevation in quality and better outcomes for women. These guidelines aim to contribute to a vision of an ASEAN free from all forms of VAWG in ASEAN, where women and girls access the services they need, are safe and live free from violence.

Ms. Miwa Kato
Regional Director
UN Women Regional Office for Asia and the Pacific
Executive summary

In 2015, the Association of Southeast Asian Nations Regional Plan of Action on the Elimination of Violence against Women (ASEAN RPA on VAW) was adopted and recognized that violence against women and girls (VAWG) is an “obstacle to the social and economic development of communities and states as well as the achievement of internationally agreed-upon development goals,” including the Sustainable Development Goals (SDGs). Given this recognition, ASEAN Member States agreed to develop and disseminate these ASEAN Regional Guidelines on VAWG Data Collection and Use (herein referred to as the ASEAN VAWG Data Guidelines) that build upon national and international good practices.

With support from the Australian Department of Foreign Affairs and Trade (DFAT), the ASEAN Secretariat partnered with the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) to strengthen the capacity of ASEAN Member States to systematically collect and use data related to VAWG through the development and dissemination of these ASEAN VAWG Data Guidelines. VAWG is a significant concern in ASEAN where 6 to 44 percent of women experience VAWG during their lifetime based on current available data. The ASEAN VAWG Data Guidelines are an important step in improving evidence-based VAWG prevention and response policies and programmes as well as the quality and availability of services, protection and justice for women who experience violence in ASEAN.

The ASEAN VAWG Data Guidelines provide guidance to equip ASEAN Member States to generate reliable data to inform evidence-based advocacy efforts, resource mobilization, budget-making, policy formulation and implementation and to monitor the impact of policies and programmes to prevent and respond to VAWG as well as to report on SDG targets and indicators related to ending VAWG. The guidelines bring together leading guidance on the collection of the three main types of VAWG data – administrative data, prevalence data and costing data. These guidelines are not mandatory and can be used by data analysts and managers in statistics agencies, ministries and organizations that deal with data related to VAWG and by those who are responsible for making decisions about budget allocations related to efforts to end VAWG and to improve the provision of essential services for women and girls who have experienced violence. The information provided by the guidelines can inform decisions related to VAWG data and be used to advocate for more and better data on VAWG. The guidelines also give an overview of the current existing data in ASEAN Member States.

Data on violence against women and girls

VAWG cannot be effectively eliminated without reliable data. Over the past decade, global attention has shifted to collecting more and better data to support efforts to eliminate all forms of VAWG. The focus is on collecting data on the nature and prevalence of VAWG and the ability of people who have experienced violence to access essential services, as well as risk and protective factors and consequences of VAWG.

Challenges related to data on VAWG

One of the main challenges to collecting data on VAWG is the culture of silence and stigma associated with VAWG. VAWG survivors may feel they must keep the violence they experience a secret and fear they may be in danger of further violence if information is released that shows they sought help. People who have perpetrated violence may retaliate against women and girls for speaking out and use threats and intimidation to coerce them into silence. Perpetrators may also threaten those who are providing assistance to survivors if they know who have helped them. Another danger of broken confidentiality is that the community may shame and stigmatize VAWG survivors and treat them as ‘damaged goods’. This may increase the risk of repeated violence and abuse. A further challenge is that survivors of violence may be blamed, not believed or made to feel ashamed when they do report by the very people tasked with supporting them.

Given this reality, women and girls are often afraid to report incidents of violence; thus, the number of reported cases to formal services is likely to be significantly lower than the actual prevalence.

Types of VAWG data

There are three main types of data that are often collected and generated to study VAWG: administrative data, prevalence data and costing data.

- **Administrative data** are routinely collected by service providers. The data come from VAWG cases identified or reported by individuals, registered

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1. As recognized in the ASEAN RPA on VAW, the 1993 United Nations Declaration on the Elimination of Violence against Women defines violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.”
and handled by authorities and service providers, including the police, prosecutors, courts, social welfare, social services, child protection, shelters, hotlines, health and education, as examples.

- **Prevalence data** come from surveys, including demographic and population surveys. Prevalence data capture the incidence of VAWG for different age groups (such as, childhood, prior to age 15 and age 15–69 years), determinants and factors that contribute to VAWG, description of perpetrators, help-seeking behaviours and negative consequences of VAWG on women and their children. VAWG prevalence studies create a baseline against which other VAWG prevalence studies can be compared to monitor changes in prevalence and the factors that contribute to VAWG over time.

- **Costing data** come from costing studies and exercises. VAWG costing studies provide a way of determining and analysing the monetary costs of VAWG which are determined by measuring and quantifying the various consequences of VAWG for individuals, households and national economies. Costing data analyse the impact of VAWG at numerous levels and among various sectors, often using both prevalence and administrative data.

Prevalence and administrative data can be used to inform, guide and support costing studies.

**VAWG data dissemination**

Data dissemination involves sharing statistics and evidence related to VAWG - including on SDG indicators - through technical and professional documents and media outlets. Statistics, data and evidence should be presented in a way that is easy to understand for diverse audiences. Plans should be developed for communicating VAWG statistics and indicators to a wide range of stakeholders, including policymakers, decision-makers, ministries, agencies, development partners, civil society organizations, donors and the public. It is important to engage media outlets to draw attention to the statistics and indicators and to broaden their exposure and dissemination.

**Ethical and safety guidelines for data on VAWG**

VAWG data collection raises critical ethical and safety challenges, including protecting the identity of VAWG survivors. Considering the high-risk nature of VAWG, respect for principles of ethics, safety, and confidentiality is crucial when collecting, storing and sharing VAWG data. Essential to ensuring women’s safety is that data protection procedures are established and followed to ensure ethical collection and use of data and confidentiality and anonymity of VAWG survivors’ identities.

Data collected without respect for ethical and safety considerations can cause further harm to VAWG survivors, including stigmatization, ostracism, retaliation, further violence and even death. These risks are particularly high with VAWG administrative data, as victim information and data are often collected by agents and/or service providers who may not be adequately trained, and may not be fully aware of the risks. It is crucial to train agents and service providers to collect VAWG data in an ethical and safe manner, and to ensure confidentiality and proper data protections.

Recent efforts to create national data management systems and registries that include VAWG data and link that data to citizen identification numbers is a concern. Such practices could violate VAWG survivors’ rights to privacy and confidentiality, particularly in countries where access to data management systems and registries are available to multiple users and where protocols to ensure confidentiality and protection of the data may not be fully implemented.

**Violence against women and girls prevalence data**

VAWG prevalence data refer to the proportion of women and girls who experienced violence as part of the total population of women and girls. Prevalence estimates of intimate partner violence (IPV) are usually presented as the percentage of ever-partnered women and girls who experienced violence, among all ever-partnered women and girls in the same age group. Population-based surveys are the only way to achieve reliable and comprehensive data and statistics that represent the magnitude of VAWG in the general population. Prevalence studies usually collect quantitative data, but can also collect qualitative data to provide a deeper understanding and insight into VAWG.

Population-based surveys can involve dedicated surveys, specifically focused on VAWG, or surveys on broader issues (health surveys, crime victimization surveys) that integrate specific modules or questions related to VAWG. The World Health Organization, the United Nations Population Fund and the United Nations Statistics Division have developed a set of tools that provides step-by-step guidance to prepare Governments and their national statistics offices to conduct population-based VAWG prevalence studies, collect and compile data, and analyse indicators on VAWG. Thus, these ASEAN VAWG Data Guidelines aim to provide a brief description of key issues related to VAWG prevalence studies and data and refer to available guidance.
Types of VAWG measured in prevalence surveys
Surveys on the prevalence of VAWG typically include physical, sexual, psychological and economic violence. To effectively measure the prevalence of VAWG, survey questions should explore a range of specific behaviours that can be measured in a systematic and standardized way. Also, women who experience violence, particularly in intimate relationships and families, often experience more than one form of violence and/or multiple episodes of violence; therefore, surveys should allow for the collection of data on all forms of violence experienced by women during their lifetime and in the past 12 months (for instance sexual harassment and forced marriage). It is also important to collect data on the places where women experience violence, such as in public spaces (streets, public transportation), private spaces (home, institutions) and work-related environments.

Strengths of VAWG prevalence studies
The benefits of VAWG prevalence studies are that they can provide reliable estimates of the prevalence of VAWG within a population and identify risk factors and contributing factors to VAWG. Prevalence studies can also show the history of violence in women’s and girl’s lives, consequences of violence, identify common characteristics of women and girls who experience violence, profiles of perpetrators and help-seeking behaviours of VAWG survivors. Findings from VAWG prevalence studies can be used to develop prevention programmes based on the identified risk factors, contributing factors, protective factors and consequences. Information provided on the help-seeking behaviours can be used to improve the quality and accessibility of essential services.

VAWG prevalence studies help create a baseline against which other prevalence studies can be compared to monitor changes in the prevalence of VAWG, factors that contribute to VAWG and help-seeking behaviours of VAWG survivors. When VAWG prevalence studies are replicated every 5–10 years, patterns and trends can be analysed. VAWG prevalence studies can also help raise awareness about the magnitude and impacts of such violence and data from VAWG prevalence studies can be a strong advocacy tool.

Challenges of VAWG prevalence studies
Challenges with VAWG prevalence studies are that they are expensive and implementation requires a significant investment of financial, technical and human resources, equipment and training. Given the costs of conducting VAWG prevalence studies, countries generally conduct them on a certain period of time, as a one-off exercise. Another challenge with VAWG prevalence studies is ensuring the methodology is properly implemented so that the data gathered are valid and reliable and that ethical and safety protocols are carefully followed to protect the women and girls who agree to participate in the survey as well as the interviewers. Not using internationally recognized and validated standard methodologies can erode the validity of survey findings and prevent comparisons between countries. Comparisons between countries are important to generate regional and global data for the purpose of monitoring regional and global efforts.

“Non-disclosure”, when people decline to speak about their experiences, can be an issue with prevalence surveys. The amount of non-disclosure is unknown and variable but it can skew the results of prevalence studies towards unrealistically low rates of violence. Such findings have a negative impact on planning, policy and programme development and less value for comparison purposes. Given the sensitive nature of VAWG and to minimize “non-disclosure”, prevalence studies need to include ethical and safety standards and training for the interviewers.

Violence against women and girls administrative data
Administrative data are regularly collected and compiled by government agencies and departments, non-governmental service providers, public and private health-care facilities, shelters, hotlines and police and justice officials among others. Administrative data are an important source of information that can be readily accessed and used to complement VAWG prevalence studies to understand current and localized service provision for VAWG survivors. Administrative data on VAWG provide information on VAWG survivors’ access to services, patterns of violence reported, response made, availability and quality of the services.

Administrative data can be used to explore patterns and trends in reporting and response to VAWG and to inform programme planning and resource allocation since administrative data illustrate use of services. It provides information on women’s experiences related to the number and types of VAWG incidents reported, the demand for and access to services, services availability and capacity to respond to the different needs of women and girls facing violence, within a given time period and across sectors, districts, provinces and regions.

VAWG administrative data collection is crucial, however only as reliable as the record keeping and registration at the point of entry, so it is most important to improve
registration systems at the point of entry. In some ASEAN Member States, administrative data may be the only or best available source of VAWG data, particularly in countries where prevalence surveys are lacking or outdated.

Ministries and agencies use various types of data management systems to collect and analyse administrative data related to VAWG, including paper-based registration or record-keeping systems, computer-based data management systems and computer- and web-based case management systems.

Strengthening VAWG administrative data
There are often inconsistencies in administrative data collection, including how administrative data are registered, recorded and compiled at subdistrict, district, province and national levels. This leads to inconsistencies in the accuracy, completeness and coverage of administrative data.

There are some concerns about “double counting”, if VAWG survivors or incidents of violence are registered by more than one agency or organization or multiple times in one organization. Identifying and correcting potential double counting in the record-keeping system of a single agency or organization is important, but double counting is not always an issue with administrative data related on VAWG. Administrative data serve different purposes than prevalence data. VAWG administrative data reflect the number of incidents of VAWG identified, reported and responded to and the number of VAWG survivors who accessed services at points of entry and do not reflect the magnitude of the problem in the general population. VAWG administrative data provide data on the incident itself, and allow to track the number of times women accessed services, the types of assistance requested and the different services provided.

Ministries and agencies also face challenges with administrative data flows, including: delays in the flow of data from subdistrict to district, provincial and national levels; inconsistencies in use of paper-based and computer-based systems at each level in many ministries and agencies; fragmentation of data in some ministries and agencies and broken channels of data sharing and compilation between departments in ministries and agencies.

Strengthening VAWG administrative data is an important and useful investment. By working more systematically with administrative data, the limitations can be identified and used to inform efforts to strengthen systems of administrative data collection.

Given the need for tools or guidelines on collection and use of administrative data on VAWG, the sections that follow offer guidance as to how to improve VAWG administrative data collection and data.

VAWG administrative data analysis and reporting
VAWG administrative data are under-analysed due to a lack of analytical and reporting know-how. Issues ministries and agencies face include: lack of data analysis skills; lack of knowledge and understanding of VAWG theories and literature that should guide data analysis; lack of understanding of the use of VAWG data (the purposes of VAWG data used and who can use it); and lack of understanding of how best to present and report VAWG data (based on the target audience).

Use of VAWG administrative data
To make administrative data useful, it is crucial for policymakers, ministries, agencies and organizations to address gaps and challenges in the collection and analysis of VAWG administrative data. Administrative data can provide information about points of entry and access to essential services for VAWG survivors. When routinely collected, administrative data can also provide important information on patterns and trends in reporting, responses, availability, quality and access to essential services. This allows Governments and service providers to monitor the demand for essential services and how different sectors are responding to the needs for services. Administrative data can reveal the level of services available within a community and gaps in essential services.

Governments, ministries and agencies can also use VAWG administrative data for planning, programme development, policymaking, costing studies, budget allocation and gender-responsive budgeting. Better administrative data collection and analysis can be used to make service provision more effective. To improve the use of VAWG administrative data, agencies and organizations must first improve practices related to collecting, compiling and sharing VAWG administrative data across sectors and levels.

VAWG data confidentiality and security and data sharing
Keeping individual data safe and confidential is one of the cornerstones of ethical and quality service delivery. Data security focuses on protecting personal data and keeping personal or sensitive information safe. Data that contain personal information should be treated with higher levels of security than data that do not (such as summary statistics). It is crucial to ensure the security of data and prevent unauthorized access, disclosure, changes to and/
or destruction of data. Security practices should cover information stored in paper-based registries, case files, patient or client records, as well as computer- and web-based data management and case management systems.

In some countries, data security is based upon national legislation which dictates that personal data should only be accessible to authorized persons and that strategies for data security and confidentiality of personal information are informed by ethical and legal obligations of service providers, police and justice agencies.

Given the issues of privacy and confidentiality related to VAWG administrative data, it is important that ministries, agencies and organizations have well-developed standard operating procedures and protocols for administrative data management and data sharing. These should include specific practices related to ensuring administrative data provide for the confidentiality and protection of the identity and information of VAWG survivors, as well as perpetrator identity information in VAWG incidents or cases.

**Quality assurance of VAWG administrative data**

Quality assurance of VAWG data requires regular monitoring for accuracy and reliability; however, ASEAN Member States generally lack quality assurance processes and mechanisms that can verify and validate administrative data related to VAWG. In addition, registration, record-keeping systems and data management systems generally do not meet the minimum acceptable standards on data collection, including standards related to accuracy, reliability and precision. Inter-agency oversight committees or working groups can play an important role in monitoring VAWG data for accuracy and reliability.

**Violence against women costing data**

VAWG has tremendous costs for societies, including costs that impact women and girls who experience violence but also families, communities, businesses, organizations, Governments and society at large. The costs of VAWG impact health-care systems, social support and welfare systems, police organizations, legal and justice systems, and economic and human development. VAWG costing is a way of determining and analysing the impact of VAWG on different levels and across various sectors. There are different methodologies for costing studies with different purposes: evaluating the costs and impacts of VAWG for women, communities, organizations, businesses or the whole society (cost of the impact of VAWG) or evaluating the costs and resources needed to respond to VAWG through the implementation of laws, policies and programmes to prevent and respond to VAWG, for instance the provision of services for VAWG survivors (cost of the response to VAWG).

Enough resources must be available to implement laws, policies and action plans related to eliminating VAWG, including domestic violence laws and family protection acts, and provide essential services to respond to the diverse needs of VAWG survivors. Estimating the costs of implementing laws and policies and of providing services for VAWG survivors is necessary to inform budget planning. Adequate budgets will support the effective implementation of laws and policies to prevent and respond to VAWG as well as the provision of quality services with adequate geographic and population coverage.

**Resources for VAWG costing exercises**

UN Women has developed step-by-step guidance and tools for Governments and organizations to conduct VAWG costing studies to estimate the costs of VAWG and the resource requirements to respond to VAWG. The guidance and tools draw on experiences and lessons from UN Women’s global programme and provide concrete methodologies to estimate the financing gaps and requirements for gender responsive planning and budgeting to achieve gender equality commitments. These tools have been used in Cambodia, Lao People’s Democratic Republic, Indonesia and Viet Nam to demonstrate that implementing a minimum package of essential services (MPES) can be affordable and the benefits of preventing and stopping VAWG early are magnified for women, their families and societies.

**VAWG costing methodologies**

Several different methodologies can be applied to understand the costs of preventing, responding to and eliminating VAWG, including the estimated costs associated with full implementation of VAWG laws and policies, and delivering a MPES to women and girls who experience violence. Three key methodologies have been used in Asia and the Pacific, including:

- **Gender-responsive budgeting** – A method of analysing government budgets and the planning, execution and reporting (budget cycle) to establish the gendered impacts of budgetary decisions.
- **Impact costing methodology** – A method that calculates the full socioeconomic impact of VAWG in monetary terms, including a multilayered costing based on the impact of violence on the lives of women and girls who experience it.
- **Unit costing methodology** – A method that aims to understand the total costs of providing a particular service or package of services to women and girls.
who experience violence based upon the costs of individual goods and services, and rates of use.

The unit costing methodology can be used to understand resource requirements for existing services and to estimate the resources needed for a MPES for VAWG survivors and their children. MPES includes a range of multisectoral services from the health, justice, police and social services sectors such as hotlines (24 hours), one-stop crisis centres, shelters, counselling services, referral networks, capacity-building of stakeholders and training of service providers.

Each methodology has strengths and limitations, and there is no single ‘best’ methodology for VAWG costing studies. Some methodologies are more appropriate depending on whether the focus is on the costs of the impact of VAWG or the costs of preventing and responding to VAWG. The choice of methodology should be guided by the research questions that a costing study sets out to answer.

The most significant obstacle to conducting VAWG costing studies is the availability and quality of data, for example prevalence research, quality administrative data and financial and budgetary data. Yet, conducting a VAWG costing study enables Governments to identify areas where VAWG data are missing or incomplete and need to be strengthened. The process also builds greater understanding and brings key stakeholders and relevant partners from across sectors into the conversation about the costs of VAWG and budgeting for efforts to eliminate VAWG, provide essential services and collect data.

**Strengths of VAWG costing studies**

VAWG costing studies highlight budgetary gaps and funding deficits in addressing VAWG; therefore, they can be used to strengthen the case for government budgets to support interventions to prevent and respond to VAWG. VAWG costing gives evidence to Governments on the resources required to ensure a comprehensive multisectoral response to meet the needs of VAWG survivors, in line with national laws and action plans.

VAWG costing studies can also facilitate greater coordination across sectors to prevent and respond to VAWG because such studies document the financial impact of VAWG and of delivering services to VAWG survivors and their children. Costing studies can open a dialogue on which institutions are providing services and what services are missing and were improvements are needed.

Costing studies support efforts to strengthen the implementation of laws and policies to prevent and respond to VAWG. VAWG costing studies are an important evidence-based policy advocacy tool that can be used to inform policy dialogue and advance effective policies and programmes, assess the impact of policies and programmes, support evidence-based policymaking, ensure accountability for implementation, support resource mobilization and contribute to strengthening national, regional and international commitments to end VAWG. VAWG costing studies foster the understanding that VAWG is not a ‘domestic issue’, but a human rights and a development issue. Costing studies can demonstrate the costs of inaction, estimate the costs of prevention efforts versus response and support advocacy for investments in prevention programmes, showing that efforts over time will lead to savings related to the prevention of new incidences of violence.

**Using violence against women and girls data to report on Sustainable Development Goals and indicators**

Ending VAWG is an explicit target of SDG 5 (achieve gender equality and empower all women and girls), but VAWG is also an impediment to the realization of most of the SDGs. SDG indicators measure progress made towards goals related to gender equality and VAWG and can be used to monitor the impact of policies, action plans and programmes. When reporting on the SDGs, it is very important to use harmonized and agreed indicator definitions and data that have been collected in alignment with internationally agreed methodologies and standards. These guidelines offer insight into data collection needed to report on SDG indicators and targets related to VAWG.

The Inter-Agency Expert Group on SDG Indicators (IAEG-SDGs), composed of Member States, including regional and international agencies as observers, was established to develop and support the implementation of the global indicator framework for the goals and targets of the 2030 Agenda for Sustainable Development. The IAEG-SDGs identified a possible custodian agency (or agencies) and other partner agencies (mostly from the United Nations system) for each indicator for global reporting and indicator development and provide guidance on data required to report on each indicator. This guide provides links to leading resources for SDG indicators and reporting.
CHAPTER 1
OVERVIEW OF THE ASEAN REGIONAL GUIDELINES ON VIOLENCE AGAINST WOMEN AND GIRLS DATA COLLECTION AND USE

Photo: UN Women/Pornvit Visitoran
1.1 Overview

In 1976, the ASEAN Committee on Women (ACW) was established as a sectoral body to implement, coordinate and monitor the implementation of ASEAN's regional priorities related to women's issues at various levels of political, economic and social life. In 2004, the Member States of the Association of Southeast Asian Nations (ASEAN) came together to produce the Declaration on the Elimination of Violence against Women in the ASEAN Region, which was followed in 2013 by the Declaration on the Elimination of Violence against Women and the Elimination of Violence against Children. In 2010, the ASEAN Commission on the Promotion and Protection of the Rights of Women and Children (ACWC) was established as an intergovernmental commission and an ASEAN human rights mechanism. In 2015, the ASEAN Regional Plan of Action on the Elimination of Violence against Women (ASEAN RPA on VAW) was adopted and recognized that violence against women and girls (VAWG) is an “obstacle to the social and economic development of communities and states as well as the achievement of internationally agreed-upon development goals”.

Through regional and international agreements, ASEAN Member States have made commitments to collect VAWG data. These agreements include the ASEAN RPA on VAW, the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (1979), the 1995 Beijing Platform for Action and indicators on VAWG agreed upon by the United Nations Statistical Commission in 2011 and advanced in the 2030 Agenda for Sustainable Development. VAWG data can be used to inform the implementation of the ASEAN RPA on VAW.

Given this recognition, in the ASEAN RPA on VAW, ASEAN Member States supported the following actions in accordance with national and regional contexts and circumstances:

- Establish regional guidelines on the collection and analysis of data related to VAW, aligned with existing global ethical guidelines (regional level).
- Develop and/or improve national data systems to collect disaggregated data on VAWG. National data systems should include:
  - Prevalence data in line with indicators;
  - Risk and protective factors associated with VAWG;
  - Cost and impact of all forms of VAWG;
  - Accessibility of services for victims/survivors;
  - Quality of services and client satisfaction; and
  - VAWG in disaster and conflict situations (national level).
- Strengthen the collection of national administrative data on VAWG for effective policy development and implementation by harmonizing data collection and its appropriate uses across agencies and civil society organizations (CSOs), and to improve confidentiality, ethics and safety at the national level related to data collection (national level).
- Review research gaps and conduct qualitative and quantitative research concerning all forms of VAWG and their underlying causes (national level).
- Evaluate the impact of policies and programmes to contribute towards development of evidence-based policies, programmes, plans of actions and laws (national level) to end VAWG.

The information provided by the guidelines can be used to advocate for more and better data on VAWG. The guidelines also give an overview of the current existing data in ASEAN Member States.

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VAWG data collection and analyses are highlighted as a priority area in the ASEAN RPA on VAW, and have been identified as a specific activity in the ASEAN Committee on Women (ACW) work plan 2016–2020. To accomplish these commitments, ASEAN Member States agreed to develop and disseminate this document, the ASEAN Regional Guidelines on Violence against women and Girls Data Collection and Use (hereafter ASEAN VAWG Data Guidelines) that build upon national and international good practices. ASEAN Member States established the ACWC-ACW Ad-hoc Working Group on the development of the ASEAN VAWG Data Guidelines.

During the sixteenth meeting of the ASEAN Commission on the Promotion and Protection of the Rights of Women in Phuket, Thailand, in September 2017, ASEAN Member States developed a monitoring and evaluation results framework for the ACW Work Plan 2020, with indicators on VAWG and further commitments to data collection (specifically data showing a reduction in VAWG based on policies, plans and programmes implemented by ASEAN Member States). The ACW Work Plan 2016–2020 identified eliminating violence against women as a priority area, with the objective to “establish and/or strengthen effective prevention and protection services supported by national EVAW legal framework and institutional mechanism”.

The establishment of the ASEAN VAWG Data Guidelines is important because VAWG is a significant concern in ASEAN Member States where 6 to 44 per cent of women experience VAWG during their lifetime according to data currently available. VAWG cannot be effectively eliminated without reliable data because data and evidence are needed for advocacy efforts, resource mobilization and policy formulation and implementation. Comprehensive and systematic data collection is essential to reveal the nature, extent, causes and negative consequences of VAWG and to inform the development of evidence-based policies and programmes to prevent and respond to VAWG.

1.2 Drafting process for the ASEAN VAWG Data Guidelines

With support from the Australian Department of Foreign Affairs and Trade (DFAT), the ASEAN Secretariat partnered with the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) to strengthen the capacities of ASEAN Member States to systematically collect and use data related to VAWG through the development and dissemination of the ASEAN VAWG Data Guidelines. As part of this project, two consultations were organized to gather inputs, comments, experiences and practices from representatives of ACWC and ACW to inform the development of these guidelines. Chaired by Cambodia, the meetings were organized by UN Women and the ASEAN Secretariat under the auspices of the ACW and ACWC Ad-hoc Working Group on the development of the ASEAN VAWG Data Guidelines. The two meetings gathered members of the ACW and ACWC and VAWG data specialists. The full list of people who meaningfully contributed to the development of the guidelines can be found in Annex F.

The first meeting, the Technical Consultation on the Development of the ASEAN Guidelines for Collection and Analysis of Data on VAWG, was organized on 15–16 June 2017 in Bangkok, Thailand. Participants of the Technical Consultation were representatives of ACW, ACWC and VAWG data experts. The aim of the Technical Consultation was to provide information to key ASEAN VAWG stakeholders regarding the main types of VAWG data and their different purposes, as well as to share experiences, challenges and good practices to inform the development of the ASEAN VAWG Data Guidelines. The Technical Consultation also provided an opportunity to integrate experiences and practices related to VAWG data from ASEAN Member States into these ASEAN VAWG Data Guidelines, to make it regionally relevant. The outline of the guidelines was presented for participants to provide inputs and feedback. Following the technical consultation in June 2017, ASEAN Member States received and provided two rounds of comments and inputs on the initial draft of the guidelines. Feedback from ACW and ACWC was included to develop a third draft of the guidelines.

The second meeting, the Validation Workshop for the Draft ASEAN Guidelines on the Collection and Analysis of Data on Violence against Women, was organized on 10–11 October 2017 in Siem Reap, Cambodia. This second meeting served to collect comments, insights and country experiences related to VAWG data practices and challenges from ACW and ACWC representatives to further revise the third draft and make the guidelines relevant and useful for users and ASEAN Member States. This participative process of review and discussion led to the revision of the third draft to a fourth draft, which includes the points raised during the October validation workshop. The fourth and final draft of the guidelines was reviewed by ACW and ACWC representatives and presented during the ACWC Partnership Conference on 28 March 2018 in Jakarta, Indonesia. The guidelines were endorsed by ACW and ACWC representatives in April 2018.
1.3 ASEAN VAWG Data Guidelines purpose and scope

The purpose of the ASEAN VAWG Data Guidelines is to provide guidance to ASEAN Member States to be better equipped to generate reliable data and evidence that can inform national and regional strategies to prevent and respond to VAWG and to report on SDG targets and indicators related to preventing and responding to VAWG, including indicators on VAWG agreed upon by ASEAN Member States. In addition, the guidelines provide an overview of the current studies and data available in ASEAN Member States and internationally recognized research and methodologies. By outlining why and how data are critical to eliminate all forms of VAWG, the guidelines can be used to start discussions on VAWG data, to advocate for more and better data on VAWG and to inform decisions on the collection and use of VAWG data. These guidelines will be a step towards improving evidence-based VAWG prevention and response policies and programmes as well as the quality and availability of services, protection and justice for women who experience violence.

These ASEAN VAWG Data Guidelines bring together in one document leading guidance on the collection and use of the three main types of VAWG data – administrative data, prevalence data and costing data. The guidelines offer insights, resources and guidance to strengthen the capacities of ASEAN Member States to systematically collect and use administrative data, prevalence data and costing data. It explains the different purposes, strengths and limits of these three types of data. It underlines ethical and safety considerations surrounding VAWG data collection, including issues of data security and sharing.

The guidelines explore administrative, prevalence and costing data because they are the most common types of VAWG data collected and used, and questions remain about their purposes, methods and use. These ASEAN VAWG Data Guidelines offer a special emphasis on administrative data on VAWG as little guidance is currently available. However, good practices and challenges related to VAWG data still need to be better understood and analysed to produce and refine guidance available.

This document is not a how-to manual, nor does it offer step-by-step instructions for conducting studies and ensuring ethical practices. While the guidelines are not designed as a how-to, they include key resources and refer to internationally tested and validated step-by-step guidance. As the analysis of data requires extensive guidance and to be context-specific, the guidelines do not cover the methodologies to analyse data, however some general guidance is provided on the meaning drawn from data.

Since research on VAWG typically encompasses violence against girls and women from age 15 years and up, girls younger than age 15 are beyond the scope of these guidelines. Data from informal services and violence in emergency settings are beyond the scope of this document, however, information on a data management system designed for emergency setting is included in these guidelines.

It would be useful to review and update the ASEAN VAWG Data Guidelines in five years.

1.4 Use of the ASEAN VAWG Data Guidelines

Who should use the ASEAN VAWG Data Guidelines? These voluntary guidelines can be used by data managers and analysts in statistics agencies, ministries or organizations that provide services and access for justice to women and girls who have experienced violence. The guidelines can also be used by those who are responsible for making decisions about budget allocation and improving essential services for women and girls who have experienced violence.

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1. ASEAN, Declaration on the Elimination of Violence Against Women in the ASEAN Region (2004).
CHAPTER 2

VIOLENCE AGAINST WOMEN AND GIRLS IN ASEAN MEMBER STATES
Physical, sexual, psychological and economic violence occurring in the family such as denying a partner control over basic resources, battering, sexual abuse of female children in the household, marital rape, dowry-related violence, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation.

Physical, sexual and psychological violence occurring within the general community, such as rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution.

Physical violence is the intentional use of physical force with the potential for causing death, disability, injury, or harm. Physical violence includes, but is not limited to, scratching; pushing; shoving; throwing; grabbing; biting; choking; shaking; slapping; punching; burning; use of a weapon; and use of restraints or one's body, size, or strength against another person.

Sexual violence is any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting. It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object.

Psychological abuse which includes behaviour that is intended to intimidate and persecute, and takes the form of threats of abandonment or abuse, confinement to the home, surveillance, threats to take away custody of the children, destruction of objects, isolation, verbal aggression and constant humiliation.

The World Health Organization (WHO) defines economic violence as being a form of collective violence, committed by larger groups towards individuals. Economic abuse includes acts such as the denial of funds, refusal to contribute financially, denial of food and basic needs, and controlling access to health care, employment etc.
The ASEAN RPA on VAW recognizes other forms of VAW. These include early and forced marriage and other forms of harmful practices that constitute or contribute to VAW. Child, early and forced marriages are also forms of discrimination against girls and women linked to higher levels of violence experienced by girls and women in such marriages. It recognizes new and emerging forms of VAW, including VAW committed using information and communications technology such as online harassment, abuse, bullying, stalking and distribution of denigrating images. Other specific forms of violence that occur in ASEAN Member States include femicide (including intimate femicide and so-called honour killings), trafficking and acid violence.

Women and girls located at the margins, due to their intersectional identities, are at increased risk of VAWG due to their status and location within communities and societies. Because of these intersectional identities, women and girls are more vulnerable to social and economic discrimination and violence, and their access to support services, protection and justice system responses to VAWG is likely to be limited. The ASEAN RPA on VAW recognizes that diverse groups of women suffer from multiple and intersecting forms of discrimination and inequalities, making them especially vulnerable to violence. They include women with disabilities, women living with and affected by HIV and AIDS, girls, older women, ethnic minority and/or indigenous women, women in conflict with the law, women living in disaster or conflict-affected areas, refugee and displaced women, documented and undocumented migrant women, stateless women, women’s human rights defenders/gender equality advocates, and women who are trafficked for forced labour or sexual exploitation, among others.

International research conducted over the past two decades by the United Nations Population Fund (UNFPA), WHO and others reveals VAWG is a widespread and serious problem in all societies, including ASEAN Member States. Globally, WHO data estimate that 35 per cent of women have experienced either physical and/or sexual violence by an intimate partner or sexual violence by a non-partner during their lifetime. More specifically, 30 per cent of ever-partnered women experienced physical and/or sexual violence by an intimate partner during their lifetime and 7 per cent experienced sexual violence by a non-partner during their lifetime.

Available data indicate that intimate partner violence (IPV), including physical, sexual, psychological and economic violence, is one of the most widespread forms of VAWG. Globally, at least 60 per cent of women who reported incidents of physical and/or sexual violence in their lifetime were abused by a current or former husband or boyfriend. In countries where cultural practices dictate that women leave their natal home and family to live with their husband and his family, the isolation of women from their natal family increases the risk of violence. In such situations, perpetrators may include husbands, mothers-in-law and sisters-in-law. The risk of violence is greatest in families where newly married women have the lowest position within the extended family.

VAWG reflects the pervasive imbalance of power that exists between men and women within societies. In other words, VAWG arises from and perpetuates gender inequalities and discrimination against women and girls. Globally, VAWG is firmly grounded in unequal power relations between women and men (gender inequality) and is reinforced by discriminatory and gender-biased attitudes, norms and practices.
Cross-cultural research in many societies reveals both men and women, young and old, share attitudes and social norms that justify wife beating. Men and women in many societies believe IPV against women is justified at times, particularly for behaviours that transgress gender role expectations (for example, a wife burns food, argues with her husband, goes out without telling him, neglects the children or refuses to have sex with her husband). When IPV is ‘justified’, women are blamed for the abuse they experience. Shame and stigma make it difficult for women to seek help and protection from their abusive husband and/or in-laws.

Violence has serious negative consequences for women and girls, ranging from immediate to long-term physical, psychological and mental health effects and sexual and reproductive problems, which can prevent women and girls from completing their education and fully participating in the economic workforce, their communities and society at large. Women who experience violence are generally employed in higher numbers in casual and part-time work, and tend to earn less than men. They often experience lost income and bear the costs for accessing health care, support services and justice. Thus, VAWG significantly undermines women and girl’s employment opportunities, including income earning capabilities and advancement in the workplace.

Because in many societies women are blamed for provoking violence and remain stigmatized, it is difficult for them to speak out and seek help and protection. Abused women often have nowhere to turn, especially in societies where it is difficult for women to leave their husband or partner and live alone. In societies with high rates of IPV, girls learn from a young age that they must tolerate abuse and violence through personal experience and seeing violence used against their sisters, mothers and aunts. They also learn that others are not eager to intervene or to protect women.

VAWG remains one of the most pervasive barriers for creating safe and peaceful societies worldwide. Thus, eliminating VAWG is one of the global priority areas of Governments, NGOs, CSOs, UN Women and the United Nations system.
2.2 Prevalence of violence against women and girls in ASEAN Member States

As of 2017, eight ASEAN Member States—Cambodia, Indonesia, Lao People’s Democratic Republic, Myanmar, the Philippines, Singapore, Thailand and Viet Nam—have completed VAWG prevalence surveys (see Annex A for a summary of findings from each survey). For ASEAN Members States with available data, the proportion of women who experienced intimate partner physical and/or sexual violence in the past 12 months ranges from 1 per cent in Singapore to 22 per cent in Thailand. In terms of experiences with IPV in women’s lifetime, the rates range from 6 per cent in Singapore to 44 per cent in Thailand (see Table 1).

Among ASEAN Member States, despite efforts to collect data and evidence to eliminate VAWG, data on the proportion of women who experience psychological violence in intimate relationships are still lacking; however, the prevalence of psychological violence is generally higher than physical violence in women’s lifetime and in the past 12 months. In Viet Nam, 54 per cent of women have experienced emotional violence in intimate relationships in their lifetime and 25 per cent have experienced emotional violence in the past 12 months; compared to 34 per cent of women who have experienced physical violence in their lifetime, and 9 per cent in the past 12 months.

Research has also shown the majority of women who experience violence in intimate relationships often experience multiple forms of violence and endure repeated acts of violence at the hands of their current or former husband or partner. In the Lao People’s Democratic Republic, in their lifetime, 15 per cent of women experienced physical and/or sexual violence, whereas 30 per cent experienced at least one of the three types of violence: emotional, physical and/or sexual by an intimate partner. The proportion of women who experienced physical, sexual and/or emotional violence in their lifetime was as high as 58 per cent, and 27 per cent of women experienced all three types of violence in the past 12 months.11

Women and girls are also at risk of physical and/or sexual violence by non-partners. Only a few countries in ASEAN have available data on sexual violence by non-partners. In Viet Nam, 10 per cent of women experienced non-partner physical violence and 2 per cent experienced sexual violence by someone other than a husband, since age 15. Non-partner perpetrators of physical violence were mainly family members (65 per cent), whereas perpetrators of sexual violence were strangers and boyfriends.12

In the Lao People's Democratic Republic, the lifetime prevalence of non-partner physical violence was 5 per cent and the prevalence of sexual violence was 1 per cent. Non-partner perpetrators of physical violence were most likely to be female family members (35 per cent), specifically mothers or step-mothers (27 per cent) and female friends and acquaintances (20 per cent). Non-partner perpetrators of sexual violence included male family members (24 per cent) and other males (24 per cent).13 In Indonesia, during a woman’s lifetime, the prevalence of physical and/or sexual violence by non-partner was 24 per cent and 18 per cent by partner.14

Girls’ experiences with sexual violence before age 18 is also a serious problem. According to UNICEF, worldwide, around 15 million adolescent girls aged 15 to 19 have experienced forced sex in their lifetime.15 In Viet Nam, 3 per cent of women experienced sexual abuse before age 15 and perpetrators were most often strangers, but some were family members.16 Worldwide estimates reported by UNFPA find up to 50 per cent of sexual assaults are committed against girls under age 15.17 Women who experience sexual violence in childhood often experience multiple instances of physical and sexual violence in their lifetime, and by multiple perpetrators.18 Research has also found that girls who experience sexual violence in childhood and adolescence are at increased risk of experiencing sexual violence in adulthood.19

Table 1. Proportion of women who experienced intimate partner physical and/or sexual violence in their lifetime and the last 12 months, 2003-2017 (latest available)

<table>
<thead>
<tr>
<th>Country</th>
<th>Lifetime</th>
<th>Past 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia†</td>
<td>20.9%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Indonesia†</td>
<td>18.3%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Lao People’s Democratic Republic†</td>
<td>15.3%</td>
<td>6.0%</td>
</tr>
<tr>
<td>Myanmar†</td>
<td>17.3%</td>
<td>11.0%</td>
</tr>
<tr>
<td>Philippines†</td>
<td>16.9%</td>
<td>7.1%</td>
</tr>
<tr>
<td>Thailand (in two provinces)</td>
<td>44.0%</td>
<td>22.0%</td>
</tr>
<tr>
<td>Singapore‡</td>
<td>6.1%</td>
<td>0.9%</td>
</tr>
<tr>
<td>Viet Nam†</td>
<td>34.4%</td>
<td>9.0%</td>
</tr>
</tbody>
</table>

Sources:
Women and girls who experience violence often suffer violence-related injuries. The rates of women who experienced IPV and sustained physical injuries were as high as 48 per cent of women in Cambodia and 43 per cent in the Lao People’s Democratic Republic. In the Lao People’s Democratic Republic, 21 per cent of women were injured two to five times, and 20 per cent were injured more than five times. In the Philippines, as many as 65 per cent of women who experienced IPV experienced physical and/or psychological injuries.

In 2012, UNODC revealed intimate partner or family-related violence is a major cause of female homicides, with almost half of women who were murdered (47 per cent) were killed by their family members or intimate partners, compared to 6 per cent of men who were murdered. Gender-related killing of women and girls is both a form and a consequence of VAWG, and it refers to the murder of women and girls because they are female, whether the killing occurs in public or private. In 2012, the Report of the United Nations Special Rapporteur on violence against women, its causes and consequences, identified active or direct forms of gender-related killing, including killing as a result of IPV, sorcery or witchcraft-related killing, so-called honour killings, armed conflict killing, dowry-related killing, gender identity- and sexual orientation-related killing and ethnic- and indigenous identity-related killing. Each of these forms of gender-related killings is present in Asia and the Pacific (see Box 2). The Special Rapporteur has called for the establishment of gender-related killing of women (femicide) watch or observatory and to publish every year the number of femicides under the categories of ‘family or intimate-partner related femicides’ and ‘other femicides’.

Box 2. Gender-related killing of women and girls in nine countries in Asia

- Intimate partner or family-related homicide accounts for 20.5 per cent of all homicide
- 55 per cent of homicides against women are committed by their intimate partners or family members, compared to 6 per cent of homicides against men
- An estimated 19,700 women died in intimate partner or family-related homicide in 2012


Note: Data from 2012 or latest year.
2.3 Violence against women and girls and the 2030 Agenda for Sustainable Development

The 2030 Agenda for Sustainable Development is a commitment for all countries and stakeholders to take a new direction towards sustainable development through stronger universal action, new partnerships, adequate financing and an integrated approach for achievement of all goals. The Sustainable Development Goals (SDGs) address gender equality as an explicit priority through the stand-alone SDG 5 and mainstreaming gender equality across the SDGs. The SDGs cannot be fully achieved without considering gender equality. Recognizing multiple dimensions of inequalities within and between countries, the 2030 Agenda is a commitment to leave no one behind (see Box 3).

Violence against women impacts societies’ economic and human development. VAWG has tremendous economic costs that affect individuals, households, communities, organizations, businesses and societies. VAWG has very high costs for police and justice agencies and health care, social protection/welfare and education systems.

Ending VAWG is relevant to realizing SDG 5, but VAWG affects almost all of the SDGs and is an impediment to their realization. VAWG undermines countries’ efforts to reduce and eradicate poverty and it is an impediment to the achievement of the 2030 Agenda for Sustainable Development. Given the pervasiveness of VAWG, the 2030 Agenda recognizes VAWG as a major obstacle to social and economic development. The United Nations General Assembly resolved to combat all forms of VAWG and to implement CEDAW. For the first time, VAWG is addressed in SDG 5: Achieve gender equality and empower all women and girls.

Ending violence against women and girls is identified as one of the key transformative policy areas for the advancement of gender equality and empowerment of women and girls in Asia and the Pacific region. It underscores the strong synergies and the integrated nature of the SDGs, and highlight the potential to catalyse change across the SDGs as well as change in the lives of women and girls, according to Gender Equality and the Sustainable Development Goals in Asia and the Pacific: Baseline and Pathways for Transformative Change by 2030, a regional flagship publication jointly produced by the Asian Development Bank (ADB) and UN Women (forthcoming in 2018). The publication provides a baseline for monitoring progress on gender equality as per the SDG indicators, including on VAWG-related indicators, and identifies priority actions towards achieving gender equality commitments in Asia and the Pacific region. It also provides the first assessment for Asia and the Pacific on how the 2030 Agenda is to be achieved through addressing gender equality and empowerment of women and girls.

Box 3. 2030 Agenda for sustainable development - Leaving no one behind

The 2030 Agenda for Sustainable Development also commits to leave no one behind, which means prioritizing human dignity and placing the progress of the most marginalized communities first, with women and girls at the top of the list. It also reinforces the need to identify and correct structural causes of inequality and marginalization that affect women and girls. An increased risk of violence is one impact of women’s and girls’ intersectional identities, including age, race, ethnicity, poverty, class, sexual orientation, gender identity, disability, religion, nationality and other factors.

Leaving no one behind obliges United Nations Members States to assess the response of service providers, police and justice officials to women and girls who have experienced violence. The intersectional identities of some women make them even more vulnerable to violence and less able to access justice and services.

Leaving no one behind also requires that all services are available to all women and girls who experience violence, regardless of their intersectional identities. Some women and girls have limited access to services or feel uncomfortable accessing services if they are excluded or made to feel unwelcome because of their identities and the way identity is defined within communities and society. Therefore, understanding the impact of intersectional identities on women’s and girls’ experiences with violence and access to essential services is important to identify and close gaps in service provision, and leave no one behind as work progresses towards eliminating VAWG.
1. UN General Assembly, Declaration on the Elimination of Violence against Women (Resolution 48/104, 1993).
7. UN General Assembly, Intensification of efforts to eliminate all forms of violence against women and girls: Domestic Violence (Resolution 71/170, 2016).
11. UN Viet Nam, ‘Keeping silent is dying’ Results from the National Study on Domestic Violence against Women in Viet Nam (2010).
15. UN Viet Nam, ‘Keeping silent is dying’ Results from the National Study on Domestic Violence against Women in Viet Nam (2010).
23. UN Human Rights Office of the High Commissioner, UN expert on violence against women urges worldwide adoption of Femicide Watch or gender-related killings observatories (2017).
CHAPTER 3
DATA ON VIOLENCE AGAINST WOMEN AND GIRLS

Photo: UN Women/Adrianus Meja
### 3.1 Uses of data on violence against women and girls

Over the past decade, global attention has shifted to collecting more and better data and evidence to support efforts to eliminate all forms of VAWG. The focus is on collecting data that can be used to inform evidence-based programming to prevent and respond to VAWG. International development agencies, national policymakers, donors and CSOs that focus on women's human rights aim to understand the nature and prevalence of VAWG and the ability of people who have experienced violence to access essential services, as well as the risk and protective factors and consequences of VAWG. Guidance is needed on systematic data collection and analysis, presentation and reporting, and on how to use data to inform the development of policies and programmes to eliminate VAWG.¹

VAWG cannot be effectively and efficiently addressed without reliable data.² Data on VAWG are a critical starting point to develop policies and programmes to eliminate VAWG. Once policies and programmes are in place, data are essential to make a strong case for effective lobbying and advocacy for resource allocation, for effective implementation and to improve the quality and availability of essential services, protection and justice for women and girls who have experienced violence. Data on VAWG can demonstrate what is effective to prevent and respond to VAWG. Data can identify similarities and differences in women's and girls’ experiences of violence and their ability to access essential services. The most useful data are disaggregated based on additional factors (such as age, race or ethnicity, wealth quintile, class, sexual orientation, gender identity, disability, religion, nationality, migrant status and other factors depending on the context).

The United Nations Expert Group Meeting on Indicators to measure violence against women³ listed 12 forms of VAWG in need of further study and called for the development of data collection methods and indicators to measure and quantify these forms of VAWG. These were:

| Killing of women by intimate partners; |
| Dowry-related violence; |
| Female infanticide; |
| Sexual exploitation; |
| Threats of violence; |
| Trafficking; |
| Economic and emotional/psychological violence as part of intimate partner violence; |

| Femicide; |
| Crimes committed against women in the name of ‘honour’; |
| Forced marriage; |
| Conflict/crisis-related violence against women; |
| Sexual harassment. |
3.2 Challenges related to data on violence against women and girls

One of the main challenges to collecting data on VAWG is the culture of silence and the stigma associated with VAWG. Women and girls are discouraged from reporting violent incidents, thus the number of cases reported to formal services (justice, police, social services and health care) is likely to be significantly lower than the actual prevalence.

The relevance and usefulness of data depend on the quality and reliability of data. The ability of ASEAN Member States to collect quality and reliable data depends upon having data collection methods that are aligned with agreed methodological standards (using internationally agreed upon definitions of VAWG, tested and validated VAWG surveys, quality data collection and registration forms) and modes of data collection. Data collection methods must respect ethical, safety and confidentiality principles. The ability to collect quality and reliable data also requires having trained data collectors and/or interviewers, and skilled data analysts who can carry out theory-driven analysis and interpretation of VAWG data. In most ASEAN Member States, data on VAWG tend to be unevenly and irregularly collected across sectors, agencies and organizations. Data that are collected are often underdeveloped and underutilized to inform VAWG policies and programmes.

The quality and reliability of data vary significantly given different definitions of VAWG adopted across sectors, agencies and organizations, as well as inconsistencies in disaggregation of VAWG data (types of violence, severity of violence, frequency of violence, location of the violence, victim-perpetrator relationship and their personal characteristics). Different definitions of VAWG and inconsistencies in disaggregation of VAWG data can affect the possibility to compile and compare VAWG data across sectors.

In most ASEAN Member States, there tends to be little coordination across sectors, agencies and organizations to share and compile VAWG data. Inconsistent data collection approaches make it harder to compile data and identify patterns. Given these limitations, government agencies and CSOs have tried to improve data collection related to VAWG (see Box 4). One of the biggest challenges is the limited national and regional capacity for data collection, storage, analysis, sharing and use (see Diagram 1). The ASEAN VAWG Data Guidelines target those challenges.

Box 4. Efforts to improve violence against women and girls data collection in Indonesia

In Indonesia, the National Commission on Violence Against Women (KOMNAS Perempuan) is an independent institution that was established by Presidential decree to promote and monitor women’s human rights and VAWG in Indonesia. Annually, it sends out a standard survey to some 700 to 1,000 government agencies and CSOs nationwide that provide essential services to women and girls who have experienced violence. It collects summary administrative data from at least 30 per cent of the 700 to 1,000 government agencies and CSOs, analyses the survey data using a computer-based system and generates an annual report on VAWG reporting and service provision in Indonesia.

3.3 Types of violence against women and girls data

Three main types of data – administrative data, prevalence data and costing data are generally used to provide insight into VAWG. These types of data can be used to inform, guide and support costing studies that reveal the monetary costs and financial impact of VAWG. Each of the types of data are defined in Box 5 and discussed in more detail in the chapters that follow.

3.4 Links between violence against women and girls data

Administrative data and prevalence data come from different sources, have different purposes, and respond to different questions. Together, administrative and prevalence data enable a better understanding of VAWG. Both VAWG administrative data and VAWG prevalence data are needed for VAWG costing studies.

In general, however, VAWG prevalence studies gather data from a representative sample of the population (national or subnational) so results can be representative of the actual prevalence of violence in the population. Prevalence studies provide more detailed information on the context in which VAWG occurs, how VAWG affects women and girls in the general population, risk and protective factors as well as help-seeking behaviours. VAWG prevalence studies help create a baseline against which other VAWG prevalence studies can be compared to monitor changes in the prevalence of VAWG and the factors that contribute to VAWG over time.
Diagram 1. Flowchart: data collection, storage, analysis, sharing and use

**Data use**
Data can reveal the nature and prevalence of VAWG at district, province and national levels. Data are essential inputs to evidence-based decision-making on policies and programmes to eliminate VAWG, including prevention, intervention, protection, service provision, access to justice and coordination.

**Data sharing**
Data can be compiled from various sources and analysed at the inter-agency level. Data sharing is a key step towards ensuring a more comprehensive understanding of VAWG. It can be used to assess initiatives to prevent VAWG and ensure a proper and effective multisectoral coordinated response to VAWG and survivors’ needs.

**Data analysis**
Once collected, data must be analysed. Data analysis entails making sense of the data, including analysing frequencies, correlations and relationships between variables, patterns and trends when possible. Qualitative data can be analysed and presented to supplement quantitative data, offering greater understanding of VAWG and experiences of VAWG survivors. Data analysis requires an understanding of VAWG and theories of VAWG and its causes to extract meaningful information. Then data-driven observations can be made.

**Data storage**
Considering the sensitive nature of VAWG data, all data throughout the information management process – including collection, storage, analysis, and sharing - should be stored properly in a manner that ensures the confidentiality and safety of the VAWG survivors and those collecting the data.

**Data collection**
Processes by which data are gathered or obtained. The primary concern of service providers, police and justice officials responsible for collecting data should be the immediate well-being of VAWG survivors and respect for principles of safety and confidentiality, including in the data collection process. It should also ensure systematic data collection processes are developed and implemented to improve the quality and reliability of VAWG data.

Note: This flowchart frames common steps related to VAW data collection; it may vary according to the type of data.

Box 5. Types of violence against women and girls data
Administrative, prevalence and costing data serve different purposes.

**Administrative data** are routinely collected by service providers. The data come from VAWG cases identified and reported, registered and handled by authorities and service providers, including the police, prosecutors, courts, social welfare, social services, child protection, health and education.

**Prevalence data** come from surveys, including demographic and population surveys. Prevalence data capture the incidence of VAWG for different age groups (including in childhood, prior to age 15, and age 15+), determinants and factors that contribute to VAWG, attitudes toward VAWG, help-seeking behaviours, description of perpetrators and negative consequences of VAWG on women and their children.

**Costing data** come from costing studies. VAWG costing studies provide a way of determining and analysing estimates of the monetary costs of VAWG by measuring and quantifying the various consequences of VAWG for individuals, households, and national economies. Costing data can estimate the impact of VAWG as well as estimate the costs of providing essential services to survivors of VAWG, using both prevalence and administrative data.
Although VAWG administrative data do not capture the prevalence of VAWG, VAWG administrative data are important for assessing how and where women and girls access protection and services and how ministries, agencies and service providers respond to the needs of women and girls who have experienced violence. The data can reveal patterns and trends over time in help-seeking behaviours, and the outcomes of reported cases.

VAWG costing studies provide a way of determining and analysing estimates of the monetary costs of VAWG by measuring and quantifying the various consequences of VAWG for individuals, households, and national economies. Costing data can estimate the impact of VAWG as well as estimate the costs of providing essential services to survivors of VAWG, using both prevalence and administrative data.

VAWG prevalence and administrative data often reveal that there is a ‘funnel effect’ when it comes to VAWG data (see Diagram 2). Disclosed violence is usually much less than the actual prevalence in a population. In other words, the prevalence of VAWG in a country is far greater than the number of women and girls who disclose the violence they experience and seek out protection and support services (based on administrative data from VAWG service providers). In turn, the number of women and girls who seek out protection and support services is greater than the number of VAWG cases reported and recorded by the police (based on administrative data from the police). The number of VAWG cases reported to the police is greater than the number of cases investigated by the police (based on administrative data from the police and justice officials). Finally, the number of VAWG cases prosecuted by the courts is less than the number investigated (based on administrative data from prosecutors and/or courts). The difference between actual prevalence of violence and disclosed violence varies but needs to be understood to estimate the costs of preventing, responding to and eliminating VAWG, and to plan and develop policies and programmes. Box 6 provides further explanation on the different purposes of prevalence, administrative and costing data.

### 3.5 Quantitative and qualitative data

This section introduces key terminology related to data (see Box 7) and differences between quantitative and qualitative data. The aim is to foster a better understanding of which sources of data can be used to answer specific questions.

Data are measurements of quantities or observations of qualities that are collected as a source of information. The data unit is the person or institution about which data are collected. **Quantitative data** are numerical and measure an amount; whereas **qualitative data** are non-numerical and descriptive, and can include words, narratives, photographs, videos and audio recordings. Both quantitative and qualitative data can be gathered from the same data unit.


**Note:** This diagram is not meant to show proportion. Rates of reported cases of VAWG are usually much lower than the prevalence of VAWG in the population.
Table 2 highlights some important differences between quantitative and qualitative research and data collection methods, particularly as it relates to their purpose, research objectives, focus, groups studied, variables measured, forms of data collected, data collection methods, types of data analysis and the results they will generate.

### 3.5.1 Quantitative data

Quantitative data are measures of values or counts that are expressed as numbers (numerical). Quantitative measures are often focused on ‘how many’, ‘how much’ and/or ‘how often’. Quantitative data collection methods are typically very structured and include various forms of surveys, such as population-based surveys, online surveys, face-to-face surveys, telephone surveys, longitudinal studies and online polls. Quantitative data on the nature and prevalence of VAWG can include questions on the causes and consequences of violence, attitudes and opinions and help-seeking behaviours. The people included in the survey sample should be selected with care to ensure it is representative of the population. Surveys typically rely upon close-ended questions that produce numerical data or data that can be put into numerically coded categories that produce numerical data which can be nominal or categorical (for example, What is your sex? 1=female, 2=male), ordinal or rank order (for example, 1=strongly disagree to 5=strongly agree; 1=never to 5=very often) and/or scale data (for example, age recorded in years). Quantitative data can be easily transformed into usable statistics, such as percentages and mean differences, and easily presented in tables, graphs, charts and infographics.

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**Box 6. The different purposes of violence against women and girls data**

**Differences between VAWG prevalence data and VAWG administrative data:** VAWG administrative data cannot be used as a substitute for VAWG prevalence data because administrative data do not provide an accurate measure of the prevalence of VAWG in a population. Administrative data are not representative because a large number of VAWG survivors do not report the violence they experience to official agencies or service providers.

VAWG prevalence data can reveal the proportion of women and girls who have experienced violence while administrative data show how many seek help, which service providers help them and the number of services needed.

**Differences between VAWG costing data and VAWG prevalence data:** VAWG prevalence data show the scale of VAWG in the population. VAWG costing data can estimate the impact of VAWG to individuals, communities, businesses and the economy.

**VAWG costing data and VAWG administrative data:** VAWG administrative data show current demand for services and can be used to estimate the costs of VAWG service provision and partially inform the economic impact of VAWG.

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**Box 7. Key data terminology**

**Data** are measurements or observations that are collected as a source of information.

**Data unit** is one entity (such as a person or agency) in the population being studied, about which data are collected.

**Data item (variable)** is a characteristic (or attribute) of a data unit which is measured or counted, such as sex (male or female) and age.

**Observation** is an occurrence of a specific data item that is recorded about a data unit. An observation can be numerical (quantitative) or non-numeric (qualitative)

**Dataset** is a complete collection of all observations.
Table 3 highlights some of the strengths and limitations of quantitative data. In terms of strengths, quantitative data tend to be clear and specific, and can be accurate and reliable if properly collected and analysed. Also, large data sets can be created and developed over time into longitudinal data sets, to allow comparison over time. The limitations of quantitative data are that data collection can require complex sampling procedures and respondents are provided with a limited number of pre-determined response options which may not accurately measure the complexities of the situation. Quantitative data also require statistical analysis software and expertise to conduct statistical data analysis.
3.5.2 Qualitative data

Qualitative data are typically descriptive or contextual (non-numerical), but can be more than just words or narratives. Qualitative data can include photographs, videos and audio recordings. Qualitative data provide deeper understanding and insight into social phenomenon, such as attitudes, opinions, practices, reasons and motivations. It may be possible to convert qualitative data in a quantitative form. For example, the qualitative findings of interviews can be organized by theme, and the results can be reported numerically.

Qualitative data collection methods vary significantly, but can include unstructured, semi-structured and structured interviews, focus group discussions, observations, daily accounts and photo documentaries. Open-ended questions enable a wider range of responses, and subjects can answer any way they choose in their own words. The strengths and limitations of qualitative data are summarized in Table 4.

Qualitative data may include quotes from people who have experienced violence that bring the consequences of violence to life in a more powerful way than numbers alone (see Box 8). Qualitative data can help inform the development of policies and programmes to eliminate VAWG and are useful for monitoring and evaluating interventions aiming to improve services as well as perceptions of the availability, accessibility and quality of services for women and girls who have experienced violence.4

Table 4. Strengths and limitations of qualitative data

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can give a nuanced understanding of the experiences, perspectives and needs of women and girls who have experienced violence</td>
<td>May lend itself to collect data from smaller populations, which may not be representative of larger demographics</td>
</tr>
<tr>
<td>Can be used to supplement quantitative data since qualitative data are descriptive in nature and can provide more depth, explanation and understanding of the numbers</td>
<td>Data analysis can be time consuming and may require expertise to conduct qualitative data analysis, including qualitative data analysis software for large qualitative data sets</td>
</tr>
<tr>
<td>Source of detailed or rich information which can be used to understand experiences of women and girls who have experienced violence</td>
<td>Collection and analysis can be subjective, so there is the potential for bias</td>
</tr>
</tbody>
</table>

Source: UN Women, The Ripple Effect - Sharing promising practices, innovations and evidence on ending violence against women and girls in Southeast Asia (2016).


ii. Viet Nam and United Nations, National Study on Domestic Violence against Women in Viet Nam (Hanoi, 2010).

Qualitative research often involves collecting descriptive or contextual data from targeted groups and smaller numbers of people; however, some qualitative studies include interviews with hundreds of people. One of the limitations of qualitative data is that it can be time consuming to analyse, and the methods differ from those used to analyse quantitative data. All responses to open-ended questions must be sorted and organized into themes and sub-themes. Qualitative data analysis also requires expert knowledge of VAWG and an accurate description of respondents’ responses. Care must be taken when analysing qualitative data to avoid inaccurate interpretations.

### 3.6 Violence against women and girls data dissemination

Dissemination of data involves the release of statistics and evidence related to VAWG prevalence data, administrative data and costing studies, as well as SDG indicators through various technical and professional documents and media outlets. Prior to the official release of VAWG statistics and indicators, the data should be subjected to verification to ensure that erroneous data are not released. A verification plan should be set up in advance with a checklist of data quality and internal consistency checks. This process can involve subject matter experts who are external to the national statistics agency, such as a national commission on VAWG, a working group on VAWG, or both so they can verify the statistics in terms of how realistic they are and be involved in their interpretation.

A plan should be developed for communicating VAWG statistics and indicators to a wide range of stakeholders, including policymakers, decision-makers, ministries, agencies, development partners, CSOs, donors and the public. It is also important to engage media outlets to draw attention to the evidence, statistics and indicators and to broaden their exposure and dissemination.

Data should be presented and disseminated in a way that is appealing and user-friendly. Technical terms should be avoided as possible and data should be easy to understand for policymakers and the general public, in order to maximize its impact, for example by producing infographics and selecting key powerful statistics or quotes.

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**Box 8. Quotes from qualitative research**

“When we got home I didn't have time to say anything, didn't even turn off the motorcycle, yet he came and used the helmet to hit me on the head. That time my face was all bruised and I couldn't go to sell the clothes the next day.” (Woman in Lao People’s Democratic Republic who had experienced IPV).

“I did not ask for help because even if I asked, no one would come. People there hated me, they harmed me. They just left me for my husband to beat me. They did not pay attention to me” (Woman in Viet Nam who had experienced IPV).

“You were raped because of the way you dressed yourself; if not by this offender you would have been abusing by another” (Female social worker reporting a statement from a police officer handling a case in Viet Nam of a girl aged 12 years who had been raped).

Sources:


3.7 Ethical and safety guidelines for data on violence against women and girls

VAWG data collection raises important ethical and safety challenges, including protecting the identity of women and girls who have experienced violence, whether it is prevalence data or administrative data. Considering the high-risk nature of VAWG, respect for ethical principles of safety and confidentiality are crucial when collecting and analysing VAWG data. Data protection measures must be established to ensure ethical collection of data and confidentiality and anonymity of VAWG survivors’ identities. Essential to ensuring women’s safety is that data protection procedures are established and followed. Ensuring ethical and confidential principles will also encourage survivors of VAWG to report incidents of violence and seek help from services, reducing underreporting and non-disclosure of incidents.

Data collected without respect for ethical and safety considerations can cause further harm to women and girls who have experienced violence, including stigmatization, ostracism, retaliation, further violence and even death. Unsafe data collection practices can also put service providers and interviewers at risk. These risks are particularly high with VAWG administrative data, as victim information and data are often collected by agents and/or service providers who may not be adequately trained, and they may not be fully aware of the risks. It is crucial to train agents and service providers to collect VAWG data in an ethical and safe manner, and to ensure confidentiality and proper data protections.

Ethical practices, safety and confidentiality are also important when referring women and girls who have experienced violence across sectors and agencies, including to different service providers, police and justice officials. All data collection on VAWG should be undertaken in a way that respects women’s human rights, safety and confidentiality (see Box 9).

Recent efforts of Governments to create national data management systems and registries that include VAWG data and link that data to citizen identification numbers is a concern. Such practices violate VAWG survivors’ rights to privacy and confidentiality, particularly in countries where access to data management systems and registries are available to multiple users and where there is a lack of protocols to ensure confidentiality and protection of the data.

Box 9. The human rights-based approach - Panel principles

When dealing with violence against women data, it is important to take a human rights-based approach to ensure that human rights are put at the very centre of policies and practices. The human rights-based approach focuses on those who are most marginalized, excluded or discriminated against. Most vulnerable women include women with disabilities, women from indigenous communities, elderly women, women living in poverty and sex workers, among others. A human rights-based approach empowers people to know and claim their rights. It increases the ability of organizations, public bodies and businesses to fulfil their human rights obligations. The PANEL principles are one way of breaking down what a human rights-based approach means in practice.

**Participation:** Involving people in decisions that affect their human rights.

**Accountability:** Monitoring of how people’s rights are being affected, as well as remedies for human rights breaches.

**Non-Discrimination and Equality:** Prohibition, prevention and elimination of all forms of discrimination. Prioritization of the most vulnerable people, such as marginalized women, who face the biggest barriers to realizing their rights.

**Empowerment:** Everyone should understand their rights and be fully supported to take part in developing policy and practices which affect their lives.

**Legality:** Grounding approaches in the legal rights that are set out in domestic and international laws.

Although there is no specific global guidance on VAWG administrative data collection, WHO provides detailed ethical and safety recommendations for research on domestic violence against women and ethical and safe data collection on sexual violence in emergencies. These guidelines can apply to VAWG administrative data collection, including key principles of privacy and confidentiality, informed consent, safety and referral of women and girls who have experienced violence to and between service providers.

The following are three key WHO documents that provide detailed information and direction on the planning, implementation and dissemination of VAWG research to ensure no harm to respondents.

Guidance on safe and ethical ways to collect data on VAWG are also available through the diverse VAWG and gender-based violence (GBV) training and case management manuals from different sectors (such as health, police and justice). A few examples for health, police and justice can be found below:

This guide draws on the experience of researchers from more than 40 countries and presents methods for performing surveys and qualitative research on VAWG in low-resource settings. It covers all aspects of the research process, from study design to training of field workers. It also describes ways to use findings to influence decision-makers. Most important, it presents clear guidelines for protecting the safety of women participating in the research.

**WHO, Putting Women First: Ethical and Safety Recommendations for Research on Domestic Violence Against Women (2001)**
This document outlines the recommendations developed by WHO regarding the ethical and safety issues associated with planning and conducting domestic violence research. The document is designed for use by anyone intending to do research on domestic violence against women (including investigators, project coordinators and others implementing such research), and for those initiating or reviewing such research (including donors, research ethical committees, etc.).

**WHO, Responding to intimate partner violence and sexual violence against women - WHO clinical and policy guidelines (2013)**
These guidelines aim to provide evidence-based guidance to health-care providers on the appropriate responses to IPV and sexual violence against women, including sensitive collection of data.

**UNDOC, Handbook on Effective police responses to violence against women (2010)**
This handbook is designed for first-responders such as the police. It includes guidance on collecting data for cases of VAW for the police to respect the principles of privacy and confidentiality.

**UNODC, Handbook on effective prosecution responses to violence against women and girls (2014)**
This handbook provides guidance on interviewing victims in cases involving VAWG for prosecutors.
Box 10. The women-centred approach - First line support

Women-centered approach involves designing and developing programming that ensures survivors’ rights and needs are first and foremost. It aims to create a supportive environment in which survivors’ rights are respected and in which they are treated with dignity and respect.

Services providers have a role to provide first-line support to respond to both emotional and practical needs. It can be summarized by 5 letters: **LIVES**.

**L**ISTEN Listen to the woman closely, with empathy, and without judging.
**I**NQUIRE ABOUT NEEDS AND CONCERNS Assess and respond to her various needs and concerns—emotional, physical, social and practical (e.g. childcare)
**V**ALIDATE Show her that you understand and believe her. Assure her that she is not to blame.
**E**NHANCE SAFETY Discuss a plan to protect herself from further harm if violence occurs again.
**S**UPPORT Support her by helping her connect to information, services and social support.

**Source:** WHO, *Health care for women subjected to intimate partner violence or sexual violence - A clinical handbook* (2014).

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8. Ibid.
CHAPTER 4

VIOLENCE AGAINST WOMEN AND GIRLS
PREVALENCE DATA
4.1 Violence against women and girls prevalence data

As well-tested, step-by-step guidance for robust and comparable prevalence surveys already exist, this chapter provides a brief description of key issues and refers to internationally recognized guidance.

Surveys are the only way to collect data on the prevalence of VAWG in a selected country or area. VAWG prevalence data are generated from population-based surveys that gather data from a large, representative sample of the population of a defined area (national or subnational). By surveying a representative sample, the results provide an accurate approximation of the actual prevalence of VAWG in the whole population of the area targeted. Surveys conducted in subnational areas or particular settings would only be representative of the population of that specific setting and cannot be used to provide national prevalence data. Only surveys with a sample representative of the whole population can provide national prevalence data. Prevalence data can also provide data on the context in which VAWG occurs, negative effects of VAWG on women’s health and well-being, and women’s help-seeking behaviours.

Lifetime and current (in the past 12 months) prevalence rates of VAWG can help decision-makers and policymakers understand the impact of initiatives to eliminate VAWG. If current prevalence rates are significantly lower than lifetime prevalence rates, it may demonstrate the positive impact of these initiatives (for example, in Viet Nam, 9 per cent of women experienced IPV in the past 12 months and 8 per cent over their lifetime).

VAWG prevalence data are useful for services planning as it shows how many women may need to access services. The difference between lifetime and current prevalence can help demonstrate the effectiveness of policies and programmes to prevent and respond to VAWG. If current prevalence is lower than lifetime prevalence, it may indicate that the government’s efforts have been effective.

Population-based surveys are the only way to achieve reliable and comprehensive data, statistics and evidence that represent the magnitude of the problem in the general population.

WHO, UNFPA and UNSD have developed a set of tools that provides guidance to prepare Governments and their national statistics offices to conduct population-based VAWG prevalence studies, collect and compile data and analyse indicators on VAWG.

Box 11. Violence against women and girls prevalence data

VAWG prevalence data refers to the proportion of women and girls who experienced violence as part of the total population of women and girls. Prevalence estimates of IPV are usually presented as the percentage of ever-partnered women who experienced violence, among all ever-partnered women in the same age group.

VAWG prevalence is typically measured for two different time periods:

- **Current violence**, experienced during the previous 12 months. Current violence rates show how many women are living with violence at this time. It provides information useful for services planning as it shows how many women may need to access services.
- **Lifetime violence**, experienced at any time in one’s life since age 15. Lifetime violence rates show the proportion of women who have ever experienced violence in their life, and live with the consequences of violence.

Comparing lifetime and current prevalence can yield information on the effectiveness of policies and programmes to prevent and respond to VAWG. If the current violence is lower than the lifetime prevalence, it may indicate that the government’s efforts have been effective.

34 per cent experienced IPV during their lifetime); whereas, if current prevalence rates remain high in relation to lifetime prevalence rates, it can demonstrate the need for more effective policies and initiatives (see Box 11).

Population-based surveys can involve dedicated surveys, specifically focused on VAWG, or surveys on broader issues (health surveys, crime victimization surveys) that integrate specific modules or questions related to VAWG. To support and strengthen sustainable regional and national capacities to measure VAWG, UNFPA developed detailed documents through the kNOwVAWdata initiative on the advantages and disadvantages of dedicated surveys versus modules within larger surveys. kNOwVAWdata is providing technical support and capacity-building on VAWG surveys and analyses in the Asia-Pacific region. The initiative is strengthening capacities of national institutions to collect and analyse data, using internationally recognized best practice survey methodologies.

The initiative has produced a series of documents on VAW data to enhance the understanding of key terms and principles related to VAW data and prevalence studies in particular:

UNFPA, Measuring Prevalence of Violence against Women - Key Terminology (2016) outlines the definitions of commonly used terms related to violence against women and measuring its prevalence.

UNFPA, Measuring Prevalence of Violence against Women - Survey Methodologies (2016) provides information on the different major prevalence study methodologies.

UNFPA, Sources of Data (2016) is a leaflet looking at the differences between VAW administrative data and prevalence data.

UNFPA, Six golden principles for interviewing women who may have experienced violence (2016) provides six principles to be considered in the training of interviewers.

Whether data are collected through a dedicated survey or through modules within larger surveys on broader topics, VAWG prevalence studies involve interviewing a representative sample of women and girls using a structured questionnaire. Population-based surveys that measure the prevalence of VAWG require a large, random sample of women, representative of the general population; thus, interviewers do not know in advance if the women being interviewed have experienced violence. It is crucial to train interviewers on ethical and safety principles for conducting research on VAWG.

Population-based surveys are the only way to produce reliable and comprehensive statistics that represent the magnitude of the problem in the general population, provided they are properly conducted. However, population-based surveys require a large amount of training and financial and technical resources.
4.2 Resources to guide violence against women and girls prevalence surveys

There is a set of tools that provides step-by-step guidance to prepare Governments and their national statistics offices to conduct population-based VAWG prevalence studies, collect and compile data and analyse indicators on VAWG. Countries interested in conducting a VAWG prevalence study should review each of the tools described below for step-by-step guidance.

4.2.1 World Health Organization resources

In 2005, WHO released the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women. The report analyses data collected from over 24,000 women in 10 countries representing diverse cultural, geographical and urban/rural settings: Bangladesh, Brazil, Ethiopia, Japan, Namibia, Peru, Samoa, Serbia and Montenegro, Tanzania and Thailand. The WHO study used female interviewers and supervisors and accorded paramount importance to their careful selection and appropriate training.

The WHO methodology includes survey modules to measure the prevalence of VAWG and its health repercussions, as well as underlying factors that increase the risk of violence, consequences of violence for women and their children, and women’s help-seeking behaviours. It includes a standard protocol for conducting a population-based survey, and a structured survey that can be administered in a face-to-face interview with a representative sample of women aged 15–49 years (reproductive age). The methodology and tools also include a qualitative component of focus group discussions, in-depth interviews, and key informant interviews. Ethics and confidentiality principles are key components of this methodology that includes ethical and safety standards and a training manual for interviewers. The methodology developed for the WHO study is now internationally accepted as best practice for national population-based studies of VAWG which has been replicated or adapted in approximately 20 countries in the Asia-Pacific region, and many more countries around the world.

4.2.2 Demographic and Health Survey Program resources

The Demographic and Health Survey (DHS) Program can be used to collect and disseminate accurate, nationally representative data on a wide range of health topics, including: reproductive health, maternal and child health, sexual behaviour and nutrition. The DHS includes an optional domestic violence module, with questions modified from the WHO questionnaire, which enables comparability between countries.

Traditionally, the DHS focused on women aged 15–49 years (reproductive age); however, in recent years, UNFPA expanded the DHS to women aged 50 years and older. The United States Agency for International Development (USAID) and UNFPA have supported the DHS in countries in Asia and the Pacific in keeping with WHO ethical and safety guidelines. The DHS is usually conducted every five years, which produces comparable, longitudinal data that enable the analysis of patterns and trends over time.

The DHS Program website provides basic documents to go with the model questionnaire, which includes a module on measuring VAWG. Any country interested in conducting the DHS should review and understand each of these documents, which provides step-by-step guidance on how to administer the survey. The documents include the following:

- DHS Sampling Manual.
- Statistical and Methodological Documentation: Guide to DHS Statistics; International Indicators.
experience violence, particularly in intimate relationships and families, often experience more than one form of violence and/or multiple episodes of violence; therefore, surveys should allow for the collection of data on all forms of violence experienced by women during their lifetime and in the past 12 months.

It is also important to collect data on the places where women experience violence, such as in public spaces (streets, public transportation), private spaces (home, institutions) and work-related environments.

4.4 Violence against women and girls prevalence studies conducted in ASEAN Member States

As of December 2017, eight ASEAN Member States have completed VAWG prevalence studies (see Table 5 and Annex A for a summary of the findings from each study). Cambodia and the Philippines have conducted periodic VAWG prevalence studies.

Table 5. Violence against women and girls studies conducted by country and year of fieldwork implementation

<table>
<thead>
<tr>
<th>Country</th>
<th>VAW prevalence studies (Years conducted)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>2000, 2005, 2014 (CDHS) and 2015 (WHO)</td>
</tr>
<tr>
<td>Indonesia</td>
<td>2016 (WHO)</td>
</tr>
<tr>
<td>Lao People’s Democratic Republic</td>
<td>2014 (WHO)</td>
</tr>
<tr>
<td>Myanmar</td>
<td>2015-2016 (DHS)</td>
</tr>
<tr>
<td>Singapore</td>
<td>2009 (IVAWS)</td>
</tr>
<tr>
<td>Thailand</td>
<td>2000 (WHO)</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>2010 (WHO)</td>
</tr>
</tbody>
</table>

4.2.3 United Nations Statistics Division resources

The UNSD developed the Guidelines for Producing Statistics on Violence against Women: Statistical Surveys (2014). The guidelines can assist national statistical offices in assessing the scope, prevalence and incidence of VAWG. The guidelines discuss methodologies, sources of data, relevant statistical classifications, outputs, wording of questions and all other relevant issues to consider when conducting statistical surveys on VAWG. These guidelines also provide detailed guidance on the essential features of these surveys and steps required to plan, organize and execute these surveys, as well as concepts that are essential for ensuring the reliable, valid and consistent measurement of women’s experiences with violence. The guidelines provide national statistical offices with step-by-step guidance on how to collect, process, analyse and disseminate data on VAWG. This includes guidance on the role of statistical surveys in meeting policy objectives related to VAWG.

The UNSD Guidelines should be used in conjunction with UNODC and UNSD manuals, including:

• UNODC, Manual on Victimization Surveys (2010) provides guidance on all aspects of victimization surveys.
• UNSD, Designing Household Survey Samples: Practical Guidelines (2008) is a practical guide to sample survey design, data processing, and analysis of large-scale household surveys.
• UNSD, Household Sample Surveys in Developing and Transition Countries (2005) covers important aspects of conducting household surveys, including sample design, survey implementation, non-sampling errors, survey costs and data analysis.

4.3 Types of violence against women and girls measured in prevalence surveys

Surveys on the prevalence of VAWG typically include physical, sexual, psychological and economic violence (see Diagram 3). It is important to understand that women who experience violence do not always recognize their experiences as violence, and if they do, they typically do not name or label their experiences with terms like ‘violence’ or ‘abuse’; therefore, those terms should be avoided in surveys. To successfully measure the prevalence of VAWG, survey questions should explore a range of specific behaviours that can be measured in a systematic and standardized way. Also, women who experience violence, particularly in intimate relationships and families, often experience more than one form of violence and/or multiple episodes of violence; therefore, surveys should allow for the collection of data on all forms of violence experienced by women during their lifetime and in the past 12 months.

It is also important to collect data on the places where women experience violence, such as in public spaces (streets, public transportation), private spaces (home, institutions) and work-related environments.
Diagram 3. Types of violence against women and girls measured in prevalence surveys

**Physical Violence**

**Definition** - Intentional use of physical force with the potential for causing physical harm, injury, disability, and in the most severe cases death

**Measurement** - Women are asked about specific acts of physical violence experienced since age 15 and in the past 12 months that range from moderate to severe forms of physical violence (e.g., slapping, pushing, shoving, hair pulling, kicking, choking, burning, and use of a weapon)

**Sexual Violence**

**Definition** - Any sexual act or attempt to obtain a sexual act, or unwanted sexual comments or acts, that are directed against a woman’s sexuality using coercion or physical force by anyone, regardless of their relationship to the victim, in any setting, including at home, at work, and in public spaces

**Measurement** - Women are asked about specific acts of sexual violence experienced since age 15 and in the past 12 months that constitute three different types of sexual violence:

1. **Forced/ coerced intercourse or rape**, for example, intercourse out of fear of what her intimate partner may do if she refuses
2. **Contact sexual violence**, for example, unwanted touching (excluding intercourse) and sexual acts that a woman has to do but finds humiliating or degrading
3. **Noncontact sexual violence**, for example, threatened sexual violence, exhibitionism, verbal sexual harassment, and use of sexual texts and images on phones and electronic social media

**Economic Violence**

**Definition** - Acts that deny a woman access to and control over basic resources or causes or attempts to cause an individual to become financially dependent on another person, by obstructing their access to or control over resources and/or independent economic activity

**Measurement** - Women are asked about specific acts that constitute economic violence, such as denial of access to money or household funds, refusal of husband or partner to contribute financially to the household, denial of food and basic needs, and controlling access to health care, employment or access to money

**Psychological Violence**

**Definition** - Any act or omission that damages the self-esteem, dignity, identity or development of a woman. This includes, but is not limited to, humiliation, threatening loss of custody of one’s children, forced isolation from family or friends, threatening to harm the individual or someone they care about, repeated yelling or degradation, inducing fear through intimidating words or gestures, controlling behaviour, and the destruction of possessions

**Measurement** - Women are asked about specific acts of psychological violence experienced since age 15 and in the past 12 months that constitute:

1. **Controlling behaviours**, for example, a husband or intimate partner prevents a woman from seeing friends, limits her contact with family, insists on knowing where she is at all times, insists that she ask permission to seek health care
2. **Emotional abuse**, for example, belittling, humiliation, verbal insults, name-calling, doing things that make a woman feel scared or intimidated, and threats by words or gestures to harm a woman or someone she cares about

Source: UNFPA, Measuring Prevalence of Violence against Women: Key Terminology; kNOwVAWdata (2016)
Cambodia and the Philippines used DHS domestic violence modules to conduct their VAWG prevalence surveys and have replicated their DHS studies over time. Thailand participated in the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women. Indonesia, Lao People’s Democratic Republic and Viet Nam replicated the methodology developed for the WHO Multi-Country Study on Women’s Health and Domestic Violence, which provides comparable data between countries. Singapore used the International Violence against Women Survey (IVAWS) methodology to conduct its prevalence study.

Cambodia conducted the Cambodia Demographic Health Survey (CDHS) in 2000, 2005 and 2014. Each CDHS included modules focused on women’s experiences with domestic violence. The result is long-term comparable data over 14 years on women’s experiences with IPV during their lifetime and in the past 12 months. Repeating the same survey over time has produced comparable data to understand the trends and patterns of VAWG in Cambodia. The data demonstrate that from 2000 to 2014, there was a small decrease in the proportion of ever-married women who experienced physical violence since age 15 but a larger decrease in the proportion of women who experienced physical violence in the 12 months prior to the survey. This reduction in the current violence can indicate the impact of VAWG programmes, policies and initiatives to reduce violence against women in Cambodia.

Comparability of VAWG data from different periods of time and across countries, regions and even globally, can be achieved through standardized VAWG prevalence surveys and methodologies. Thailand reportedly has a plan to develop common standards, including clearly defined indicators and measures, that can help guide countries in the region to conduct VAWG prevalence studies to enable comparisons across ASEAN Member States and over time. Sometimes, because of methodology issues and complications, prevalence surveys do not go as planned, nevertheless, lessons learned from these experiences are valuable and can be shared with other countries in the region.

Given the different methodologies, survey questions, definitions of VAWG, measures and age disaggregation, surveys between countries may not be comparable. Only surveys using the same methodology with the same questionnaire and disaggregation of data can be compared.

4.5 Strengths of violence against women and girls prevalence studies

The benefits of VAWG prevalence studies are that they can provide reliable estimates of the prevalence of VAWG within a population and identify risk factors and contributing factors to VAWG. Prevalence studies can also show the history of violence in women’s and girl’s lives, identify common characteristics of women and girls who have experienced violence, profiles of perpetrators and the factors that align with help-seeking behaviour of VAWG survivors. Findings from VAWG prevalence studies can be used to develop prevention programmes based on the identified risk factors, contributing factors, protective factors and consequences.

VAWG prevalence studies completed over time can be compared to monitor changes in the prevalence of VAWG, factors that contribute to VAWG and help-seeking behaviours of VAWG survivors. When VAWG prevalence studies are replicated every 5–10 years, patterns and trends can be analysed.

Findings related to current levels of IPV (women who reported experiencing IPV in the past 12 months) capture the status of the epidemic, and can inform policymakers and service providers in planning and budgeting as they try to meet the needs of women and girls currently experiencing violence. Studies on the prevalence of VAWG can include questions on why women seek help (or do not seek help) and from whom. That information can be used to improve service delivery in response to the views of VAWG survivors. It can also be used to support advocacy efforts to generate policy and programme attention to prevent and respond to VAWG.

In many cases prevalence studies are the first opportunity many women have to talk with someone about their experiences of violence, to be listened to and to realize that they are experiencing violence, that it should not be tolerated and that they can reach out for help. In some cases, it is also an opportunity for interviewers to reflect and maybe act on their own experiences of violence.
4.6 Challenges of violence against women prevalence studies

The challenges with VAWG prevalence studies are that they are expensive and implementation requires a significant investment of financial and human resources and equipment. VAWG prevalence studies also require capacity-building, technical expertise or assistance and specialized technical skills. Given the costs of conducting VAWG prevalence studies, countries generally conduct them either as a single study, or every 5-10 years. Another challenge with VAWG prevalence studies is ensuring the proper implementation of the methodology so that the data gathered are valid and reliable and following ethical and safety protocols to protect the women and girls who agreed to participate in the survey. Finally, not using internationally recognized and validated standard methodologies can erode the validity of survey findings and prevent comparisons between countries. Comparisons between countries are important to generate regional and global data for monitoring regional and global efforts.

“Non-disclosure”, when people decline to speak about their experiences, can be an issue with prevalence surveys. The amount of non-disclosure is unknown and variable but it can skew the results of prevalence studies towards unrealistically low rates of violence. Such findings have a negative impact on planning, policy and programme development, and on the comparability or reliability of the data. Proper and appropriate interviewer training and safety and confidentiality measures are always needed to minimize the levels of non-disclosure in surveys. If the interviewer fails to respect essential principles, such as confidentiality, women are less likely to trust the interviewer enough to disclose their experience of violence. Because of the sensitive nature of VAWG, it is important to secure the safety of participants and of interviewers. Inexperienced interviewers can place women and girls who have experienced violence and themselves at risk. The risk of harm increases when VAWG prevalence studies are conducted by agencies or institutions that lack the necessary technical expertise and skills.

Prevalence studies capture only some forms of violence. Prevalence studies usually enable a deeper understanding of domestic violence and IPV but do not reach the most marginalized women and girls and most severe cases, as those women may not be identified or participate in the survey. Prevalence studies do not capture the stories of women who have been killed, institutionalized or are in prison.

4.7 Population-based studies that include men’s use of violence against women and girls

4.7.1 International Men and Gender Equality Survey

The International Men and Gender Equality Survey (IMAGES) is a household questionnaire on men’s and women’s attitudes and practices on a wide variety of topics related to gender equality. IMAGES data provide insights on men’s use of, and women’s experience of IPV, participation in caregiving, attitudes towards gender-equality policies, among other topics. The data and conclusions generated from IMAGES studies can be used to inform policies and programmes to engage men in gender equality and to prevent VAWG. As of 2017, IMAGES studies had been carried out in more than 20 countries around the world.

The IMAGES questionnaire includes items from the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women, Demographic and Health Surveys (DHS), the Gender Equitable Men (GEM) Scale (a validated instrument to assess attitudes about gender that has been adapted and validated in household research in more than 20 countries) and other questions on men’s attitudes and practices related to gender equality.

In the Middle East and North Africa (MENA), Promundo, UN Women and local researchers partnered to conduct the largest multi-country study exploring men’s and women’s attitudes and practices related to a range of key issues related to gender equality. Understanding Masculinities: Results from the International Men and Gender Equality Survey (Images) – Middle East and North Africa (MENA) consists of surveys with nearly 10,000 men and women aged 18–59 years, including both urban and rural areas (as well as refugee settlements, when appropriate) in Egypt, Lebanon, Morocco and Palestine. Topics included support for gender equality, support for women’s rights policies, household decision-making, use of various forms of gender-based violence (GBV), men’s participation in caregiving and domestic chores, gendered health vulnerabilities, employment-related stress, physical security and adverse life conditions, and childhood, among others.

The study took a comparative lens to allow regional comparison between countries of the MENA region, and provided country-specific analysis.
4.7.2 Partners for Prevention resources

Through a regional joint programme ‘Partners for Prevention’, UNDP, UNFPA, UN Women and United Nations Volunteers conducted the study Why Do Some Men Use Violence Against Women and How Can We Prevent It? The study collected and analysed both quantitative and qualitative data from more than 10,000 men and 3,000 women in nine sites across six countries in the Asia-Pacific region (Bangladesh, Cambodia, China, Indonesia, Papua New Guinea and Sri Lanka). It provides the largest multi-country dataset on men’s use of violence against women and can inform evidence-based interventions to prevent such violence. To ensure data comparability across sites, the study used a standardized structured questionnaire, which drew from the Study on Men’s Health and Relationships, the WHO Multi-Country Study on Women’s Health and Domestic Violence against Women and the IMAGES survey. This research can be used to inform violence prevention efforts.

Partners for Prevention developed the Toolkit for Replicating the UN Multi-Country Study on Men and Violence: Understanding Why Some Men Use Violence against Women and How We Can Prevent It. It provides step-by-step guidance on how to conduct rigorous and ethical research on men’s use of violence against women. The toolkit includes the following methodological approaches:

- Quantitative population-based representative household survey with men;
- Qualitative life history interviews with men who use violence and those who do not; and
- Sociological and ethnographic gender politics of policy research.
2. Ibid.
5. UNFPA, Sources of Data, kNovWAVdata (2016).
6. UNFPA, Six golden principles for interviewing women who may have experienced violence, kNovWAVdata (2016).
27. UN Division for the Advancement of Women, Economic Commission for Europe (ECE) and WHO, Expert Group Meeting on Violence against women: a statistical overview, challenges and gaps in data collection and methodology and approaches for overcoming them (2005).
CHAPTER 5
VIOLENCE AGAINST WOMEN AND GIRLS
ADMINISTRATIVE DATA
• Administrative data are regularly collected and compiled by service providers (health care facilities, social services, justice and police officials), government agencies and departments and non-government service providers.
• Administrative data reveal the number and types of VAWG incidences identified and reported to authorities and service providers, points of entry and intervention, and access to protection and support services, within a given time period and across districts, provinces and regions.
• Administrative data hold the potential to understand patterns of cases outcomes and can be a basis for improving services to survivors.
• Since administrative data demonstrate the use of services by VAWG survivors, they can be used to explore patterns and trends in reporting and response to VAWG, and to inform programme planning and resource allocation to improve service quality and availability.
• Ministries and agencies use different types of data management systems to collect and analyse administrative data related to VAWG, including paper-based registration or record-keeping systems, computer-based data management systems, and computer- and web-based case management systems.
• In many countries, ministries and agencies face challenges with administrative data flows, including: delays in the flow of data from subdistrict to district, provincial and national levels; inconsistencies in use of paper-based and computer-based systems at each level in many ministries and agencies; fragmentation of data in some ministries and agencies, and broken channels of data sharing and compilation between departments in ministries and agencies.
• Different definitions of VAWG and inconsistencies in disaggregation of VAWG data can also affect the possibility to compile and compare VAWG data across sectors.
• VAWG administrative data collection is crucial, but only as good as the record keeping and registration at the point of entry, so it is critical to improve registration systems at the point of entry.
• VAWG administrative data are under-analysed due to a lack of analytical and reporting know-how.
• To make administrative data useful, it is crucial for policymakers, ministries, agencies and organizations to address gaps and challenges in the collection and analysis of VAWG administrative data.

5.1. Violence against women and girls administrative data

In recent years, there has been increased interest among Governments and development partners to explore ways to use existing administrative data to monitor and report on VAWG. Administrative data are an important source of data and information that can often be readily accessed and used to complement VAWG prevalence studies, by providing information on VAWG survivors’ access to services. Administrative data can also be used to measure progress towards VAWG-related SDG targets and indicators that do not require prevalence data. Administrative data can only be used to report on SDG indicator 16.1.1: number of victims of intentional homicides per 100,000 population, by sex and age and indicator 16.2.2: number of victims of human trafficking per 100,000 population by sex, age, and forms of exploitation.

In many ASEAN Member States, VAWG administrative data are regularly collected and compiled at subdistrict, district, province and national levels by government agencies and departments (social welfare, child protection, health, police, prosecutors and courts), non-government service providers and public and private health-care facilities. In some countries, there is already a wealth of information on how women and girls are using services when they have experienced violence, as well as how service providers respond to women and girls when they seek health care, psycho-social support, legal aid, shelter and justice (see Diagram 4). However, usually the main purpose of administrative data is not to study VAWG, but to provide information for administrative purposes (such as workload, logistics, budget and reporting) and for case management. Often administrative data are not compiled, shared across sectors or analysed with a ‘VAWG lens’ or used to improve service provision for VAWG survivors. A ‘VAWG lens’ means collecting, compiling, sharing, analysing and using data guided by knowledge and understanding of VAWG theories and literature with a view to using the data to better understand VAWG and to inform evidence-based approaches to prevent and respond to VAWG, including by improving the quality and availability of services for VAWG survivors.

Singapore reportedly has many reporting channels in place for VAWG, including formal and informal channels. For example, the school system and the police have their own reporting systems for cases of violence. Singapore also has a network of organizations that addresses all types of violence.
## Diagram 4. Violence against women and girls administrative data sources across sectors

<table>
<thead>
<tr>
<th>Sector</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Administrative data include information about VAWG survivors who access health clinics and hospitals (public and private) for domestic violence, sexual violence and other forms of violence.</td>
</tr>
<tr>
<td>Social Welfare</td>
<td>Administrative data include information about VAWG survivors who access the range of services and shelters through the social welfare system.</td>
</tr>
<tr>
<td>Child protection</td>
<td>Administrative data include information about girls who experience violence and their families, who access the range of support services and protection, including alternative care, through the child protection system.</td>
</tr>
<tr>
<td>Women's affairs/unions</td>
<td>Administrative data include information about VAWG survivors who access the range of support services, protection and legal aid through the women’s affairs/unions.</td>
</tr>
<tr>
<td>Education</td>
<td>Administrative data include information about incidents of violence against girls in and around schools.</td>
</tr>
<tr>
<td>Police</td>
<td>Administrative data include information about incidents of VAWG identified and reported to the police, and police safety notices and/or protection orders issued by the police.</td>
</tr>
<tr>
<td>Prosecutor’s offices</td>
<td>Administrative data include information about incidents of VAWG that are reported and/or transferred to public prosecutor’s offices for investigation and/or prosecution, and the number of protection and/or restraining orders sought through the public prosecutor’s office.</td>
</tr>
<tr>
<td>Courts</td>
<td>Administrative data include information about VAWG cases prosecuted in the courts, the number of protection and/or restraining orders issues by the courts or magistrates, the number of sentences handed out to perpetrators (by offense) and the number of convictions.</td>
</tr>
<tr>
<td>Helplines</td>
<td>Administrative data include information about calls to helplines/hotlines related to incidents of VAWG and any information or data related to case management and/or referrals of VAWG cases.</td>
</tr>
<tr>
<td>Shelters</td>
<td>Administrative data include information about VAWG survivors who access protection in shelters and detailed information about their cases, including access to police, justice agencies and other service providers.</td>
</tr>
<tr>
<td>CSO or NGO service providers</td>
<td>Administrative data include information about VAWG survivors who access CSO or NGO service providers and detailed information about their cases, including access to other service providers, police and justice agencies.</td>
</tr>
</tbody>
</table>
5.2. Strengths of administrative data

Strengthening administrative data on VAWG is an important and useful investment. The strengths of administrative data are numerous. Agencies and organizations automatically and regularly collect VAWG administrative data at points of entry (meaning the point at which women and girls who have experienced violence access services, protection and/or justice), and they regularly compile this data at subdistrict, district, province and national levels. It is different from prevalence survey data which is collected periodically (every few years), and often at only one point in time. Another strength of administrative data is that it can capture information related to anyone who accesses services, including women and girls from hard to reach populations, whereas the experiences of women and girls from marginalized groups may not be fully reflected in VAWG prevalence surveys. Marginalized groups include indigenous and displaced people, and cultural, religious and ethnic or racial minorities. However, this is true only to the extent that women and girls from these populations can access services.

The purpose of VAWG administrative data is to help service providers, justice agencies, policymakers and decision-makers understand the number of incidents of VAWG reported and responded to, the number of VAWG survivors who access services, points of entry, which services they are accessing and how services are responding to VAWG survivors’ needs, within a given time period and across districts, provinces and regions. Administrative data track which services women seek, how often and for which purposes. It can provide insight into the quality of those services, the referrals made, and the outcomes of services. The overarching questions that administrative data help answer are: did the services help women to be safer, to heal, to recover, to access justice? Were women satisfied with the services?

Administrative data can be used to explore historical patterns and trends in identification, reporting and response. At a practical level, administrative data can be used to inform general programme planning and resource allocation since the data can demonstrate the use of services, including social welfare, health care, police and justice services, along with the use of community-based services. In some ASEAN Member States, administrative data may be the only or best available source of VAWG data, particularly in countries where prevalence surveys are lacking or outdated.

In most cases, administrative data are collected and used for internal purposes, but are not necessarily compiled and reported outside the agency or organization. If administrative data are used for monitoring and evaluation purposes or external purposes, this kind of data cannot be easily generalized to the larger population, which makes them different from prevalence surveys.

Ultimately, the relevance and usefulness of agency-based client data depend on the quality of agencies’ registration and record-keeping systems, and the degree to which the data can be used to answer different kinds of questions (such as, how many women and girls make use of agencies and their services? What kind of help do women and girls who experience violence need? What kind of help do agencies offer to survivors?). Administrative data can also be used to evaluate and improve the quality of services and estimate the costs of services.

Administrative records can be a good source of data in ASEAN Member States that have well-developed record-keeping systems. By working more systematically with administrative data, the limitations can be identified and used to inform efforts to strengthen systems of administrative data collection.
5.3. Consequences of underreporting of violence against women and girls

Underreporting is an issue with administrative data. VAWG administrative data rely on VAWG survivors to self-report, yet most women are reluctant to report their experiences of violence. For various reasons, however, including a lack of trust or fear of retaliation and shame, or the belief that the violence they experience is not serious, many women do not report to formal services, and their experiences are not reflected in administrative data on VAWG. Women are often ashamed and fearful of speaking out; they do not want to “air the family’s dirty laundry in public”, bring shame to their family, or they may fear further experiences of violence if they report or seek help (see Box 12).

Since survivors of VAWG consistently report these concerns, it is essential that service providers are trained to treat survivors in a respectful manner that supports and empowers them. When trustworthy, confidential, safe services are available to survivors of VAWG, it is most likely survivors of violence will disclose violence and seek help.

Across sectors, ministries and agencies, data are usually collected and recorded when VAWG survivors self-identify or seek services. In some ASEAN Member States, there are also community watch groups which report incidents of VAWG that come to their attention. Service providers have mechanisms and systems to properly record such data. However, even when an agency or organization has a registration/record-keeping system, and even when women and girls self-identify, there is no guarantee that the case will be registered or recorded. For instance, when women and girls who have experienced violence access health care and self-identify to health workers, health workers may not register VAWG cases for fear of becoming involved in legal proceedings.

Similarly, some police officials do not always register or record VAWG, particularly in domestic violence cases. Police may discourage women from making official reports. They may blame the women, discourage them to report or encourage them to return to and reconcile with their husband and family. Efforts are underway in many countries to improve the responses of the police, health workers, service providers and justice officials. Meanwhile ensuring that reported cases are properly registered remains a challenge.

5.4. Types of administrative data management systems

Ministries and agencies use several different types of data management systems to collect and analyse administrative data related to VAWG. These include paper-based systems, computer-based systems and online systems.

- Paper-based registration or record-keeping systems – Many ministries, agencies and non-governmental organizations (NGOs) rely on paper-based, handwritten registration or record-keeping systems, such as registry books, case files and reporting forms. Paper-based systems are labour intensive because they require hand tallying of the number of cases and other relevant information contained in the files to be able to generate reports. There is a high risk of error with hand tallying information and data from paper-based systems.
• **Computer-based data management systems** – A computer-based data management system is a secure software application designed to manage administrative data and large sets of structured data, and to run operations and analysis of data requested by users.

• **Online case management systems** – Online case management systems or software applications are designed to support case management best practices and offer many features, including functionality for users at every level of the organization (frontline service providers, supervisors, managers and decision-makers). Each group of users will be able to view and update the information relevant to the work they are doing on a case, with pre-built templates comprising data components and process workflows for all common case management functions (client or person and household information; referral information; intake, screening and assessments; case notes and documents; service planning, goals and outcome measurements; external referrals; tasks and notification; operational and management report; and service and location management).

Integrated case management systems can automate the entire cycle of a client, from referral to screening, risk or needs assessments, service delivery, discharge, re-entry and aftercare. Such systems improve identification and management of clients, generate a profile of support needs and prioritize access to available resources. They can also include a case planning module to create client goals and monitor progress, and a system of oversight, monitoring and supervision of services, even those provided by third parties. They can also provide automated tasks, reminders and assessment tools. Each national administrative data system on VAWG will be different based on the purpose they were created for (such as case management, improving services, or information and reporting), and may vary from context to context. Before developing administrative data systems that collect data on VAWG, it is important to define the purpose of administrative data collection on VAWG and the type of data that should be collected according to national context, agency or organization mission or responsibilities, and plans for data uses.

Box 13 highlights the Gender-Based Violence Information Management System (GBVIMS), an example of an integrated case management system, which was launched in 2006. The system was designed for use in humanitarian settings and supports standardized data collection, case management and analysis.

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**Box 13. Gender-based violence information management system (GBVIMS)**

The GBVIMS is a standardized data collection, case management, and analysis mechanism that introduces safety and ethics into data collection, and addresses challenges that limit the availability of service delivery data specifically in humanitarian settings. The GBVIMS is unique because it standardizes VAWG incident data collection and terminology across service providing agencies, anonymizes VAWG data for safe storage and sharing, and automatically creates statistics on reported incidents of VAWG that can be used to target programming, reveal gaps and identify areas for research. The GBVIMS can assist service providers to better understand reported cases of VAWG and it enables agents to share data internally and across sectors for improved case management, coordination and analysis of trends. It provides a simple system for VAWG project managers to collect, store and analyse data, and share reported VAWG incident data in a safe and ethical way.

The GBVIMS includes:
- **GBV Classification Tool** – standardized definitions for six types of GBV/VAWG and incident classification processes
- **Intake and Consent Forms** – standardized intake form to ensure service providers collect a common set of data points, and women and girls are empowered to decide what information about them can be shared. This provision helps protect the rights of women and girls to control the data on the incident and protect their identities
- **Incident Recorder** – a database designed to simplify and improve data collection, compilation and analysis
- **GBV Information Sharing Protocol Template** – principles on safe and ethical sharing of VAWG data and best practices to follow when developing inter-agency information sharing protocols

**Source:** GBVIMS. Available from: [http://www.gbvims.com/](http://www.gbvims.com/)
5.5. Administrative record-keeping systems in ASEAN Member States

When it comes to VAWG record-keeping systems, previous reviews of administrative data on VAWG in developing countries have revealed significant variation across sectors, ministries, agencies and countries. Ministries and agencies tend to have paper-based registration and record-keeping systems at district and provincial levels. The use of computers is mainly to import hand-tailed data into tables developed in word processing software. Social welfare and child protection agencies may have computer-based case management systems in operation even down to the district level, but social welfare and child protection officers may still rely on paper-based case files. Similarly, the police may have a computer-based data management system at the provincial level, but at the district level many crime reports are registered and recorded on paper, including police station diaries. Justice sectors also tend to rely more heavily on paper records, including court case files.

In the Philippines, standardized forms have been developed to collect information on VAWG, including the types of violence, characteristics of victims and perpetrators and services needed and accessed. To reduce duplication and monitor services provided to women and girls who experience violence, the Philippine Commission on Women developed a web-based national VAWG data management system. To ensure confidentiality, the system creates a unique identification number for each person (different from the national identification number), and data are attached to that number.

Some challenges have prevented the full implementation of the national VAWG data management system and reduced the quality of the data collected. These challenges include the following:

- High turnover of personnel, resulting in recurring need to train new staff, and
- Without sufficient training, personnel do not properly complete the standardized forms;
- Poor Internet connectivity at subdistrict and district levels is an obstacle to use of the online system.

The Philippine Commission on Women is a small organization with limited resources to maintain and manage the national VAWG data management own system and ensure its security. The national VAWG data management system may be vulnerable to hacking or data security breaches, and the Philippine Commission on Women lacks the technical expertise to ensure the confidentiality of private information.

In Indonesia, efforts are underway to implement a national administrative data management system that can compile data collected by different sectors and agencies, including registered incidents of violence against women and children (see Box 14).

Box 14. Indonesia KPPPA SIMFONI PPA administrative data management system

In Indonesia, the Ministry of Women Empowerment and Child Protection (KPPPA) has a core duty to assist the President in formulating policies and promoting coordination to support women’s empowerment and to ensure child welfare and protection. The Ministry participates in joint programming with other ministries for coordinated delivery of services to women and children, and is instrumental in issuing policy guidelines for social protection to subnational counterparts.

The Ministry gathers data on cases registered and recorded by provincial and district level women empowerment and child protection departments, and the Integrated Service Centres for Protection of Women and Children related to clients, cases, services provided, and referrals. Not all Integrated Service Centres register and record information in the same way. Some rely on paper-based case files and compile data manually, whereas others input case file data into a computer-based data management system which enables them to compile and analyse client and case data using computer-based software.

KPPPA invested significant financial and human resources into establishing and rolling out SIMFONI PPA, an online data management system. Some Integrated Service Centres have started to input case and client data into the system, but others are not willing to input case and client data into the system because they have concerns about client confidentiality, data protection and security. Based on data inputs into SIMFONI PPA, KPPPA can generate so-called real-time data compilation and analyses. The system can overlay VAWG data with province and district population and community data (population data, poverty rate data and unemployment data).

In ASEAN Member States, some ministries and agencies (such as police, service providers and shelters) have registration or record-keeping systems for identified and reported incidents of VAWG, and they regularly collect data on VAWG. Other ministries and agencies generally do not collect data on VAWG (women’s affairs, hospitals, health clinics, schools and universities).

Ministries and agencies that have VAWG registration or record-keeping systems and are points of entry are likely to keep a record of the reported incident. The point of entry is typically at the subdistrict and district levels (subdistrict or district police stations); however, sometimes, incidents of VAWG can be reported and registered at the provincial level (provincial police stations or hospitals).

Administrative data are only as good as the record keeping and registration at the point of entry, so improving registration systems and ensuring personnel training at the point of entry is extremely important (see Annex B for case registration forms developed by service providers in Cambodia). This includes making sure that detailed information about the victim incident(s) is registered and recorded. Categories of information that should be collected in administrative data include the following:

- Victim’s sex
- Victim’s age
- Single incident of violence or recurring violence
- Victim’s name or identification number
- Types of violence experienced (register all types of violence experienced)
- Location where violent incident occurred
- Domestic violence
- Types of violence-related injuries
- Perpetrator(s) name
- Perpetrator(s) sex
- Use of weapon
- Type of weapon
- Perpetrator(s) age
- Agencies victim was referred to
- Services provided to victim
- Victim-perpetrator relationship
- Use of social media/internet to commit violence

To respect confidentiality and safety principles, some countries may choose not to collect the name of the victim but rather to create an identification number, that is not the national identification number, to be able to track the case.

UNODC developed the International Classification of Crime for Statistical Purposes (ICCS) in 2016. This framework provides an international classification of crime for statistical purposes, with some elements relevant for VAWG administrative data definitions and disaggregation. It is based on internationally agreed concepts, definitions and principles in order to enhance the consistency and international comparability of crime statistics, and improve analytical capabilities at the national and international levels.

The ICCS provides a framework for the systematic production and comparison of statistical data across different criminal justice institutions and jurisdictions. At the international and regional level, the ICCS can be used to improve the comparability of crime data between countries. Standardized concepts and definitions allow for the systematic collection, analysis and dissemination of data. At the national level, the ICCS can be used as a model to provide structure and organize statistical data that are often produced according to legal rather than analytical categories. Moreover, the ICCS can harmonize and standardize data across agencies that have different statistical systems or legal frameworks and across different data sources (administrative records and prevalence surveys).

Whether ministries or agencies have paper-based or computer-based registration or record-keeping systems, or both, it is important that registration or record-keeping systems is routinely used to record all incidents of VAWG identified and reported to agencies and service providers. It is also important that registration or record-keeping systems enables data to be compiled on a regular basis (monthly or quarterly) so that data can be regularly analysed by ministries and agencies. For instance, in Malaysia, the Ministry of Women, Family and Community Development has a record-keeping system and regularly collects and compiles data on VAWG in a spreadsheet format which is then printed in a booklet as a hard copy record.

Data collection limitations and challenges often exist because of problems with the registration forms or data entry forms at the point of entry. This shows the importance of improving data collection at the entry point. Table 6 identifies several VAWG administrative data collection limitations and challenges that often exist. It also summarizes possible solutions to those challenges.
### Table 6. Limitations/challenges and solutions for violence against women and girls incident registration/record-keeping systems

<table>
<thead>
<tr>
<th>Limitations/challenges</th>
<th>Possible solutions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Limited and inconsistent definitions of VAWG and disaggregation by type of VAWG across sectors, ministries and agencies</strong> hinder compilation across sectors (health, social welfare, child protection, shelters, helplines, police, prosecutors, courts and women’s unions)</td>
<td><strong>Use common definitions of VAWG and similar ways of disaggregating types of VAWG across sectors</strong> in keeping with international and/or national definitions of VAWG and/or national criminal offenses (especially for the police and justice system). Some countries may choose to establish a <strong>technical working group or committee</strong> composed of representatives from VAWG service providers (health, social welfare, child protection, shelters, helplines, police, prosecutors, courts, and/or women’s unions) to assist in clarifying common definitions of VAWG and disaggregation of types of VAWG.</td>
</tr>
</tbody>
</table>
| **Insufficient disaggregation by type of VAWG into overly general categories – physical, sexual, psychological and economic violence** | **Allow for greater disaggregation of each of the different types of:**
|                                                                                       | • Physical violence (physical violence resulting in disfigurement or disability, physical violence with injuries, physical violence without injuries, physical violence with a weapon or hard object)  
|                                                                                       | • Sexual violence (sexual assault, rape, sexual harassment)  
|                                                                                       | • Psychological violence (controlling behaviours, threats of physical harm, belittling or humiliation)  
|                                                                                       | • Economic violence (denial of funds, refusal to contribute financially, denial of food and basic needs, controlling access to health care, employment)  
|                                                                                       | Collection of data on other forms of violence can also be considered for disaggregation:
|                                                                                       | • Femicide  
|                                                                                       | • Trafficking  
|                                                                                       | • Sexual exploitation  
|                                                                                       | • Child and early marriage  
|                                                                                       | • Acid violence  
|                                                                                       | • Sexual harassment  |
| **Limited and meaningless disaggregation by age for women and girls who experienced violence** (0–17 years, 10–19 years, 15–59 years) and **overlapping disaggregation** (0–18 years and 18–25 years where women aged 18 years may be in either or both groups) | **Data should be collected and recorded based on the actual age in years of the victims, to enable disaggregation by age group. If this is not an option it is best to disaggregate girls (0–17 years) from women (18 years and older). Further disaggregation can follow logical increments (0–4 years, 5–9 years, 10–14 years, 15–17 years) and 10-year increments for women (18–24 years, 25–29 years, 30–39 years, 40–49 years, 50–59 years, 60+ years).** |

<table>
<thead>
<tr>
<th>Inconsistencies and time delays in recording and registering VAWG cases.</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is important that registration or record-keeping systems are <strong>regularly used</strong> to record all incidents of VAWG identified and reported to agencies and service providers. Data should be recorded and input into the registration or record-keeping system <strong>at the time it is reported, without delay.</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Incomplete data (incomplete forms, missing data)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear instructions should be provided for all forms on how to complete all categories pertaining the person who experienced or perpetrated the violence, case and incident information, and services provided. There should be a category for <strong>unknown information</strong> on each category so that no measure or category is left blank on the forms.</td>
</tr>
<tr>
<td>Staff should be <strong>trained</strong> and <strong>instructed</strong> to document all incidents of VAWG and to complete VAWG registration or record-keeping forms.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lack of training for staff on paper-based or computer-based data management systems and ethical and confidentiality principles of VAWG data collection. Attrition of trained staff can be a challenge in some ministries or agencies (police officers are frequently rotated)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Proper training</strong> for staff includes the many facets of the impact of violence on women and girls, families and society. Training should cover taking reports from women and girls, completing registration or reporting forms, and respecting ethics, confidentiality and safety principles.</td>
</tr>
<tr>
<td>Staff should be <strong>trained to question sensitively and collect relevant information from VAWG survivors,</strong> respecting essential principles of confidentiality and ethics to ensure staff and survivors’ safety, and prevent retraumatizing the survivor with insensitive questioning.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Transitions to computer-based data management and/or case management systems are often slow and with challenges, including infrastructure (electricity and internet connectivity), equipment (computers/tablets and internet), and human capacities (inconsistencies among staff and supervisors to transition to and use the computer-based system)</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is a need for <strong>infrastructure</strong> (electricity and internet connection), <strong>equipment</strong> (computers/tablets), and <strong>human capacity</strong> (staff and supervisors trained and required to use the computer-based system) to support the transition from a paper-based to a computer-based system at the district, province and national levels.</td>
</tr>
<tr>
<td>Ministries and agencies need to ensure <strong>information technology support</strong> is readily available and accessible to staff and supervisors as they learn the new computer-based system so they can overcome technology and system problems.</td>
</tr>
</tbody>
</table>
5.6 Violence against women and girls administrative data flows

In most ASEAN Member States, government agencies collect VAWG administrative data and compile reports on a regular basis (daily, weekly, monthly and/or quarterly). The data flow from the point of registration or service provision to the national (ministerial) level (see Diagram 5). It is usually at the national level that VAWG data are compiled, analysed and reported each quarter or each year.

CSO and NGO service providers and private health-care facilities providing services to VAWG survivors also register cases and collect relevant data. In most countries, administrative data collected by CSOs and NGOs are collected and stored independently of the Government. The data are not typically shared with the Government except in summary form, in order to ensure confidentiality. It is important that summative administrative data collected by CSO and NGO service providers and private health-care facilities are shared with national VAWG working groups or committees and national commissions on VAWG because it reveals points of entry and services provided to VAWG survivors, as well as the number of identified and reported incidents of VAWG.

VAWG survivors have multiple needs, including access to health care, psycho-social support, legal aid, protection and justice. Each of these sectors, agencies and organizations should collect data on VAWG, including information about VAWG survivors and perpetrators and details related to the incident. In most cases, data on VAWG are fragmented across sectors, agencies and organizations, and data do not flow across providers of health care, psycho-social support, legal aid, protection and justice. If information and data are shared, it is most likely only to facilitate internal case management.

In Cambodia, there is a lack of capacity for a computer-based data management system, and confidentiality remains a challenge when it comes to sharing information about VAWG cases and survivors. Cambodia recognizes that ensuring VAWG survivors’ confidentiality increases survivors’ willingness and ability to seek help and services. Researchers mapped the actual pathway through service providers and justice agencies in Cambodia for women and girls who experienced domestic violence (Diagram 6) and women and girls who experienced rape or sexual violence (Diagram 7). Diagram 6 and 7 are not meant to be used as models for referral pathways. The diagrams illustrate where administrative data on incidents or cases of domestic violence, rape or sexual violence may be collected and how complex data flows are across service providers and justice agencies. Using this mapping of the actual journey of VAWG survivors, Cambodia is seeking to use the evidence to improve the pathway to better respond to the needs of women and girls. In the case of Cambodia, administrative data have proven important to document the types of services provided and referred to. Administrative data on VAWG helped understand the demand for services and identify bottlenecks in services use as well as estimate costs for service provision.
Diagram 6. The journey after domestic violence in Cambodia

1. Survivor seeks help from closest resource
   - Nearby family or neighbours
   - Village Chief
   - Commune Chief or Council
   - District

2. Village Chief seeks immediate help
   - Mediation is common intervention

3. Mediation is common in cases of violence with injuries
   - Police intervention - mediation or referral to court

4. Urgent health care treatment for injuries
   - Court is most commonly for divorce (not criminal charges for domestic violence)
   - Other Services

5. Violence with injuries can be referred for other interventions
   - Most common intervention is mediation. Mediation is within the law for ‘petty crimes and misdemeanors’
   - Repeated mediation is common and referrals to other services are not yet systemic in all locations

6. Other Services
   - Safe shelter
   - Psycho-social support
   - Legal services
   - Material aid
   - Other health care

Source: UN Women, Cost of Essential Services for Women Subjected to Intimate Partner and Sexual Violence in Cambodia (Phnom Penh, 2017).

Diagram 7. The journey after rape or sexual violence in Cambodia

1. Survivor seeks help from closest resource
   - Local authorities refer to Police
   - Rape or sexual violence is interpreted as criminal

2. Police intervention
   - A financial settlement is commonly negotiated by police or other authority. If this is the case, the court action is commonly dropped

3. Referral for forensic exam
4. Referral to Prosecutor Court

5. Other Services
   - Safe shelter
   - Psycho-social support
   - Legal services
   - Material aid
   - Other health care

Source: UN Women, Cost of Essential Services for Women Subjected to Intimate Partner and Sexual Violence in Cambodia (Phnom Penh, 2017).

Other essential services based on availability and referral knowledge of service providers
- If an NGO or multi-sectoral network is operating, referral to other essential services is more common
In many ASEAN Member States, ministries and agencies face challenges with administrative data flows, some of which are explained below.

- **Delays in the flow of data from subdistrict > district > provincial > up to the national level.** Delays in data flow can be a challenge, particularly from rural and remote areas of countries or in countries with conflict zones. In some countries, data do not always flow up through each of these levels, as some districts are not required to submit data to provincial levels of government, for instance, in Indonesia.

- **Inconsistencies in use of paper-based and computer-based systems at each level in many ministries and agencies.** At some levels, registration or record-keeping systems are paper-based and handwritten (for example, registry books, police station diaries and case files), where data compilation is done by hand as tallies. These practices are resource intensive and have a high risk of error in data compilation and can result in significant delays in reporting. In some ministries and agencies, compiled data from the subdistrict, district and provincial levels are put into a computer-based system only at the national level, limiting the type of data analysis that can be conducted to the summation of frequencies. Analyses of relationships between variables cannot be carried out (see Box 15).

- **Data are fragmented in some ministries and agencies.** For instance, in some police agencies, VAWG data are not shared between police criminal investigation divisions and police gender units. VAWG cases of severe gravity are handled by criminal investigation divisions and VAWG cases of less gravity are handled by police gender units, but the two units do not always share or compile data on all VAWG cases, so VAWG data are fragmented in the two different police units.

- **There are few personnel with expertise in data management and analysis skills in ministries and agencies, particularly in the area of VAWG.** Ministries and agencies need personnel with expertise in data management and analysis at each level (district, provincial and national), but particularly at the national level where data are compiled and analysed on a quarterly and/or annual basis and reports are generated. The lack of expertise can contribute to delays, particularly when personnel have limited time for data management and compilation.

### Box 15. Example of violence against women and girls administrative data flows in ministries and agencies

**Subdistrict and district levels**
- Paper-based in many ministries and agencies
- Manual tallies (resource intensive and high risk of error)

**Province level**
- Often paper-based, but sometimes input into Excel (varies across ministries and agencies)
- Manual tallies with paper-based systems (resource intensive and high risk of error)
- Effort to put into computer-based management systems in some ministries and agencies

**National level**
- Often goes from a paper-based system to a computer-based data management system (varies across ministries and agencies)
- Some ministries and agencies have an online data management system or case management system which allows for easier data input at the point of registration, and data can be accessed and analysed in near real-time at the national level

- **Data validation is a major challenge in many ministries and agencies.** Ministries and agencies should have a formalized process of validating data, particularly when data are compiled and shared from the subdistrict, district, provincial and national levels.

#### 5.7 Violence against women and girls administrative data analyses and reporting

VAWG administrative data are under-analysed due to a lack of analytical and reporting know-how. Issues ministries and agencies face include the following:
- Lack of data analysis skills
- Lack of knowledge and understanding of VAWG theories and literature that should guide data analysis
- Lack of understanding of the use of VAWG data (the purposes of VAWG data used and who can use it)
- How best to present and report VAWG data, based on the target audience
When it comes to data analysis there are some important considerations, outlined below.

- **Analyse and report on VAWG administrative data as they are disaggregated into each of the different types of VAWG (physical, sexual, psychological and economic violence).** It is important to analyse each of the different types of VAWG, then to consider summing up by types of violence to generate a total number of violence cases reported or registered by types, all cases of physical violence for instance. Because women often experience more than one type of violence, the number of types of VAWG should not be limited to just physical, sexual, psychological and economic violence, but can be compiled, for instance, in cases of physical and sexual violence experienced at the same time, in which case, numbers will not always reach the total wanted (see Table 7). Ministries and agencies must ensure all forms of violence a woman experiences are registered and recorded at the points of entry.

- **Collect and analyse all forms of VAWG and for specific target groups.** Other forms of VAWG, such as child and early marriages, trafficking, sexual exploitation, acid violence and femicide, can be collected, compiled, analysed and reported separately to provide data and information on these specific issues. Since some women are more vulnerable to violence, data should be collected for specific target groups, for instance migrant women, women with disabilities, women living with and affected by HIV and AIDS, girls, older women, ethnic minority and/or indigenous women, women in conflict with the law, women living in disaster or conflict affected areas, refugee and displaced women, documented and undocumented migrant women, stateless women, women’s human rights defenders and gender equality advocates, and women who are trafficked for forced labour or sexual exploitation, among others.

- **Analyse and report frequencies and percentages (proportions) based on the totals.** As shown in Table 7, it is best if both frequencies and percentage (proportions) are calculated and reported. When only frequencies are reported (without the percentages), it is difficult for the reader to determine how serious the problem is in comparison to the total number of cases reported and registered. Percentages (proportions) are very important to report.

### Table 7. Example of analyses and disaggregation of violence against women and girls administrative data for a ministry or agency

<table>
<thead>
<tr>
<th>Type of Violence</th>
<th>Registered VAWG cases N=300</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical violence</td>
<td>Number</td>
</tr>
<tr>
<td>Physical violence resulting in disfigurement or disability</td>
<td>5</td>
</tr>
<tr>
<td>Physical violence with injuries</td>
<td>80</td>
</tr>
<tr>
<td>Physical violence without injuries</td>
<td>15</td>
</tr>
<tr>
<td>Physical violence with a weapon or hard object</td>
<td>35</td>
</tr>
<tr>
<td>Sexual violence</td>
<td>60</td>
</tr>
<tr>
<td>Sexual assault</td>
<td>30</td>
</tr>
<tr>
<td>Rape</td>
<td>25</td>
</tr>
<tr>
<td>Sexual harassment</td>
<td>5</td>
</tr>
<tr>
<td>Psychological violence</td>
<td>150</td>
</tr>
<tr>
<td>Controlling behaviours</td>
<td>80</td>
</tr>
<tr>
<td>Threats of physical harm</td>
<td>60</td>
</tr>
<tr>
<td>Belittling or humiliation</td>
<td>90</td>
</tr>
<tr>
<td>Economic violence</td>
<td>30</td>
</tr>
</tbody>
</table>

**Note:** Some women experience more than one type of violence, and several kinds of violence may be included in a single registered VAWG case, thus the percentage may not add up to 100. This table is not intended to be used as a model for disaggregating forms of violence, as it would vary from one country to another, based on national laws and national data systems.
Because VAWG survivors often experience more than one type of violence, when summing up the number by type of violence, the numbers will not always add up to the total number of registered VAWG cases, and percentages will not always total 100 per cent. When interpreting Table 7, it is important to bear in mind that, in this table, the percentage of VAWG survivors who experienced physical, sexual, psychological or economic violence are calculated based on the total number of registered VAWG cases (N=300). Whereas, the percentage of VAWG survivors who experienced one or more types of physical violence is calculated based on the total number of VAWG survivors who experienced physical violence (n=100). Similarly, the percentage of VAWG survivors who experienced one or more of the different types of psychological violence is calculated based on the total number of VAWG survivors who experienced psychological violence (n=60).

- Analyse and report on data for as many categories as possible based on data collected, do not limit analysis to just types of violence, age and/or district/province. All relevant variables should be analysed, including: victim’s sex and age; types of violence experienced; types of violence-related injuries; use of weapons; types of weapon; single or recurring incidents of violence; location where violent incident occurred; perpetrator’s sex and age; victim-perpetrator relationship; service provided to women and girls who have experienced violence; and agencies to which they were referred.

- Analyse and report on the relationship between relevant variables as it relates to VAWG. To more fully understand VAWG it is important to analyse the relationship between variables. This requires that data analysts understand theories and concepts related to VAWG, so they know how to examine the data, and which variables and relationships to analyse.

- Analyse and report on VAWG administrative data to track and present trends and patterns in data from year-to-year. This requires longitudinal VAWG administrative data and presentation of yearly data side-by-side, along with calculation of percentage changes from year-to-year.

- Administrative data must not be mistaken for prevalence data. Administrative data are not prevalence data. Prevalence data reflect the percentage of women in a population who experienced VAWG whereas administrative data represent only the identified, reported and registered VAWG cases or incidents of violence. Only women and girls who come forward to seek help from formal service providers (including shelters, police, health, legal or psychosocial services) are included in administrative data. Increases and decreases in VAWG administrative data may reflect many different factors. For instance, counter-intuitively, an increase in reporting to service providers can indicate women and girls are more aware of services and how to access them, changes in social norms towards empowering women and girls to report incidents of violence, or that the quality or accessibility of services has increased. Increased reporting to formal services does not provide any information on the prevalence of VAWG.

5.8 Use of violence against women and girls administrative data

In many ASEAN Member States, Governments, ministries and agencies use VAWG administrative data to varying degrees, and subdistrict, district and provincial levels face challenges understanding how VAWG administrative data are used at the national level. At the national level, there is often limited understanding of how to use VAWG administrative data. In addition, at the provincial and national levels, VAWG administrative data are rarely used for decision-making, planning or programming.

Box 16 highlights findings from research in Thailand and Viet Nam which focused on understanding the criminal justice system response to sexual violence. This study used administrative data to understand attrition of sexual violence cases. Both Thailand and Viet Nam used the findings of the study to improve the responses of the criminal justice systems to sexual violence.
Administrative data are meant to track which services women seek, how often, and for which purposes. It provides insight into the quality of those services, the referrals made, and the outcomes of services. The overarching questions that administrative data help to answer are “did the services help women be safer, heal, recover, access justice? Were women satisfied with the services?” Administrative data can provide information about points of entry and access to essential services for VAWG survivors. When routinely collected, administrative data can also provide important patterns and trends in reporting, responses, and access to essential services. This enables Governments and service providers to monitor the demand for essential services and how different sectors are responding to the needs for services.

Administrative data can also reveal the level of services available within a community and gaps in essential services.

Governments, ministries and agencies can use VAWG administrative data for planning, programme development, policymaking, costing studies, budget allocation and gender-responsive budgeting (GRB). Better administrative data collection and analysis can be used to make service provision more effective. To improve the use of VAWG administrative data, agencies and organizations must first improve practices related to sharing VAWG administrative data.

Box 16. Using administrative data to understand attrition of sexual violence cases in Thailand and Viet Nam

The 2017 publication entitled, The Trial of Rape: Understanding the criminal justice system response to sexual violence in Thailand and Viet Nam, analysed how criminal justice agencies in Thailand and Viet Nam respond to reported cases of rape and sexual assault, and identified institutional factors related to case outcomes. It aimed to understand why attrition of sexual violence cases occurs and to identify effective ways to strengthen the administration of justice in rape and sexual assault cases. The study was conducted between 2013 and 2014 and used quantitative data from administrative data related to VAWG, including police and court files along with qualitative data (interviews of justice and police actors and VAWG survivors) to identify factors which can lead to or prevent attrition of sexual violence cases.

The findings of this study have important implications related to how justice systems handle sexual crimes and approach victims of sexual violence. It found that:

- There is wide acceptance of myths about women and girls, and how sexual assaults and rape happen, which interfere in women’s and girls’ ability to seek justice and have their cases taken seriously.
- Legal and institutional barriers, in turn, can inhibit reporting of sexual violence and reduce the likelihood that a woman will persist in seeking redress through the criminal justice system.
- In both countries, attrition occurred at all stages of the criminal justice process - reporting/initial contact stage; investigation stage; pre-trial stage; and trial stage.

Regarding VAWG data, the study found that the police and justice agencies in Thailand and Viet Nam had inadequate and incomplete administrative data on sexual violence cases, limited disaggregated data on demographic characteristics of people who experience or perpetrate sexual violence and poor record-keeping related to outcomes of police investigations and prosecution. At the time when the study was conducted, neither country had victimization survey data or prevalence data on sexual violence, and both had little information about the costs and impacts of sexual violence. The absence of consistent and complete administrative data on sexual violence against women and girls in police and justice agencies were contributing factors to attrition in sexual violence cases.

The study also found little monitoring and evaluation of the handling and processing of sexual violence cases. Moreover, the study found that more data and evidence are needed to inform the development of strategies, policies and practices to improve the way criminal justice systems treat women and girls who have experienced sexual violence and handle and process sexual violence cases.

In response to the study, both Thailand and Viet Nam have made changes to improve the handling of sexual violence cases. Viet Nam revised the Penal Code which previously had a narrow definition of rape which excluded many forms of sexual assault and Thailand created new interdisciplinary teams and offered targeted training to police, prosecutors and court personnel to provide better services for women and girls who have experienced sexual violence.

5.9 Violence against women and girls data confidentiality and security and data sharing

Keeping individual data safe and confidential is one of the cornerstones of ethical and quality service delivery. Women and girls who have experienced violence may be in danger of further violence if information is released that shows they sought help. For instance, people who have perpetrated violence may retaliate against women and girls for speaking out, and use threats and intimidation to coerce them into silence. Women and girls who experience violence may feel they must keep the violence they experience a secret. Another danger of broken confidentiality is that the community surrounding women and girls who experienced violence may shame and stigmatize them and treat them as “damaged goods”. This outcome may increase the risk of further or repeated violence and abuse. Moreover, safety and confidentiality of VAWG data are important to keep service providers safe, as they can also face retaliation, threats and violence for supporting survivors of VAWG.

Ultimately, broken confidentiality is broken trust. Women and girls need to trust service providers before they confide in them about experiences with violence that they may regard as embarrassing, painful, or even shameful. When trust is low and women and girls doubt that their privacy and confidentiality will be respected, they may choose to keep silent and remain in violent and abusive relationships or situations. When VAWG survivors do eventually reach out and ask for help, but are asked why they did not seek help or report the abuse sooner, many report feeling a sense of shame and fear that holds them back from reporting the abuse and violence.

Data security focuses on protecting personal data and keeping personal or sensitive information safe. Data that contain personal information should be treated with higher levels of security than data that do not (such as summary statistics). Data security is extremely important given the sensitive nature of VAWG and the risks involved for women and girls if their privacy is not maintained. It is crucial to ensure the security of data and prevent unauthorized access, disclosure, changes to and/or destruction of data. Security practices should cover information stored in paper-based registries, case files and patient or client records, as well as computer- and web-based data management and case management systems. Box 17 provides a checklist of requirements for ensuring physical security, network security and security of computer systems and files.

### Box 17. Data Security

**Physical data security requires:**

- Control access to rooms and buildings where files, data, and computers are located or stored
- Tracking logs that document access to and/or removal of hardcopy and digital data
- Transport sensitive data only under exceptional circumstances, even for repair purposes, because giving a failed hard drive containing sensitive data to an information technology expert or computer repair service can result in a breach of security

**Network security requires:**

- Not storing confidential data, including data containing personal information on servers or computers connected to an external network, particularly servers that host internet services
- Firewall protection and security-related upgrades and patches to operate systems to avoid viruses and malicious hacks

**Security of computer systems and files requires:**

- Lock computer systems with a password and install a firewall system
- Protect servers by power surge protection systems
- Implement password protection of, and controlled access to data files (for example, no access, read only, read and write, or administrator-only permission)
- Control access to restricted materials with encryption
- Impose non-disclosure agreements for managers or users of confidential data
- Prohibit sending personal or confidential data via email or through File Transfer Protocol (FTP), but rather transmit as encrypted data
- Destroy data in a consistent manner when needed

**Source:** Van den Eynden and others, Managing and Sharing Data, UK Data Archive (University of Essex, United Kingdom, 2011), p. 19.

In some countries, data security is based on national legislation which dictates that personal data should only be accessible to authorized persons, and that strategies for data security and confidentiality of personal information are informed by ethical and legal obligations of service providers, police and justice agencies. Legislation may also require that clients or patients receive information on the following: how confidential data or data containing personal information are stored, preserved and used; how confidentiality will be maintained; and on data sharing practices.1
Under certain circumstances, sensitive and confidential data can be safeguarded by regulating the use or restricting access to such data, while at the same time enabling data sharing across service providers to ensure effective case management and service delivery. Computer- and web-based data management and case management systems are restricted by access regulations and user sign-in portals. Users of the data and case management systems should also be bound to system access regulations and required to sign a non-disclosure and confidentiality agreement, and conditions of use.

Case management can be challenging when it comes to facilitating data sharing, transfer and storage across sectors, agencies and service providers. Web-based case management systems are relatively undeveloped and underutilized in ASEAN Member States and require a significant amount of resources and technical expertise to set up and maintain. Consequently, many ministries, agencies and service providers are not comfortable with computer- and web-based data management and case management systems, and may still rely on email, social network applications (such as WhatsApp), and online file sharing services to transfer information. However, these are not recommended for confidential data because users have no control over where the data are stored.

Given the issues of privacy and confidentiality related to VAWG administrative data, it is important that ministries, agencies and organizations have well developed standard operating procedures and protocols for administrative data management and data sharing. These should include specific practices to ensure that administrative data provide for the confidentiality and protection of the identity and information of women who have experienced violence, as well as perpetrator identity information. VAWG data should not be tied to national identification numbers. Computer data management passwords should be kept confidential and should not be shared. VAWG survivors should be informed about their right to confidentiality and the service provider should explain the systems they put in place to ensure data security and confidentiality (see Annex C for Consent to Release Information to Other Service Providers Form that was developed for use by service providers in Cambodia). Box 18 provides useful questions and answers as to why privacy and confidentiality matter for VAWG survivors.

Box 18. Why privacy and confidentiality matter

Q: Why are privacy and confidentiality important?
A: Privacy is critical to the safety of women and girls who have experienced violence because the exposure of sensitive information can put them in danger of harm and even death. Many countries have established national laws and service providers have clear policies that safeguard privacy and confidentiality, and prohibit disclosure of private information. In the age of advanced technology, increased data collection and data sharing, it has become more difficult to ensure the privacy and confidentiality of personal information.

Q: What is the privacy impact for VAWG survivors?
A: Any collection, sharing and/or publication of data on women who have experienced violence should include a discussion on the potential for victim data collection, data sharing and publication of data to impact victim’s privacy and safety. Experts on privacy for women and girls who experience violence should be included in these discussions to ensure the experiences of VAWG survivors are at the centre of these conversations. Most VAWG survivors need to ensure their information is kept private and confidential for safety reasons. If they know their privacy will not be maintained, they may decide not to request help or seek protection against the violence in their lives.

Q: Should there be notice or consent for the release of information?
A: At a minimum, VAWG survivors should be made aware of the data collected about them and who will have access to it. The lives of VAWG survivors are complex and they know best what might compromise their safety. Good practices are to allow the individual to decide what information can be shared, to whom and when.

Q: How can individual privacy and confidentiality be protected?
A: Agencies and organizations must have guidelines that define how to collect and share data and information that may identify VAWG survivors, and how to ensure individual privacy and confidentiality. These guidelines should include transparency to VAWG survivors as to what information is being collected, the purpose for collecting information and uses of the information. Good practices are to limit data that are collected and the uses of the data, while ensuring data quality and integrity. It is crucial to establish data security safeguards and protocols as well as clearly defined guidelines related to information data sharing that ensures privacy.
5.10 Quality assurance of violence against women and girls data

Another challenge facing many ministries, agencies and service providers relates to the quality of VAWG data. Quality assurance of VAWG data requires regular monitoring for accuracy and reliability. Many countries lack quality assurance processes and mechanisms that can verify and validate administrative data related to VAWG. In addition, registration and record-keeping systems and data management systems generally do not meet the minimum acceptable standards on data collection, including standards related to accuracy, reliability and precision.

Inter-agency oversight committees or working groups can play an important role in monitoring VAWG data for accuracy and reliability. VAWG data gathered with robust quality assurance processes and mechanisms in place can prove invaluable in providing evidence-based good practices and lessons learned.

5.11 Strengthening administrative data on violence against women and girls

Despite its advantages, VAWG administrative data have certain limitations and challenges as described below.

- Many ministries and agencies produce limited administrative data on VAWG and the data can be unreliable. VAWG data are often unevenly or irregularly collected within and across sectors, ministries and agencies. As a result, the quality and reliability of the data vary significantly. Existing data may lack demographic data on victims and perpetrators and/or on victim-perpetrator relationships, making it difficult to identify certain types of violence (IPV, domestic violence, acquaintance violence, stranger violence). Most ministries and agencies do not have data collection systems that go beyond the internal administrative needs of their own organization, making it difficult to compare data across ministries, agencies and organizations.

- There are often inconsistencies in administrative data collection. There are inconsistencies in how administrative data are registered, recorded and compiled at subdistrict, district, province and national levels. This leads to inconsistencies in the accuracy, completeness and coverage of administrative data. In many countries, data may be missing or incomplete, inconsistent and/or lacking quality assurance processes. This is because data collection, and data collection on VAWG, are not the primary responsibility of many ministries, agencies and organizations. These problems result from inadequate capacities, training and resources for those who collect and analyse administrative data related to VAWG.

- There are some concerns about “double counting” if VAWG survivors or incidents of violence are registered by more than one agency or organization. “Double counting” is not always an issue with administrative data. Administrative data serve different purposes than prevalence data. VAWG administrative data reflects the number of incidents of VAWG reported and responded to and the number of VAWG survivors who accessed services at points of entry and do not reflect the magnitude of the problem in the general population. Administrative data track the number of times women accessed services and the different services provided. One woman accessing the same service multiple times can demonstrate multiple incidents of violence and that survivors often have a variety of ongoing needs requiring different services, sometimes multiple times.

- Administrative data collection practices and data storage often do not comply with requirements on data protection and confidentiality, including special provisions for the safety of victims of violence.
While there are often concerns expressed about VAWG, this is not always an issue with administrative data because administrative data are not prevalence data. Administrative data reflect the number of VAWG incidents reported and how often services are provided. Administrative data track which services women seek, how often and for which purposes. As a result of VAWG, multiple visits are to be expected and do not constitute “double counting”. It is expected that agency reports will include data on women and girls who have accessed services at multiple locations and multiple times. VAWG administrative data help service providers, justice agencies, policymakers and decision-makers understand:

• Number of VAWG incidents reported and responded to across agencies and organizations
• Number of VAWG survivors who accessed services and points of entry
• Which agencies, organizations and services VAWG survivors are accessing
• Which agencies and organizations are responding to VAWG survivors’ needs

• The quality of services provided
• Referrals made between services

Service providers, police and justice agencies generate administrative data in their reports on the number of VAWG incidents they respond to, the number of VAWG survivors supported and the services provided. The priority is to ensure that administrative data are consistently collected in VAWG cases across service providers, police and justice agencies.

Regarding case management systems to track services provided to specific survivors, agencies often develop unique identifiers to confidentially track cases as they move through various systems of support and through the justice system. Case management tracking systems follow single cases to provide a continuum of care for specific cases. These data collection systems are different than State- or national- administrative data collection systems which report on aggregate numbers of cases reported and assisted across response sectors.
5.12 Recommendations to strengthen administrative data on violence against women and girls

Despite the challenges and limitations identified above, administrative data may be the only or best available source of data on VAWG in some settings, particularly in countries without VAWG prevalence studies. Strengthening administrative data on VAWG is an important investment of resources because such data can be used to monitor and evaluate the impact and effectiveness of policies and programmes to prevent and respond to VAWG. Understanding whether services are meeting the needs of survivors is a core question to answer.

Some of these recommendations are adapted from Administrative data collection on violence against women: Good practices developed by the European Institute for Gender Equality and informed by UNICEF Review and Assessment of Sources of Administrative Data on Violence against Children.

To make administrative data more useful, policymakers, ministries, agencies and organizations can address the following gaps and challenges in the collection and analysis of VAWG administrative data:

• Develop a common understanding of the definitions, terminology and types of VAWG across sectors and organizations to improve comparability of VAWG administrative data.

• Collect and analyse data on all forms of VAWG, beyond domestic violence and sexual violence such as child and early marriages, trafficking, sexual exploitation, acid violence and femicide and for marginalized women such as migrant women or women with disabilities, among others.

• Develop understanding of the context in which administrative data are collected on VAWG to improve the quality of collected data and comparability of VAWG administrative data across ministries and agencies.

• Ensure data are disaggregated, as a minimum requirement, by sex and age of the victims and perpetrators, types of violence experienced, victim-perpetrator relationship, geographic location of the incident and other relevant factors.

• Develop protocols to guide administrative data collection, compilation and sharing.

• Establish some degree of agreement across sectors, agencies and organization as to the types of data, data disaggregation and information related to VAWG that should be collected to enable compilation and comparability among similar institutions (across shelters or across police stations), but do not mandate the use of the same or standardized forms for data collection across all sectors, agencies and organizations.

• Encourage electronic data collection and processing of administrative data which requires a computer data management and/or case management system.

• Raise awareness about survivor-centered, sensitive and supportive services to improve reporting and registration of VAWG across sectors, agencies, and organizations.

• Ensure that strengthening VAWG administrative data collection is part of all national action plans to eliminate VAWG accompanied by dedicated financial resources.

• Ensure that sufficient financial and human resources are allocated to support administrative data collection, compilation and analysis, as well as wider dissemination.

• Ensure that VAWG administrative data collection is suitable for generating statistics and reporting on the VAWG-related SDGs indicators as well as to assess the impact of policies and programmes to prevent and respond to VAWG, particularly those related to the improvement in the availability, accessibility and quality of essential services for survivors.
• Ensure that VAWG administrative data collection and data storage practices comply with requirements on data protection and confidentiality. Ensure ministries and agencies involved in data collection have such data protection and confidentiality policies and there is national legislation to ensure citizen rights and data protection.

• Provide specific training to all professionals dealing with VAWG data on gender issues and on basic rules for VAWG administrative data collection, sharing, compilation, analysis and dissemination, including for the respect of principles of ethics, safety and confidentiality.

• Promote a clear political and institutional commitment from regional, national and local authorities to the collection of administrative data on VAWG.

• Promote a systematic, coordinated and multisectoral approach to VAWG data collection involving those responsible for collecting administrative data in the justice, police, health, social and other sectors, CSOs and NGOs.

• Designate or establish one or more official bodies responsible for compiling, analysing and disseminating VAWG administrative data from across ministries and agencies and for the coordination, implementation, monitoring and evaluation of policies and initiatives to eliminate VAWG to guarantee sustainability and harmonized collection of VAWG data. CSOs and NGOs should be included and consulted in national data collection systems, as they often provide services to VAWG survivors.

3. Van den Eynden and others, Managing and Sharing Data. UK Data Archive (University of Essex, United Kingdom, 2011).
4. Ibid.
5. Ibid.
8. European Institute for Gender Equality, Administrative data collection on violence against women: Good practices (2016).
CHAPTER 6
VIOLENCE AGAINST WOMEN AND GIRLS
COSTING STUDIES
6.1 Types of costs related to violence against women and girls

VAWG has tremendous costs for societies, including costs that impact households, women and girls who have experienced violence, Governments, businesses and society at large. The costs of VAWG impact healthcare systems, social support and welfare systems, police organizations, legal and justice systems and economic and human development. The costs of VAWG can be understood in several ways, as listed in Table 8.

<table>
<thead>
<tr>
<th>Costs</th>
<th>Description</th>
</tr>
</thead>
</table>
| Direct, indirect and opportunity costs | **Direct costs** are costs associated with the provision of a range of facilities, resources and services to a survivor as a result of their experiences with violence. The costs include crisis care, legal services, health and medical services, shelter and income support.  
**Indirect costs** are costs affected by VAWG, although not directly, include costs of replacing lost or damaged household items, costs of reduced workforce participation and social and psychological burdens (pain, suffering and fear of individuals and their children).  
**Opportunity costs** represent the monetary value of lost opportunities (loss of employment, promotion opportunities and reduced quality of life). |
| Real and transfer costs            | **Real costs** use ‘real’ resources (capital and/or labour) and reduce the economy’s overall capacity to produce (or consume) good and services.  
**Transfer costs** involve payments for one economic agent to another, but do not use ‘real’ resources (such as if a person loses their job, production is lost, there is less income and taxes, and there is a transfer of costs from an individual to the Government). |
| Economic and non-economic costs    | **Economic costs** include the loss of goods and services that have a price in the market or that could be assigned an approximate price by an informed observer.  
**Non-economic costs** include the emotional cost to the victims and their family, as well as the long-term impacts on children and damage to social values. |
| Short-and long-run costs           | **Short-run costs** reflect those related to the short-term disruptions to a woman’s health, work, social order and family life as a result of the violence.  
**Long-run costs** reflect the cumulative long-term impacts on a woman’s health, well-being and productive capacity as a result of the violence. |
### Costs

<table>
<thead>
<tr>
<th>Costs</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>Social and economic multiplier effects</td>
<td><strong>Social multiplier effects</strong> are the impact of VAWG on interpersonal relations and quality of life, including the effects of children of witnessing violence, reduced quality of life, and reduced participation in democratic processes. <strong>Economic multiplier effects</strong> are the broader economic effects of VAWG which include increased absenteeism and decreased labour market participation, productivity, earnings, investments, savings and intergenerational productivity.</td>
</tr>
</tbody>
</table>

### 6.2 Violence against women and girls costing studies

VAWG costing is:

“the financial valuation of the added monetary and non-monetary resources and efforts that have to be invested for the implementation of a law or a policy to end VAWG;

or the consequent costs to an economy of not implementing the law or the policy. VAWG costing exercises also involve a technical and political process that aims to have an impact in public planning and budgeting processes, which can also contribute to the reduction of VAWG.”

The monetary costs of VAWG are determined by measuring and quantifying the various consequences for women who experienced violence, households, organizations, businesses and national economies to analyse the impact of VAWG across various sectors.

Enough resources must be available to implement laws, policies and action plans related to eliminating VAWG, including domestic violence laws and family protection acts, and provide essential services to respond to the diverse needs of VAWG survivors. Estimating the costs of implementing laws and policies and of proving services for VAWG survivors is necessary to inform budget planning. Adequate budgets will support the effective implementation of laws and policies to prevent and respond to VAWG as well as the provision good quality services with adequate geographic and population coverage.

### 6.3 Resources for violence against women and girls costing studies

UN Women developed a series of step-by-step manuals, guidelines and tools to estimate the costs of VAWG and resource requirements for responding to VAWG.

UN Women, *Manual for Costing a Multidisciplinary Package of Response Services for Women and Girls Subjected to Violence* (2013). The manual presents a methodology that focuses on costing the implementation of services and responses to address VAWG in a country or region for the purposes of public budgeting. The Gender-responsive budgeting (GRB) approach described in this manual allows for the mapping of both legal and policy obligations of a national government against budgetary allocations, as well as resources from other actors to cover VAWG-related services for survivors.

UN Women, *Handbook on Costing Gender quality* (2015). In 2015, UN Women developed a comprehensive step-by-step guide to costing gender equality priorities. The handbook provides concrete methodologies to estimate the financing gaps and requirements for gender responsive planning and budgeting to achieve gender equality commitments. It draws on experiences and lessons from UN Women’s global programme.

UN Women, *A Costing Tool for Action: Estimating Resource Requirements for Responding to Violence against Women in South-East Asia* (2016). This practical tool provides step-by-step guidance for estimating the resource requirements for a minimum package of essential services (MPES) for women and girls experiencing violence. It outlines the steps needed to calculate the unit costs to provide these resource requirements, to calculate the overall cost of providing a MPES, and to project future costs. The costing methods used can be applied to a wide range of services and are not limited to the services illustrated in this manual. This tool was developed to provide information to the Governments of Indonesia, Lao People’s Democratic Republic, and Timor-Leste on the resources required to ensure a comprehensive multisector response to meet the needs of women who have experienced violence, in line with national action plans or legislation on violence against women.


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UN Women, *A Costing Tool for Action: Estimating Resource Requirements for Responding to Violence against Women in South-East Asia* (2016). This practical tool provides step-by-step guidance for estimating the resource requirements for a minimum package of essential services (MPES) for women and girls experiencing violence. It outlines the steps needed to calculate the unit costs to provide these resource requirements, to calculate the overall cost of providing a MPES, and to project future costs. The costing methods used can be applied to a wide range of services and are not limited to the services illustrated in this manual. This tool was developed to provide information to the Governments of Indonesia, Lao People’s Democratic Republic, and Timor-Leste on the resources required to ensure a comprehensive multisector response to meet the needs of women who have experienced violence, in line with national action plans or legislation on violence against women.

There are several different methodologies that can be applied to understand the costs of VAWG. Some focus on the costs to individuals, households, communities, businesses, organizations and national economies, some estimate the costs of fully implementing VAWG laws and policies, and others focus on the cost of delivering a MPES to women and girls who have experienced violence. Each methodology has strengths and limitations, and there is no single ‘best’ methodology for VAWG costing studies. Some methodologies are more appropriate depending on whether the focus is on the costs of VAWG or the costs of ending VAWG. The choice of methodology should be guided by the research questions that a costing study sets out to answer.

The UN Women report on The Costs of Violence analysed VAWG costing studies from Asia and the Pacific. It highlighted three methodologies for costing: GRB, impact costing, and unit costing.

- **Gender-responsive budgeting (GRB)** – A method of analysing government budgets and the planning, execution and reporting (budget cycle) to establish the gendered impacts of budgetary decisions. Application of this method requires comprehensive knowledge of the national budgeting process and full knowledge of VAWG services that are available or planned in keeping with legislation and/or national action plans. This approach focuses on the entire budget, rather than unit costs of services, prevention interventions, and/or application of legal remedies. The methodology includes the following: an institutional policy and legal scan (environmental scan); review of previous research on VAWG in the country; mapping of the journey to access services for women and girls who have experienced violence; and a budget analysis that looks at prevention, provision of services and prosecution.

- **Impact costing methodology** – This is a comprehensive methodology that calculates the full socioeconomic impact of VAWG in monetary terms, including a multilayered costing based on the impact of violence on the lives of women and girls who experience it but also national economies.

- **Unit costing methodology** – This methodology aims to understand the total costs of providing a particular service or package of services to women

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### Table 9. Violence against women and girls costing studies conducted by country and year

<table>
<thead>
<tr>
<th>Country</th>
<th>Costing studies (year conducted)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>2012, forthcoming in 2018</td>
</tr>
<tr>
<td>Indonesia</td>
<td>2012</td>
</tr>
<tr>
<td>Lao People’s Democratic Republic</td>
<td>2016</td>
</tr>
<tr>
<td>Myanmar</td>
<td>Planned</td>
</tr>
<tr>
<td>Philippines</td>
<td>1999</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>2012</td>
</tr>
</tbody>
</table>

---

UN Women, *Estimating Resource Requirements for Responding to Violence against Women in South-East Asia: Synthesis of Findings and Lessons* (2016). This costing study provides a synthesis of research undertaken in Indonesia, Lao People’s Democratic Republic, and Timor-Leste on estimating resource requirements for a MPES for women and girls who have experienced violence.

UN Women, *The Costs of Violence: Understanding the costs of violence against women and girls and its response: selected findings and lessons learned from Asia and the Pacific* (2014). UN Women supported several studies in Asia and the Pacific to cost the impact of VAWG, and the resources required to address it. These included a socioeconomic impact study to estimate the costs of domestic violence in Viet Nam and a costing study that used a GRB approach to determine the costs of providing a multisectoral package of response services in Cambodia and Indonesia. As a result of these and other efforts, there is now a critical mass of information and specialized knowledge on VAWG costing techniques within the region. This report catalogues VAWG costing in Asia and the Pacific and highlights the findings, challenges and lessons learned from this research. The report helps reveal the far-reaching economic impact of VAWG, and identify the level of financial resources needed to realize the commitments Government have made. In this sense, costing can serve as a powerful tool to close the gap between policy and practice and ensure that laws to prevent and respond to VAWG are duly implemented.

The three above-mentioned tools have been used in Cambodia, Indonesia, Lao People’s Democratic Republic and Viet Nam to demonstrate that implementing a MPES can be affordable and the benefits of preventing VAWG and stopping VAWG early are magnified for women, their families and societies. Table 9 lists ASEAN Member States that have conducted VAWG costing studies by year. See Annex D for a summary of the findings of the VAWG costing studies conducted in Cambodia, Indonesia, Lao People’s Democratic Republic, the Philippines and Viet Nam.

### 6.4 Violence against women and girls costing methodologies

There are several different methodologies that can be applied to understand the costs of VAWG. Some focus on the costs to individuals, households, communities, businesses, organizations and national economies, some...
and girls who experience violence based upon the costs of individual goods and services, and rates of use. The unit costing methodology can be used to understand resource requirements for existing services and to estimate the resources needed for a MPES for women who experience violence and their children (see Table 10). MPES includes a range of multi-sectoral services such as hotlines (24 hours), one-stop crisis centres, shelters, counselling services, referral networks, capacity-building of stakeholders and training of service providers as an example of one essential services packages (see Box 20).

Deriving from the unit costing methodology to define the costs of a MPES, the resource needs model guided the report on resource requirements for a MPES in the Lao People’s Democratic Republic and Timor Leste.

- **Resource needs model** – A model used to measure and predict resource requirements for an intervention that aims to achieve coverage for women and girls who experience violence in present and future time periods, and resource implications of expanding the interventions and coverage. This model builds upon an activity-based costing approach and measures and predicts resource requirements for different services which are dependent upon the unit costs of providing a single service and the demand for that service. Projections of future resource requirements are based on assumptions of macroeconomic indicators, such as inflation rate and expansion of services rate based on increased demands and coverage.⁸

Although the three costing methodologies are different in terms of their focus, approach and inputs, they are complementary and can be used to inform the others when possible. Table 11 offers a breakdown for three of the costing methodologies: GRB; impact costing; and unit costing.

Depending on the availability and the quality of administrative and prevalence data to conduct a costing study, uncertainty or imperfections regarding VAWG data can remain, which can make it more difficult to estimate the cost of services. Regardless of data uncertainty and imperfections, conducting a VAWG costing study enables Governments to identify areas where VAWG data are missing and/or incomplete and need to be strengthened. The process also builds greater understanding and brings key stakeholders and relevant partners from across sectors into the conversation about the costs of VAWG and budgeting for efforts to eliminate VAWG, provide essential services and collect data.

### Table 10. Steps and objectives of violence against women and girls costing studies to estimate a minimum package of essential services

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1 - Develop and outline key elements of the MPES</td>
<td>Identify and define the MPES - Map what is currently available against obligations and commitments under the national legal framework, and international good practices in service delivery</td>
</tr>
<tr>
<td>Step 2 - Understand resource requirements for existing services</td>
<td>Data collection - Conduct a survey of existing service providers in different sectors, determine unit costs of existing service provision, assess referrals</td>
</tr>
<tr>
<td>Step 3 - Estimate resource costs for the MPES</td>
<td>Identify an appropriate methodology to estimate the aggregate costs of the MPES</td>
</tr>
</tbody>
</table>

**BOX 20. Essential Services Package**

UN Women, UNFPA, WHO and UNODC, through the United Nations Joint Global Programme on Essential Services for Women and Girls Subject to Violence have identified the essential services to be provided by the health, social services, police and justice sectors as well as guidelines for the coordination of essential services and the governance of coordination processes and mechanisms. Service delivery guidelines for the core elements of each essential service have been identified to ensure the delivery of high-quality services, particularly for low- and middle-income countries, for women and girls experiencing violence.

The purpose of the Essential Services Package is to support countries as they work to design, implement and review services for all women and girls who are victims and survivors of violence, in a broad range of settings and situations. The Package is a practical tool for countries setting out a clear roadmap on how to ensure the provision and coordination of quality services of all sectors. The way in which essential services are implemented will vary from one country to another. Some countries may already have the described services in place; others may need to adapt existing services or progressively implement new services, or take additional measures to meet these standards. It is critical that each country has a plan in place to achieve identified standards, and to ensure that measurement and accountability processes and mechanisms are in place to ensure that services are being delivered and are of the required quality.

<table>
<thead>
<tr>
<th>Type of costs</th>
<th>Data requirements</th>
<th>Potential impact</th>
</tr>
</thead>
</table>
| Gender-responsive budgeting| This method considers four important questions: 1. What are the gaps in VAWG laws and policies? 2. What amount of resources are allocated to different VAWG-related services? 3. What are the sources of funding? 4. Are these resources adequate? Information on what VAWG-related services are available and/or planned, and current VAWG laws and policies and relevant budgetary data. | • A GRB approach to costing can serve as a powerful tool to facilitate gender mainstreaming in government budgets by identifying gaps in VAWG-related services and/or policies, and weaknesses or absences of VAWG-related services.  
• A GRB approach aims to help Governments decide how policies need to be adjusted and where resources need to be reallocated to address gaps and inequalities.  
• Results may be highly political as they illustrate weaknesses within systems, including a lack of coordination among various stakeholders working to address VAWG.  
• In countries where budget data are not publicly available or the practice of information-sharing is not active, implementing a GRB approach may be particularly challenging. |
| Impact costing            | This method measures the direct and indirect, and tangible and intangible costs of VAWG to survivors and their families, the community, organizations, businesses and society at-large (including out-of-pocket expenses or fees for support services, transport, and/or shelter, loss of earnings and the value of missed paid or unpaid work due to VAWG). Implementing this method requires national prevalence statistics, information on the frequency of VAWG and unit costs of different services access by VAWG survivors, which is provided by administrative data. It requires information on the severity of the effects of VAWG, how survivors’ lives are affected by violence, help-seeking behaviours, agents bearing the costs, and some knowledge of public budgets. Both administrative and prevalence data are required. | • Impact costing is often used for advocacy purposes, to mobilize support for legal and policy changes by demonstrating the effects and quantitative (and qualitative) losses of VAWG to entire societies and nations.  
• Depending on the scope, results can be a powerful awareness-raising tool among new or critical audiences (including employers and/or health, labour or finance ministries), demonstrating that VAWG is a social and economic issue. |
| Unit costing              | The method calculates the total direct and indirect costs of goods or services deployed (or planned for future use) in addressing VAWG by understanding the cost per unit of a particular VAWG-related service and multiplying that by the usage rate. Implementing this method does not require accurate national data on VAWG, however, does require information on which VAWG-related services and/or activities are ongoing, how often they are being used (number of units consumed), and costs per unit of those services. This information will be provided by administrative data and can be complemented by targeted interviews. | • Unit costing provides a clear picture of existing services and their usage, and costs of providing those services.  
• This offers a helpful component for broader costing methodologies being implemented, and may provide Governments with a clearer picture of what resources are needed to implement a specific VAWG law or policy and/or to provide essential services to VAWG survivors.  
• In measuring the costs, this methodology does not factor in quality of services being provided and is limited to costing only those existing services. |

6.5 Strengths of violence against women costing studies

VAWG costing studies are important evidence-based policy advocacy tools that can be used to:
• Inform policy dialogue and advance effective policies and programmes
• Assess the impact of policies and programmes
• Support evidence-based policymaking
• Ensure accountability for implementation
• Advocate for laws, policies and services that comprehensively respond to VAWG survivors’ needs
• Support resource mobilization
• Contribute to strengthening national, regional, and international commitments

VAWG costing studies foster understanding that VAWG is not a ‘domestic issue’, but a human rights issue and a development issue. There are numerous benefits of VAWG costing studies as described below.

• Measuring the costs of VAWG can demonstrate the financial costs to VAWG survivors and their children, as well as people who have perpetrated violence, family, friends, businesses, organizations, governments (including local, district, provincial and national levels), communities and society at-large. For instance, in 2012, UN Women supported an impact study on the cost of domestic violence against women in Viet Nam. *Estimating the Costs of Domestic Violence against Women in Viet Nam* demonstrated that women who have experienced domestic violence earn 35 per cent less than other women. The impact study also demonstrated that domestic violence against women has direct and indirect costs to the economy amounting an opportunity cost of 1.41 per cent of the 2010 gross domestic product (GDP) (both out of pocket expenditures and lost earnings) and 1.78 per cent of GDP in overall lost productivity.

• VAWG costing studies highlight budgetary gaps in addressing VAWG. Costing current VAWG-related budgetary landscapes can reveal funding deficits and overlaps for VAWG services and can be used to strengthen the case for government budgets to support interventions to prevent and respond to VAWG. Costing estimates assist service providers, sectors and ministries to prioritize assistance and services to address VAWG in government budget allocations; in other words, advocating for the allocation of resources required to offer essential services to VAWG survivors, in line with commitments to legislation and national action plans to end VAWG. In fact, countries that have done costing studies have seen increases in budget allocations for Governments, CSOs and NGOs. For example, in Timor-Leste, a VAWG costing study was successfully used to advocate for shelter funding.

• VAWG costing gives evidence to Governments on the resources required to ensure a comprehensive multisectoral response to meet the needs of VAWG survivors, in line with national laws and action plans. Costing studies in the region showed that implementing essential services is affordable and the benefits of stopping VAWG early are magnified for women and girls, their families, and society. When comparing the costs of VAWG to the costs of providing services, it shows that preventing and responding to VAWG are a good investment.

• Costing facilitates greater coordination across sectors to prevent and respond to VAWG because it documents the financial impact of VAWG on various sectors and highlights different expenditures to prevent and respond to VAWG. Understanding the cost of VAWG can facilitate greater coordination between health services, policing, social services and justice when it comes to delivering services to VAWG survivors. Coordination is often improved because costing studies open dialogue on which institutions are providing services and what services are missing.

• Costing supports efforts to strengthen the implementation of laws and policies to prevent and respond to VAWG. This is because costing analyses how VAWG laws and policies are being implemented, and it shows the level of dedicated resources needed to fully enforce the laws and implement the policies. Innovative approaches to financing are needed to close resource gaps, enhance efforts to achieve gender equality and empower women and girls as an essential part of achieving the SDGs.

Costing contributes to strengthening evidence-based planning, budgeting and implementation of national policy commitments to prevent and respond to VAWG.

Costing facilitates greater coordination across sectors to prevent and respond to VAWG because it documents the financial impact of VAWG on various sectors and highlights different expenditures to prevent and respond to VAWG. Understanding the cost of VAWG can facilitate greater coordination between health services, policing, social services and justice when it comes to delivering services to VAWG survivors. Coordination is often improved because costing studies open dialogue on which institutions are providing services and what services are missing.

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• Costing contributes to strengthening evidence-based planning, budgeting and implementation of national policy commitments to prevent and respond to VAWG.

The costs of delivering a minimum package of essential services for women and girls who experienced violence accounts for:

- 0.25% of Lao PDR GDP

These numbers pale in comparison with the impact of violence: a study in Viet Nam found that total productivity loss and potential opportunity costs associated with such violence represent as much as:

- 3% of Viet Nam GDP

Implementing essential support services is affordable and the benefits of stopping violence early are magnified for women, their family and society in general.


How is data on the costs of violence against women being used?

Budget allocations
Costing violence against women can strengthen the case for prioritizing assistance and services to address violence against women in government budget allocations. Countries that have done costing studies have seen increases in budget allocations for both governments and civil society.

Greater coordination between sectors
Understanding the cost of violence against women can facilitate greater coordination between health services, policing, social services, justice, to deliver services to survivors because doing the research opens dialogue on which institutions are providing which services and on what is being missed.

Implementing laws and policies
Studying the cost of violence against women supports efforts to implement laws and policies on violence against women. The research starts with understanding the laws and policies in place and then analyses how they are being implemented. 80% of countries in the Asia-Pacific region now have laws on domestic violence.


i. United Nations Secretary General, Database on VAW. Available from: http://evaw-global-database.unwomen.org/
6.6 Challenges of violence against women and girls costing studies

The most significant challenges of VAWG costing studies relate to the availability and quality of data needed for the VAWG costing studies, that is usually administrative data related to VAWG. Having reliable data from relevant service providers is a critical first step to estimate the cost of providing adequate services for women and girls who have experienced violence and their family members. One of the biggest challenges has been the lack of administrative data and prevalence data to develop estimates on the economic impact of VAWG and the costs of providing services to women and girls who have experienced violence. It can be a challenge to get to the level of detail required for costing in terms of the extent and depth of geographic coverage for detailed services, the yearly roll-out of services, and the detailed breakdown of the required inputs for each activity and service in a MPES. Other challenges are that costing studies are costly and take time to conduct.

The following are several examples of challenges faced by different ASEAN Member States when it comes to conducting VAWG costing studies.

- In Cambodia, there have been efforts to improve responses to VAWG, including provision of essential services from the Government, CSOs and NGOs; however, it is unclear how much is spent on VAWG services. Plans to conduct a VAWG costing study for a MPES are included in the second National Action Plan for violence against women and the costing exercise is expected to be completed in 2018. The challenge is that Cambodia is a low-income country and does not have systematic administrative data needed for a VAWG costing study. Another challenge is getting accurate information. Questions remain on the costs of primary prevention compared to the costs of responding to VAWG.

To lay the ground work for the VAWG costing study, the Government of Cambodia organized four field visits to look at how to implement a MPES and how to evaluate the costs of VAWG for women in terms of out-of-pocket expenses (for transport and accommodations), and the number of visits to service providers. A survey of all NGOs and government service providers at the district level in two target provinces was conducted to estimate the cost of VAWG services and multisectoral coordination. The focus was also on exploring ways to institutionalize multisectoral coordination and to provide valuable information needed to move forward with the VAWG costing study.

- In the Philippines, a costing study published in 1999 attempted to identify and quantify the economic cost of VAW. *The Economic Costs of Violence Against Women* covered only the costs reported by the victims and the service providers, such as medical expenses for the treatment of VAWG cases and government expenses related to VAWG for the department of social welfare, health and the police.

- In Indonesia, the diverse terrain and cultural diversity of each province are a major challenge for conducting a VAWG costing study. In 2015, a VAWG costing study was conducted but only covered two areas.11 In 2017, Indonesia considered conducting a new nationally representative VAWG costing study; however, it required commitment from each province before the costing study could be conducted.

- Myanmar has plans to conduct a VAWG costing study and recognizes the need to improve capacities to collect VAWG administrative and prevalence data and to improve the availability and quality of VAWG data. VAWG data collection is very complicated in Myanmar because of the diversity of the country and the culture of silence surrounding VAWG. Nevertheless, improving the availability of VAWG data is part of the National Action Plan on eliminating violence against women. It is now included in Myanmar’s National Strategic Plan for the Advancement of Women to develop a costing study.

- In Thailand, there has not been a VAWG costing study, but Thailand has VAWG administrative data and VAWG prevalence data to support a VAWG costing study. Thailand needs capacity-building to engage line ministries to help them understand the value of VAWG costing studies.

- In Malaysia, there is no VAWG costing study yet, which hinders the evidence-based advocacy on the social and economic impact of VAWG and the benefits of allocating budget to address VAWG. To get a budget to address VAWG, women’s rights organizations in Malaysia need to demonstrate the benefits of allocating funds; however, this cannot be done without a VAWG costing data.
6.7 Lessons learned from violence against women and girls costing studies in Asia and the Pacific


**Designing a costing study or exercise:**

- Tailor the methodology to specific needs, according to country context, available data and research capacity, among other factors. Designing and implementing a costing study depend on the context and the purpose of the study.
- Define the purpose, expected outcomes, scope and parameters of the study from the beginning. Defining the scope means outlining the questions the costing seeks to answer, for which audience, and to what outcome. Defining parameters will provide clarity around which methodology is the most appropriate for achieving the expected outcomes and will ensure a solid foundation to the study.

**Implementing a VAWG costing study or exercise:**

- Use qualitative data to supplement quantitative data. Costing studies can be done even without reliable quantitative data using qualitative data. Interviews with survivors and service providers can be conducted to obtain information on the context and nature of these costs.
- Invest in participatory process. National ownership and partner buy-in throughout the costing process, and especially at the study’s completion, are critical to the success of the study.
- Include prevention efforts in costing studies to build evidence around the cost-effectiveness of VAWG prevention interventions. Studies that employ a cost-benefit analysis to demonstrate the cost savings of reducing VAWG can also help make the case that prevention is not only a moral and legal imperative but also essential for broader social and economic development.
- Consider qualitative aspects of pain and suffering, such as negative effects on a survivor’s mental health and the inter-generational impacts of such violence. It is also to capture the qualitative dimensions because purely quantitative estimates are likely to be underestimates.
- Consider costs incurred on behalf of or by the perpetrator by including perpetrators in surveys or interviews to provide a more comprehensive picture of costs associated with VAWG.
- Look at the specific experiences of marginalized women and girls.

**Disseminating and leveraging findings:**

- Ensure a strong media and communications strategy around the implementation and publication of the study. This can support effective advocacy and raise critical awareness.
- Frame prevention efforts versus response and inaction costs. Prevention of VAWG is a critical component of effective response and must be considered in costing studies, as investing in prevention efforts will over time lead to savings related to the prevention of new incidences of violence.

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CHAPTER 7

USING VIOLENCE AGAINST WOMEN AND GIRLS DATA TO REPORT ON SUSTAINABLE DEVELOPMENT GOALS AND INDICATORS
7.1 Violence against women and girls and the Sustainable Development Goals

The Sustainable Development Goals (SDGs) recognise that having quality, accessible, timely and reliable disaggregated data is essential to help measure progress and ensure that no one is left behind. In adopting the SDGs, Member States called for strengthening data collection and statistical capacity at national level and for developing baselines where they do not yet exist.

Ending VAWG is a critical component of SDG 5: Achieve gender equality and empower all women and girls. Furthermore, VAWG affects almost all of the SDGs and preventing VAWG makes a significant contribution to achieving many of the Goals. Diagram 8 demonstrates that eliminating VAWG is central to achieving at least six of the 17 SDGs.

Diagram 8. Violence against women and girls is an impediment to the realization of the Sustainable Development Goals

7.2 Sustainable Development Goal indicators on violence against women and girls

Indicators summarize complex data into a form that is meaningful for policymakers, and can be understood by practitioners and the general public. The purpose of indicators is to provide a simple summary of a complex picture, such as ‘how much’, ‘how many’ and ‘to what extent’.

- Indicators measure progress made towards goals related to gender equality and VAWG
- Indicators can be used to monitor the impact of policies, action plans and programmes.
- Indicators are a means to convert data into relevant statistics that tell a story about women’s lives and can be used by national authorities to develop legislation, policies and mechanisms to help women and girls who have experienced violence.

The Inter-Agency Expert Group on SDG Indicators (IAEG-SDGs), composed of Member States and regional and international agencies as observers, was established to develop and support the implementation of the global indicator framework for the Goals and targets of the 2030 Agenda. The IAEG-SDGs identified a possible custodian agency (or agencies) and other partner agencies (mostly from the United Nations system) for each indicator for global reporting and indicator development.

When reporting on the SDGs, it is very important to use harmonized and agreed indicator definitions and data that have been collected in alignment with internationally agreed methodologies and standards.

All SDGs indicators are classified by the IAEG-SDGs into three tiers according to their level of methodological development and the availability of data at the global level as follows:

**Tier 1**: Indicator conceptually clear, established methodology and standards available and data regularly produced by countries.

**Tier 2**: Indicator conceptually clear, established methodology and standards available but data are not regularly produced by countries.

**Tier 3**: Indicator for which there are no established methodologies and standards or the methodologies and standards are being developed or tested.

The following links provide relevant guidance and resources related to the process of reporting on the SDGs:

1. Information about the IAEG-SDGs: [https://unstats.un.org/sdgs/iaeg-sdgs/](https://unstats.un.org/sdgs/iaeg-sdgs/)
2. The official list of SDG indicators: [https://unstats.un.org/sdgs/indicators/indicators-list/](https://unstats.un.org/sdgs/indicators/indicators-list/)
6. Global database of SDG indicators (this platform provides access to official data for all SDG indicators for which data are available): [https://unstats.un.org/sdgs/indicators/database/](https://unstats.un.org/sdgs/indicators/database/)
7.2.1 Goal 5: Achieve gender equality and empower all women and girls

Goal 5 focuses on achieving gender equality and empowering all women and girls. The Goal 5 includes four targets and six specific indicators related to VAWG. Each of the targets and indicators is highlighted in **Diagram 9**, along with data requirements for each indicator.

### Diagram 9. Goal 5 targets related to violence against women and girls, indicators and data requirements

<table>
<thead>
<tr>
<th>Target 5.1: End all forms of discrimination against all women and girls everywhere</th>
<th>Indicator 5.1.1: Whether or not legal frameworks are in place to promote, enforce, and monitor equality and non-discrimination on the basis of sex</th>
<th>Requires analysis and review of legal frameworks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target 5.2: Eliminate all forms of violence against all women and girls in public and private spheres, including trafficking and sexual and other types of exploitation</td>
<td>Indicator 5.2.1: Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual, or psychological violence by a current or former intimate partner in the previous 12 months by form of violence and age</td>
<td>Requires VAWG prevalence data collected through population-based prevalence surveys of ever-partnered women and girls aged 15 years and older</td>
</tr>
<tr>
<td></td>
<td>Indicator 5.2.2: Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner in the previous 12 months, by age and place of occurrence</td>
<td>Requires VAWG prevalence data collected through population-based prevalence surveys of women and girls aged 15 years and older</td>
</tr>
<tr>
<td>Target 5.3: Eliminate all harmful practices, such as child, early, and forced marriage and female genital mutilation</td>
<td>Indicator 5.3.1: Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18</td>
<td>Requires prevalence data collected through population-based prevalence surveys of women and girls aged 15-24 years (in some countries censuses also provide data on this indicator)</td>
</tr>
<tr>
<td></td>
<td>Indicator 5.3.2: Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting (FGM/C), by age - not relevant to all countries</td>
<td>Requires FGM/C prevalence data collected through population-based prevalence surveys of women and girls aged 15-49 years</td>
</tr>
<tr>
<td>Target 5.6: Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences</td>
<td>Indicator 5.6.1: Proportion of women ages 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use, and reproductive health care</td>
<td>Requires prevalence data related to sexual and reproductive health and decision-making via population-based prevalence surveys of women and girls aged 15-49 years</td>
</tr>
</tbody>
</table>

VAWG prevalence data are essential for reporting on SDG 5. Administrative data cannot be used to report on the above-mentioned indicators.
7.2.2 Goal 11: Sustainable cities and communities
Goal 11 is focused on making cities and human settlements inclusive, safe, resilient and sustainable. Goal 11 includes one target and one indicator related to VAWG. This target and indicator are highlighted in Diagram 10, along with the data requirements for the indicator.

Diagram 10. Goal 11 target related to violence against women and girls, indicator and data requirements

Target 11.7: By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, in particular for women and children, older persons and persons with disabilities

Indicator 11.7.2: Proportion of persons victims of physical or sexual harassment by sex, age, disability status and place of occurrence, in the previous 12 months

Requires prevalence data related to physical and/or sexual harassment via population-based prevalence surveys of persons (disaggregated by sex, age, disability status and place of occurrence)

VAWG administrative data cannot be used to report on the SDG indicator 11.7.2.

7.2.3 Goal 16: Peace, justice and strong institutions
Goal 16 is focused on promoting peaceful and inclusive societies for sustainable development, providing access to justice for all and building effective, accountable and inclusive institutions at all levels, making cities and human settlements inclusive, safe, resilient and sustainable. Goal 16 includes three targets and five indicators related to VAWG. Each of these targets and indicators is highlighted in Diagram 11, along with data requirements for each indicator.

Diagram 11. Goal 16 targets related to violence against women and girls, indicators and data requirements

Target 16.1: Significantly reduce all forms of violence and related death rates everywhere

Indicator 16.1.1: Number of victims of intentional homicides per 100,000 population, by sex and age

Requires administrative data that can capture the cases of intentional homicides by sex and by age

Indicator 16.1.3: Proportion of population subjected to physical, psychological, or sexual violence in the previous 12 months

Requires administrative data that can capture the cases of intentional homicides by sex and by age

Target 16.2: End abuse, exploitation, trafficking, and all forms of violence against and torture of children

Indicator 16.2.2: Number of victims of human trafficking per 100,000 population by sex, age, and forms of exploitation

Requires administrative data that can capture the number of victims of human trafficking, by sex, age and forms of exploitation

Indicator 16.2.3: Proportion of young women and men age 18-29 years who experienced sexual violence by age 18 years

Requires prevalence data of sexual violence before age 18 through population-based surveys of women and men aged 18–29 years, by sex

Target 16.3: Promote the rule of law at the national and international levels and ensure equal access to justice for all

Indicator 16.3.1: Proportion of victims of violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms

Requires prevalence data of persons who experienced violence and reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms

Administrative data can be used to report on indicator 16.1.1 and indicator 16.2.2. Prevalence data can be used to report on indicator 16.1.3, indicator 16.2.3 and indicator 16.3.1.
Annex A
Summary of findings from violence against women and girls prevalence surveys in ASEAN Member States

The following data are selected from prevalence studies to illustrate findings and do not provide a comprehensive analysis or summary of VAWG prevalence in ASEAN Member States.

Cambodia
2000, 2005, 2010 and 2014 Cambodia Demographic and Health Survey (CDHS)

The 2000, 2005, 2010 and 2014 Cambodia Demographic and Health Survey (CDHS) included a module on women’s experiences with domestic violence. The 2010 CDHS did not include a module related to domestic violence, although it did measure women’s and men’s attitudes towards wife beating. In 2005, 2010 and 2014, the domestic violence module included questions on women’s experiences of violence since age 15 perpetrated by an intimate partner (husband or partner) and by other persons. The questions on violence by current or former intimate partner measured the following: types of violence experienced; frequency and timing of the violence; violence during pregnancy; help-seeking behaviours.

Each round of the survey was administered to a nationally representative sample of adults aged 15–49 years. The 2000 CDHS was administered to 15,351 women. To ensure that the survey results could provide estimates for all 24 provinces in the country, the sample included 12 individual provinces and five groups of provinces. In 2005 and 2014 the sample included 14 individual provinces and five groups of provinces. The 2005 CDHS was administered to a sample of 16,823 women and 6,731 men. Similarly, the 2010 CDHS was administered to a sample of 17,578 women and 5,190 men.

The 2014 CDHS found that 22 per cent of all women have experienced physical or sexual violence in their lives, 20 per cent have experienced physical violence and 8 per cent reported the physical violence occurred in the past 12 months. Among all women, 6 per cent have experienced sexual violence in their lifetime and 3 per cent in the last 12 months.

Regarding prevalence of intimate partner physical violence, the 2000 CDHS found that 16 per cent of ever-married women experienced physical violence by their husband since age 15, and 15 per cent in the 12 months prior to the survey. Similarly, the 2005 CDHS found that 13 per cent of ever-married women experienced physical violence by their husband since age 15 and 8 per cent in the 12 months prior to the survey. In 2014, the CDHS found that 16 per cent of ever-married women experienced physical violence by their husband since age 15, and 9 per cent in the 12 months prior to the survey. From 2000 to 2014, there was a reduction in the proportion of women who experienced physical violence in the 12 months prior to the survey.

Regarding the types of violence against ever-married women perpetrated by their husband, according to the 2000 CDHS, 18 per cent of ever-married women experienced emotional violence, 16 per cent experienced physical violence (13 per cent experienced less severe forms and 4 per cent experienced more severe forms) and 4 per cent experienced sexual violence by their husband in their lifetime. Similarly, the 2005 CDHS found among ever-married women, 19 per cent experienced emotional violence, 13 per cent experienced physical violence (7 per cent experienced less severe forms and 6 per cent more severe forms) and 3 per cent experienced sexual violence from their husband in their lifetime. Some ever-married women experienced multiple forms of violence within the context of their marriage. In fact, 14 per cent of ever-married women experienced physical or sexual violence and 22 per cent experienced physical, sexual or emotional violence from their husband in their lifetime. The 2014 CDHS found that as many as 25 per cent of ever-married women experienced emotional violence, 18 per cent experienced physical and/or sexual violence, 16 per cent experienced physical violence and 6 per cent experienced sexual violence by their intimate partner in their lifetime. In addition, 29 per cent experienced physical, sexual and/or emotional violence from a current or most recent intimate partner in their lifetime and 20 per cent in the 12 months prior to the survey.

In terms of most common perpetrators of violence, among ever-married women who experienced physical violence, the most common perpetrators were their current husband or partner (75 per cent in 2000, 65 per cent in 2005, 56 per cent in 2014), mother or step-mother (23 per cent in 2014) and former husband or partner (11 per cent in 2005, 20 per cent in 2014). The 2014 CHDS found that among never-married women who experienced physical violence, the most common perpetrators were their father or step-father (37 per cent), sister or brother (31 per cent) and mothers or step-mother (26 per cent). According to the 2014 CHDS, among ever-married women who experienced sexual violence, perpetrators were most likely to be their current husband or partner (61 per cent), followed by former husband or partner (23 per cent).
Women who experience violence often suffer violence-related injuries. The 2000 CDHS found that 37 per cent of ever-married women who have ever experienced physical or sexual violence by their husband reported having bruises or aches in their lifetime and 31 per cent had bruises or aches in the past year because of something their husband did. Among ever-married women who have experienced physical or sexual violence by their husband, 6 per cent ever had to visit a health facility because of something their husband did. In 2005, 41 per cent of ever-married women who have ever experienced physical or sexual violence by their husband reported having bruises or aches in their lifetime and 30 per cent had bruises and aches in the past year because of something their husband did. Among ever-married women who have experienced physical or sexual violence by their husband, 6 per cent ever had to visit a health facility because of something their husband did. Finally, the 2014 CDHS found that 48 per cent of women who have ever experienced spousal physical or sexual violence suffered injuries, of which, 44 per cent suffered cuts, bruises, or aches. Also, 22 per cent had eye injuries, sprains, dislocations, or burns; and 5 per cent had deep wounds, broken bones, broken teeth, or other serious injuries.

For most women in Cambodia, violence starts early in the marriage. The 2000 and 2005 CDHS found that in 28 per cent of marriages, violence occurred in the first two years of marriage. The 2000 CDHS found that violence had occurred in the first five years of marriage for three fifths of marriages; whereas, the 2005 CDHS found that violence had occurred in the first five years of marriage for two thirds of marriages (a small decrease).

In terms of help-seeking behaviours, the 2000 CDHS revealed that among all women who had reported any physical or sexual violence by anyone, 20 per cent of women asked someone for help. Women were most likely to seek help from their family (63 per cent), from other relatives or friends (44 per cent) or from their in-laws (12 per cent). Only 1 percent sought help from medical personnel. Women were least likely to have sought help if the perpetrator of violence was their current husband (15 per cent). The 2005 CDHS revealed that 31 per cent of all women who had experienced physical or sexual violence asked someone for help. Of those who sought help, 51 per cent sought help from their families and 46 per cent from other sources. Women were least likely to seek help if the perpetrator was a person other than their husband (23 per cent); whereas, 38 per cent of women sought help when they experienced violence by their husband. Among women who experienced violence by a previous husband, 53 per cent sought help.

As the frequency of violence experienced in women’s lives increased, they were more likely to seek help. For instance, the CDHS 2005 found that 31 per cent of women who experienced physical or sexual in the previous 12 months sought help, compared to 52 per cent of women who experienced physical or sexual violence four or more times in the same period. The increase in help-seeking behaviours from 2000 to 2005 may reflect the fact that there was pending legislation on domestic violence during this period. Finally, the 2014 CDHS found that 43 per cent of women who have ever experienced physical or sexual violence sought help; 38 per cent of women never sought help and never told anyone; 19 percent never sought help but told someone. Women who experienced physical or sexual violence most often sought help from their own family (59 per cent), followed by neighbours (29 per cent), other (16 per cent) and police (12 per cent).

Regarding attitudes towards wife-beating, CDHS found that 35 per cent of women agreed with specific reasons justifying a husband beating his wife in 2010, 55 per cent of women in 2005, 46 per cent in 2010 and 50 per cent in 2014. In comparison the 2010 CDHS found that 22 per cent of men believed a husband is justified in beating his wife for at least one of the specified reason.

The 2014 CDHS found that 7 per cent of ever-married women say that their husband or partner displayed three or more controlling behaviours. The main controlling behaviours women experienced from their husband or partner were jealousy or anger if they talked to other men (23 per cent) and being accused of being unfaithful (12 per cent). About 4–5 per cent of women experienced each of the controlling behaviours.

National survey on Women’s Health and Life Experiences in Cambodia

In 2015, the Royal Government of Cambodia conducted the National survey on Women’s Health and Life Experiences in Cambodia with the support of WHO and UN Women. The Cambodia Study Questionnaire was based on the WHO methodology, developed for the Multi-Country Study on Women’s Health and Domestic Violence against Women. The questionnaire included questions on women’s experiences of violence, socio-demographic characteristics, health related experiences, and help-seeking and coping strategies. A total of 3075 women aged 15-64 years were interviewed.

The study found that 21 per cent of women who had ever been in a relationship have experienced physical and/or sexual violence by an intimate partner. The study highlighted the high degree of overlapping of different forms of IPV. Overall, 21 per cent of women who had experienced IPV reported experiencing both physical and sexual violence in their lifetime and 15 per cent in the last 12 months.

Regarding help-seek behaviours, the study revealed that 49 per cent of women who had experienced IPV had not told anyone about their partner’s violence. If they told someone about the violence, women most often told their parents (25 per cent) and secondly their neighbours (22 per cent) and siblings (21 per
cent). Only 7 per cent of women reported to the police, and 5 per cent mentioned that the police had tried to help them.

**Women’s Experience of Domestic Violence and Other Forms of Violence – Secondary data analysis report of CDHS 2014**

In 2016, the National Institute of Statistics and the Ministry of Health collaborated to conduct a secondary analysis of the CDHS 2000, 2005 and 2014 and the National Survey on Women’s Health and Life Experiences in Cambodia. The report, *Women’s Experience of Domestic Violence and Other Forms of Violence – Secondary data analysis report of CDHS 2014,* examined trends and patterns of VAWG over time in Cambodia and provided a comparison of results of the different prevalence surveys. It analysed the impact of violence prevention policies and programmes to inform the development of policies and strategic plans for more effective prevention of VAWG.

The analysis found that over 30 per cent of Cambodian women had experienced physical, sexual, emotional or economic IPV in their lifetime. The study highlighted the high degree of overlapping of different forms of IPV, with the majority of women who experienced sexual IPV experienced both physical and sexual IPV. Regarding help-seek behaviours, the study revealed that women most often sought and received help from family members, friends and neighbours, rather than formal services.

**Indonesia**

In 2016, Indonesia conducted the first national VAWG prevalence study, entitled the *Indonesian National Women’s Life Experience Survey,* of 8,757 women aged 15–64 years in 83 districts across 24 provinces. The survey was commissioned by the Ministry of Women’s Empowerment and Child Protection (KPPPA) and was carried out by the Central Statistics Agency, with assistance from UNFPA. The Survey used a methodology designed by UNFPA to collect sensitive information on VAWG, and interviewers were trained to conduct face-to-face interviews and to respect principles of safety and confidentiality.

The survey looked at four different types of violence: physical, sexual, emotional and economic. Preliminary findings revealed that 42 per cent of ever-partnered women have experienced at least one of the four types of violence in their lifetime and 16 per cent in the last 12 months. Among ever-partnered women, 33 per cent experienced physical and/or sexual violence in their lifetime and 9 per cent in the past 12 months. Regarding sexual and/or physical violence by an intimate partner, 18 per cent of ever-partnered women experienced physical and/or sexual violence by their partner in their lifetime and 5 per cent in the past 12 months.

The survey also revealed information on the profile of women who have experienced violence; in particular, cases of physical and/or sexual violence were highest among women with a high school degree or higher educational background, as well as among women who were unemployed and those who live in urban areas.

**Lao People’s Democratic Republic**

In 2014, the Lao People’s Democratic Republic conducted its first national representative study on VAWG, the *Lao National Survey on Women’s Health and Life Experiences 2014: A Study on Violence against Women,* adopted the methodology of the WHO *Multi-Country Study on Women’s Health and Domestic Violence against Women.* The survey was the result of a collaboration between the National Commission for the Advancement of Women and Lao Statistics Bureau, in coordination with the Lao Women’s Union, Ministry of Health, Ministry of Justice, and Ministry of Public Security, with support from UNFPA and UN Women. The study had two components: a quantitative survey of 2,997 women aged 15–64 years, representing the general population; and a qualitative component consisting of in-depth interviews with women who have experienced IPV, focus group discussions with women and men, and key informant interviews.

Regarding IPV, the survey found that among ever-partnered women, 12 per cent have experienced physical violence in their lifetime and 4 per cent in the past 12 months, 7 per cent have experienced sexual violence in their lifetime and 3 per cent in the past 12 months, and 26 per cent have experienced emotional violence in their lifetime and 11 per cent in the past 12 months by their husband or partner. In regard to overlapping types of IPV, 15 per cent of women experienced physical and/or sexual violence in their lifetime and 6 per cent in the past 12 months.

Among women who have experienced physical and/or sexual IPV in their lifetime, 43 per cent sustained injuries and 20 per cent were injured more than five times. Women who experienced physical and/or sexual violence by their partner also reported having poor health (22 per cent) while 15 per cent women who never experienced IPV reported having poor health.

The survey found the lifetime prevalence of physical violence by a non-partner since age 15 was 5 per cent. Non-partner perpetrators of physical violence were most likely to be female family members (35 per cent), specifically mothers or step-mothers (27 per cent) and female friends and acquaintances (20 per cent). Non-partner perpetrators also included male family members (24 per cent) and other males (24 per cent). The lifetime prevalence of sexual violence by non-partner was 5 per cent, and the total lifetime prevalence of forced intercourse was 1 per cent.
Among women who experienced physical and/or sexual IPV, 43 per cent never told anyone. Women who did not tell someone were most likely to seek help from family members, including siblings (36 per cent) and parents (34 per cent), followed by friends (20 per cent). Importantly, however, a large majority of women (71 per cent) who experienced physical and/or sexual violence by their husband or partner did not seek help from local authorities. Among those who sought help from local authorities, 19 per cent contacted a local leader, 12 per cent contacted a mediation unit. Only 4 per cent approached the police and less than 1 per cent approached courts. The main reasons women sought help was because they were no longer able to endure the violence (64 per cent) and because they were encouraged by family or friends to seek help (40 per cent). At the same time, the main reasons women did not seek help were due to embarrassment or shame (37 per cent) and because they thought the violence was not serious (35 per cent).

The survey also measured attitudes towards the underlying factors that contribute to IPV, and as many as 36 per cent of women believed ‘a good wife obeys her husband, even if she disagrees’, 29 per cent accepted that ‘a wife is obliged to have sex with her husband’, and 23 per cent concurred that ‘a man should show he is the boss’.

Myanmar

The 2015–16 Myanmar Demographic and Health Survey (2015-16 MDHS) is the first DHS to be conducted in Myanmar. The 2015–16 MDHS was conducted by the Ministry of Health and Sports, with the objective of providing reliable, accurate, and up-to-date data for the country. The target groups were women and men aged 15–49 residing in randomly selected households across the country. Overall, 12,500 households were interviewed with 12,885 women and 4,737 men.

The 2015–16 MDHS included a module on domestic violence and a set of questions on attitudes towards wife beating. Overall, 51 per cent of women and 49 per cent of men agreed that wife beating is justified for at least one of the specified reasons.

The survey found that 15 per cent of women have experienced physical violence since age 15 and 9 per cent in the past 12 months, 3 per cent of women have experienced sexual violence in their lifetime and 2 per cent in the past 12 months. Among ever-pregnant women, 3 per cent reported having experienced physical violence during their pregnancy.

There are important variations by state and region. Tanintharyi Region and Rakhine State have the highest percentages of women who have ever experienced physical violence (30 per cent and 27 per cent, respectively). The percentage of women who have ever experienced sexual violence ranges from a high of 10 per cent in Kayah State to a low of 1 per cent each in Yangon Region and Mandalay Region.

Among ever-married women who have experienced physical violence since age 15, 67 per cent reported the perpetrator was their current husband and 24 per cent reported a former husband as the perpetrator. Among ever-married women who had experienced sexual violence, 56 per cent reported their current husband and 43 per cent reported a former husband as the perpetrator, while 1 per cent reported that strangers were the perpetrators of sexual violence.

The survey found that 21 per cent of ever-married women experienced at least one form of spousal violence in their lifetime; the most common type of spousal violence was physical violence (15 per cent), followed by emotional violence (14 per cent) and sexual violence (3 per cent).

However, 38 per cent of women who have experienced physical and sexual violence have never sought help and never told anyone about the violence. Only 28 per cent have sought help to stop the violence and 34 per cent never sought help but told someone about the violence. Among women who have experienced physical and sexual violence and sought help, the most common source for help was their own family (43 per cent), followed by neighbours (40 per cent) and friends (22 per cent). Only 1 per cent of women sought help from the police. Only 3 percent sought help from a lawyer and from a social work organization.

Philippines

Every five years since 1968, the Philippines conducted a NDHS to monitor and evaluate the impact of population programmes being implemented. The 2008\textsuperscript{10}, 2013\textsuperscript{11} and 2017\textsuperscript{12} NDHS included a module designed to determine the extent of VAWG. This included data and evidence on the experiences of physical and sexual violence, perpetrators of physical and sexual violence, age at first experience of sexual violence, spousal violence, violence during pregnancy, violence-related injuries and women’s help-seeking behaviours.

The 2008 NDHS Women’s Safety Module was administered to a nationally representative sample of 9,316 women aged 15–49 years from rural and urban areas through the Philippines. In 2013, the NDHS Women’s Safety Module was administered to a nationally representative sample of 10,963 women aged 15–49 years from 14,804 households. For the 2017 NDHS, 25,074 women aged 15–49 were interviewed from 27,496 households.

Regarding physical violence, the 2008 NDHS found that 20 per cent of all women experienced physical violence since age 15. Among ever-married women, the most common perpetrator was their current husband.
(55 per cent). Among never-married women, the most common perpetrator was their mother/step-mother (35 per cent). Among women who have ever been pregnant, 4 per cent reported they have experienced physical violence during at least one pregnancy. The 2013 NDHS found that 20 per cent of all women experienced physical violence. Among ever-married women, 44 per cent reported that the perpetrator was the current husband and 42 per cent of never-married women reported that the perpetrator was their mother/step-mother. 4 per cent of women who have ever been pregnant experienced violence during pregnancy. The 2017 NDHS found that 14 per cent of ever-married women have experienced physical violence in their lifetime. Regarding sexual violence, the 2008 NDHS found that 9 per cent of all women experienced sexual violence in their lifetime. 61 per cent of ever-married women reported that the perpetrator was their current husband/partner and 58 per cent of never-married women reported that the perpetrator was their current/former boyfriend. The 2013 NDHS found that 6 per cent of women experienced sexual violence in their lifetime. 55 per cent of ever-married women reported the perpetrator was their current husband/partner and 42 per cent of never-married women reported the perpetrator was their current/former boyfriend. According to the 2017 NDHS Key Indicators Report, 5 per cent of ever-married women experienced sexual violence by their husband or partner in their lifetime.

Regarding IPV, the 2008 NHDS found that 14 per cent of ever-married women experienced physical violence, 8 per cent experienced sexual violence and 23 per cent experienced emotional and other forms of violence by their husband in their lifetime. Overall, 29 per cent of ever-married women had experienced at least one type of violence by a husband or partner in their lives and 19 per cent in the 12 months prior to the survey. Similarly, the 2013 NHDS found that 13 per cent of ever-married women experienced physical violence, 5 per cent experienced sexual violence and 22 per cent experienced emotional violence by a current or most recent husband or partner in their lifetime. Regarding the current rate, in the past 12 months, 5 per cent of ever-married women experienced physical violence, 3 per cent experienced sexual violence, 13 experienced emotional violence by a current or most recent husband or partner. Overall, 26 per cent of ever-married women experienced any form of violence by a current or most recent husband or partner in their lifetime or partner and 16 per cent in the 12 months prior to the survey.

The 2008 NDHS also found the more a woman’s husband or partner consumed alcohol, the more likely she was to experience any form of violence. For physical violence, 44 per cent of ever-married women who have experienced physical violence in their lifetime reported that their husband gets drunk very often while 8 per cent reported their husband does not drink. In terms of attitudes towards wife beating, the 2008 NDHS found 14 per cent women aged 15-49 agreed that a husband is justified in hitting or beating his wife for at least one specific reason. Similarly, the 2013 NDHS found that 13 per cent of women agreed that a husband is justified in hitting or beating his wife for at least one of the specified reason.

In terms of the consequences of IPV, the 2008 NDHS found that 63 per cent of ever-married women who have experienced physical or sexual violence by their husband or partner in their lifetime reported experiencing one or more physical or psychological consequences. 30 per cent of ever-married women who have experienced physical or sexual violence in their lifetime experienced cuts, bruises or aches, and 11 per cent attempted to commit suicide. In comparison, the 2013 NDHS found that 59 per cent of ever-married women who have experienced physical or sexual violence by their husband in their lifetime experienced psychological or physical injuries. More specifically, 35 per cent experienced cuts, bruises or aches and 12 per cent attempted to commit suicide.

In terms of help-seeking behaviours, the 2008 NDHS found that 18 per cent of women sought help from someone for physical or sexual violence in the lifetime, of which 45 per cent went to their own family, 29 per cent went to friends/neighbours and 15 per cent sought help from the husband’s family. The 2013 NDHS found that as many as 38 per cent of women never sought help and never told anyone about physical or sexual violence, while 27 per cent never sought help, but told someone. Yet, 30 per cent sought help to stop violence, of which 59 per cent sought help from their family and 17 per cent from friend. The proportion of women who sought help for the violence in their lives significantly increased from 2008 to 2013.

**Singapore**

In 2009, Singapore conducted a VAW prevalence study using the International Violence against Women Survey (IVAWS). The IVAWS was developed in the late 1990s by the European Institute for Crime Prevention and Control, United Nations Interregional Crime and Justice Institute and Statistics Canada. Based upon a sample of 2,006 women aged 18–69 years, using a random sample of Singapore households, the *International Violence Against Women Survey: Final Report on Singapore* found that 10 per cent of women experienced at least one incident of violence since age 16. In their lifetime, 7 per cent of women experienced physical violence and 4 per cent experienced sexual violence. Threats of physical violence were the most common experience, followed by being pushed or grabbed, having an arm twisted or hair pulled, being slapped, kicked, bitten or hit with a fist, and have something thrown at them. The most common form of sexual violence was unwanted sexual touching.
In terms of IPV, 6 per cent of ever-partnered women experienced at least one form of violence by their intimate partner in their lifetime. More specifically, 6 per cent experienced physical violence and 1 per cent experienced sexual violence by their intimate partner in their adult lifetime. Among women who experienced any type of violence, 22 per cent reported it was by a former partner and 2 per cent identified a current partner. Among women who experienced violence by their current partner, 50 per cent sustained physical injuries and 44 per cent feared for their life in the most recent violent incident.

In terms of non-partner violence, 5 per cent of women experienced any form of violence by a man other than an intimate partner in their adult lifetime. Perpetrators of non-partner violence were most likely to be strangers (3 per cent), family members or relatives (2 per cent) and friends and acquaintances (1 per cent). Sexual violence was the most common form of violence by strangers (2 per cent) and friends or acquaintances (1 per cent); whereas, family members or relatives tended to use physical violence.

In regard to violence-related injuries by non-partners, 26 per cent of women experienced physical injuries during the most recent incidents of violence, of which 85 per cent reported bruises and swelling and 39 per cent experienced cuts, scratches or burns. 22 per cent of women reported the injuries were serious enough to require medical care. Also, 34 per cent of women felt their life was in danger during the most recent incident of violence by non-partners.

Regarding perceptions of violence, about 60 per cent of all women who experienced violence perceived the violence to be serious, regardless of the perpetrator; however, women who had experienced violence by non-partner (44 per cent) were two times more likely to regard violence by non-partners as a crime, compared to women who had experienced IPV (20 per cent). In fact, 59 per cent of women who had experienced violence who considered the violent incident to be a crime were attacked by strangers.

In terms of the response to violence, the IVAWS found that 13 per cent of women who had experienced IPV and 1 per cent of women who had experienced non-partner violence contacted victim-support agencies. The majority of women sought help from family and friends. 25 per cent of women who experienced IPV and 22 per cent of women who experienced non-partner violence reported the incident to the police. Women actually reported incidents of physical violence (28 per cent) to the police more often than sexual violence (17 per cent). Women who had experienced violence were more likely to report incidents of violence to the police if they had been injured, felt their life was in danger, perceived the incident was serious and/or regarded it as a crime. The main reasons for not contacting the police were that the women who had experienced violence and/or their family dealt with situation (52 per cent) or perceived the incident as minor (38 per cent). The IVAWS concluded that 12 per cent of acts of IPV reported to the police were charged and convicted; whereas, 9 per cent of acts of non-partner violence were charged and convicted.

Finally, the IVAWS found a strong relationship between childhood victimization (before age 16) and victimization in adulthood. Women who experienced abuse in childhood were about six times more likely to experience violence in adulthood (48 per cent) than those who were never victimised in childhood (8 per cent). It was also found that a significant number of women (14 per cent) who experienced or used partner violence in adulthood had witnessed domestic violence in their childhood than who never witnessed parental violence in their childhood (4.5 per cent).

**Thailand**

Thailand was one of the countries selected to participate in the 2005 WHO Multi-Country Study on Women’s Health and Domestic Violence against Women. The WHO study was a cross-section survey of women aged 15–49 years in the capital city Bangkok and in a rural town, Nakhonsawan (province). A total of 1,536 women were interviewed in Bangkok and 1,282 women were interviewed in Nakhonsawan.

Regarding lifetime IPV, the key findings were that 23 per cent of ever-partnered women experienced physical violence by an intimate partner in their lifetime in the city and 34 per cent in the province. 30 per cent of ever-partnered women experienced sexual violence by an intimate partner in their lifetime in the city and 29 per cent in the province. In the province, 47 per cent of ever-partnered women experienced physical and/or sexual violence in their lifetime, and 41 per cent in the city.

Regarding current IPV, 8 per cent (city) to 13 per cent (province) of ever-married women experienced physical violence, 17 per cent (city) to 30 per cent (province) experienced sexual violence and 21 per cent (city) to 23 per cent (province) experienced physical and/or sexual violence by an intimate partner in the 12 months prior to the survey.

Prevalence of physical and sexual violence by non-partner was lower than IPV. The WHO study found that 8 per cent (city) to 10 per cent (province) of women have experienced physical violence, 3 per cent (province) to 6 per cent (city) have experienced sexual violence and 11 per cent (province) to 12 per cent (city) have experienced physical and/or sexual violence by a non-partner since age 15. Among those who have experienced sexual violence by a non-partner, 47 per cent of the respondents in Bangkok answered that the perpetrator was a complete stranger while 18 per cent of the respondents in the province answered that it was a complete stranger.
The study estimated that 5 per cent (province) to 9 per cent (city) of women were abused before age 15. In the capital city, 58 per cent of women who experienced sexual abuse before age 15 reported that the perpetrator was a stranger and 8 per cent reported that it was a family member. In comparison, 30 per cent of women who experienced sexual abuse before age 15 and who live in the province reported that the perpetrator was a stranger and 22 per cent reported that it was family member. Among those perpetrators who were family of the victim, male family members other than fathers and stepfathers were by far the most common.

The study also found that 4 per cent of ever-pregnant women in Thailand had experienced physical violence during a pregnancy. The percentage was significantly higher when the woman experienced physical violence before a pregnancy. 18 per cent of women in the city and 11 per cent of women in the province who had experienced physical violence reported that the violence continued during her pregnancy.

Viet Nam

The National Study on Domestic Violence against Women in Viet Nam was conducted by the General Statistics Office of Viet Nam in 2009. The study was carried out as part of the United Nations-Government of Viet Nam Joint Programme on Gender Equality, with technical support provided by WHO. The study replicated the methodology developed for the WHO Multi-Country Study on Women’s Health and Domestic Violence. The sample included a national representative sample of 4,838 women aged 18–60 years.

Regarding IPV, the study found that the proportion of ever-married women who experienced physical, sexual, and/or emotional violence in their lifetime was as high as 58 per cent, with 27 per cent of ever-married women who experienced any of these types of violence in the past 12 months. In terms of physical IPV, 32 per cent of ever-married women experienced physical violence by their husband in their lifetime, and 6 per cent in the 12 months prior to the survey. Five per cent of ever-pregnant women experienced physical violence by their husband in at least one pregnancy. Physical violence typically started early in a relationship and was found to lessen with age.

In addition, 10 per cent of ever-married women experienced sexual violence by their husband in their lifetime, and 4 per cent in the past 12 months. In turn, 34 per cent of ever-married women experienced physical and/or sexual violence by their husband in their lifetime, and 9 per cent in the past 12 months. The proportion of ever-married women who experienced emotional violence by their husband was of 54 per cent in their lifetime and 25 per cent in the 12 months prior to the survey. Also, 9 per cent of women experienced economic abuse in their lifetime.

In regard to violence against women by perpetrators other than husband, the study found that 10 per cent of women experienced physical violence and 2 per cent experience sexual violence by someone other than a husband since age 15. Non-partner perpetrators of physical violence were mainly family members (65 per cent); whereas, perpetrators of sexual violence were strangers and boyfriends, and rarely family members. The study also found that 3 per cent of women experienced sexual abuse before age 15, and perpetrators were most often strangers, and some were family members and others.

In terms of the consequences of violence, 26 per cent of women who experienced physical or sexual violence by their husband reported experience violence-related injuries, of which 60 per cent were injured more than once and 17 per cent were injured many times. Women who experienced IPV were more likely to report ‘poor’ or ‘very poor’ health. They were more likely to have difficulties walking and carrying out daily activities, they suffered pain and memory loss problems and experienced emotional distress.

The survey showed that violence against children has a strong association with violence against women by the same perpetrator. Among women with children less than 15 years old, 24 per cent reported that these children have been abused physically by their husband. Women who had a violent husband were twice as likely to report that their children were beaten and even more so if the husband perpetrated severe violence against his wife. Women who experience partner violence are more likely than other women to have had a mother who was beaten. They are also more likely to have a partner whose mother had been beaten or who himself was beaten as a child.

In terms of helping seeking behaviours, 87 per cent of women who experienced physical or sexual violence by their husband never sought help from formal services or people in authority, and 50 per cent never told anybody about the violence. If women told anyone, 43 per cent of women told a family member, 20 per cent told neighbours and 17 per cent told friends. This is despite the fact that 60 per cent of women who experienced violence by their husband said they heard about the law on domestic violence.
15. United Nations Viet Nam, 'Keeping silent is dying' Results from the National Study on Domestic Violence against Women in Viet Nam (2010).
Annex B
Cambodia Case Registration Form

This Case Registration Form has been included at the request of participants to the second consultation for the development of the guidelines and are not intended to be used as a model, but merely to show an example of a Case Registration Form.

Confidential, please do not share this document; make a copy of this form for the receiving services
(File No: ____________________________)

<table>
<thead>
<tr>
<th>Part I - Initial Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A - Victim information/Plaintiff</strong></td>
</tr>
<tr>
<td>Name of the survivor:</td>
</tr>
<tr>
<td>Place of Birth:</td>
</tr>
<tr>
<td>Education attained:</td>
</tr>
<tr>
<td>Total number of children:</td>
</tr>
<tr>
<td></td>
</tr>
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</tr>
</tbody>
</table>

Disability of survivor: Is the survivor a disabled person? Yes □ No □
If yes, please describe type of disability of the survivor:

| Address of survivor: | Survivor contact No. |
| ____________________________ | ____________________________ |
| (If survivor is a child) | |
| Name of the father □ mother □ or caregiver □ : | |
| Address: | Contact number: |
B - The Incident

Type of violence related to GBV - You can check more than one

☐ Sexual violence
  ☐ Sexual Harassment  ☐ Indecent Exposure  ☐ Indecent Assault  ☐ Rape

☐ Intimate Partner or Domestic Violence
  ☐ Physical  ☐ Physical  ☐ Emotional  ☐ Economic

Other Please describe:

Location of the incident:  Date:  Time of the incident:

Description of the incident (summarize the circumstances, exactly what occurred and what happened afterwards) - attach additional page with narrative if needed.

Complain/Accusation of Criminal Act:

Is this the first incident with this perpetrator? If not please describe the history of violence with this perpetrator?
### C - Perpetrator/Defendant Information

#### Number of perpetrators:

1. **Name:** ____________  
   **Sex:** __  
   **Age:** ____________
   
   **Nationality:** ____________  
   **Ethnicity:** ____________
   
   **Marital status (married ☐ single ☐ widow ☐**
   
   **Occupation:**
   
   **Address:** _______________________________________

2. **Name:** ____________  
   **Sex:** __  
   **Age:** ____________
   
   **Nationality:** ____________  
   **Ethnicity:** ____________
   
   **Marital status (married ☐ single ☐ widow ☐**
   
   **Occupation:**
   
   **Address:** _______________________________________

3. **Name:** ____________  
   **Sex:** __  
   **Age:** ____________
   
   **Nationality:** ____________  
   **Ethnicity:** ____________
   
   **Marital status (married ☐ single ☐ widow ☐**
   
   **Occupation:**
   
   **Address:** _______________________________________

---

If perpetrator is unknown, describe him/her a description with any identifying marks:

---

Is the perpetrator a continuing threat? Yes ☐ No ☐ If so conduct a risk assessment and develop a safety plan with the survivor

---

If the perpetrator is a child (below 18 years old), please write name of parents/care givers:

**Address:**

**Relationship:**

**Contact number:**
### D - Witness (use additional paper if needed)

<table>
<thead>
<tr>
<th>Name, address and contact number:</th>
<th>Describe the event witnessed:</th>
</tr>
</thead>
</table>

### E - Actions taken/service received prior to this interview

<table>
<thead>
<tr>
<th>Has the incident been reported?</th>
<th>Yes ☐</th>
<th>No ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many times has the incident reported? Please write number:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Who the incident was reported to?</th>
<th>Dates reported</th>
<th>Responses to the report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police/Gendarmerie Name and address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local authorities (e.g. commune council, village chief) Name and address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Name and address:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Has the client received any social services already?</th>
<th>Yes ☐</th>
<th>No ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of service received</td>
<td>Date</td>
<td>Service provided by</td>
</tr>
<tr>
<td>--------------------------</td>
<td>------</td>
<td>--------------------</td>
</tr>
<tr>
<td>Counselling</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Further services/actions needed?</th>
<th>Yes ☐</th>
<th>No ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If yes, see Part II for the Assessment, Service and Referral planning guide</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Source: Case Management with Women Survivors of Gender-Based Violence: A Guide for Service Providers (Phnom Penh, 2017).*
## Part II: Assessment, Service and Referral Planning Guide

What are the services or actions that she needs or wants?

Share with her the different options for actions/services (Use additional pages if needed for more services)

<table>
<thead>
<tr>
<th>Current Needs of Survivor</th>
<th>Check if she needs</th>
<th>Planned Actions (date of this form)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If Refer - to whom will you refer?

Provide referral to Planned Actions needs if she refers to these services.

Notes, Survivor Comments, Circumstances to Follow-up, Etc.

- Other Services (list)
  - Vocational Training
  - Occupational Guidance
  - Emergency Aid
- Economic
  - Other (list)
  - Emergency Care for Injuries
  - Forensic Exam
- Safety Plan (Use Risk Assessment and Safety Planning Guide)
  - Other (list)
  - Other (list)
  - Domestic Violence Intervention
  - Legal Consultation
  - Legal Representation
  - Legal Consultation
  - Legal Consultation
  - Legal Consultation
  - Legal Consultation
- Social
  - Homeless Services
  - Other (list)
- Health
  - Other (list)

Prepared by: _______________________________________
Case manager/Focal person/Interviewer    Date: _______________________________________
This Consent Form has been included at the request of participants to the second consultation for the development of the guidelines and are not intended to be used as a model, but merely to show an example of a Consent Form.

Name of Victim/Plaintiff: ____________________________________  ID Number: _______________________

Service Provider: ___________________________  Location: ________________________________________

This form should be read to the victim/plaintiff or guardian in her first language. It should be clearly explained that by signing checking/listing any service provider this gives permission to share information as described below. The victim/plaintiff can choose any or none of the options listed. When a survivor cannot read or write, the counselor should take a verbal consensus and make note on her behalf.

I, _________________________________, give my permission to ____________________________________

Survivor/Complainant                         Service Provider

to share information about the incident I have reported as explained below:

• I understand that in giving my authorization below, I am giving this service provider permission to share the specific case information from my Case Registration Form with the service provider(s) I have indicated, so that I can receive help with safety, health, psychosocial, and/or legal needs.

• I understand that shared information will be treated with confidentiality and respect, and shared only as needed to provide the assistance I request.

• I understand that releasing this information means that a person from the agency or service ticked below may come to talk to me. At any point, I have the right to change my mind about sharing information with the designated agency/focal point listed below.

I give permission for information released to the following:

(Tick all that apply, and specify name, facility and agency/organization as applicable)

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Authorities (specify)</td>
<td></td>
</tr>
<tr>
<td>Police (specify)</td>
<td></td>
</tr>
<tr>
<td>Health/Medical Services (specify)</td>
<td></td>
</tr>
<tr>
<td>Safe Accommodation/Shelter (specify)</td>
<td></td>
</tr>
<tr>
<td>Legal Assistance (specify)</td>
<td></td>
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<tr>
<td>Counseling (specify)</td>
<td></td>
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<tr>
<td>Livelihood Services (specify)</td>
<td></td>
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<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
</tbody>
</table>

Signature/Thumbprint of Victim/Complainant: ________________________________________________
(or parent/guardian if victim is under 18)

Signature Case manager/Focal person/interviewer  ______________________  Date: ________________

The following data are selected from costing studies and do not provide a comprehensive analysis or summary of VAWG costing studies in ASEAN Member States.

Cambodia
UN Women VAW Costing Study

Key findings
- Complexity of funding streams, difficult to discern direct government funding for VAW
- Lack of funding coordination in addressing VAW/G through response services
- Itinerary of a VAW survivor in Cambodia

In 2012, UN Women Regional Office for Asia and the Pacific (ROAP) and UN Women Cambodia, in collaboration with Gender and Development for Cambodia, implemented a VAW costing study using a gender-responsive budgeting (GRB) approach to determine the costs of a multisectoral package of response services for women who had experienced violence. The report of the study was entitled *Costing a Multidisciplinary Package of Response Services for Women and Girls Subjected to Violence: A Gender Budgeting Approach – The Case of Cambodia.*

The GRB approach to costing was developed by UN Women in parallel to the elaboration of the study, which drew upon data from a variety of sources, including the National Committee for Subnational Democratic Development, international development agencies and NGO databases, and budgets and policy from relevant line ministries. Data were also gathered during fieldwork in communes in two provinces - Battambang and Kampong Cham.

The limited availability of budget data was a constraint on the study. At all levels of government there was a reluctance to share budget information. At the central level, state budget data were highly aggregated by economic categories of spending (such as personnel and operations), rather than by functions or activities. Incomplete archives and financial records were common in government offices. Almost all commune level authorities had paper-based administrative records. Data on donor and NGO budgets were classified by projects, and the records and classification system did not enable the researchers to compile a complete list of projects related to gender or VAW. At the subnational and local levels, funding for activities related to gender and VAW came through several channels which led to fragmentation in data management.

The report of the VAW costing study observed the following:

“there is extremely limited state budget explicitly allocated for services to respond to VAW. Support for the gender sector in general is limited and fragmented. Evidence from fieldwork supports the conclusion that some services exist for victims of violence against women; however, specific services and costs per beneficiary are not disaggregated in a way that allows for costs to be accurately calculated.”

In Cambodia, NGOs and CSOs are the primary service providers, funded by international donors. Despite the lack of official service provision by the Government, it is notable that “local authorities and local actors often provide referral services and informal mediation within their limited means, often at their own expense.” In fact, the findings of the costing study revealed significant concern and debate related to the costs associated with processing VAW cases and coordinating services, including transportation, for women who have experienced violence. Given the lack of budgeting, women often had to pay out-of-pocket for essential services, including informal fees and transportation costs.

The only government agency that had a substantial budget dedicated to social interventions was the Ministry of Health; however, there were no formal ethics protocols or standards for care for women who had experienced violence. As a result, the standard of care varied significantly between communities although local authorities believed it was their responsibility and duty to respond to cases of domestic violence. Yet, awareness of laws and policies related to domestic violence was not widespread, and police and local authorities often intervened by providing informal mediation and referrals.
The costing study found that the best short-term strategy to improve essential services to women who have experienced violence was “to earmark a portion of the recurrent budget to support activities specifically related to ending violence against women, while simultaneously continuing to support gender responsive budgeting activities across all sectors.”

Findings from the costing study reinforced the need for minimum quality standards and ethics protocols, accompanied by resources for capacity development.

**CARE prevalence and costing study on sexual harassment in the garment industry**

In 2017, CARE International in Cambodia published a report entitled *I know I cannot quit: The Prevalence and Productivity Cost of Sexual Harassment to the Cambodian Garment Industry.* Interviews with 1,287 garment workers (1,085 women and 198 men) in 52 factories revealed that sexual harassment is a serious and widespread problem for women working in the Cambodian garment industry. At the time of the study, women represented 85 per cent of the workers in the garment industry and 29 per cent of women garment factory workers had experienced sexual harassment in the workplace in the past 12 months. This study also found that sexual harassment had a significant economic impact on garment factories in terms of productivity costs; in particular, the research estimated the financial costs to the garment industry were US$89 million per year. This study also used human resource data to examine turnover costs, absenteeism and presenteeism among a representative sample of 546,467 workers in the Cambodian garment industry. It showed that sexual harassment is a barrier to equal participation in paid work and undermines the equal participation of women in the workplace. It also reduces worker productivity which leads to decreased productivity for businesses.

**Key findings**

- Decentralized budget makes discerning funding streams complex, but overall low investment in VAWG
- VAWG excluded from gender mainstreaming efforts
- Significant role of NGOs in providing services and lack of coordination among key actors

**Multidisciplinary Packages of Response Services for Women and Girls Subjected to Violence: A Gender Budgeting Approach – Case Study of Indonesia**

The methodology for this costing study was guided by the Manual for Costing a Multidisciplinary Package of Response Services for Women and Girls Subjected to Violence developed by UN Women Regional Office for Asia and the Pacific for use in Cambodia and Indonesia. Components of the study included: systematic document analysis (including legal, administrative, and policy documents) and mapping the general environment for advancing a multidisciplinary or holistic approach to preventing and combatting VAW; budgetary analysis of activities stipulated by the law and/or national plans or strategies on domestic violence with government budget and work plan; and fieldwork and data collection in 46 institutions. DKI Jakarta (Jakarta Special Capital Region) and Yogyakarta (DIY - Special Region of Yogyakarta) were selected as the research locations because these provinces had a greater density of services for women who had experienced domestic violence, compared to other provinces.

The VAW costing study found that, although the Indonesian Government made the policy on women and children’s protection a national priority, there were challenges when it came to policy implementation due to a lack of enforcement mechanisms and supporting infrastructure, and expenditures for support services. Furthermore, it was unclear which government institutions had authority to implement the policy. Decentralization legislation leaves policymaking to the higher levels of government, and implementation of VAW services to the lower levels of government. However, funds for direct services at the lower levels of government were insufficient to fulfil the needs of women who had experienced violence and train staff for service delivery. There were also no minimum standards for service provision to women who had experienced violence.

Study also revealed the referral system and integrated services developed under the Ministry of Social Services were not effectively implemented. There were no clear referral mechanisms between service units, including government agencies, and NGO or CSO service providers, and the budget for developing the referral system was mainly channelled to government agencies. For service providers, the costs of delivering services were far higher than their budgets.

**Indonesia VAW Costing Study**

In 2012, UN Women ROAP, UN Women Indonesia and the Centre for Population and Policy Studies at Gadjah Mada University collaborated to implement a small-scale VAW costing study using a GRB approach. The report of the VAW costing study was entitled *Costing a
This VAW costing study categorized budget allocations for VAW services in three ways. First, insufficient resource allocation resulted in low quality of services for women who had experienced violence. Second, no budget allocation for concrete VAW services resulted in no services provided. Third, VAW services were not properly budgeted, so the costs were assumed by service providers and even women accessing services.9

General recommendations of the costing study included the need for an enabling environment for the development of integrated services for women who had experienced violence. This could require legislation reform to ensure laws and policies related to VAW are aligned with services, and GRB to support VAW services.10 It was also recommended to develop the capacities of government and non-government institutions mandated to respond to domestic violence and to support women who had experienced violence. This would require engaging NGOs and CSOs more fully as partners in advising the Government on national action plans related to service design and implementing issues, and coordinating the implementation process given the Government’s budgetary constraints. The recommendations advocated for stronger inclusion of NGOs and CSOs in formal VAW referral systems, along with additional funding for logistics surrounding VAW services.11

**Lao People’s Democratic Republic VAW Costing Study**

In 2016, UN Women supported a VAW costing study in the Lao People’s Democratic Republic, *Estimating Resource Requirements for Responding to Violence against Women in Southeast Asia: Synthesis of Findings and Lessons*.12 The study began with an environmental scan, a review of international good practices and a consultative workshop with key stakeholders. The VAW costing study mapped existing services, identified gaps in service provision and defined priorities. There were significant challenges in getting to the level of detail required for costing, particularly for geographic coverage for the desired services, roll-out of services, and the breakdown of inputs for the minimum package of essential services. Data for unit costs were gathered through a survey of service providers across different sectors, including health, police, justice and women’s organizations. A total of 82 facilities were surveyed from six provinces and in Vientiane.

The study found the cost of delivering a minimum package of essential services for women who have experienced violence would amount to 0.25 per cent of GDP for the Lao People’s Democratic Republic, a fraction of the cost of VAW to families, communities and society at-large.13

In conclusion, the minimum package of essential services was determined to be feasible and reasonable to achieve as part of the country’s commitments to ending VAWG.

**Philippines VAW Costing Study**

In 1999, the National Commission on the Role of Filipino Women conducted research on the economic costs of VAW with support from the United Nations Population Fund. *The Economic Costs of Violence Against Women* included the costs to women who experience violence, costs to agencies that provide medical treatment for women who have experienced violence and the institutional budgets of the department of social welfare, health and law enforcement. The calculation was limited to selected incidences of violence that were reported to law enforcement agencies, hospitals and/or service providers. Other legal, emotional, physical and social costs were excluded from the research.

The framework for analysing the economic costs of VAW rested on measuring the expenditures of private and public agencies and organizations on activities related to prevention, treatment and monitoring of VAW. The economic costs of VAW were classified into three main groups: costs to the Government; costs to the person who had experienced violence; and costs to the community. According to the research, in 1997, the Government spent at least 3.7 billion Philippine pesos (about US$125 million) for activities related to gender and development. At the individual level, an estimated 19 million pesos (about US$645,000) was reportedly lost by women who had experienced violence. In addition, approximately 48 million pesos (about US$1.6 million) in expenses were incurred for medical and psychiatric treatments at shelters.14 The costs of other related expenses were not quantified.

The research concluded with recommendations to prevent incidents of VAW and to reduce the economic costs to society. The recommendations include: systematic data gathering and record-keeping; clear-cut and consistent policies on the criminalization of VAW and compliance with the gender and development budget and Call to Action on Domestic Violence; and involvement of local and other government units in responding to VAW.

An estimated 19 million pesos (about US$645,000) was reportedly lost by women who had experienced violence.

In addition, approximately 48 million pesos (about US$1.6 million) in expenses were incurred for medical and psychiatric treatments at shelters.

**Viet Nam VAW Costing Study**

In 2012, UN Women supported the implementation of a socioeconomic impact study on the costs of domestic violence in Viet Nam. The study was implemented by UN Women ROAP, UN Women Viet Nam, the National University of Ireland – Galway and the Institute for Family and Gender Studies to provide reliable estimates of the economic costs of domestic violence in Viet Nam.
The aim was to raise awareness on the cost of inaction on VAW for policymakers, NGOs and the general public. Objectives of the research were to estimate the cost of domestic violence and IPV and estimate the cost of service provision including health, police, justice and social services for women who experience violence.

The study used a mixed methods approach, including a survey of 1,053 women (541 rural, 512 urban) on experiences of domestic violence and its costs at the household level. The research considered two elements of the economic costs of domestic violence: 1) actual out-of-pocket expenditures that women incur to access medical treatment, police support, legal support, counselling support and judicial support; and 2) an additional out-of-pocket expenditure which is the lost school fees if children miss school due to domestic violence experienced by their mothers. It was found that the major element of economic cost is lost income due to missed work, including missed paid work and household work.

This study documented the high costs of domestic violence for women in Viet Nam. Health-care costs alone (including accessing health care, transport and medicine) came to an average cost of VND4,000 Vietnamese dong (VND) per incident, or about 28 per cent of a woman’s average monthly income. Other costs included replacing broken items, seeking shelter and seeking assistance from police, courts and other authorities. In total, the weighted average of the unit cost across all categories was estimated at VND600,000 or 21 per cent of the average monthly income for women in Viet Nam. Nevertheless, because women who experience violence tend to have lower earnings than average, the financial consequences of domestic violence and IPV are an even greater burden.

Another important cost was foregone earnings due to missed work. The loss of earnings per incident was estimated to be VND382,234 dong or 13 per cent of a woman’s average monthly income. Women also reported missing 33 hours of household work. Although this work is unpaid, it has an economic value of VND501,525 or 18 per cent of a woman’s average monthly income.

Men also lost earning equivalent to VND305,984 or 8 per cent of the average monthly income for men in Viet Nam. Taken together, the total cost per incident from household income was estimated to be 11 per cent of average household monthly income.

A major finding of this study was that domestic violence and IPV against women have a significant impact on earnings. More importantly, estimates of productivity loss due to violence indicated that women experiencing violence earn 35 per cent less than other women, representing another significant drain on the national economy.

A key objective of the study was to estimate the macro costs of domestic violence against women. For the economy as a whole, the potential opportunity cost, including out-of-pocket expenditures, lost earnings and value of missed housework, was estimated to be 1.41 per cent of GDP in 2010. The potential productivity loss is estimated to represent 1.78 per cent of the GDP.

The costs of domestic violence in Viet Nam:

- **28 per cent** of a woman’s average monthly income
- **21 per cent** of the average monthly income for women in Viet Nam
- **11 per cent** of average household monthly income
- Women experiencing violence earn **35 per cent** less than other women
- For the economy as a whole, the potential opportunity cost was estimated to be **1.41 per cent of GDP in 2010**
- **The potential productivity loss is estimated to represent 1.78 per cent of the GDP**

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2. Ibid, p. 10.
3. Ibid.
4. Ibid.
8. Ibid.
9. Ibid.
11. Ibid, p. 64.
13. Ibid, p. 3.
15. Currency as of 2000, $1=29.41P.
17. Ibid, pp. 2-3.
19. Ibid.
Annex F
List of participants to the consultations who contributed to the development of the guidelines

**Brunei Darussalam**
H.E Hajah Misnah binti Haji Bolhassan
Ms. Nurul Nazurah binti Jaya
Ms. Misnah Bolhassan

**Cambodia**
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Ms. Chhy Ratha
Ms. Sar Sineth
Mr. Phon Puthborey
Ms. Nith Sreya
Mr. Sokha Te
Mr. Vutha Phan
Ms. Robin Mauney

**Indonesia**
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Ms. Indah Lukitasari
Ms. Betty Ratnasari
Ms Lily Purba
Ms. Yuniyanti Chuaifah

**Lao People's Democratic Republic**
Ms. Sisavanh Detvongsone
Ms. Bounleua Chanthaphomma
Ms. Malaykhan Keopmounty
Ms. Soukphaphone Phanit
Ms. Chaleunnith Phanit

**Myanmar**
Ms. Than Than Win
Ms. Yuzana Kyin
Ms. Khin Khin Mra

**Malaysia**
Mr. Mohd Khairul Zamalluddin
Ms. Lai Keng Yap
Ms. Sae'dah Md Saleh
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