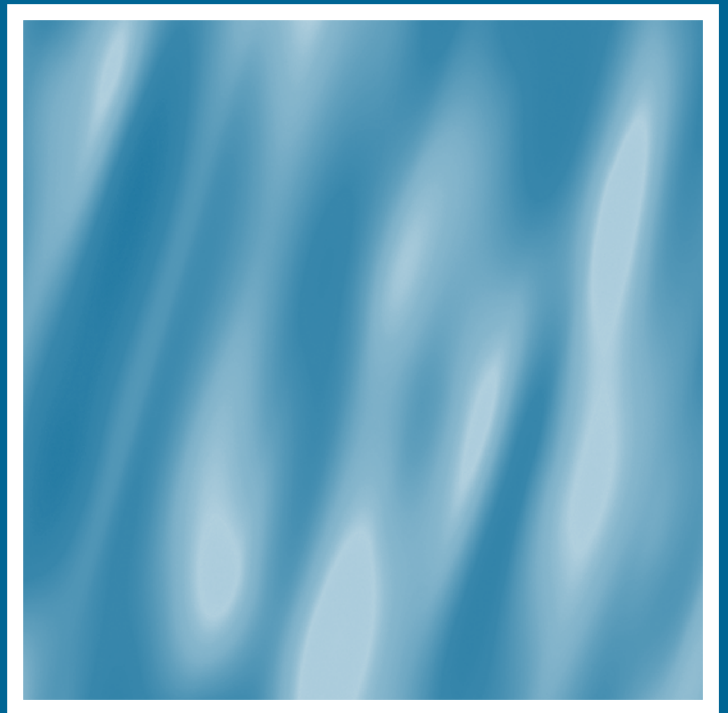


# Routine Screening for Domestic Violence Program

Snapshot Report 3, November 2005  
Snapshot Report 4, November 2006



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## SECTION 1

# Introduction

Domestic violence is an important public health issue that has a significant impact on the physical, psychological and social health of many women and children in New South Wales. In response to this issue, Area Health Services have since 2001 undertaken routine screening of female clients for domestic violence as an early intervention and prevention strategy.

The NSW Health *Policy and Procedures for Identifying and Responding to Domestic Violence* (2003) formalised this strategy. All women attending antenatal and early childhood health services, and women aged 16 years and over who attend mental health and alcohol and other drugs services are screened as part of routine assessment. The prevalence of domestic violence and associated risks are high for female patients/clients in these clinical groups.

NSW Health defines domestic violence as:

*"violent, abusive or intimidating behaviour carried out by an adult against a partner or former partner to control and dominate that person. Domestic violence causes fear, physical and/or psychological harm. It is most often violent, abusive or intimidating behaviour by a man against a woman. Living with domestic violence has a profound effect upon children and young people and constitutes a form of child abuse."*

The screening tool is based on this definition.

The screening tool consists of a preamble that contains key background information for women to assist them to make an informed decision about participating in the screening. This includes information on the health impacts of domestic violence, assurances relating to the standard questions asked of all women and the limits of confidentiality. If domestic violence is identified through asking two direct questions, two further questions are asked, one to ascertain safety and the other offering assistance (see Appendix 2 for screening form).

This report documents two one-month data snapshots of routine screening that were conducted in the eight Area Health Services across New South Wales in November 2005 and November 2006. Two previous snapshots were conducted in the same month in 2003 and 2004 using the same methodology.

The profile of screening presented by the snapshots provides the NSW Department of Health, Area Health Services and individual participating services with valuable information for monitoring the strategy's implementation and informing service development.

A comparison of the information compiled in 2005 and 2006 with the results of the previous snapshots provides a useful point of reference for reviewing progress in achieving desired program objectives and in facilitating a range of early and appropriate interventions for women who experience domestic violence.

The report shows that a significant number of women in New South Wales who are patients or clients of public health services are living with domestic violence.

## SECTION 2

# Snapshot methodology

Information was collected from each targeted program facility that was screening women for domestic violence in November 2005 and November 2006. Data from the screening forms were collected and collated according to program and Area Health Service.

Facilities were asked to compile data relating to the eligible patients who presented in the survey period. The data obtained included the number of eligible women attending the services, the number screened, responses to the questions and key actions taken, including reports to the NSW Department of Community Services (DoCS) and notifications to Police. Information on other referrals was also requested including whether the referral was made to a health service or a service outside health (See Appendix 3 for data collection forms and Appendix 4 for guidelines for data collection).

## SECTION 2

# Snapshot report 3: November 2005

### 3.1 Key findings

The key findings as at November 2005 are:

- 10,090 (62%) of the 16,290 women who attended the participating services were screened.
- This represents a 29% increase in the number screened but a reduction from the 2004 screening rate of 75%.
- All of the Area Health Services have introduced screening in the target program areas of antenatal, early childhood health, mental health and alcohol and other drugs services.
- 736 (7.3%) of the women screened had experienced domestic violence in the previous 12 months, according to the screening questions.
- The rate of identification of domestic violence at 7.3% is higher than 2004 (6.5%), and consistent with 7% in 2003.
- The percentage of women accepting the offer of assistance, 22.6%, decreased significantly from 71% in 2004.
- The number of Police notifications was 27 (3.7%) of those identified, consistent with 4% in 2004.
- The percentage of child at risk of harm reports to the Department of Community Services (DoCS) significantly increased from 12% in 2004 to 20% in 2005.
- The number of referrals to other services decreased significantly from 49% in 2004 to 28.6% in 2005.
- The presence of partners (27%) and presence of others (21%) were recorded as main reasons for not screening. For 39.8%, 'other reason' was noted.

# Overall results

## 4.1 Extent of screening in November 2005

- Screening was implemented in the eight Area Health Services in all or most of the target programs.
- Some clusters in Greater Western and Sydney South West had not commenced screening.
- Data was not provided from some services in Greater Western that were screening.
- There were data extraction issues in some drug and alcohol and community health services in Greater Western and incomplete data provided by some mental health services in North Sydney / Central Coast. As data from these services was incomplete, it was not used in this report.

## 4.2 Screening rate

- A total of 16,290 women were counted as eligible clients/patients by all services participating in the screening snapshot. This is a significant increase of 57.5% from 2004, when 10,343 women attended these services. This indicates an increase in the number of services conducting screening, particularly in early childhood health and mental health services.
- Early childhood health saw the highest number of women (5,744), followed by antenatal services (4,679), mental health (1,577) and alcohol and other drugs (906). The total number of women attending additional programs was 2,933 and 451 attended women's health nursing services.<sup>1</sup>
- Of the 16,290 women attending these services, 10,090 women were screened. The number screened is a 29.8% increase from that in 2004, giving a screening rate of 62%, a decrease from 70% in 2004 (see Figure 2).

Figure 1: Screening in Area Health Services

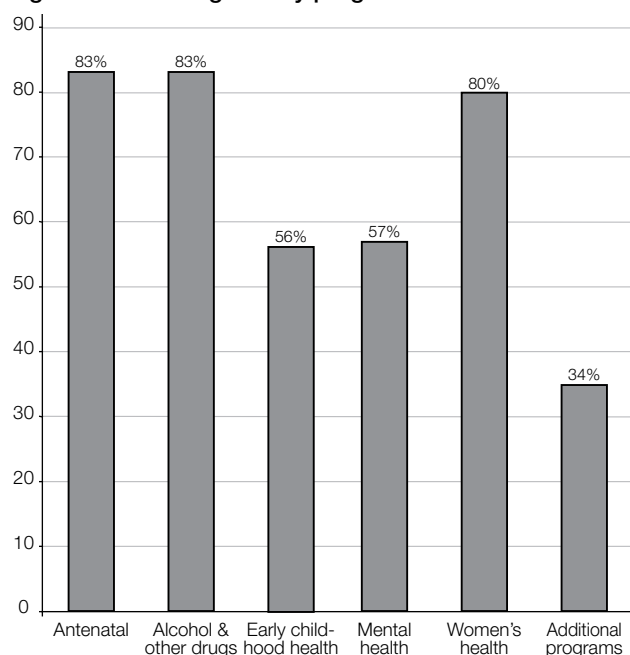
Area Health Service	antenatal	early childhood health	mental health	alcohol and other drugs	women's health nursing	additional programs
Greater Southern (GS)	✓	✓	✓	✓	✓	✓
Greater Western (GW)	✓	✓	*	✓	✓	
Hunter / New England (HNE)	✓	✓	✓	✓	✓	
North Coast (NC)	✓	✓	✓	✓	✓	
Northern Sydney / Central Coast (NSCC)	✓	✓	✓	✓		✓
South Eastern Sydney / Illawarra (SESI)	✓	✓	✓	✓	✓	✓
Sydney South West (SSW)	✓	✓	✓	✓		
Sydney West (SW)	✓	✓**	✓	✓		✓

\* Incomplete data provided, unable to be included

\*\* Data for ECH is included in additional programs

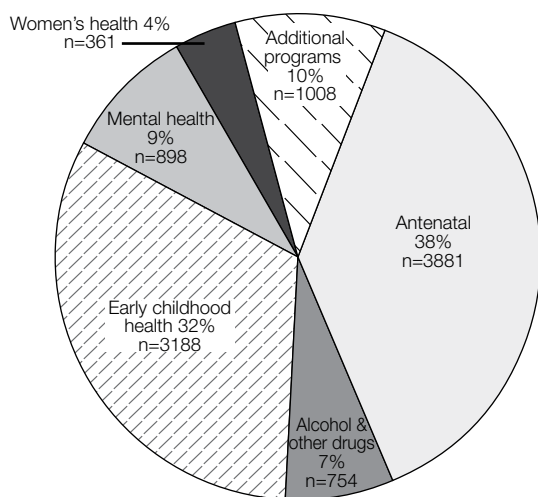
1. Sydney West Area Health Service provided combined data for a range of community health services including Early Childhood Health. As the data were unable to be separated, all data has been included in Additional Programs.

**Figure 2: Screening rate by program**



- Antenatal and early childhood health services are the programs where most screening occurred in 2005, comprising 38.5% and 31.5% respectively of all women screened. Mental health services account for 8.9% of the screening and alcohol and other drugs for 7.5% (see Figure 3).

**Figure 3: Percentage of women screened by program**



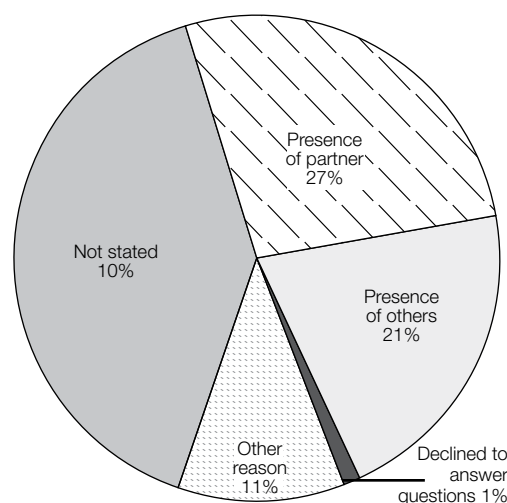
#### 4.3 Reasons screening not completed

- The most frequently given reasons for not screening were the presence of partner (27%) or others (21%) (see Figure 4).
- For 40% of women not screened, no reason was provided.
- One percent of women declined to answer the question, as in 2004.
- 11% of women were not screened for other reasons. Information provided in the 'comments' section

provided some other reasons for not screening including: no current relationship, no interpreter available, woman too unwell, no time available in consultation and domestic violence already identified. One specialised metropolitan postnatal social work service deals with referrals from early childhood health and noted domestic violence as a major reason for referral. 28 of the 95 women were referred for this reason alone in the snapshot period and were therefore not screened by this service.

- Incompleteness of the data reflected by the high percentage in 'not stated' may not accurately reflect the reasons for not completing screening.

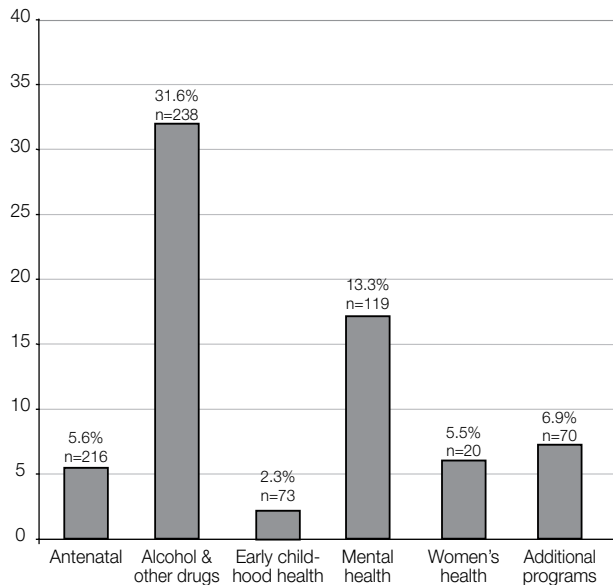
**Figure 4: Reasons for not completing screening**



#### 4.4 Domestic violence identified

- A women was identified as a victim of domestic violence if she answered 'yes' to either or both of the following questions: 'Within the last year have you been hit, slapped or hurt in other ways by your partner or ex-partner?' and 'Are you frightened of your partner or ex-partner?'
- 736 women, 7.3% of the women screened, identified domestic violence according to the screening questions. This is higher but remains consistent with previous snapshots when the prevalence was 6.5% to 7% (see Figure 5).
- The disclosure rates were not consistent across all programs being 5.6% in antenatal, 2.3% in early childhood health, 31.6% in alcohol and other drugs, and 13.3% in mental health.
- Compared with the 2004 snapshot, the positive identification rate has increased in alcohol and other drugs services, decreased in early childhood health and mental health services, but remained consistent in antenatal services.

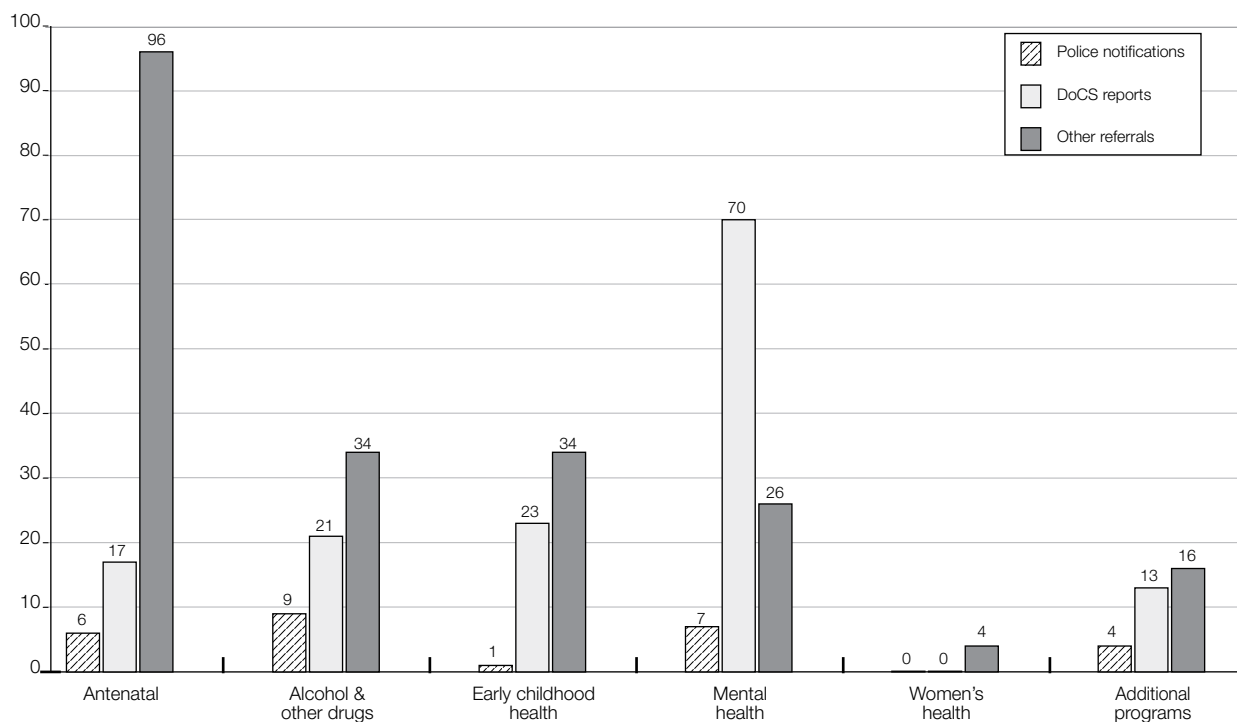
**Figure 5: Percentage of women disclosing domestic violence in response to questions by program**



#### 4.5 Assistance accepted and action taken

■ 166 (22.6%) women who identified domestic violence also accepted the offer of assistance. This is a significant decrease from 71% in 2004. Given the figure of 454 or 61.7% who were given support and information, and subsequent number of referrals and reports to statutory authorities, this figure may not be accurate (see Figure 6).

**Figure 6: Action taken by program**



2. The number of other referrals does not always match the numbers noted in the section on referrals within health or to outside services. Staff may have recorded referrals made for other reasons, or not documented the total number of referrals.

- 144 reports were made to DoCS and 27 notifications were made to Police. The relative number of DoCS referrals has significantly increased from 12% in 2004 to 20% in 2005. This may be due to more thorough assessment after identification, or, the possibility of some services making reports at the point of identification. There were 70 reports from mental health services, 59% of those identified through the screening process, indicating an increased awareness of the possible child at risk implications.
- There was a significant decrease in the rate of referrals to other services from 49% in 2004 to 28.6% in 2005. 210 other referrals were made. Those listed included 140 to other health services and 50 to services outside NSW Health.<sup>2</sup> Some women received more than one referral.
- As in previous snapshots, intrahealth referrals were most often made to social workers and specialist support programs and some to other mental health or alcohol and other drugs services. Referrals outside the health system were made to domestic violence court assistance schemes, women's refuges, family support services, Police Domestic Violence Liaison Officers, and to counselling services including victims of crime services and services that provide groupwork.

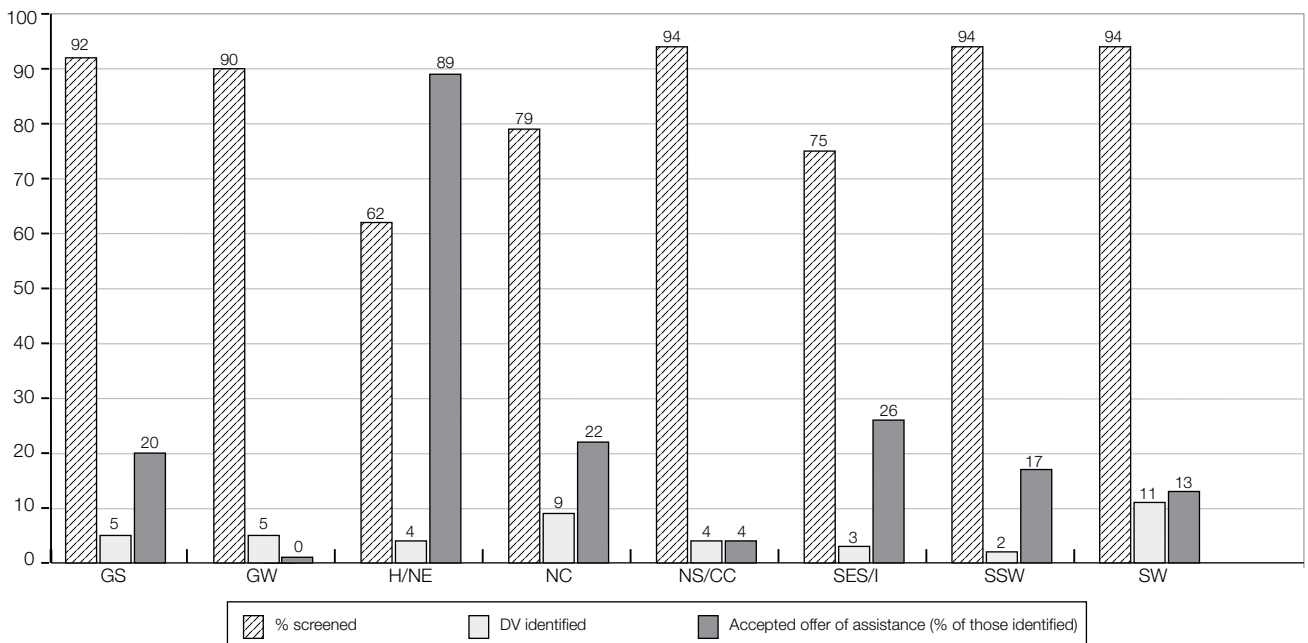
SECTION 5

# Results by target programs

## 5.1 Antenatal services

- All Area Health Services have introduced screening in antenatal services.
- 3881 (83%) of the 4,679 women who attended antenatal services were screened. This is a slight decrease but consistent with rate recorded in 2004 (85%).
- The presence of a partner (38.9%) or others (16.5%) as a reason for not participating in screening accounted for a total 51.4% of women not screened. This is similar to 54% in 2004, and indicates that some services have been successful in implementing strategies to interview the woman alone.
- 216 (5.6%) women were identified as having experienced domestic violence in the previous 12 months. This is consistent with 5% in 2004.
- 20.8% of the women identified as having experienced domestic violence accepted an offer of assistance.
- 17 (7.9%) reports were made to DoCS and six notifications (3%) were made to Police.
- 96 (44.4%) other referrals were made.
- Both the numbers screened and positive identification rate have remained relatively stable in antenatal services.

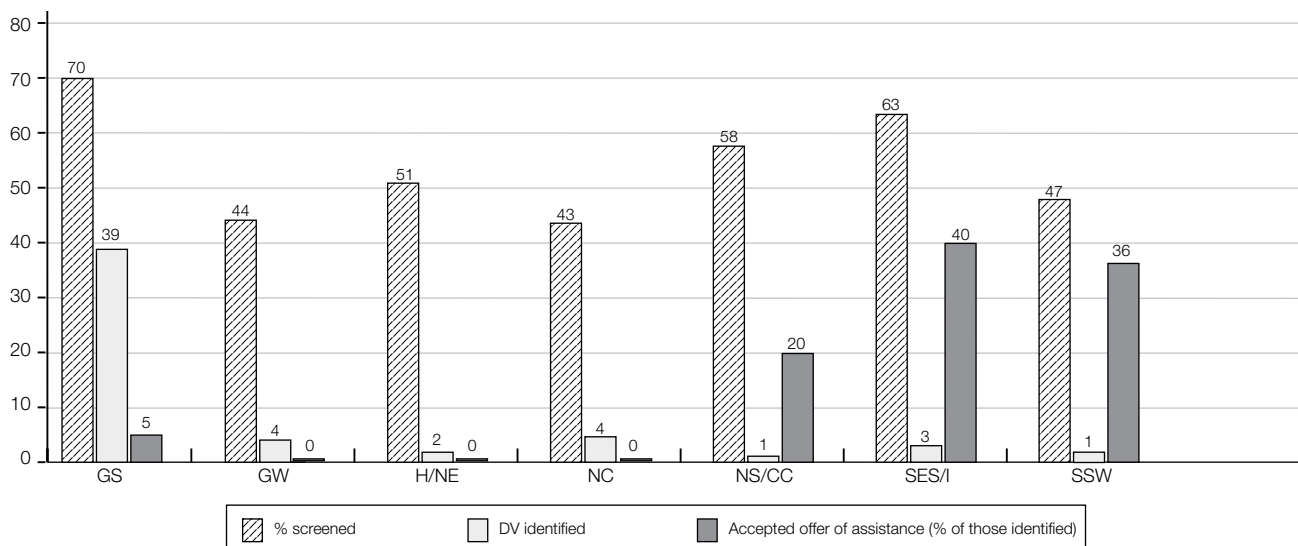
Figure 7: Antenatal services



## 5.2 Early childhood health services

- All Area Health Services have introduced screening in early childhood health services. As noted above, data from Sydney West has not been included in this section, as it was inextricable from general community health data.
- 3,188 (55.5%) of the 5,744 women attending these services were screened, which is similar to the 58% in 2004. The numbers of women presenting at early childhood health services which provide screening and those successfully screened have increased by 51.4% and 44.2% respectively, indicating an increase in services now implementing this program.
- The presence of a partner (42%) or others (29%) as a reason for not completing screening accounted for 71% of women not being screened. This suggests that having or creating the opportunities to interview the woman in private remains an issue for this service environment.
- 73 (2.3%) women were identified as having experienced domestic violence in the previous 12 months. This is a decrease from both 4% in 2004 and 3% in 2003.
- 54.6% of those women identified as having experienced domestic violence accepted an offer of assistance.
- 35 (48%) reports were made to DoCS and 6 (8%) notifications were made to Police.
- 34 (47%) other referrals were made.

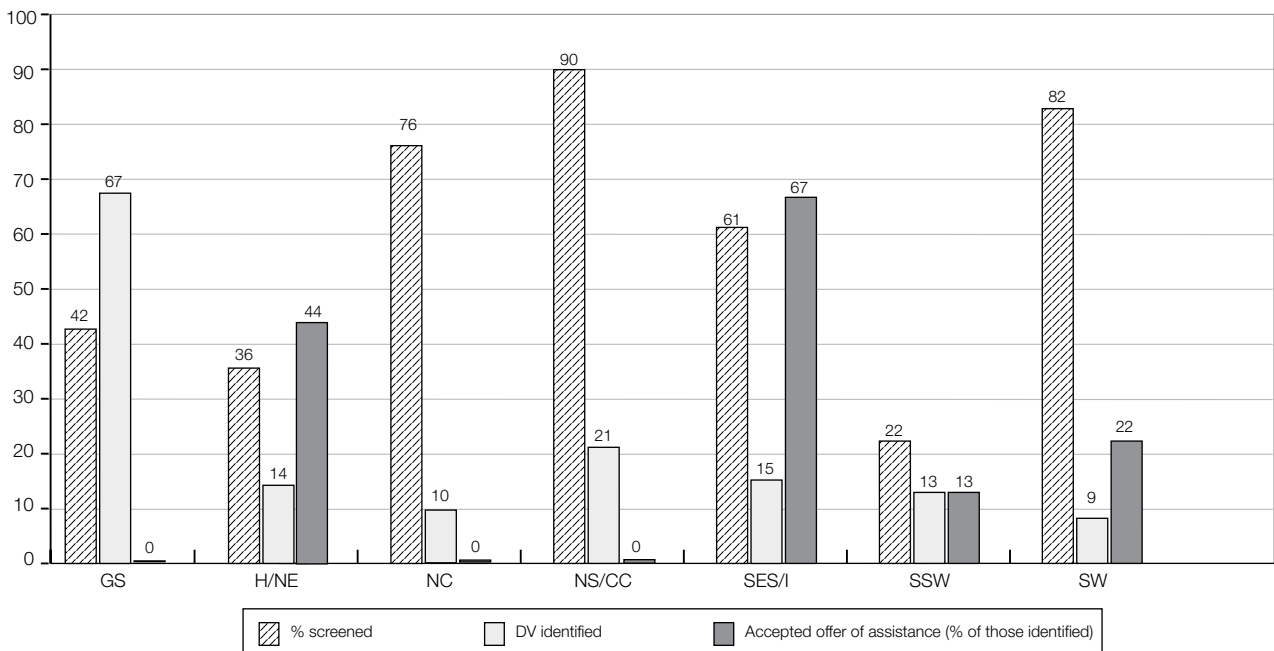
Figure 8: Early childhood health services



### 5.3 Mental health services

- All Area Health Services have introduced screening in mental health services. Greater Western has yet to commence screening in the Remote Cluster and Central, Mitchell and Castlereagh clusters. Although some services in the Southern and Eastern clusters of Greater Western are screening, data was not provided due to data extraction difficulties. There were also data problems in two Northern Sydney /Central Coast services which precluded their inclusion in the snapshot.
- 898 (57%) of the 1,577 women attending these services were screened. The numbers screened have more than doubled indicating an increase in services providing screening. The screening rate has decreased from 66% in 2004.
- 119 women (13.3%) were identified as having experienced domestic violence in the previous 12 months, which is a decrease from the 2004 rate of 19%.
- 40.3% of the women identified as having experienced domestic violence accepted an offer of assistance.
- 35 (18.6%) reports were made to DoCS and seven (5.9%) notifications were made to Police.
- 26 (21.8%) other referrals were made.

Figure 9: Mental health services



## 5.4 Alcohol and other drugs services

- All Area Health Services have introduced screening in alcohol and other drugs services.
- 754 (83%) of the 906 women attending these services were screened. This is similar to the screening rate of 85% in November 2004. The number of women presenting has more than doubled indicating a larger number of services are now screening.
- 238 (31.6%) women were identified as having experienced domestic violence in the previous 12 months. This is an increase from 27% in 2004.
- 46 (19.3%) women who were identified as having experienced domestic violence accepted an offer of assistance. This is a significant decrease from 2004 (56%).
- 21 (8.8%) reports were made to DoCS and nine (3.8%) notifications were made to Police.
- 34 (14.3%) referrals were made to other services.

Figure 10: Alcohol and other drugs services

