

DOCUMENTS DE TRAVAIL 212

VIRAGE Survey

Violence and Gender Relations: Contexts and Consequences of Violence Against Women and Men

Survey project description

Survey coordinator
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Working document

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1 AN INSTITUTIONAL APPEAL FOR KNOWLEDGE REGARDING VIOLENCE AGAINST WOMEN

Policies aimed at combating violence against women were given substance in the international forum in 1985, during the UN's Third World Conference on Women in Nairobi. Since then, international organizations and European institutions have developed recommendations and implemented action plans to try to eradicate violence of this kind; furthermore, measuring the extent of these action plans has become a key concern for national governments. The Platform for Action resulting from the Fourth World Conference on Women in Beijing in 1995 invited states to "promote research, collect data and compile statistics [...] relating to the prevalence of different forms of violence against women and encourage research into the causes, nature, seriousness and consequences of violence against women and the effectiveness of measures implemented to prevent and redress violence against women." A European convention currently being drafted, which seeks to eradicate violence against women, will soon mark a new stage in this process.

At national level in France, a mission to assess the policy of preventing and combating violence against women, attached to the French National Assembly, was set up in 2009. It has published an information report¹ containing numerous proposals aimed at developing a public policy to combat such violence. These proposals reflect the importance accorded to the statistical measurement of violence perpetrated against women and lists a series of surveys that it would like to see conducted, including "the organization of a new survey on violence against women modelled on ENVEFF" (proposal 2). On 25 November 2009, the then prime minister François Fillon announced, in a speech on combating violence against women, a series of measures including conducting a survey that replicates ENVEFF: "Finally, we should make the necessary resources available to enable more effective measurement of the extent of violence against women. From 2010 onwards, we shall launch a new survey on this theme based on the work already undertaken by the National Institute for Demographic Studies [INED]."

To accommodate these requests, and bearing in mind the research on violence already undertaken by INED over the last decade, a research team, composed of five female researchers,² was set up within the "Demography, Gender and Society" research unit to realize this project. The aim of the resultant survey would be to fulfil the needs expressed, not just by public authorities, but also by associations and professionals involved in providing support for victims and perpetrators of violence. To obtain a better understanding of these expectations, a meeting was organized at INED in late June 2011, attended by 12 associations,³ four doctors (from the fields of forensics, psychiatry and psychology), two lawyers and three police officers from the French interior ministry's Délégation aux victimes (Commission for Victims). This day-long event brought to light the convergence of the various priorities expressed by the public authorities and civil society towards the need to update and extend knowledge on violence against women, particularly within the family context (by paying greater attention to the situation of children in contexts of intimate-partner violence), and fill

¹ Danielle Bousquet, chair of the Mission d'évaluation de la politique de prévention et de lutte contre les violences faites aux femmes, 2009, *Violences faites aux femmes : mettre enfin un terme à l'inacceptable*, information report, no. 1799, Paris, Assemblée nationale, vols. 1 and 2.

² Elizabeth Brown (CRIDUP, Université Paris-1), Catherine Cavalin (Centre d'études de l'emploi), Sylvie Cromer (Université de Lille-2), Christelle Hamel (INED), Magali Mazuy (INED, Centre Max Weber).

³ Namely: Association contre les violences faites aux femmes au travail; Collectif féministe contre le viol; Collectif national pour les droits des femmes; Élués contre les violences faites aux femmes; Femmes pour le dire, femmes pour agir; Femmes solidaires-Fédération nationale solidarité femmes; Groupe pour l'abolition des mutilations sexuelles; Le Planning familial; Observatoire des violences de Seine-Saint-Denis; SOS Homophobie; and Voix de femmes.

knowledge gaps such as those concerning violence in the workplace.⁴ The associations also raised questions absent from the 3^e *Plan triennal interministériel de lutte contre les violences faites aux femmes* (3rd Triennial Interministerial Action Plan on Violence against Women, 2011–2013). They emphasized the lack of knowledge regarding outcomes for victims: what are their educational, occupational and family trajectories like? They also highlighted the fact that emergency support and accommodation facilities vary from one region to another. Finally, they underlined the need to take account of the specific contexts of certain minority populations in situations where multiple factors of social vulnerability exist: migrant women, homosexual individuals and disabled people.

Finally, with the need to combat violence against women having been declared a “major national cause” for 2010 by the French government, a wide-ranging information campaign was launched. The recommissioning of a national survey will enable comparisons with data from ENVEFF and the surveys that followed in its wake on the subject of violence, such as *Événements de vie et santé* (EVS – Life Events and Health; DREES, 2006) and the annual *Cadre de vie et sécurité* (CVS – Living Environment and Security) surveys, which mainly provide information about prevalence, and tell us relatively little about the contexts and long-term consequences of violence suffered by women and men.

2 FROM STUDYING VIOLENCE AGAINST WOMEN TO STUDYING VIOLENCE FROM A GENDER PERSPECTIVE

Research into violence against women, though quite a recent and relatively undeveloped field in France, already benefits from a vast corpus of knowledge, the methodology of which was mostly developed in English-speaking countries. Here, a brief history of this field of research is necessary in order to situate this new survey within the French context. Action to raise awareness of, and condemn, violence against women was initially led by the feminist movement in the early 1970s. The first studies conducted by female researchers in the 1970s and 1980s laid the groundwork for analyses of this violence within the general framework of social relations, or “gender relations”, which produce the structural inequalities between women and men in all spheres of society (family, education, employment, access to political power, etc.). Violence against women was therefore analysed as both a consequence of these structural inequalities and an instrument for maintaining them.⁵ This analysis also emphasizes the differentiated socialization of women and men, which leads to different uses of violence according to gender. It has also been established that the use of violence is, socially, more a male than female trait, and that the kinds of violence suffered by men and by women are not the same. For this reason, both in scientific research and in many texts produced by international organizations, we now talk about “gender-based violence”.⁶

⁴ The 2011–2013 *Plan interministériel de lutte contre les violences faites aux femmes* (Interministerial Action Plan on Violence against Women) lists a series of quantitative surveys that were due to be conducted over this three-year period. In particular, this included a survey on violence in the workplace, both in the three parts of the French civil service and in the private sector, and a study concerning children in contexts of intimate-partner violence.

This action plan was drafted by the Service des droits des femmes et de l'égalité entre les hommes et les femmes (Department for Women's Rights and Equality Between Men and Women), under the control of the French Ministry for Solidarity and Social Cohesion (and more specifically the Directorate-General for Social Cohesion).

⁵ Hanmer, J., 1977, “Violence et contrôle social des femmes”, *Questions féministes*, no. 1, pp. 69–88.

Kelly, L., 1988, *Surviving Sexual Violence*, Cambridge, Polity Press.

Romito, P., 2006, *Un silence de mortes. La violence masculine occultée*, Paris, Syllepse, “Nouvelles questions féministes” collection, 298 pages.

⁶ For instance, the Population Association of America (PAA) has a “Gender-Based Violence” research network.

In the wake of these developments, the primary objective of the *Violence and Gender Relations: Contexts and Consequences of Violence Against Women and Men* (VIRAGE) survey is to study the diverse types of violence suffered by women and men, as well as the outcomes for victims. To achieve this, the survey will collect data on the contexts in which this violence is experienced, together with its consequences.

3 STATISTICAL KNOWLEDGE ON VIOLENCE IN FRANCE

In France, sociologists, demographers and epidemiologists have been central to the process of producing statistical data on this subject. The *Enquête nationale sur les violences envers les femmes en France* (ENVEFF – National Survey on Violence Against Women in France)⁷ conducted in 2000 by IDUP (the Université Paris-1 Institute of Demography) was the first scientific operation in France to measure the extent of violence suffered by women nationwide and, as such, is the reference survey in terms of analysing such violence with regard to gender relations, in a context where crime victimization surveys (conducted in France since the 1980s on limited samples and at irregular intervals) at the time took into consideration neither rape nor intimate-partner violence. Other surveys, not specifically regarding violence against women, have subsequently addressed this issue. Surveys on sexuality⁸ and health⁹ have included violence within the scope of their research objectives. These surveys identified a limited number of violent acts, each in a restrictive framework that used data concerning these acts to explain other social realities (e.g. relating to health), but violence was not a research object in itself. This is the case for the *Contexte de la sexualité en France* (CSF – Context of Sexuality in France; 2005–2006) and *Baromètre santé* (Health Barometer) surveys. The *Événements de vie et Santé* (EVS – Life Events and Health; 2005–2006) survey, by contrast, is more focused on the study of violence as a difficult life event. In recent years, crime victimization surveys have also included sexual violence and violence in family contexts within their scope.

In order to explain the precise contributions that our project will make with respect to the knowledge already produced by recent surveys, we need to examine the respective characteristics of these surveys more closely. We shall proceed chronologically, in order to show how knowledge and methodological advances have been built up with each new survey.

⁷ Jaspard, M. *et al.*, 2003, *Les Violences envers les femmes en France. Une enquête nationale*, Paris, La Documentation française, “Droits des femmes” collection, 370 pages.

⁸ In particular, the *Contexte de la sexualité en France* (CSF – Context of Sexuality in France) survey, conducted by INED and INSERM in 2005–2006, following on from surveys such as the *Analyse des comportements sexuels en France* (ACSF – Analysis of Sexual Behaviour in France, INED–INSERM–CNRS, 1992) and the *Analyse du comportement sexuel des jeunes* (ACSJ – Analysis of Young People’s Sexual Behaviour, ANRS, 1994).

⁹ In particular, the *Baromètre santé* (Health Barometer) survey, periodically conducted by INPES (the latest edition of which was in 2010; results forthcoming), and the *Événements de vie et Santé* (EVS – Life Events and Health) survey, conducted by DREES in 2006.

3.1 *ENQUETE NATIONALE SUR LES VIOLENCES ENVERS LES FEMMES EN FRANCE (ENVEFF – NATIONAL SURVEY ON VIOLENCE AGAINST WOMEN IN FRANCE; 2000)*

3.1.1. Issues and objectives

The *Enquête nationale sur les violences envers les femmes en France* (ENVEFF – National Survey on Violence Against Women in France), conducted by the Institute of Demography of the Université Paris-1 (IDUP) in 2000, involved telephone interviews with 7,000 women aged 20 to 59 residing in private households.

This survey used its own definition of violence, which did not correspond to police or legal categories, expressed in terms of crimes, but instead were formulated – in reference to the universality of human rights – as any harm to the integrity of the person in question:

“Whatever the nature, and whoever the protagonists, of violent acts, such acts are always a violation of the integrity of the person concerned. [...] In addition to the acts themselves, violence involves one person gaining or maintaining power over another. It is based on a power relationship that manifests itself through physical or mental abuse between at least two people. More generally, it is the manifestation of one person’s desire to impose their will on the other, to dominate them, if necessary by humiliating, demeaning and harassing them until they capitulate and submit. Unlike conflict, which is an interactive form of relationship liable to bring about change, violence – a sign of an inability to communicate, moreover – is perpetrated in an unequivocal, destructive fashion.”¹⁰

The ENVEFF survey sought to record acts of violence declared by women. Indeed, it was the first French survey to examine interpersonal violence, in the broadest sense, and gather information regarding women exposed to verbal, physical, sexual or psychological abuse, in different “ordinary” situations (in public spaces or in private).¹¹ In particular, its detailed approach to violence perpetrated within intimate relationships (current or previous relationship) or by family members or close friends highlights – for the first time in France – the many different forms that violence can take within the domestic sphere, as well as the frequency with which it occurs, and interprets these occurrences in the wider context of an understanding of gender relations.¹²

From a methodological standpoint, violence is not perceived as an overarching, abstract reality: each form of violent abuse has its own factual description (systematic belittlement, insults, kicking, punching, striking with objects, deprivation of liberty, expulsion from the household, etc.). There is therefore never any mention of “aggression” or “violence” in the formulation of questions in the survey. For example, in order to garner information regarding any occurrences of sexual assault within an intimate relationship, respondents are asked the following two questions: “Has your partner ever used force in order to have sexual relations with you?” and “Has your partner ever imposed sexual acts to which you did not consent?”.

¹⁰ Jaspard, M. *et al.*, 2003, *op. cit.*, pp. 17–18.

¹¹ Damage to possessions is not included in the ENVEFF questionnaire unless it is associated with an attack perpetrated directly against the person. For example, a theft alone is not counted; thefts are only taken into consideration when accompanied by insults, blows or other acts against the person in the course of (and often to facilitate, from the perpetrator’s viewpoint) predation.

¹² For example, statistical correlations can be found between the occurrence of violence and the state of an individual’s intimate relationship. Like the different acts of violence, the state of a respondent’s intimate relationship is addressed not in general, abstract terms, but by evoking actual situations.

These wordings focus on situations of violence or humiliation rather than on the legal definitions of crimes or offences, although the two are not completely disconnected.

Different experiences of violence are recorded successively in different “spheres” or contexts – namely family and close friends, intimate relationships (with a current or former partner), public spaces, and the workplace or place of study – as this structure improves respondents’ recollections of events. Finally, violent acts experienced over the last 12 months are recorded, together with a limited number of violent acts experienced throughout the respondent’s lifetime.

In the ENVEFF survey, information on respondents’ state of health was collected via both “conventional” questions on healthcare and medication consumption over the previous 12 months and questions with a direct link to violence suffered (traumatology), sexual behaviour and any associated risks taken, consumption of alcohol and illicit drugs, and mental health. ENVEFF approached health issues as consequences of violence suffered and as elements indicating the severity of the violence, and thus also as a means of characterizing such violence.

3.1.2. Key findings

The most important results from the ENVEFF survey include, first and foremost, the fact that, for the majority of victims interviewed, this was the first time they had ever talked about the violence they had suffered (except where a serious injury had forced them to go to hospital or see a doctor). This silence was all the greater in cases where incidents occurred within close relationships (with an intimate partner or with family) or involved sexual violence. Incidents were rarely reported to the police. The silence surrounding this violence has proved highly significant.

Another important finding was that all social categories are affected by violence in all spheres of life. Although profession has little bearing on respondents’ exposure to violence, the frequency of intimate-partner violence tends to increase if one or other partner is unemployed or in an unstable occupational situation.

Whether the abuse in question is verbal, psychological, physical or sexual, rates of violence are almost always higher within intimate relationships than in any other sphere: psychological pressure is frequently encountered and often recurrent; reports of physical abuse are 1.5 times more likely in this sphere than in public spaces; and, in cases where women reported having suffered one or more rapes during the previous 12 months, the rapes in question occurred within the context of intimate relationships nine times out of ten.

While relations with family members (other than intimate partners) and close friends over the previous 12 months appeared, in 99% of cases, to be free of any physical or sexual abuse, physical violence suffered in the course of respondents’ lives since the age of 18¹³ was mostly perpetrated by a current or former intimate partner and, in 18% of cases, by the respondent’s father or mother. Most of the sexual violence suffered throughout respondents’ lives involved sexual touching before the age of 15. Most occurrences of attempted or actual rape occurred after the age of 18.

Young women are more often victims of abuse of all kinds than older women, in all spheres, including the workplace. Furthermore, for women who live with their intimate partner and who are in employment, there is a positive correlation between workplace violence and intimate-partner violence, which suggests that it would be useful to analyse

¹³ Excluding the previous 12 months.

interactions between different spheres. Difficulties experienced in childhood, which often lead to an early departure from the parental home and consequently a lack of education and/or training and a more vulnerable socio-economic position, are one of the main factors that increase the risk of violence in all spheres.

3.1.3. Replication of ENVEFF in French overseas territories

Three surveys, very similar to ENVEFF in mainland France, were conducted in Réunion (an overseas *département* and region) and French Polynesia (an “overseas country”) in 2002, and in New Caledonia (a special overseas collectivity) in 2003.¹⁴ All three surveys targeted women only and involved small population samples (1,213 respondents in Réunion, 1,001 in French Polynesia and 1,013 in New Caledonia). The questionnaire, though adapted to local realities and language specificities, remained very similar to the one used for ENVEFF in mainland France. As a result, it has been possible to make a number of comparisons:¹⁵ overall, rates of violence, by type of act and by sphere, are of similar levels in Réunion as in mainland France, while they are much higher in French Polynesia and New Caledonia. The impact of violence in childhood – particularly physical and sexual abuse – on the frequency of violence experienced in adulthood was found in all three areas; however, although all socio-professional and cultural backgrounds were affected, women with a high level of education working in socially valued professions seemed to be protected to a greater extent, especially within their intimate relationships – which contrasts with the trends observed in mainland France.

In 2008, the survey called *Genre et violences interpersonnelles en Martinique*¹⁶ (Gender and interpersonal violence in Martinique) was conducted according to the same general principles (questionnaire structured by spheres, questions relating to specific acts, etc.), but this time involving a sample of both women and men: 1,000 women and 500 men for the main questionnaire, plus 126 women and 500 men for a short questionnaire for interviews conducted via respondents’ mobile phones. For women, the rates of violence and the factors contributing to variations thereof were often similar to those observed in mainland France and Réunion, but with higher levels of sexual violence (which could perhaps be explained by a greater willingness to report such acts among respondents following anti-violence campaigns).

One of the major findings of this survey was that men declared virtually as much violence as women (and even more so with regard to the public sphere); however, for any given question, they would often cite acts with less serious consequences than those cited by women: they would often describe physical attacks by their spouse or girlfriend as “not

¹⁴ Jaspard, M., Brown, E., Pirus, C., 2003, *Enquête quantitative sur les violences envers les femmes en Polynésie française. Rapport final*, Paris/Papeete, IDUP/Direction de la santé en Polynésie française.

Brown, E., Jaspard, M., Pourette, D., 2004, “Les violences envers les femmes dans le cadre du couple en Polynésie française”, *Espace, populations, sociétés*, no. 2.

Widmer, I., 2003, *Enquête nationale sur les violences envers les femmes en France à l’île de La Réunion, ENVEFF–Réunion. Rapport final, enquête quantitative*, INED, December.

Widmer, I., Pourette, D., 2009, *Les violences envers les femmes à l’île de La Réunion : poids des chiffres, paroles de victimes*, Aix-en-Provence, Publications de l’Université de Provence, “Monde contemporain” collection.

Salomon, C., Hamelin, C., Goldberg, P., Sitta, R., Cyr, D., Nakache, J.-P., Goldberg, M., 2004, “Premiers résultats de l’enquête santé, conditions de vie et de sécurité des femmes calédoniennes”, *Rapport INSERM U88*, February.

¹⁵ Brown, E., Widmer, I., 2007, “Les violences envers les femmes en France : continuités et différences au-delà des mers”, in Chetcuti, N., Jaspard, M. (eds.), 2007, *Violences envers les femmes, « trois pas en avant, deux pas en arrière »*, Paris, L’Harmattan, “Bibliothèque du féminisme” collection, March.

¹⁶ Lefaucheur, N., Brown, E. (eds.), 2011, “Genre et violences à la Martinique”, *Pouvoirs dans la Caraïbe*, Paris, L’Harmattan, October.

serious” and consider that forced sexual relations (actual or attempted) fell more into the category of blackmail than physical coercion. Regarding psychological violence experienced within intimate relationships, men more often reported manifestations of jealousy (correlated in one in three cases to declarations of infidelity), while women tended to report acts of denigration or domination perpetrated by their partner. It is therefore essential, if the same questionnaire is used for both sexes in order to facilitate comparisons, to include clearly written, specific questions that elicit the precise nature of the acts described, their real impact, their severity and their consequences.

3.2 THE *BAROMÈTRE SANTÉ* AND CSF SURVEYS IN FRANCE

Advances in statistical knowledge in the field of violence have also come from sources whose primary focus is not violence, but which incorporate certain forms of violence in their field of study. This is the case, for example, for the *Baromètre santé* surveys, as well as for the *Contexte de la sexualité* (CSF – Context of Sexuality in France) survey conducted in 2005–2006, essentially a revised edition of the *Analyse du comportement sexuel des Français* (ACSF – Analysis of Sexual Behaviour in France) survey conducted in 1992–1993.

3.2.1 The *Baromètre santé* surveys (2005)

The *Baromètre santé*¹⁷ surveys seek to gain a better understanding of knowledge and attitudes regarding health among people aged 12 to 75 residing in France. The aim is therefore one of preventive health, in accordance with the objectives of the Institut national de prévention et d'éducation pour la santé (INPES – French National Institute for Health-Related Prevention and Education) which is responsible for this survey. The themes covered by the survey vary slightly from one edition to another, but a certain number of questions about acts of physical and sexual violence have all been included in the 2000, 2005 and 2010 questionnaires. Violent acts are considered “in conjunction with other life situations or acts involving health risks: suicide attempts and the use of licit or illicit drugs, and, where relevant, rule-breaking such as playing truant”.¹⁸

The questions in the *Baromètre santé* survey on the subject of violence cover only a limited number of forms of physical and sexual abuse. In the 2005 edition (the latest version for which results on violence are publicly available), victims of physical abuse are described as having been “hit or physically hurt” over the past 12 months, while occurrences of sexual abuse are covered by the category of “forced sexual relations” suffered throughout the respondent’s lifetime, which, in the case of an affirmative answer, is subdivided into “sexual touching”, “attempted forced sex” and “forced sex”. Acts of physical violence perpetrated by respondents themselves are also addressed for the 12 months preceding the survey. In 2005, 2.4% of respondents aged 15 to 75 reported having experienced a sexual assault at least once in their life, concerning more specifically 4.1% of women and 0.6% of men in this age range.

¹⁷ The 2005 *Baromètre santé* survey, the results of which are publicly available, was a telephone-based survey in which some 30,000 women and men aged 12 to 75 with either a landline (including listed, partially listed and unlisted numbers; 26,000 respondents) or a mobile phone for their own exclusive use (4,000 respondents) were interviewed. Questions concerning sexuality and sexual violence were asked only of those respondents aged 15 to 75, as the French legal age of sexual consent is 15 (Beck, F., Guilbert, P., Gautier, A. (eds.), 2008, *Baromètre santé 2005. Attitudes et comportements de santé*, Saint-Denis, INPES, 593 pages). A more recent edition of the *Baromètre santé* survey was conducted in 2010, the results of which have not yet been published. This survey, again conducted by telephone, involved 27,658 respondents aged 15 to 85.

¹⁸ Guilbert, P., Baudier, F., Gautier, A. (eds.), 2001, *Baromètre 2000. Résultats (volume 2)*, Éditions CFES, 472 pages.

Respectively, 12%, 18% and 70% of acts reported corresponded to sexual touching, attempted forced sex and forced sex, with men more likely to report touching than women; furthermore, the results show that both the men and the women concerned were exposed to the acts in question very early on in their lives.

3.2.2 The CSF survey (2005–2006)

The *Contexte de la sexualité en France* (CSF – Context of Sexuality in France) survey¹⁹ was organized in 2006 by the Institut national de la santé et de la recherche médicale (INSERM – French National Institute of Health and Medical Research) and INED, at the initiative of the Agence nationale de recherche sur le sida (ANRS – French National Agency for Aids Research). It was conducted by telephone with 12,364 respondents (male and female) aged 18 to 69. The CSF survey records only those acts of violence that have a gendered dimension: conversations or telephone calls of a pornographic nature, sexual touching, attempted forced sex and actual forced sex. Special efforts were made to ensure the survey's compatibility with ENVEFF, so as to enable the best possible comparisons with regard to sexual violence and the circumstances surrounding such acts. Furthermore, as the data-collection method was the same (telephone interviews), a number of conditions were therefore met to facilitate the side-by-side comparison of the results of these two surveys. By contrast, the way in which sexual violence is recorded differs significantly between CSF and ENVEFF: in the CSF survey, questions about the sexual violence suffered are asked at the end of the interview, after respondents have already recounted their emotional and sexual histories, while ENVEFF's core aim is to address all situations of victimization in order to establish the context of these situations. The CSF survey thus examines the way in which sexual violence fits into respondents' emotional and sexual trajectories, which is impossible in ENVEFF. Analyses on this subject, highlighting the disturbances triggered in victims' personal lives, are currently under way. Finally, like the *Baromètre santé* and the EVS survey (see below), surveys on sexuality have also yielded information about male rape, especially during childhood and adolescence.

3.3 THE EVS SURVEY (2005–2006)

3.3.1 Issues and objectives

Very similar to ENVEFF in several respects but also quite different from it in others, the *Événements de vie et Santé* (EVS – Life Events and Health) survey was prepared by the Direction de la recherche, des études, de l'évaluation et des statistiques (DREES – Department for Research, Studies, Evaluation and Statistics) and conducted in 2005–2006 by researchers from the Institut national de la statistique et des études économiques (INSEE – French National Institute for Statistics and Economic Studies) with 10,000 respondents (male and female); consequently, its female sample size was smaller than that of ENVEFF.

The key objective of this survey is to analyse the relationships between violence suffered and health, as violence is here regarded as a public health issue. This survey was a

¹⁹ Respondents had either a landline (including listed, partially listed and unlisted numbers; 22% of respondents were unlisted) or a mobile phone for their own exclusive use (around 2% of all respondents).

response to calls made in the WHO *World Report on Violence and Health*²⁰ for a better understanding of the links between violence and health. This approach to the question of violence – new for France – stems from concerns expressed by international organizations (WHO, European Commission, Council of Europe) regarding the need to promote equality between men and women and to defend *both* human rights *and* public health issues. Although difficult to quantify and understand in terms of their causal mechanisms, the links between violence and health are close: when health deteriorates, violence may follow, as ill health increases the probability of being exposed to certain forms of violence and abuse (for people with disabilities and elderly people in particular); furthermore, poor health can – in the case of certain mental disorders, for example – predispose individuals to inflict violence on others. Obviously, health can also deteriorate as a result of violence suffered.

It is these correlations between violence (here limited to violence *suffered*) and health that EVS seeks to establish and clarify. Accordingly, the central perspective of this survey is not the analysis of gender-based violence. The approach adopted is the result of both a conscious choice and legal constraints affecting this survey. For example, it was not possible, in the context of face-to-face interviews and the use of public statistics, to ask questions regarding the identities of perpetrators of violence, including whether the respondent's intimate partner was involved in any of the violent acts reported (as a result of Article 40, Paragraph 2 of the French Criminal Procedure Code). EVS is therefore unable to address the question of intimate-partner violence, other than via the cross-referencing of different data sources and approximations. Information on the relationship between perpetrator and victim is limited to categories such as: family, close friends, acquaintances from other contexts (work, school, place of residence, etc.), and unknown persons. Other aspects of intimate relationships can be revealed (arguments, various conflicts, relationship history, etc.) but violent acts within such relationships cannot be considered here. Moreover, violence is not recorded for different spheres of life as in ENVEFF, but rather by type of violence. A further difference is that all violent acts suffered over the respondent's lifetime and in the last 24 months are recorded in EVS, whereas ENVEFF took account of only the last 12 months.

Respondents' health is studied in more detail in EVS than in ENVEFF. While the health module of EVS covers aspects similar to those explored by the "health" questions in ENVEFF, these aspects are explored in greater detail, in particular regarding the use of psychoactive substances, healthcare consumption over the last 12 months and chronic conditions. In addition, the standardized mental-health questionnaire used is likely to produce information close to a diagnosis for certain pathologies; persons identified by the survey as being depressed, for instance, will present with a state of health corresponding to a reality that goes beyond a temporary lack of enthusiasm and closer to what could be described, according to medical criteria, as a major episode of depression.²¹ Finally, the EVS questionnaire addresses health²² from a biographical viewpoint: it is almost always possible to date the occurrence or duration of events across the lifetime of the respondent, which is one of the survey's major advantages over ENVEFF. This biographical perspective is present throughout the EVS questionnaire. This specificity of the survey applies to a wide range of difficult events that may feature in respondents' life histories (suicides of close relatives or friends,

²⁰ Krug, É.-G., Dahlberg, L.-L., Mercy, J.-A., Zwi, A., Lozano-Ascensio, R., 2002, *World Report on Violence and Health*, Geneva, World Health Organization.

²¹ For EVS, a less sensitive and more specific mental-health questionnaire (*Mini International Neuropsychiatric Interview*, or MINI) was chosen than for ENVEFF (12-question version of the *General Health Questionnaire*, or GHQ-12).

²² However, there is no question here of collecting open-ended, narrative data in the manner of the *Biographies et entourages* (Event Histories and Contact Circle) survey (Bonvalet, C. and Lelièvre, É., 2006); situations or events reported are associated either with an exact date or, failing that, one of three major periods in respondents' lives: childhood (ages 0–9), adolescence (ages 10–19) and adulthood (ages 20 and over).

suicide attempts by close relatives or friends or by the respondent themselves, serious illness, deaths, etc.). In this regard, too, EVS benefits from a wider-ranging biographical contextualization than ENVEFF.

Lastly, concerning the data-collection methods employed, EVS implemented a survey protocol that was rather innovative in certain respects and adapted, as far as possible, to the sensitivity of the themes broached. Unlike previous surveys, it was conducted via face-to-face interviews using the ACASI (audio computer-assisted self-interview) method for questions relating to alcohol consumption, illegal drug use, and sexual behaviour, as well as a “follow-up” question (in addition to those asked during the face-to-face interview) on forced sexual relations. Encouraging conclusions and interesting methodological hypotheses regarding the effects of data-collection methods on interviewees’ responses (sincerity of responses, degree of ease with which responses are given, etc.) were able to be drawn from the results of EVS.²³ For example, with this method, men appear to be more forthcoming in reporting forced sexual relations (and attempts thereof).

3.3.2 Key findings

The extension of the survey to include the male population enabled a number of observations to be made concerning the similarities and differences between men and women. With regard to sexual violence over the course of one’s lifetime, women are massively overexposed to all types of such acts: sexual assaults (such as exhibitionism), forced sexual relations (actual or attempted), forced physical contact (such as being forcibly kissed), etc. As far as physical violence is concerned, men are more likely to be faced with such acts,²⁴ although it is impossible to say whether this is in the context of intimate-partner violence, given that the data-collection method used for the EVS questionnaire does not allow the precise identification of events perpetrated by an intimate partner, resulting in a net under-reporting of violence in this sphere. It should be noted that the results of crime victimization surveys (see below) are not consistent with these findings, probably because their data-collection protocols yields information on violence much more effectively.

Regarding the relationship between violence suffered and health, EVS shows that, for victims of violence, the gender gaps observed elsewhere in terms of reporting one’s state of health are also present here, but are less pronounced. The impact on mental health is quite considerable, for both men and women: while the prevalence of major episodes of depression and generalized anxiety disorder remains higher among female victims than male victims, men are nevertheless very frequently affected by such health problems. The results obtained regarding reported physical health also provide interesting insights: the perceptions of physical health expressed by individuals exposed to violence (even those who have suffered violence the most), both male and female, appear to reflect far less deterioration than for mental health; explanations for this in terms of resilience and resistance may be a possibility.

Finally, another point that female and male respondents have in common, revealed by EVS, lies in the close relationship between exposure to violence, health problems (mental, especially, as we have just seen) and having experienced many other difficult events in one’s

²³ See, for example: Cavalin, C., 2010, “Les violences sexuelles subies par les femmes : au-delà des écarts de mesure, des résultats convergents”, in Beck, F. *et al.* (eds.), *op. cit.*, pp. 99–108.

²⁴ The CVS survey obtained results showing the exact opposite. Since 2007, CVS has followed the same procedure as ENVEFF, using questions structured in terms of “spheres” and, in this particular case, by addressing violence that may have occurred within respondents’ intimate relationships in a specific section of the questionnaire. These results appeared in CVS *precisely when* this new interview method was introduced in January 2007.

lifetime. When violence and health resonate, it is typically in a biographical context that is not without difficulties elsewhere.

3.4 ANNUAL CRIME VICTIMIZATION SURVEYS: THE CVS SURVEY

3.4.1 Issues and objectives

Crime victimization surveys began to be conducted in France some 20 years after the United States: the first such survey was carried out in 1984–1985 at the initiative of researchers from the Centre de sociologie du droit et des institutions pénales (CESDIP – Centre for Sociological Research on Law and Criminal Justice Institutions).²⁵ The aim of these first surveys was to create a second type of data source to compare with administrative data, hitherto the only data that existed concerning crime and delinquency.

The first crime victimization surveys were initially defined as tools to track the unrecorded crime rate. These surveys endeavoured, through the wording of their questions, to refer to the legal definitions of categories of criminal acts used by the police and the justice system, which are the same as those contained in the “*État 4001*” file used to identify the activities of the police and the justice system. Crime victimization surveys record events of which the police, *gendarmerie* and justice system were not necessarily aware, or which have resulted in nothing more than an entry on the register of offences (and therefore without any report being referred to the courts), but it is the same definitions and the same legal and judicial “standards” that serve as a common frame of reference for all these sources.

However, French crime victimization surveys were quickly assigned a broader objective than merely tracking unrecorded crime. In particular, they have been used to analyse the behaviour of victims in response to assaults suffered (e.g. whether they involved the police, *gendarmerie* or courts, whether they told family or close friends, carers or lawyers about the events) and to find out what the most immediate consequences of these assaults (injuries, time off work, difficulties in performing day-to-day activities, sadness, feelings of insecurity, etc.) are. In the process, these surveys open up opportunities to analyse the socio-demographic, socio-economic and socio-cultural characteristics of victims, and also provide certain details of the social context of violent incidents recorded. They do not, however, take into consideration victims’ outcomes or trajectories beyond the formal complaint and the immediate health consequences (injuries or time off work, for example).

These surveys underwent a significant change in 1996 with the introduction, in the *Enquêtes permanentes sur les conditions de vie des ménages* (PCV or EPCV – Permanent Surveys on Household Living Conditions) conducted by INSEE, of questions about security, insecurity, feelings of insecurity, etc. Until 2004,²⁶ these surveys remained oriented towards living conditions in general, treating the security of households (with the focus on thefts, burglaries, etc.) as just one of many aspects of living conditions. From 2005, and in particular following the publication of the results of ENVEFF and the launch of the EVS survey, the Observatoire national de la délinquance et des réponses pénales (ONDRP (French National Observatory of Crime and Criminal Justice Responses) or, as it was at the time, OND (French National Observatory of Crime), attached to the Institut national des hautes études de sécurité

²⁵ Zauberman, R., Robert, P., Pérez-Díaz, C., Lévy, R., 1990, “Les victimes : comportements et attitudes. Enquête nationale de victimation”, *Déviance et contrôle social*, Guyancourt, CESDIP, no. 52, vols. 1 and 2 (+ annexes).

²⁶ With the exception of the 1999 edition, conducted jointly by INSEE and the Institut des hautes études de la sécurité intérieure (IHESI – French Institute for Advanced Studies in National Security), which increased the portion of the survey devoted to exploring victimization.

(INHES – French National Institute for Advanced Studies in Security)) and INSEE designed and produced a new type of crime victimization survey: the *Cadre de vie et sécurité* (CVS – Living Environment and Security) survey, conducted annually.

Since 2007, the stabilized CVS questionnaire has incorporated statistical operations relating to victimization, but has also annualized data collection, which now involves larger samples (approximately 17,000 households and 13,000 individuals aged 18 to 75). Notable improvements to CVS include the extension of its questionnaire to cover a broader field of victimization and insecurity. After the creation of a more in-depth version of the questionnaire in 2006, the 2007 edition marked the start of a new form of survey, based to a large extent on the *British Crime Survey* (BCS). In particular, the concept of assault was considered in greater detail with, for the first time, the differentiation and development of various types of acts against the person in the questionnaire (theft with threat or violence, theft without violence, physical violence, threats, insults or verbal abuse, and sexual violence). In addition, following on from the methodological innovations of the EVS survey, the CVS survey began, from 2007 onwards, to use a more confidential data-collection protocol that, as such, is better suited to the collection of the most sensitive information: questions about physical abuse committed by a person living with the respondent at the time of the survey and questions about sexual abuse (committed by all perpetrators, i.e. regardless of whether they were living with the victim at the time of the survey) are asked via a computer-assisted self-interview questionnaire with an audio interface.²⁷

By contrast, the questionnaire is limited to events experienced within the last 24 months and can only be used to examine the outcomes of respondents partially, as the impacts of violence on life trajectories in the longer term are not explored; similarly, the accumulation of violent acts in different spheres of life is not considered either. Certain questions focusing exclusively on sexual violence throughout the respondent's lifetime are asked. Unlike ENVEFF, where questions relating to violence were repeated for each of five spheres of life (family and close friends, current intimate partner, former intimate partner, public spaces, and workplace/place of study²⁸), physical and sexual violence is recorded in CVS in just two binary contexts: within the household and outside the household.

3.4.2 Key findings

This new form of survey has made it possible to obtain, via the series of annual ONDRP reports, results combining data from different CVS surveys. One of the objectives behind the repetition of the survey is not only to study changes in rates of reported violence, but also to accumulate data files from five years of surveys so as to obtain a particularly large population sample (65,000 people in total, i.e. just over 32,000 individuals of each sex), thus ensuring a high level of statistical power and making it possible to study the rarest acts of violence in greater detail.

While still fundamentally based on standardized definitions of what constitutes a criminal act under the law, recent CVS surveys have produced consistent results in terms of intimate-partner violence, violence in family contexts and sexual violence.²⁹ Above all, these

²⁷ ACASI procedure with the option of asking questions in other languages for respondents whose French is not good enough. The survey conducted in January 2007 was available in French, Arabic, Turkish and German.

²⁸ In ENVEFF, questions were included for one other sphere, which proved of little interest once the data had been processed: "consultations and home visits" (e.g. medical appointments, home visits from tradespeople such as repairers).

²⁹ These forms of violence have increasingly been criminalized in recent years; in other words, the judicial treatment of such acts has been extended and toughened (e.g. rape between partners was defined as a form of subjugation by the French law of 4 April 2006).

surveys have brought sexual and intimate-partner violence – of which women are the primary victims – to the fore with regard to crime victimization and the measurement of insecurity; this is a major step forward. These surveys have estimated the number of victims of rape each year to be of the order of 75,000,³⁰ providing a striking comparison with the low number of complaints filed on the one hand (about 10,000) and the even lower number of convictions on the other (fewer than 2,000).³¹ Similarly, these surveys estimated the number of women (aged 18 to 75) who were victims of intimate-partner violence in 2009 to be 208,000.³² Finally, they also explore in detail the steps taken by victims and show, for example, that victims of intimate-partner or sexual violence go to the *gendarmerie* or police station in the majority of cases, but rarely file complaints.³³

4 SURVEY OBJECTIVES: GENDER, CONTEXTS AND CONSEQUENCES

Although the measurement of prevalence rates is one of the objectives of the survey, this is no longer as central as at the time of ENVEFF, when many knowledge gaps existed. Indeed, crime victimization surveys now give rise to annual indicators, while comparisons between ENVEFF, EVS, CSF and *Baromètre santé* provide a solid quantitative framework.

The central objective of the *Violence and Gender Relations* (VIRAGE) survey is to obtain more detailed knowledge on violence, based on the premise that the severity of this violence can only be determined through the detailed description of its nature (verbal, psychological, physical, sexual, etc.), its frequency and overall duration, how long ago the events took place, the contexts and circumstances in which they occurred (family, workplace, public spaces), the links that exist between the perpetrators and the victims (family, acquaintance, unknown), and the consequences in terms of victims' future lives (injuries, fear, disruption of educational, occupational or family trajectories, etc.). By proceeding in this way, this new project seeks to develop a typology of violence that no longer uses the severity benchmarks associated with the French Criminal Code and which have been adopted by crime victimization surveys, and gain a clearer understanding of the different forms of violence in question, based on the hypothesis that: first, situations of intimate-partner violence are not necessarily similar to one another; second, situations of workplace violence are not necessarily similar to one another either; and, third, although situations experienced by victims may have points in common, it is also important to highlight the differences that exist.

This typology of violence will make it possible, in particular, to clarify the extent to which violent acts suffered by women on the one hand and by men on the other are similar in terms of their severity, context and consequences. The VIRAGE survey will therefore incorporate a gender perspective, and thus complement crime victimization surveys, which do not enable the construction of such a typology or the study of victims' trajectories.

³⁰ The crime victimization survey *Cadre de vie et sécurité 2007–2008*, conducted by the ONDRP and INSEE, estimated that 150,000 women aged 18 to 75 had reported suffering at least one rape during the years 2007 and 2008. The figure of 75,000 per year is based on this estimate divided by two.

³¹ Tournier, P. V., 2011, *Observatoire des prisons et autres lieux d'enfermement et de restriction de liberté (OPALE). Les infractions sexuelles. France 2011*, Paris, Université Paris-1 Panthéon–Sorbonne, Centre d'histoire sociale du XX^e siècle, p. 88. Available online at the following address: http://theseas.reseaudoc.org/opac/doc_num.php?explnum_id=560.

³² Observatoire national de la délinquance et des réponses pénales (ONDRP), 2010, "Les auteurs d'actes de violences physiques ou sexuelles, déclarés par les personnes de 18 à 75 ans, en 2008 et 2009 d'après les résultats des enquêtes « Cadre de vie et sécurité »", *Repères*, no. 14, December, p. 7.

³³ Rizk, C., 2011, "Violences physiques ou sexuelles au sein du ménage. Description par les personnes de 18 à 75 ans se déclarant victimes des suites et des conséquences des actes subis", *Repères*, no. 15, July, p. 7.

Today, more in-depth sociological and demographic analyses of violence appear to be necessary, and this form of analysis would seem particularly appropriate. Social demand for more detailed knowledge surrounding the socio-demographic characteristics of both victims and perpetrators is high, as is the desire to obtain a better understanding of the circumstances in which violence occurs and to measure their impacts both on individuals and on society. To achieve this, a new tool for measuring violence needs to be designed.

4.1 CONSTRUCTING A TYPOLOGY OF VIOLENCE BASED ON SEVERITY AND CONTEXT

The definitions provided by international organizations and statistical surveys, both in France and abroad, regarding violence against women have, for nearly two decades, emphasized the plurality and diversity of acts covered by this phenomenon. While the initial aim of these definitions was to list as exhaustively as possible all acts of physical and sexual abuse, together with psychological abuse (although the CVS survey does not take this into consideration, as psychological violence in conjugal contexts was only introduced in 2009), and to measure the frequency of such acts, a more in-depth analysis of the *situations of violence* faced by victims is now necessary; the severity of violent acts cannot be determined merely by legal definitions and the official “hierarchy” of crimes and offences.

Thus, unlike crime victimization surveys (both in France and abroad), which present their results according to legal definitions, we feel it is important to develop synthetic indicators for each type of act and for each sphere of respondents’ lives, taking into consideration elements that distinguish the circumstances in which they are experienced and using them to form a typology: repeated criticisms made by co-workers, relatives and, in particular, an intimate partner may have a far more destructive effect than an isolated slap, as insults and even sexual abuse are far more serious when they come from people we are close to and see regularly rather than strangers. The frequency of acts, how long ago they occurred, their severity as perceived and reported by victims, the relationship between the victim and the perpetrator (family, acquaintances, unknown individuals) and the context in which these acts took place (family, workplace, public spaces) will all, therefore, be taken into consideration. We will then seek to characterize the victims themselves by identifying co-occurrences of situations of violence endured in several spheres of their lives, which, regardless of any other factor of exposure shared by these spheres, show that the psychological and physical impacts of situations of adversity endured in one’s living environment correspond to an increased risk of experiencing violence elsewhere. Ultimately, we shall establish typologies of situations of violence so as to better understand what measures are required to help victims and improve prevention.

4.2 IDENTIFYING THE TYPES OF VIOLENCE SUFFERED BY WOMEN AND BY MEN

Historically, for budgetary reasons and because of the priority given to improving knowledge regarding violence against women (in accordance, as we have seen, with the priorities set by the international institutions and European communities since the mid-1990s), ENVEFF included female respondents only. This also used to be the case in other countries. Since then, however, other surveys have included both male and female respondents (e.g. CSF on sexual violence; EVS on verbal, physical, sexual and psychological violence and damage to property;

CVS, since 2007, on damage to property and verbal, physical and sexual violence; *Genre et violences interpersonnelles* in Martinique). We therefore now have results that enable comparisons between men and women: comparisons of crime victimization rates by type of violence first and foremost, but also comparisons of the circumstances in which violent acts occur, their perception, their consequences, and especially relations with human health, as we have seen previously.

4.2.1 Intimate-partner violence: the sticking point

Experiences of violence for women and men are distinguished first of all by the context. The ENVEFF survey found that women were more often victims of violence in family situations than in public spaces. The results of the CVS survey are slightly different, as violence perpetrated by a former partner outside the home is classified as non-household violence, whereas it is counted as intimate-partner violence in ENVEFF. According to the results of the CVS survey, both men and women are more often victims of violence in public spaces, but, for women, violence within the household is much more common. Thus, we find that the circumstances surrounding violence are of a gendered nature.

Moreover, the analysis of results concerning the declarations of men and women raises questions of interpretation, particularly regarding intimate-partner violence. To put this into perspective, it would be useful to take a look at the survey results from *Genre et violences interpersonnelles à la Martinique*, mentioned above. The *Genre et violences interpersonnelles en Martinique* survey, conducted in 2008 (i.e. after the introduction of the new CVS survey in 2007), interviewed women and men using the same questionnaire, as is the case with CVS surveys. A comparison of the statements made by men and women in the survey reveals that a single questionnaire, however factual and explicit in its wording, can be understood differently by men and women: the term “forced sexual relations” covers, for example, situations resulting from “blackmail” exerted by a female partner when it comes to the men’s statements, and situations resulting from the “use of force” when it comes to the women’s. While men declared that the consequences were “not very serious”, women, on the other hand, described the consequences as “serious” or “very serious”. Similarly, male and female responses to questions on certain types of violence (in particular, acts of intimate-partner violence and, more specifically, psychological harassment within the couple) are difficult to interpret in themselves, as the contexts can differ greatly depending on gender. In both cases, questions that seek to clarify the *contexts* and *circumstances* in which acts occurred, along with their *consequences*, are essential. For intimate-partner violence, for instance, it is important to establish the nature of the relationship: its duration, the number of separations and reconciliations, the age gap between partners, occurrences of infidelity, the way household tasks are shared, and representations of male and female roles are all useful for interpreting women’s and men’s responses, and consequently for comparing these responses without fear of drawing parallels between acts that are not, in fact, comparable.

These recent findings from France echo North American studies – more numerous but less recent – that have already been used to build typologies of different forms of intimate-partner violence from both qualitative and quantitative surveys (including the *National Family Violence Survey* (NFVS), conducted in 1975 in the United States, along with its second edition in 1985). Michael P. Johnson, for example, makes a distinction between “intimate terrorism”, suffered mostly by women, “violent resistance”, committed by female victims against their abusive partner, and “situational couple violence”, i.e. occasional violence committed by both men and women, which may be serious, but not generally

recurrent in the long term.³⁴ In 2009, on the basis of the CVS survey, it was estimated that 208,000 women and fewer than 80,000 men (aged 18 to 75) had been victims of physical or sexual abuse (by a current or former partner).³⁵ The typology proposed by Johnson invites us to consider that a proportion of the men surveyed who reported having suffered violence perpetrated by their partner may also be abusive men, as also evidenced by qualitative studies³⁶ or the circumstances identified in cases of spousal homicides committed by women, for which it has been shown that over half of the women in question were subjected to violence by their husbands.³⁷ Here we see the limitations of victimization indicators, which do not allow us to reconstruct the context and dynamics of situations of violence, the frequency of such situations, the severity of the acts perpetrated and their consequences for the victims.

Today in France, the statistical sources available are not sufficient for such typologies to be developed. In particular, the most recent and systematic French source of data (produced annually since 2007) based on a large population sample (13,000 people) – the CVS survey – does not take into account the dynamics at play within intimate relationships. While it does record acts in a more factual and concrete way than in older crime victimization surveys, these acts remain aligned with official definitions of crimes and offences (and exclude, for example, psychological harassment within intimate relationships, despite its inclusion in 2010 as an offence in the French Criminal Code), and the survey is not designed to establish social and life-history elements.

4.2.2 The exposure of children to intimate-partner violence

The contexts in which intimate-partner violence occurs and the nature of this violence differ for men and women. Intimate-partner violence remains hidden within the privacy of the home, and this silence contributes to its perpetuation over time and to an aggravation of consequences for the victim and for children in the household.

The (recent) consideration of children in situations of intimate-partner violence is one of the most important issues to be tackled by current and future policies to combat intimate-partner violence.³⁸ Almost 25 years after the signing of the United Nations Convention on the Rights of the Child on 20 November 1989 – to date, the convention that has been ratified by the greatest number of states in the world – the protective measures for children in France in the context of intimate-partner violence remain grossly inadequate, despite requests from professionals on the ground (both those who work with abused women and those responsible for child protection). And yet sociologists' and psychologists' findings on this subject are unequivocal: at this point of convergence between policies against intimate-partner violence

³⁴ Johnson, M. P., 1995, "Patriarchal Terrorism and Common Couple Violence: Two Forms of Violence Against Women", *Journal of Marriage and the Family*, May, no. 57, pp. 283–294.

Johnson, M. P., Leone, J. M., 2005, "The Differential Effects of Intimate Terrorism and Situational Couple Violence", *Journal of Family Issues*, vol. 26, no. 3, April, pp. 322–349.

Johnson, M. P., 2008, *A Typology of Domestic Violence: Intimate Terrorism, Violent Resistance, and Situational Couple Violence*, Lebanon, Northeastern University Press, 161 pages.

³⁵ Rizk, C., 2010, "Les auteurs d'actes de violences physiques ou sexuelles, déclarés par les personnes de 18 à 75 ans, en 2008 et 2009 d'après les résultats des enquêtes « Cadre de vie et sécurité »", *Repères*, no. 14, December, p. 5.

³⁶ Houel, A., Mercader, P., Sobota, H., 2008, *Psychosociologie du crime passionnel. À la vie, à la mort*, Paris, Presses universitaires de France, 234 pages.

³⁷ Délégation aux victimes, 2008, *Étude nationale sur les morts violentes au sein du couple*, Paris, Ministère de l'Intérieur, p. 19. Available online (in PDF format) at the following address:

www.interieur.gouv.fr/sections/a_votre_service/aide_aux_victimes/violencecouple/downloadFile/attachedFile/morts_violentes_au_sein_couples.pdf

³⁸ Sadlier, K. (ed.), 2010, *L'Enfant face à la violence dans le couple*, Paris, Dunod, 214 pages.

and policies against child abuse, everyone is in agreement that intimate-partner violence has highly negative impacts on children's well-being. The key recommendations relating to the protection of children in the context of intimate-partner violence include comprehensive, unified action and the creation of networks that bring together the different bodies and organizations involved.³⁹

Estimating the number of children who are exposed to situations of intimate-partner violence is still a very inexact science, owing to a lack of suitable measurement structures and tools – despite the fact that it features in the recommendations of the latest plans for combating violence against women (it appears under Action 23 of Axis 7 of the *3^e Plan triennal interministériel de lutte contre les violences faites aux femmes* (3rd Triennial Interministerial Action Plan on Violence against Women) developed by the French Department for Women's Rights and Equality). Based on data collected during the ENVEFF survey, more than half the time, children witness scenes of intimate-partner violence (except sexual assault); they are all the more likely to witness such scenes when assaults are numerous (in more than 60% of situations of repeated violence) and take place over a long period of time (“35% of women report that children ‘sometimes’ witness violent scenes at the beginning of the cycle of violence, 44% after seven years; 7% are ‘often’ present at the start and 27% after seven years”).⁴⁰ The study produced by the Délégation aux victimes (DAV – French Commission for Victims) on spousal homicides also reveals that almost 10% of murders of intimate partners are committed in front of children.⁴¹ Rejecting the notion that has long prevailed that children are merely “witnesses”, all recent works call for them to be considered as “victims” in their own right. As victims not only of physical violence, often receiving direct blows⁴² that can even cause death in cases where violence leads to the death of the mother,⁴³ but also of psychological violence, with deleterious effects when children helplessly witness the life of their mother being endangered. This physical and psychological violence can also take place after a separation (separation is the cause of a third of spousal homicides committed by men).

The production of a new survey will be an opportunity to obtain the latest data and describe situations of domestic violence involving children that go beyond figures alone: while data from the CVS survey provides an estimate of the number of children exposed to domestic violence via the household grids included in the surveys – and therefore indicates the presence of children in the households of victims of intimate-partner violence perpetrated

³⁹ The legal provisions on this matter in France are weak, but major advances have recently been made. The French law of 9 July 2010 relating to violence specifically against women, violence within couples, and the impacts of the latter on children, which came into force on 1 October 2010, introduced a new procedure into French civil law: the emergency protection order, issued by a family court. This protection order is governed by Articles 515-9 to 515-13 of the French Civil Code, and the specific procedure that applies to this new measure, set out by the French decree of 29 September 2010, now features in Articles 1136-3 to 1136-13 of the Code of Civil Procedure. Accordingly, Article 515-9 of the Civil Code provides that: “When violence perpetrated within a couple or by a former spouse, a former partner linked by a civil solidarity pact or a former cohabiting partner endangers the person who is the victim of this violence and one or more children, the family court may issue an emergency protection order to this person”.

⁴⁰ Brown, E., Jaspard, M., 2004, “La place de l'enfant dans les conflits et les violences conjugales”, *Recherche et Prévision*, no. 78, December, pp. 5–19.

⁴¹ Délégation aux victimes, 2008, *Étude nationale sur les morts violentes au sein du couple*, Paris, Ministère de l'Intérieur, p. 13. Available online (in PDF format) at the following address: www.interieur.gouv.fr/sections/a_votre_service/aide_aux_victimes/violencecouple/downloadFile/attachedFile/morts_violentes_au_sein_couples.pdf.

⁴² A study conducted on the hospital files of children seen in the emergency department of the Children's Hospital of Philadelphia between 1984 and 1994 showed that a not insignificant number of these children had been physically injured as they tried to intervene to prevent violence between the adults in the household. Christian, C. W., Scribano, P., Seidl, T., Pinto-Martin, J. A., 1997, “Pediatric Injury Resulting From Family Violence”, *Pediatrics*, vol. 99, no. 2, February, p. 4.

⁴³ In 5% of cases where the mother was the victim of homicide, the children were also victims of homicide (Délégation aux victimes, 2008, *op. cit.*, p. 13).

by a partner or ex-partner – it is necessary to gather more detailed information on the characteristics of families in situations of intimate-partner violence with children present in the household, over the long term; on families where parents are separated due to intimate-partner violence; and on measures taken after separation and the consequences of these measures on contact between children and their violent parent, in terms of maintaining their exposure to violence. At present, no data (apart from the ENVEFF data mentioned above) exists in France on the subject.

4.2.3 Violence in the workplace

Certain types of violence have been little studied in surveys on violence in France. This is particularly true of workplace violence. The lack of knowledge is such that a survey devoted solely to violence at work, including in-depth descriptions of respondents' situations according to whether they work in one of the three branches of the French civil service (public sector) or in the private sector, was called for in the *3^e Plan triennal interministériel de lutte contre les violences faites aux femmes* (3rd Triennial Interministerial Action Plan on Violence against Women), which was already the case under the previous plan, without any such study actually being initiated, and without any measurement of this violence being included in surveys on working conditions.⁴⁴ The strong government demand for a survey of this kind is linked to the fact that European directives⁴⁵ on professional equality between women and men deem sexual harassment in the workplace to be not only a form of violence, but also a form of discrimination, and recommend that its prevalence and magnitude be measured.

Gender-related violence and discrimination in the workplace can be addressed either through surveys focusing mainly on work or through surveys focusing mainly on violence. Since the 1970s, many statistical surveys relating to employment and the workplace have been conducted both in France and elsewhere in Europe, on themes as varied as working conditions, accidents at work, occupational diseases, and health, including mental health. Since 1984, the number of questions about mental aspects of work has increased in French surveys on working conditions and has been accompanied by changes in the categories used (“mental strain”, “mental workload”, “cognitive or psychological workload”). Following the Nasse-Légeron report,⁴⁶ an expert panel⁴⁷ on the statistical monitoring of these risks selected a provisional set of indicators⁴⁸ and then, in the final report⁴⁹ on its work, proposed six key elements for the definition of “psychosocial risks”. However, this did not take account of

⁴⁴ Bibliographic sources include:

- Institut national de recherché et de sécurité (INRS – French National Research and Safety Institute): [www.inrs.fr/inrs-pub/inrs01.nsf/IntranetObject-accesParReference/Dossier%20Harc%20C3%A8lement%20moral/\\$File/Visu.html#ancre6](http://www.inrs.fr/inrs-pub/inrs01.nsf/IntranetObject-accesParReference/Dossier%20Harc%20C3%A8lement%20moral/$File/Visu.html#ancre6) (dossier on harassment and violence, including information on the regulatory context and a bibliography);

- French health ministry: www.travailler-mieux.gouv.fr/Que-dit-la-loi.html.

⁴⁵ Directive 2000/78/EC establishing a general framework for equal treatment in employment and occupation, modified in 2002 (Directive 2002/73/EC).

⁴⁶ Nasse, P., Légeron, P., 2008, *Rapport sur la détermination, la mesure et le suivi des risques psychosociaux au travail*, Paris, Ministère du travail, des relations sociales et de la solidarité, 94 pages. Available online (in PDF format) at the following address: http://travail-emploi.gouv.fr/IMG/pdf/RAPPORT_FINAL_12_mars_2008-2.pdf.

⁴⁷ Set up by INSEE from 2008 under the chairmanship of Michel Gollac.

⁴⁸ Collège d'expertise sur le suivi statistique des risques psychosociaux au travail, 2009, “Indicateurs provisoires de facteurs de risques psychosociaux au travail”, Paris, DARES/DREES. Available online (in PDF format) at the following address: www.college-risquespsychosociaux-travail.fr/site/medias/Indicateurs-provisoires.pdf.

⁴⁹ Ministère du Travail, de l'emploi et de la santé, 2011, *Mesurer les facteurs psychosociaux de risque au travail pour les maîtriser*, report by the Collège d'expertise sur le suivi des risques psychosociaux au travail (Expert panel on monitoring psychosocial risks in the workplace), further to the request of the Minister for Work, Employment and Health, 223 pages. Available online (in PDF format) at the following address: www.insee.fr/fr/ppp/comm_presse/comm/rapport_SRPST_definitif.pdf.

interpersonal violence, let alone sexual violence. And yet, as in other spheres, the issue of workplace violence is multifaceted and is not restricted to matters relating to the organization of work itself or to bullying. Interpersonal violence can take various forms (verbal, psychological, physical, sexual) and the potential perpetrators of such acts are numerous (customers, users, colleagues, subordinates, superiors). This issue is, however, slowly coming to the fore.

In order to provide comparable data on working conditions across the whole of Europe, Eurofound (the European Foundation for the Improvement of Living and Working Conditions) designed the *European Work Conditions Survey*, conducted in member states of the EU-27 on the basis of a single, unified questionnaire.⁵⁰ The results of the 5th edition of the *European Work Conditions Survey* (EWCS 2010)⁵¹ are estimates based on a representative sample of 3,000 people in France aged 15 and over in employment, and not on the general population. The questionnaire seeks to identify the victims of sexual harassment at work during the month preceding the survey (and not the past 12 months).⁵² The results available from the 4th edition of the survey reveal that 1.5% of employed men and women reported unwanted sexual attention. In addition to the small sample size, another problem made it difficult to measure prevalence rates: the wording of the questions required respondents to identify acts of sexual harassment themselves, despite denominations that were not always clear. With the same objectives in mind, the French *Surveillance médicale des expositions aux risques professionnels* (SUMER – Medical Monitoring of Exposure to Occupational Risks) survey, conducted in 1994 and 2003, with a third edition currently under way, is coordinated by the Direction de l’animation de la recherche, des études et des statistiques (DARES – Department for the Coordination of Research, Studies and Statistics) and the Inspection médicale du travail (French Occupational Health Inspectorate). In 2003, a total of 49,984 people, representative of around 80% of employees in France, responded to the survey. SUMER does not, however, record physical or sexual violence, and focuses instead on measuring bullying in the workplace.⁵³

ENVEFF therefore remains the only national survey on violence that invites respondents to declare a detailed list of acts of physical or sexual violence experienced in the workplace. Because of its structure by “spheres of life”, it provides detailed results that go beyond victimization rates, including age, marital status, type and status of job, size of company, male-to-female ratio in the company, etc. It nevertheless has some limitations: only working-age women in employment, or who have been in employment within the previous 12 months, are surveyed, whereas victims of workplace violence may well have changed jobs, have resigned or be unemployed, precisely because of violence suffered. Even so, the victimization rates recorded are far from negligible: 8.5% of employed women report having experienced verbal abuse, including insults and threats; 2% report unwanted sexual advances; and 0.1% report touching, groping, attempted rape and actual rape. Asking respondents about both their current job and their previous job would seem necessary to improve the measurement of workplace violence.

Exploratory studies aimed at improving the collection of data on workplace violence are, however, under way or have been recently completed. For instance, the survey conducted in the *département* of Seine-Saint-Denis (an administrative area covering the north-eastern

⁵⁰ The fieldwork necessary for this study was conducted by Gallup Europe.

⁵¹ Online questionnaire used for EWCS 2010 (in PDF format):

www.eurofound.europa.eu/docs/ewco/5EWCS/questionnaires/france_fr.pdf.

⁵² “In the last month, while at work, have you been the subject of unwanted sexual attention? (Q70); of sexual harassment? (Q71)”. See also: www.eurofound.europa.eu/surveys/smt/ewcs/notes_fr.htm#q65.

⁵³ The fieldwork necessary for this study was conducted by Gallup Europe. Available online (in PDF format) at the following address: www.eurofound.europa.eu/docs/ewco/5EWCS/questionnaires/france_fr.pdf.

inner suburbs of Paris) on sexual violence against women at work (VSFFT – *Violences sexuelles faites aux femmes au travail* – 2007), was conducted by an intercompany occupational health service among employees working in the private sector or in local authorities (excluding employees of the state civil service, public hospitals and large companies, as well as unemployed individuals). This survey was initiated by the Observatoire départemental des violences faites aux femmes (Departmental Observatory on Violence Against Women) in Seine-Saint-Denis. In all, 1,772 short self-administered questionnaires were collected. In the previous 12 months, 5% of women working in Seine-Saint-Denis said they had been confronted with acts of violence defined in law as sexual assault or rape (groping, forced kissing, sexual touching, rape) and 22% reported suffering sexual harassment. The limitations of the survey are clear: this is not a survey of the general population and it is not representative of all employees. Nevertheless, the particularly high rates of violence reported in comparison to other sources shows that it is important to gather information regarding situations of violence via a number of separate questions describing specific acts. A new edition of this survey is currently under way in the *département* of Essonne (in the southern outer suburbs of Paris).

Finally, an exploratory study coordinated by the Institut de veille sanitaire (French Institute for Public Health Surveillance) is currently in progress with the aim of studying mental-health disorders in relation to different jobs and associated occupational exposure. This survey, known as the Samocrate programme, has already collected its first set of data in the Centre region of France from 6,000 respondents, and is set to be continued in the Rhône-Alpes region. This survey also has terminology-related shortcomings, namely its use of the expression “physical aggression” in the questionnaire, rather than listing a series of acts. Nonetheless, 2.2% of women and 1.5% of men reported having experienced at least one physical assault in the previous 12 months.⁵⁴

We are at a stage now where there are many experiences of measuring violence at work to draw upon, which strengthens the case for the production of such measurements at national level, which is promising for both the sociology of work and the sociology of violence.

4.2.4 Violence in public spaces

Research by criminologists and sociologists that addresses the subject of violence in public spaces from the perspective of gender relations is rare. The work of Marylène Lieber is an exception in this regard.⁵⁵ Her work has revealed that the public space is considered socially – whether in scientific research, in civil society or by state institutions – as the primary space where violence is committed, and where we are more likely to be in danger. Following ENVEFF, however, enormous progress has been made with regard to crime victimization surveys since 2007, insofar as violence within family contexts is now recorded and the level of acquaintance between the perpetrator and the victim is systematically noted. Consequently, it transpires that, for all locations combined (both inside and outside the household), 2.6% of men and 2.9% of women reported having experienced physical or sexual violence at some point during 2008 and 2009, with women being slightly overexposed to violence – but the violence suffered by men overwhelmingly took place outside the household (80% of cases), which is less often the case for women (62% of cases). When violence occurs in public

⁵⁴ Danet, S., Olier, L., 2009, *La Santé des femmes en France*, Paris, DREES/La Documentation française, p. 262.

⁵⁵ Lieber, M., 2008, *Genre, violences et espaces publics. La vulnérabilité des femmes en question*, Paris, Presse de Sciences Po, “Faits politiques” collection, 324 pages.

spaces, the perpetrator is a stranger in 60% of cases for men, but a person known to the victim in 62% of cases for women (in 16% of cases an ex-partner and in 8% of cases a family member).⁵⁶

This data already provides some insight into the varying nature of violence suffered in these spaces according to gender. The fact that the perpetrator is, in many cases, known to female victims suggests that this violence may be repeated and is more likely to create a climate of constant insecurity for women. This supports the hypothesis that the severity of physical violence depends on the context and circumstances in which it is experienced.

As in other areas investigated, the VIRAGE survey will aim to contextualize violence in public spaces and compare its severity with that of violence suffered in other spheres and consider its interactions with other spheres.

4.3 OUTCOMES FOR VICTIMS IN THE COURSE OF THEIR LIVES

Although contexts vary significantly for men and women, involving different degrees of prevalence and vulnerabilization, outcomes for victims are largely influenced by the social resources they are able to mobilize. Gender-related contexts overlap with social conditions that may increase vulnerability (in the sense of vulnerability to violence). The VIRAGE survey will aim to establish, for the first time, typologies for situations of violence by gender, not just by categorizing violence in the ways discussed above, but also by focusing on respondents' trajectories, taking account of the possible interactions between past and present violent events, involving greater or lesser degrees of vulnerabilization of victims, and also the opportunity that victims may or may not have had to speak out.

Consequently, the "life history" aspect of the questionnaire will ask about violence during childhood, as well as other aspects of people's lives (educational, occupational and intimate trajectories, etc.). The dating and localization of events will make it possible to reconstruct individual trajectories and make connections with violent events experienced at different points in respondents' lives.

4.3.1 Violence during childhood: a factor in overexposure to violence as an adult, for both men and women

The EVS survey, like ENVEFF, asked questions regarding sexual violence suffered throughout respondents' lifetimes. According to the EVS survey, 2.5% of women, and 0.2% of men, aged 18 to 75 in 2006, reported having suffered repeated sexual violence during childhood or adolescence.⁵⁷ While a third of victims suffered such violence before the age of 11, most cases took place during adolescence (between ages 11 and 19), both for women and for men.⁵⁸ These results are further confirmed by the CSF survey, which indicates that, for both men and women, sexual violence suffered throughout respondents' lifetimes mostly occurs before age 18 (this was the case for 59% of women and 67% of men).⁵⁹ Furthermore,

⁵⁶ Rizk, C., 2010, "Les auteurs d'actes de violences physiques ou sexuelles déclarés par les personnes de 18 à 75 ans en 2008 et 2009 d'après les résultats des enquêtes « Cadre de vie et sécurité »", *Repères*, no. 14, December, p. 3.

⁵⁷ Guyavarch, E., 2010, "Exposition aux violences durant l'enfance et prise en charge par les services sociaux", in Beck, F. *et al.*, *op. cit.*, p. 119.

⁵⁸ Cavalin, C., 2010, "Les violences sexuelles subies par les femmes : au-delà des écarts de mesure, des résultats convergents", in Beck, F. *et al.*, *op. cit.*, p. 105.

⁵⁹ Bajos, N., Bozon, M. and the CSF team, 2008, "Les Violences sexuelles en France : quand la parole se libère", *Population et Société*, no. 445, May.

in the vast majority of cases, no action was taken following these violent events: according to the ENVEFF data, 4% of women reported having been sexually abused before the age of 15, mostly by men they knew well (fathers and stepfathers in particular), and of the 24 women who had suffered forced sexual relations before age 15, only three had benefited from any kind of protective measure.⁶⁰ The data collected by the EVS survey confirms this: only 20% of women and 8% of men who were victims of sustained sexual violence during their childhood benefited from any protection or care measures.⁶¹

A positive correlation between violence experienced during childhood and violence experienced as an adult has been clearly established. In ENVEFF, half of all women who reported suffering repeated abuse and beatings in their early youth were victims of physical abuse or attempted murder after age 18, compared with 1 in 10 women who had not experienced violence in childhood. Regarding sexual assault, the correlation is also very clear: among women who reported suffering physical assault before the age of 18 or sexual assault before the age of 15, one in three also reported having suffered sexual violence since age 15,⁶² while among women who reported no violence, 1 in 20 reported having suffered at least one sexual assault since age 15. These results are supported by other surveys, such as EVS: respondents who reported having experienced violence during their childhood were twice as likely to have suffered violence during the 24 months preceding the survey⁶³ (the risk is slightly higher for men (OR = 2.346) than for women (OR = 2.035)). The VIRAGE survey will strive to describe the trajectories of these individuals and the cumulative violence suffered in the course of their lives.

4.3.2 The lack of knowledge regarding life histories (educational, occupational, intimate and residential trajectories)

We still know little about victims' life-event histories, and knowledge gaps still exist regarding the factors that can play a role in keeping these victims in violent situations (irrespective of the sphere of life in question – in intimate relationships, at work, in public spaces) and regarding the educational, professional, residential and family-related consequences of violence. The surveys conducted to date have gone no further than asking questions to assess the degree of severity of violence suffered in the workplace.

One part of the questionnaire will therefore be devoted to exploring respondents' life histories. Questions on respondents' entry into adulthood will be relatively detailed (age at which they left school, level of education, age of first sexual relations, age of first intimate relationship, age of first job, reproductive history). Particular attention will be paid to periods of separation and reconciliation in intimate relationships, periods of separation being conducive to triggering or increasing violent behaviour. Questions on residential histories would also seem to be particularly relevant, as this has been poorly documented in surveys on violence: sudden departures from the parental home, time spent living on the street or with no fixed abode, periods of institutionalization and accommodation in emergency shelters are all elements that have been little explored in surveys to date.

⁶⁰ Jaspard, M. *et al.*, 2003, *op. cit.*, p. 281.

⁶¹ Guyavarch, E., 2010, *op. cit.*, p. 119.

⁶² Jaspard, M., Brown, E., Lhomond, B., Saurel-Cubizolles, M.-J., 2003, "Reproduction ou résilience : les situations vécues dans l'enfance ont-elles une incidence sur les violences subies par les femmes à l'âge adulte ?", *Revue française des affaires sociales*, no. 3, July–September.

⁶³ Firdion, J.-M., Parizot, I., 2010, "Le placement des enfants durant l'enfance et le risque d'exposition aux violences à l'âge adulte", in Beck, F. *et al.*, *op. cit.*, p. 131.

The need to improve knowledge on the different ways in which victims escape the cycle of violence, with respect to residential factors, was raised during the seminar organized with associations and professionals who work with victims of violence (organized by INED in June 2011). Furthermore, the report submitted by the Intervention sociale d'intérêt collectif (ISIC – Collective Intervention in the Public Interest) working group to the French minister for social affairs⁶⁴ highlights the difficulties faced by victims in rural areas due to a lack of specialized care structures, limited geographical mobility, isolation, difficulties in guaranteeing anonymity, and fear of close acquaintances' reactions in areas where everyone knows one another. We shall therefore seek to obtain a synthetic indicator (highly sedentary lifestyles in urban or rural areas or, on the contrary, more mobile lifestyles punctuated by housing problems). The various surveys conducted in France show that people living in cities are more often exposed to violence than those living in rural areas,⁶⁵ but few studies have focused on the variation in strategies for escaping the cycle of violence according to one's place of residence. EVS simply shows that the probability of reporting the event to a third party within a few days is higher in towns with populations of 5,000 to 100,000 (41%) than in rural communities (33%) or in larger towns and cities (31%).⁶⁶ The steps taken by victims are strongly linked to the support services available: action taken to involve the police, the justice system or association-based support structures, together with the responses of these institutions, is one means of breaking the cycle of violence. Existing surveys on violence provide some information about the extent to which victims contact and involve the police. ENVEFF, for example, has shown that women tend to initiate such steps more often in the case of physical assaults in public spaces (90% of victims of such attacks⁶⁷). Conversely, comparatively few women report violence experienced within the family sphere or sexual violence (60% of victims of such attacks). These figures are confirmed by the CVS survey:⁶⁸ very few victims of violence within the household will see a doctor (less than 20%) or go to the police (also less than 20%), for instance.

4.4 UNDERSTANDING SITUATIONS WITH MULTIPLE FACTORS OF SOCIAL VULNERABILITY

As mentioned above, the ENVEFF survey has already made it possible to uncover the social factors that foster the emergence of situations of violence: unemployment and job instability increase intimate-partner violence, for example, while profession has little influence. It can be assumed that other factors may also encourage the emergence of violence, including situations of multiple social vulnerabilities. In the field of discrimination studies, a substantial corpus of work focusing on the intersection of sexist and racist discrimination has begun to develop.

⁶⁴ Ministère du Travail, des relations sociales, de la famille, de la solidarité et de la ville, 2010, *La Lutte contre les violences faites aux femmes : une approche par l'intervention sociale d'intérêt collectif. Rapport au ministre chargé des Affaires sociales*, Rennes, Presses de l'École des hautes études en santé publique, 134 pages.

⁶⁵ According to ENVEFF, 15.1% of women living in Paris and the surrounding region have been victims of sexual violence in a public space, compared with 11.6% of women living in other cities of at least 200,000 inhabitants, 6.8% of women living in smaller towns and cities, and 4.4% of women living in rural areas. The EVS survey confirmed this result: inhabitants of rural areas less often declare being the victims of violence. They are better protected than other populations in terms of thefts and attempted thefts, damage to possessions, and verbal violence. Similarly, EVS showed that living in a "ZUS" (*zone urbaine sensible* – sensitive urban zone) did not particularly overexpose respondents to violence. Brown, E., Maillochon, F., 2002, "Espaces de vie et violences envers les femmes", *Espace, populations, sociétés*, no. 3, pp. 309–321; Cavalin, C., 2010, "Panorama des violences subies et des personnes qui s'en déclarent victimes", in Beck, F. *et al.*, 2010, *op. cit.*, pp. 71–83.

⁶⁶ Ananian, S., 2010, "La parole des victimes après un événement violent", in Beck, F. *et al.*, 2010, *op. cit.*, pp. 85–97.

⁶⁷ Jaspard, M. *et al.*, 2003, *op. cit.*, pp. 271–284.

⁶⁸ Rizk, C., 2011, "Violences physiques ou sexuelles au sein du ménage. Description par les personnes de 18 à 75 ans se déclarant victimes des suites et des conséquences des actes subis", *Repères*, no. 15, July, p. 7.

This approach, known as “intersectionality”,⁶⁹ has also given rise to an abundant literature in English-speaking countries and has extended to the field of studies on violence. In particular, the aim of this work is to show how belonging to a stigmatized, discriminated and marginalized social group increases exposure to violent behaviour. For this reason, the VIRAGE survey will pay particular attention to these situations by focusing on migrant, homosexual and disabled minorities, first by identifying these people within the survey sample and then by varying the collection protocol. This approach to the analysis of violence is already used in North American surveys, but is still non-existent in French statistics.

4.4.1 Migrants and individuals of immigrant origin

The idea that there is a higher incidence of violence against women among migrant populations and people of immigrant origin is widely supported in the public debate, but the current quantitative data neither supports nor disproves this assertion, let alone explains what might be the cause. Identifying these individuals among the pool of respondents and ensuring that there are sufficient numbers of them in the sample for the future survey would therefore seem to be necessary, so as to first establish prevalence rates that are reliable and comparable with the rest of the population.

The problem is that the latest results from the ENVEFF and EVS surveys are contradictory, owing to the insufficient numbers of individuals of immigrant origin that were interviewed. In the EVS survey, migrants did not report more violence than other respondents, but the number of migrants was particularly low; for this reason, we shall present the ENVEFF results only.

In ENVEFF, immigrant women were identified. However, there were only 397 such individuals, including 131 women from Southern Europe (Spain, Portugal, Italy), 117 from North Africa, 78 from Europe and North America and 41 from other countries. Daughters of immigrants were also identified: there were 130 women born in France to immigrant parents in the sample. It follows that the results for these groups are less reliable than might be hoped, because once those who are in relationships are selected to measure intimate-partner violence, or once those who are in employment are selected to measure workplace violence, the total number is reduced by a third or even by half. Nevertheless, the results produced invite further explorations of the experiences of these populations.

In public spaces, 20% of North African and Sub-Saharan African immigrant women declared having suffered sexual abuse (exhibitionism, being followed, groping), compared with only 8% of non-immigrant women. The observed differences were not significant, however, for daughters of immigrants.

In the workplace, verbal violence (insults) and psychological violence (destruction of work or work tools) were mentioned more often by women from North Africa, Sub-Saharan African and French overseas *départements*: 11% (verbal) and 17% (psychological), compared with 8% for non-immigrant women. Psychological pressure concerned 23–31% of these women, compared with 16% for non-immigrant women, as well as 20% for the daughters of North African immigrants.

In the family sphere, significant levels of violence were also recorded. The overall rates for domestic violence were higher for North African and Sub-Saharan African women (19% compared with 9% for non-immigrant women). The number of respondents was too small for daughters of immigrants. Regarding physical or sexual abuse during childhood,

⁶⁹ Brownridge, D. A., 2009, *Violence Against Women: Vulnerable Populations*, London/New York, Routledge, 296 pages.

there is no difference between the daughters of immigrants and the general population, but there are clear differences for immigrant women, reflecting levels of violence experienced in their countries of origin, and which should be analysed with regard to the different national contexts of these countries: this violence is often associated with material deprivation or serious disputes between parents, no doubt sometimes experienced in contexts of war and decolonization.

How can these differences be explained? Various hypotheses can be put forward for each sphere. First, in the workplace and in public spaces, it is possible that racism and racial discrimination take the form of physical or verbal violence. Trying to identify the racist nature of this violence may well help to improve our understanding of it. Within the family, several processes may be simultaneously present. First, we know that migrants are affected more by unemployment than the rest of the population – and unemployment can lead to overexposure to intimate-partner violence. An analysis with “all other things being equal” would probably show no difference between migrants and others, as has already been established by data from the *British Crime Survey*.⁷⁰ Quantitative work in Germany based on a survey on violence against women conducted in 2003 (where people from Turkey and Eastern Europe were over-represented⁷¹) provides another explanation: Turkish women are shown to be much more often in situations of intimate-partner violence when only relationships with current partners are considered, but the difference between Turkish and German women fades considerably when relationships with former partners are also taken into consideration. This work has revealed that Turkish women often entered the German territory via family reunification measures, and so risk losing their right of residence in the event of divorce, placing them in a situation where they are unable to leave their spouse in cases of violence.⁷²

We can therefore consider that migration is a vulnerability factor, but that this vulnerability can be explained by the underlying context. Depending on the country of origin, access conditions for obtaining nationality and right of residence create different situations for migrant women. Moreover, while people of certain origins are exposed to racism, others are not. Finally, the socio-economic characteristics (unemployment rate, level of education/qualifications, level of language proficiency, etc.) of migrants are highly variable depending on the country of origin. All these factors highlight the need to include precise questions about respondents’ country of birth, as well as that of their parents, in surveys.

4.4.2 Homosexual individuals

Like migrants, but for different reasons, homosexual individuals are affected by various rejection processes that can take the form of violent behaviour against them in public spaces, family settings and professional contexts alike. Despite an obvious reduction in levels of hostility towards homosexual individuals, recent statistics show a residual presence of

⁷⁰ Walby, S., Allen, J., 2004, *Domestic Violence, Sexual Assault and Stalking. Findings from the British Crime Survey*, Home Office Research Study 276, London, Home Office Research, Development and Statistics Directorate. p. 79.

⁷¹ Among the respondents, there were 860 migrants. Schröttle, M., Müller, U., 2004, *Lebenssituation, Sicherheit und Gesundheit von Frauen in Deutschland. Eine repräsentative Untersuchung zu Gewalt gegen Frauen in Deutschland* [Health, Well-Being and Personal Safety of Women in Germany. A Representative Study on Violence Against Women in Germany], commissioned by the Bundesministerium für Familie, Senioren, Frauen und Jugend (BMFSFJ – Federal Ministry for Family Affairs, Senior Citizens, Women and Young People), Berlin.

⁷² Condon, S., Schröttle, M., 2007, “Ethnicité et violences: regards croisés entre l’Allemagne et la France”, in Jaspard, M., Condon, S. (eds.), *Nommer et compter les violences envers les femmes en Europe. Enjeux scientifiques et politiques*, Paris, IDUP–INED–CAHRV/Éditions de l’IDUP, pp. 147–153.

homophobic representations within the population: 17% of women and 27% of men declared that homosexuality was “against the order of nature” in the 2006 *Contexte de la sexualité en France* (CSF – Context of Sexuality in France) survey.⁷³ A number of other surveys have highlighted the harmful consequences of this ambient homophobia on health by pointing out an increased risk of suicide among sexual minorities, linked in particular to difficulties in the family context (*Enquête presse gay*, 2004; *Baromètre santé*, 2005).⁷⁴

Of the French surveys on violence, ENVEFF was the only one to identify the sexual orientation of respondents. In this respect, it was particularly innovative: it recorded whether respondents (all female) had, at least once in their lives, had any form of sexual relations with someone of the same sex. The proportion of individuals who responded to this question in the affirmative was 1.2%, or 78 women.⁷⁵ Although the population concerned is small, the number of declarations of violence suffered was nonetheless significantly higher than for women who had had exclusively heterosexual relations throughout their lives. For example, 22% of women who had had at least one homosexual experience declared having suffered violence in a public space within the previous 12 months, compared with 8% of exclusively heterosexual women; 7% of the former reported physical violence in the workplace, compared with 2% of the latter; and 15% and 7% of the former reported attempted rape or actual rape (respectively), compared with 6% and 3% of the latter.

Similar results have been produced by a crime victimization survey in Quebec called the *Enquête sociale générale* (General Social Survey), conducted by Statistics Canada every five years with 25,000 respondents (male and female) aged over 15 with the aim of measuring crime levels. This crime victimization survey has, since 2004, recorded sexual orientation (unlike the French CVS survey, but in a similar way to the *British Crime Survey*). The large population sample is explicitly linked to a desire to identify “vulnerable” populations, namely homosexual individuals, people with disabilities, visible minorities and older people. The survey shows that lesbian, gay and bisexual individuals are, all other things being equal, more exposed to interpersonal violence than heterosexual individuals,⁷⁶ whether in public spaces, in the workplace or in family contexts. Declared violence rates are, depending on the type of violence, two to three times higher for homosexual respondents; these results are consistent with findings from ENVEFF, but they would benefit from being updated and consolidated.

4.4.3 Individuals with disabilities

People with disabilities are overexposed to violence during their lives, judging by the evidence produced by disability associations and legal cases that periodically reveal various forms of abuse in institutions. More generally, another clue to the reality of the situation may

⁷³ Bajos, N., Bozon, M., 2008, *Enquête sur la sexualité en France : pratiques, genre et santé*, Paris, La Découverte, 609 pages.

⁷⁴ Jouvin, E., Beaulieu-Prévost, D., Julien, D., 2007, “Minorités sexuelles : des populations plus exposées que les autres ?”, in Beck, F., Guilbert, P., Gautier, A. (eds.), *Baromètre santé 2005 : attitudes et comportements de santé*, Saint-Denis, INPES, pp. 354–367.

Velter, A., 2007, “État dépressif, conduite suicidaire et discriminations homophobes”, in INVS, *Enquête Presse Gay 2004*, Paris, ANRS-INVS, pp. 57–69.

Beck, F., Firdion, J.-M., Legleye, S., Schiltz, M.-A., 2010, *Les Minorités sexuelles face au risque suicidaire. Acquis des sciences sociales et perspectives*, Saint-Denis, INPES, “Santé en action” collection, 112 pages.

⁷⁵ Lhomond, B., Saurel-Cubizolles, M.-J., 2006, “Violence Against Women and Suicide Risk: the Neglected Impact of Same-Sex Sexual Behaviour”, *Social Science and Medicine*, no. 62, pp. 2002–2013.

Lhomond, B., Saurel-Cubizolles, M.-J., 2003, “Orientation sexuelle, violences contre les femmes et santé” in Broqua, C., Lert, F., Souteyrand, Y. (eds.), *Homosexualités au temps du sida*, Paris, ANRS, “Sciences sociales et sida” collection, pp. 107–130.

⁷⁶ Bajos, N. et al., 2008, *op. cit.*

be found in the *Histoire de vie* (HDV – Life History) survey, conducted from February to April 2003 by INSEE with 8,403 respondents.⁷⁷ It revealed that 3% of respondents aged 18 or over reported having experienced jeering, ostracism or the denial of rights – situations that here can be considered forms of psychological violence, without distorting the purpose of the question in the survey – “because of their health condition or a disability”.⁷⁸ Although our survey will not be able to establish a protocol and a specific questionnaire to capture all disability-related violence such as may develop in institutional contexts, the block of questions relating to health should nevertheless be able to identify situations where there is official recognition of disability (this is the case, for example, in the EVS survey) and, more broadly, the degree of functional limitation that characterizes the respondent at the time of the survey. At least for this purpose, the third question of the Minimum European Health Module will enable our questionnaire to achieve this objective. While this may not allow us to establish causal relationships (in either direction) between violence experienced and disability, it should at least take account of situations of disability as an important part of the context of victimization.

As with migrant and homosexual populations, vulnerabilities may be explained by specific underlying situations (here, situations of disability) for individuals facing violence in different spheres of their lives.

The 2008 *Handicap–Santé* (Disability and Health) survey of 39,000 individuals conducted by INSEE, in partnership with DREES, provides almost no information about violence suffered (except incidentally, via the description of quite different health characteristics). Its main objective is to measure situations of disability (impairments, incapacity and activity restrictions) and provide information on health (physical health, obviously functional health with regard to disability, mental health, perceived health, preventive behaviour, use of care, recourse to medical services, hospitalization, etc.), assistance received (technical assistance, personal assistance, services, employability assistance, education assistance, etc.), marital status, education, employment, income, leisure pursuits and various aspects of social participation, such as membership of associations. It also includes a module on perceived discrimination. Results on discrimination alone seem to support the hypothesis of greater vulnerability for people with disabilities, as revealed by the HDV survey, especially in the public sphere, in the workplace and with regard to the difficulties of access to employment. Those respondents who reported a disability were more likely than others to declare suffering ostracism (47% compared with 38%), unfair treatment (42% compared with 27%) or the denial of a right (22% compared with 14%),⁷⁹ and with a greater frequency of occurrence.

Discrimination can be one facet of violent behaviour against people with disabilities. During the seminar for anti-violence associations organized at INED in June 2011, the vulnerability of women with disabilities was one of the key issues raised. The association Femmes pour le dire, femmes pour agir (FDFA), in particular, deplored the violence, abuse and various forms of discrimination that women with disabilities suffer, especially in the workplace and in family contexts.⁸⁰

In English-speaking countries, this issue has been studied for longer (in the United States, Australia and Britain in particular), including as part of general crime victimization

⁷⁷ Crenner, E., Donnat, O., Guérin-Pace, F., Houseaux, F., Ville, I., 2006, “L’élaboration d’une enquête quantitative sur la construction des identités”, *Économie et Statistique*, nos. 393–394, November, pp. 7–18.

⁷⁸ Algava, É., Bègue, M., 2006, “Perception et vécu des comportements intolérants. Une analyse du module « Relations avec les autres » de l’enquête Histoire de vie”, *Économie et Statistique*, nos. 393–394, November, pp. 115–150.

⁷⁹ Bouvier, G., Niel, X., 2010, “Les discriminations liées au handicap et à la santé”, *Insee Première*, no. 1308, 4 pages.

⁸⁰ Femmes pour le dire, femmes pour agir, 2010, *Violences envers les femmes : le non des femmes handicapées*, satisfaction survey results, October, 14 pages.

surveys, as was the case with the 2004–2005 edition of the *British Crime Survey*. This survey shows that women with disabilities were three times more likely than others to be victims of non-sexual violence during the 12 months preceding the survey.⁸¹ For disabled men, the risk was twice as high.

While the VIRAGE survey will not be able to develop a specific protocol for collecting data on violence against people with disabilities, it will nevertheless attempt – provided it is able to identify the presence of disability with sufficient precision and clarity (see §6.3) – to include disability-related aspects in the construction of typologies, among other characteristics, knowledge of which will help identify the contexts in which violence occurs and its possible consequences.

5 THE QUESTIONNAIRE

In light of the experience acquired in the course of the surveys described above, and in accordance with the scientific orientation adopted and the objectives established, a number of choices have been made regarding the construction of the questionnaire.

5.1 RECORDING VIOLENCE BY SPHERE OF LIFE RATHER THAN BY TYPE OF VIOLENCE

There are two ways of recording acts of violence. The first is to ask respondents if they have ever experienced a given act of violence and, if so, to indicate in what context it occurred (work, family, public space, etc.). The second involves first of all telling respondents that the questions will relate to, say, their work context and then considering the different possible acts of violence. In ENVEFF (and CVS since 2007), questions on violence experienced are structured according to different areas of respondents' lives, requiring the list of violent acts to be adapted to the context: for example, robbery is explicitly mentioned for public spaces, where it is not uncommon, but is not mentioned for other areas where such a question might seem incongruous to the vast majority of respondents. It should be noted, however, that CVS is structured according to a smaller number of spheres (outside the household/within the household) than ENVEFF (public spaces, work/studies, consultations and home visits, intimate relationships, ex-partner, family).

For violent acts (such as insults, slaps and other physical abuse, and even forced sex) that are likely to occur in several environments, the repetition of the relevant question for each sphere can lead to more accurate results concerning the frequency of occurrence than in surveys where the act is mentioned only once with the focus then shifted to obtaining precise dates and locations of occurrences. To put it in more general terms, memory recall is more effective when the survey proceeds sphere by sphere. The VIRAGE survey will use the list of spheres defined in ENVEFF, which will make it possible, among other things, to estimate under-reporting induced by a smaller number of spheres by comparing the results with those of the CVS survey.

Another major advantage of data collection by spheres is that it can introduce a set of questions that characterize the situation. For example, in the module on intimate relationships, certain psychological pressures have no need to be detailed in other spheres: manifestations of jealousy, blackmail regarding children, limited access to financial resources for everyday purposes, etc. The repetition of such acts can create a climate of psychological strain that has effects on the personality that are just as destructive, if not more so, than physical violence

⁸¹ Finney, A., 2006, *Domestic Violence, Sexual Assault and Stalking: Findings from the 2004/05 British Crime Survey. Home Office Online Report 12/06*, 36 pages. Available online (in PDF format) at the following address: www.ias.org.uk/uploads/pdf/Women/rdsolr1206.pdf.

that occurred only once during the reference period in another context. Data collection by sphere is therefore essential for developing a typology of violence experienced in general, and more specifically according to gender.

Finally, comparisons of the different surveys on violence that exist today highlight the influence of methodological approaches on the information collected and the calculation of prevalence rates. By choosing to record acts by sphere and, in defining these spheres, by including all violence, whether or not it was perpetrated by someone who lives with the victim on the date of the survey (as is the case with CVS), the rates of violence experienced will probably be slightly higher than for other surveys. The fact that this survey will be conducted at the same time as crime victimization surveys will provide complementary information concerning the estimation of under-reporting induced by the survey method used.

5.2 REFERENCE PERIOD

The choice of reference period (or periods) is crucial in any retrospective survey; in a survey that requires respondents to recall situations of victimization, the problem is particularly sensitive, as the process of “sorting” events is necessarily highly subjective for complex reasons. In the different surveys in this field, questions focus on the 12 or 24 months preceding the interview.⁸² In view of the periods chosen for the ENVEFF (12 months + questions about the respondent’s whole lifetime, or lifetime from the age of 18 for physical violence), EVS (24 months + lifetime) and CVS surveys (24 months + some 12-month and lifetime questions restricted to sexual violence), the period selected for VIRAGE shall be the previous 12 months with some questions concerning similar acts throughout the respondent’s lifetime.

5.3 IDENTIFYING KEY DATES IN RESPONDENTS’ LIFE HISTORIES

The questionnaire will be of a highly biographical nature. The usual dates collected in most demographic surveys will be collected here too.

All respondents will be asked the dates of events marking the transition to adulthood in order to better explore the effects of violence suffered in childhood, namely the ages at which they completed their formal education, had their first sexual relations, entered into their first intimate relationship and started their first job.

The precise dates of any gaps in employment (if longer than six months), of the start and (where relevant) end of intimate relationships, as well as of any reconciliations with former partners, will be collected, along with the dates of birth of children, and of any abortions or miscarriages. Qualitative research has shown that these key moments in people’s lives can be periods where intimate-partner violence is triggered or exacerbated.

For victims of violence, details of violent events in the past 12 months will be collected in every sphere; for violence across respondents’ lifetimes, ages will be recorded for occasional events, or periods if more appropriate. Respondents who have taken action following violence will be asked about key dates (the dates of the first and last procedures, along with the outcomes). In addition, a certain number of locations will also be requested: current place of residence, former place(s) of residence in cases where respondents have moved, and time spent in communal accommodation.

⁸² In this regard, the *International Crime Victimization Survey* (ICVS) is the exception that proves the rule, as its reference period is five years.

5.4 A NINE-MODULE QUESTIONNAIRE

The first module of the questionnaire will record the demographic, social and economic characteristics of respondents and, for those who are, or have been, in an intimate relationship, the same characteristics for their current or previous partner; it will record details of the key steps of respondents' sexual, conjugal, family-related, occupational, residential and, where appropriate, migratory trajectories. Next will come the health module, where information on perceived and objective health will be recorded, along with details of trauma, mental health, sleep and food disorders, addictions, and the use of care. This module will also identify respondents with disabilities.

The next five modules will collect details of verbal, psychological, physical and sexual violence suffered during the 12 months preceding the survey for each sphere of life (current intimate relationship, former intimate relationships if appropriate, professional life, student life (for young people), and public spaces in the broadest sense (including government offices, shops, etc.)); the frequency with which acts occurred, the place where they occurred (if different from the current place of residence or workplace) and the perpetrators of these acts will be noted along with, for the most serious acts, any action implemented and the consequences in material terms and in terms of physical and mental health.

The eighth module concerns the different forms of violence suffered since childhood and inflicted by a parent, another family member and/or a close friend.

Finally, the last module is devoted to major violence experienced throughout the respondent's lifetime, excluding the past 12 months and excluding any acts perpetrated by family or close friends. This includes episodes of bullying, physical and sexual assault, regardless of the context specified (age, sphere, etc.); as with violence that occurred in the previous 12 months, details of the frequency of these acts, the perpetrators, any action taken and the consequences will be noted.

6 SURVEY POPULATION, SAMPLING AND DATA-COLLECTION MODES

6.1 SAMPLE SIZE

The purpose of the survey is not so much to measure the prevalence of violence (which is taken into account in the CVS survey, despite a questionnaire structure that induces under-reporting of violence) as to describe the severity of violence and the contexts in which it occurs, together with the outcomes for victims (which is not taken into account by crime victimization surveys). One of the key objectives, namely to construct a typology of violence, necessarily implies a large survey population; without a sufficiently large population sample, this goal cannot be achieved.

It is also important to produce reliable data – currently non-existent – in groups that are deemed to be more exposed to violence, or, at the very least, to identify these groups: migrant populations, homosexual populations and populations with disabilities. It is important to include men and to explore their experiences of violence. Lastly, it is now essential to be able to provide detailed descriptions of victims' outcomes. These three objectives all call for the implementation of the survey on a large population sample.

The sample used for the ENVEFF survey (6,970 women) proved insufficient for the study of certain populations, such as immigrant populations (only 397 women), and even of some specific aspects of certain acts of violence, such as sexual violence (780 women had experienced sexual abuse, 87 sexual harassment at work, 63 conjugal rape, etc.).

Similarly, despite a questionnaire adapted to the study of trajectories, the EVS survey proved limited in its potential for analysis because of its small sample size.

The latest results produced regarding violence, published on the basis of the CVS survey, combine files of data collected in 2008, 2009 and 2010, representing a total sample of 40,360 people aged 18 to 75 (17,578 men and 22,782 women). In all, 846 people (204 men and 642 women) aged 18 to 75 were victims of at least one act of physical or sexual violence perpetrated by a person living with them during the two calendar years preceding the survey.⁸³ This violence was physical for 192 men and 570 women, and sexual for 19 men and 127 women. Of annual samples of around 13,000 people, approximately 65 to 70 men and 200 to 230 women were victims of at least one act of physical or sexual violence within the household during the two calendar years preceding the survey. To overcome the analytical limitations presented by the small numbers, the CVS survey protocol provides for the cumulation of data files from five consecutive years, giving a total sample of 60,000 people, evenly split by gender.

Bearing in mind the limitations of ENVEFF and the advantages of CVS, the scientific objectives of the VIRAGE survey call for a large population sample of around 35,000 people (17,500 men and 17,500 women). This will ensure that it is possible to identify a sufficient number of people reporting violence in every sphere of life, proceed with a detailed analysis of their situations, and pinpoint those of them who are victims. We expect that around 1,200 women and 300 men in this population sample will have been affected by sexual violence at some point during their lifetimes, if the proportion of victims in the population is identical to that recorded in the CSF survey in 2008,⁸⁴ i.e. 6.8 % for women and 1.6% for men; however, these numbers will allow analyses regarding these individuals (and their trajectories in particular) that the CSF sample does not allow. Similarly, almost 4,000 immigrants and almost as many people born in France to immigrant parents are expected. With regard to individuals who are homosexual or who declare having had sexual relations with someone of the same sex, the expected numbers are 700 people of each gender based on data from CSF, or nearly 4% of the population. This data will therefore be less reliable than the rest, but still stronger than anything produced to date by existing surveys.

6.2 SAMPLE AGE GROUPS

The VIRAGE survey will involve interviews with men and women aged 20 to 69 inclusive. Unlike previous surveys (EVS and CVS), we have chosen to reduce the age range taken into consideration. In terms of statistical power, we feel it is preferable to reduce the overall age range in order to optimize the analyses for different age groups.

From 20...

Unlike many previous surveys, which addressed individuals as young as 15 or 18, the population targeted by the *Violence and Gender Relations* survey will have a minimum age of 20. One aim of the survey is to study the trajectories of individuals, and age groups younger than 20 have a more limited life history: many do not live with intimate partners, and

⁸³ Rizk, C., 2011, "Violences physiques ou sexuelles au sein du ménage : description par les personnes de 18 à 75 ans se déclarant victimes des suites et des conséquences des actes subis", *Repères*, no. 15, July, 23 pages.

⁸⁴ Bajos, N. *et al.*, 2008, *op. cit.*

employment rates for young people aged between 15 and 20 were just 12.8% for both sexes in 2009.⁸⁵

... to 69

Regarding the upper age limit, we had initially considered the possibility of collecting data on acts of violence against the elderly. Indeed, while such violence is regularly highlighted in the media, few statistical studies are conducted on this subject at national level in France.⁸⁶ Despite the need for knowledge in this field, the VIRAGE survey will not address this issue. There are several reasons for this. First, we plan to interview people living in private households; however, as people get older, the more likely they are to leave this kind of household, in proportions varying from 1.3% at ages 60 to 64 to 7.4% at ages 80 to 84, and increasing further still with age. Second, the survey protocol, as currently envisaged, is not adapted to older people. More specifically, it is set to involve multi-mode data collection (via telephone and internet), which implies the use of computer. Studies of the behaviour of respondents during the self-administered questionnaire for EVS showed that, on average, people aged 55 and over (and especially those aged 65 to 75) had more difficulty answering questions, thus lengthening the duration of the questionnaire and resulting more frequently in incomplete questionnaires⁸⁷ (Bart, 2010).

While the subject of violence perpetrated against older people is one that must mobilize the scientific community, it would be necessary to conduct a large-scale survey specific to this population, focusing on people aged 75 and over, that includes specific questions on violence perpetrated by caregivers (family members or professionals) and explores the blurred boundaries between neglect and abuse. It would also be useful to proceed with a sampling of the population living in retirement homes. Such a project is currently being developed by the Caisse nationale de solidarité pour l'autonomie (CNSA – French National Solidarity Fund for Autonomy),⁸⁸ and so this issue will not be addressed by our project. Moreover, as one of the objectives of the VIRAGE survey is to gain a better understanding of workplace violence in relation to occupational trajectories, few people aged over 65 will be concerned by assaults in this sphere during the 12 months preceding the survey. By contrast, it could be interesting to study the prevalence of violence at the onset of retirement, particularly within spheres such as intimate relationships and family.

6.3 IDENTIFYING MINORITY POPULATIONS

One of the objectives of the survey is, as we have seen, to pay particular attention to populations that form minority social groups (insofar as they are the targets of various forms of discrimination and the subjects of stigmatizing stereotypes). As these groups also represent minorities from a numerical point of view, over-representing or simply identifying them does not arise in the same way for each of them, as their proportions in the general population are not the same. While it is pertinent to over-represent migrants and people of immigrant origin, bearing in mind that they represent nearly 20% of the resident population in France, the same

⁸⁵ Source: INSEE: *Enquête Emploi en continu*, 2009.

⁸⁶ Nevertheless, we might cite following: Thierry, X., 2010, “Les accidents et agressions corporelles chez les personnes âgées : moins fréquents que chez les jeunes, mais plus graves”, *Population et Société*, no. 468, Paris; Ined, 4 pages; and Thomas, H., Scodellaro, C., Dupré-Lévêque, D., 2005, “Perceptions et réactions des personnes âgées aux comportements maltraitants : une enquête qualitative”, *Études et Résultats*, no. 370, Paris, DREES, 12 pages.

⁸⁷ Bart, O., 2010, “Les comportements des répondants face au questionnaire auto-administré par ordinateur”, in Beck, F. *et al.*, 2010, *op cit.*, pp. 237–249.

⁸⁸ CEMKA-EVAL, 2009, *Enquête sur les conditions de vie, le handicap et la sécurité des personnes âgées, à domicile et en institution*, feasibility study results, CNSA–DGAS, July.

does not apply to gay people or people with disabilities, as the populations in question are much smaller, and indeed not easily quantifiable.

Immigrants and sons and daughters of immigrants

Census data from INSEE provides information on immigrant populations: in 2008, in France, 5 million immigrants – or 8% of the population – were living in private households. The combination of data from the census, the *Emploi en continu* (Continuous Employment) survey and the *Trajectoires et Origines* (Trajectories and Origins) survey gives an estimate of the number of people born in France to at least one immigrant parent: 6.5 million (of which 3 million have two immigrant parents), or 11% of the population.⁸⁹ It is possible to obtain an over-representation of immigrants in the survey by sampling using census data. However, the census cannot be used to identify the children of immigrants who have left their parents' home. These can only be identified *ex post facto*, via questions about their place of birth and the places of birth and nationalities of their parents. Therefore only a large sample size will enable reliable estimates of the prevalence of violence suffered by migrants and their descendants, as well as more detailed analyses concerning violence suffered and respondents' trajectories.

Bisexual and homosexual individuals

The issue of identifying individuals' sexual orientation was first raised in surveys on sexuality. It is now also present in health surveys and in ENVEFF; furthermore, as we have seen, North American crime victimization surveys have also chosen to identify homosexual populations. This can be achieved via various methods: self-identification (i.e. where respondents declare whether they are homosexual); by respondents declaring their attraction to people of the same sex; or by recording the occurrence of at least one sexual experience with a person of the same sex. Here too, the events in question may be past events that occurred at any point during the respondent's lifetime or current events that occurred within a fixed period preceding the survey (12 months).⁹⁰

In the 2005 *Baromètre santé* survey, the question asked was: “*During the past year, when you have had sexual relations, have these been: Always with a man (or men)? Always with a woman (or women)? Usually with a man (or men)? Usually with a woman (or women)?*”⁹¹ In a sample of 30,514 people, 395 homosexual men and 237 homosexual women were identified as having had sexual relations with people of the same sex.

Obviously, there is no way of obtaining an over-representation of homosexuals in the VIRAGE survey sample. However, a parallel internet-based survey (with the same questionnaire) is envisaged, using the same protocol as the *Enquête presse gays et lesbiennes* (EPGL – Gay and Lesbian Press Survey) that is currently under way. Respondents would be approached through websites and social networks. At a very low cost, this second survey, to be called VIRAGE-LGBT, would have the significant advantage of enabling comparisons

⁸⁹ Borrel, C., Lhommeau, B., 2010, “Être né en France d'un parent immigré”, *INSEE Première*, no. 1287, 4 pages.

⁹⁰ The questions asked in the CSF survey were as follows: “In the course of your life, have you been attracted to men only, mostly to men but also to women, to men and women equally, mostly to women but also to men, or to women only?”; on self-identification: “Do you currently define yourself as heterosexual, homosexual, gay (if male), lesbian (if female), or bisexual?”; and, finally, on homosexual practices before the age of 18: “Before the age of 18, had you had any sexual experiences with a male/female partner?”, and throughout the respondent's lifetime: “In the course of your life, how many male/female partners have you had?”.

⁹¹ Jouvin, E., Beaulieu-Prévost, D., Julien, D., 2007, “Minorités sexuelles : des populations plus exposées que les autres ?”, in Beck, F., Guilbert, P., Gautier, A., *Baromètre santé 2005*, Saint-Denis, Éditions INPES, pp. 354–367.

between the results on the homosexual population in the main VIRAGE survey and the results of the VIRAGE-LGBT survey.

Individuals with disabilities

According to the French law of 11 February 2005 for the equal rights and opportunities, participation and citizenship of people with disabilities: “A *disability, for the purposes of this act, shall include any restriction of activity or of participation in life in society suffered by a person within his or her surroundings owing to a substantial, sustained or permanent alteration of one or more physical, sensory, mental, cognitive or psychological functions, a multiple disability, or an incapacitating physical disorder.*” Situations of disability have been the subject of a series of surveys: *Handicap–Santé* (Disability and Health, comprising three components: HSM 2008 for private households; HSI 2009 for institutions; and HSA for caregivers), filtered via the *Vie quotidienne et santé* (Daily Life and Health) survey conducted in 2007 among 140,000 households. The HSM 2008 survey was conducted among 39,000 respondents.

The assessment of disability combines various dimensions covering both incapacity (functional limitations that refer to functions and measure an individual’s capacities and autonomy in performing day-to-day activities) and deficiencies (which refer to organs). In both cases, disability can occur in the motor, sensory, emotional and behavioural domains, or with regard to language. Understanding situations of disability, and assessing degrees of disability, means taking account of all of these parameters.⁹²

In order to identify people with disabilities, the health module of VIRAGE should enable the development of an indicator of disability, by drawing on questions regarding limitations and deficiencies in the HSM 2008 survey, albeit without achieving the same level of detail, given the length of the questionnaire.

To give an order of magnitude, the number of people who report a significant functional limitation is a little over 3% of those aged 20 to 29 (for sensory, motor, intellectual and psychological limitations), and nearly 15% of men and women aged 50 to 59.⁹³ These limitations do not necessarily mean that the people who suffer from them consider themselves to be “disabled” – hence the importance of obtaining enough information (without the questionnaire being as detailed as for a survey whose primary focus is disability) to be able to clearly define individual situations regarding deficiencies and limitations.

Accordingly, a large sample size is required in order to identify persons with disabilities and consider situations of disability as an important part of the context of victimization. In VIRAGE, we can expect to find around 3,000 respondents declaring at least one disability.

⁹² Bouvier, G., 2009, “L’approche du handicap par les limitations fonctionnelles et la restriction globale d’activité chez les adultes de 20 à 59 ans”, *France, portrait social – édition 2009*, Paris, INSEE, collection “INSEE Références”, pp. 125–142. Available online (in PDF format) at the following address: http://insee.fr/fr/ffc/docs_ffc/ref/FPORSOC09K.PDF.

⁹³ Midy L., 2010, « Présentation de l’enquête « Vie quotidienne et santé » de 2007 », Insee, Document de travail n° F1001, 55 pages. Available online (in PDF format) at the following address: www.insee.fr/fr/publications-et-services/docs_doc_travail/Docf1001.pdf.

6.4 TWO DATA-COLLECTION MODES: VIRAGE-MAIN AND VIRAGE-WEB

As with any survey, the choice of data-collection method will have an impact on both the cost of the operation and the quality of the results obtained. A range of options, of varying representativeness in terms of the sample population and the quality of responses, are available to us, and the choice between these options is an important methodological decision not just for surveys on violence, but also for statistical surveys in general. These options relate to the construction of the sample, the procedure adopted for approaching respondents and the mode of administering the questionnaire.

The survey will involve two complementary components: first, the main survey will be conducted by telephone with 35,000 people (VIRAGE-Main); and second, a parallel survey will be conducted online, using the same questionnaire, targeting specific populations (VIRAGE-Web).

VIRAGE-Main

The decision was made to conduct the main survey among 35,000 people by telephone and, in the event of a refusal, to offer the potential respondent the opportunity to complete the survey online.

Regarding the representativeness of the sample, it must be said that the quality of telephone surveys has deteriorated since ENVEFF. Participation rates now stand no higher than around 50%, indicating that many people now refuse to respond, while they exceed 75% for face-to-face surveys. However, telephone-based interviews garner responses of a much higher quality than face-to-face interviews in the respondent's home: it is easier to ensure confidentiality, and it is easier for respondents to talk about difficult events. Furthermore, if the respondent is disturbed for any reason, a telephone interview can always be interrupted and resumed at a later date, thus ensuring greater safety and security for respondents, particularly those in situations of intimate-partner violence. In surveys conducted via face-to-face interviews, such as CVS, questions about violence are not read out by interviewers, but instead listened to on headphones and answered on a computer – a method initiated by the EVS survey.⁹⁴ Despite this precaution, 25% of interviews are conducted in the presence of a family member and, in 2% of cases, interviewers do not offer respondents the option of listening to questions on headphones because of an overly intrusive spouse. The experience of ENVEFF, together with methodological studies conducted more recently, provide solid references for telephone surveys in France.

The goal is therefore to achieve a high rate of participation while collecting data by telephone, or by using other data-collection methods that make it easier for respondents to talk about violence suffered. To achieve this goal, we made use of the first results from the *Fécondité, contraception, dysfonctions sexuelles* (FÉCOND – Fertility, Contraception and Sexual Dysfunction) survey coordinated by INSERM, and consequently decided to offer people who initially refused to be interviewed the option of answering online.

The sample frame will be constructed by randomly generating telephone numbers, as is common practice. Contact will be made by telephone and whoever answers the call will be asked to provide some basic information about each member of the household (age and gender in particular); the person to be interviewed will be randomly selected (using the Kish

⁹⁴ Bart, O., 2010, *op. cit.*

method) from those household members aged between 20 and 69. Here, no over-representation is possible. The expected numbers of “minority” populations will only be partially achieved, merely by dint of the sample size.

In order to increase the response rate, individuals who initially refuse to participate in the survey will be asked if they wish to complete the questionnaire online. Finally, “refusal questionnaires” – to collect basic information (qualifications, gender, age, marital status, reason for refusal) about those respondents who do not wish to participate in the survey either by telephone or online – must also be envisaged, as the non-response rate now stands at almost 50% in telephone surveys.

VIRAGE-WEB: VIRAGE-LGBT, VIRAGE-ASSOCIATIONS, VIRAGE-UNIVERSITES

We are aware that, of the main population sample of 35,000, the number of people declaring some form of homosexual orientation or homosexual practices will not be high, and therefore will limit analyses regarding homosexual populations. To overcome this problem, a second survey will be conducted online in parallel to the main survey (using the same questionnaire) according to the protocol of the *Enquête Presse gay et lesbienne* (EPGL – Gay and Lesbian Press Survey) currently under way. Potential respondents will be approached solely via websites and social networks aimed at the homosexual community, where the survey will be publicized.⁹⁵ While it is true that the EPGL survey is not representative, it has nonetheless made it possible to collect over 15,000 questionnaires within a very short time (two months). At very low cost, this second survey, named VIRAGE-LGBT, will be of great value, as it will enable comparisons with the results for the homosexual population interviewed in the main VIRAGE survey, and thus highlight the degree of selection bias inherent in surveys conducted via social networks.

Along similar lines, another internet-based survey will be conducted via the websites of associations that provide assistance to victims of violence – principally those that have a toll-free number and strong government support (in particular the websites of the 3919 spousal violence helpline, the SOS-Viol rape helpline, and the Jeunes Violences Écoute youth violence helpline). This survey, named VIRAGE-Associations, will enable comparisons between individuals who seek the assistance of associations, i.e. who identify as victims of violence, and those interviewed in the main VIRAGE survey, and in particular those who, as a result of the survey’s design, are classed as victims of violence.

Finally, we envisage extending the survey to students and staff from different universities. A number of universities (e.g. Paris-7 and Paris-10) are already associated with the project. Students will be invited to complete the questionnaire electronically and return it by email. With almost 40,000 students, this VIRAGE-Universités survey will provide a relatively reliable measurement of acts of violence suffered by students, particularly acts related to harassment or hazing in the university environment.

⁹⁵ Velter, A., Methy, N., Bouyssou, A., Semaille, C., 2012, *L’Enquête Presse gay et lesbiennes. Rapport intermédiaire de recherche*, 106 pages.

7 CALENDAR

7.1 2013:

- finalization of the paper version of the questionnaire, with testing on 100 individuals in June
- submission of authorization request to CNIL (Commission nationale de l'informatique et des libertés, France's national data protection body) in July
- launch of invitation to tender in late September to select the polling company
- October–November: telephone testing of questionnaire on 30 male perpetrators of violence and 30 female victims of violence
- presentation of the survey to the CNIS (Conseil national de l'information statistique – French National Council for Statistical Information) in November

7.2 2014:

- February: referral to INED's ethics committee
- February–May: implementation of the pilot survey with 1,000 respondents, using the CATI and CAWI questionnaires
- June–October: analysis of pilot survey results and adjustment of the length of the questionnaire if necessary (by removing certain questions)
- November: “dress rehearsal” and launch of data collection

7.3 2015:

- January–mid-July: data collection across a sample of 35,000 people
- July–December: calculation of weightings; recoding of data gathered in uncoded form

7.4 2016–2017:

- analysis of data; first publications

7.5 2018:

- publication of two works: one in a short format (e.g. key findings) and one in a long format (e.g. survey report)