台灣「家庭暴力個案資料庫」使用問題之探討

游美貴

摘要

家庭暴力防治法自1998年通過。依據法規，中央政府設置有全國「家庭暴力個案資料庫」。自此之後，「家庭暴力個案資料庫」已成爲家庭暴力防治不可或缺的個案記錄系統。家庭暴力個案服務演變至今，已成爲公私部門協同合作的模式。「家庭暴力個案資料庫」從公部門社工專用，擴展到辦理家庭暴力個案服務的民間單位社工共同使用。

但隨著使用人數的增加，與權限使用的開放，資源共享與專業保密，在實務操作上很少被提及。本文主要目的在於瞭解使用者對於資料庫使用情形，並探討使用權限的管理機制及使用的缺失，以期能對於未來在「家庭暴力個案資料庫」使用上提出相關的建議。

○ 關鍵字：家庭暴力個案資料庫、家庭暴力、家庭暴力防治法。
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Domestic Violence Electronic Database (DVED): A Taiwan Study

Mei-Kuei Yu

Abstract

The Domestic Violence Prevention Act (DVPA), passed in Taiwan in 1998, was the first set of laws and regulations in Asia specifically for domestic violence. The law required the central government to establish a nationwide Domestic Violence Electronic Database (DVED). The DVED is now the most important case record system for both public and private-sector social workers in Taiwan. However, new technology brings new problems. This article examines the use of the DVED, including access management and usage permissions, to gain insights from current users of the database and to make relevant recommendations for the future of the DVED.

Keywords: Domestic Violence Database, domestic violence, Domestic Violence Prevention Act

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Domestic Violence Electronic Database (DVED): A Taiwan Study

In 1998, the Domestic Violence Prevention Act (DVPA) of Taiwan became the first regulation intended to prevent domestic violence in Asia. It required the central government to “sponsor the creation of an integrated database of domestic violence offenders for mutual reference among judges, prosecutors, policemen, medical personnel and other governmental agencies, and keep strict confidentiality of the identity of the victim.” (Article 5) ¹

The central government then created the national Domestic Violence Electronic Database (DVED)² to comply with these laws and regulations. Since then, the DVED has become an indispensable case recording system for preventing domestic violence. However, during the past decade, the mandatory notification system showed gradual annual increases in the number of domestic violence cases. Although the Integrated Vertical Service Programme was previously used exclusively by public sector social workers, local governments have officially started promoting the use of the program to help avoid the problem that subjects constantly change their protection service provider and to lower the risk of losing contact with subjects (Yu, 2010). This enables cooperation and the use of the DVED by both public and private sectors, and a collaborative model of the casework service has evolved.

As every county and city has a different system for the division of labour in local governments, and since many people may require several welfare benefits simultaneously, the DVED has become an important reference point enabling counties and cities to check each subject’s status. However, authority to access the DVED has widened considerably and improper access to a database may result in misuse of personal data. The DVED was established to monitor cases of domestic violence and must be taken to ensure that its purpose remains clear for all managers and users.

The Ministry of the Interior has published the Regulations on the establishment,

¹ The relevant articles of the legislations mentioned in the study, please see Appendix B.
² Abbreviations used in the study, please see Appendix A.
management and use of the DVED (2007). Although local governments are responsible for implementing the regulations, the regulations do not fully identify standards. That is, the system relies on professional ethics codes. Social workers know that they must respect client confidentiality. In the harsh and managerial environments of contemporary practice, however, maintaining an ethical perspective is difficult (Gray, 2010). That is, the line between “information sharing” and “professional confidentiality” become ambiguous.

Therefore, this study explores transitions in the use of the database. The research questions addressed in this study are the following. What are the barriers to the current users of the DVED? What should be changed to meet their needs? Several improvements in the DVED are then proposed.

**Background and Theoretical Framework**

During the 2011 fiscal year, 56,734 suspected cases of domestic violence were reported across Taiwan. Although not all of these reports were deemed to warrant investigation, approximately 50% of the reports were further investigated by social workers (DVSAPC, 2012).

Moreover, the hierarchical relationships and political power structures may lead to misuse of the DVED. Most decisions in social work involve a complex interaction of ethical, political, technical and legal issues. While ethical issues in social work have only recently been considered in the context of the technological database, the implications for professional ethics could be profound in terms of the possibility of action for social change (Bank, 2001).

Therefore, to understand the development of the DVED, this section examines the codes of technology and social work ethics from different countries, and reviews recent legislation on data protection in Taiwan.

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3 The regulations are stipulated according to Article 5.3 of Domestic Violence Prevention Act, including the creation, management and application of the database.
Installation and Use of the DVED

As technology progresses, many developed countries have digitized their records and developed databases. The use of databases also symbolizes the competence of a country in developing information technology. However, when personal data become easily transferable, searchable and sharable, the legislative and ethical norms of database applications must be carefully considered (Cheng, 2004; Fan & Liao, 2008; Ma, 2005).

Before the DVPA was established in 1998, some local governments in Taiwan had begun developing their own case management databases. For example, in Taipei City, a case management database was designed in the following stages: system planning, system analysis, software or programme selections, system design, system promotion, system maintenance and support (Blackmore, 2003). Despite such case management databases are rarely discussed in the social work field in Taiwan, other fields such as health care have intensively investigated database applications. For example, Wang (2009) based a case management process on database applications, including the selection of cases and subjects to be accepted, case evaluation, case management planning, provision and coordination of caring services, monitoring, tracking and evaluating the caring process.

When DVPA\(^4\) was implemented on June 24, 1998, the central government clearly stated that it would sponsor the creation of an integrated database of domestic violence by the Ministry of the Interior Domestic Violence and Sexual Assault Prevention Committee (DVSAPC)\(^5\). Since the DVED was first established in 2001, it has been constantly revised and amended. Table 1 summarizes the third amendment of the DVED.

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4 DVPA was amended on the 29th of April 2009.
5 From 23 July 2013, DVSAPC has changed the name to the Department of Protective Services under the Ministry of Health and Welfare in the central administration level.
Table 1

**Development of the Taiwan Domestic Violence Electronic Database (DVED)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Domestic Violence Electronic Database (DVED) Development</th>
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<tbody>
<tr>
<td>1998</td>
<td>Dissemination of the Domestic Violence Prevention Act, stipulating the central government would sponsor the creation of an integrated database of domestic violence.</td>
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<tr>
<td>2001</td>
<td>First generation of the DVED: The DVED System was developed.</td>
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<tr>
<td>2003</td>
<td>Second generation of the DVED: Expansion of the DVED as the Domestic Violence and Sexual Assault Prevention Database, improving system functions and integrating child protection cases as an outsourced project.</td>
</tr>
<tr>
<td>2008</td>
<td>Creation of 23 DVED Report Fax-On-Demand Systems for local government use.</td>
</tr>
<tr>
<td>2011</td>
<td>Meetings to discuss the integration of the National Domestic Violence, Sexual Assault, Child and Adolescence Protection Database, Integration Platform of Social and Labour Database and the Municipality and County Interior Affairs Statistics Internet Reporting System.</td>
</tr>
</tbody>
</table>

*Source of data: Ministry of Interior (2010).*

The Judicial Yuan, Ministry of Justice, National Police Agency, and Ministry of the Interior are responsible for managing the users’ identities and passwords of Judges, Prosecutors and Police Officers. The DVSAPC is responsible for establishing the DVED, configuring access limitations, and managing the identities and passwords of local governments’ authority staff.

To meet the needs of social workers, the current DVED has various forms for data input. For example, there are 27 data input forms to record “protection and assistance”. The social workers, who are the case managers of domestic violence cases, mainly use the system to register data that must be recorded. The most commonly used sections are “contacts and resource management records” (for recording contacts) and “consultation and negotiation” (to record protection services). Other DVED sections include “case recording”, “case source”, “victim and counterpart information”, “case summary”, “service plan”, “case evaluation” and “case closing evaluation”. Therefore, the DVED contains widely varying case
information, including detailed personal data and social work service records. As the system was initially used by public social workers, access authorization was not controversial. This situation began to change in 2010, when private agencies working for local governments also started using the DVED as the Integrated Vertical Service Programme and increased their cooperation.

According to the latest DVED authority regulations of the DVSAPC, social administration, police, medical and judicial agencies have the authority to search the DVED. Recommendation applications are needed to gain authority to use the system. New users can be added only if existing users apply for authorization (see Table 2). The applications must then be approved by the Central Authority.

The current Central Authority management of the DVED is carried out by DVSAPC. Local management authority is assigned by the Domestic Violence Prevention Centres (DVPCs) of local governments. The Regulations on the establishment, management and use of the DVED is the major legislative reference in terms of actual management and use of the database. Nevertheless, as the DVED continues to expand, and, as the number of target users increases, some researchers have questioned whether this form of regulations still fits current practice or whether further amendment is necessary.

### Table 2

**Authority mechanisms for the Taiwanese domestic violence electronic Database**

<table>
<thead>
<tr>
<th>Agency</th>
<th>Authority Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social administration agencies</td>
<td>1. Supervisors: recommended by another supervisor.</td>
</tr>
<tr>
<td></td>
<td>2. County or city government social workers: recommended by the supervisor of that city or the county.</td>
</tr>
<tr>
<td></td>
<td>3. Outsourced personnel: recommended by social workers.</td>
</tr>
</tbody>
</table>

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Data Protection in Domestic Violence Cases

The range of legislation related to domestic violence case data connected with the DVED must be reviewed (Laws and Regulations Database of Taiwan, 2012). During the service transfer process, social workers must often deliver relevant information to professionals in different fields. Therefore, electronic DVED data must be accessible via the Internet and be quickly provided to ensure continuity of case requirements. Since this raises personal privacy issues, new legislation has been established (Clark, 2006), such as the Personal Information Protection Act\(^7\) (PIPA). The DVED contains substantial personal data. Laws and regulations are therefore needed to protect the case data.

**The DVED users.** The DVPA stipulates an integrated database of domestic violence offenders needed to provide a reference for judges, prosecutors, police officers, medical personnel and other governmental agencies, and the central government must maintain the “strict confidentiality of the identity of the victim” (DVPA, Article 5).

Although the DVED can be accessed by other professionals, including doctors, nursing

\(^7\) This act is enacted to govern the collection, processing and use of personal information to prevent harm on privacy, and to facilitate the proper use of personal information in Taiwan.
staff, psychologists, social workers and civil servants, they must submit a written form (or a fax in an emergency) stating their reasons and information requested to the relevant local government authority, or to the Central Authority if more than one authority is involved.

When performing a relocation programme for a domestic violence offender, executive agencies or institutions may use the DVED to inform the judicial agency, victim and their attorney that an offender is attending a relocation programme, to obtain information about an offender, or to provide information about the offender to judicial agencies, jail audit committees, domestic violence prevention centres, and other concerned institutions.

Information can be added by the following (the Regulations on establishment, management and use of DVED, Article 2):

1. The Judicial Yuan (the highest of the five branches of the Taiwanese government): Verdicts of Civil Protection Orders, sentences of domestic violence cases, violation of Protection Orders.
3. Police Departments: Reports related to domestic violence cases, letters of criminal case removal, and records of enforcement of protection orders.
4. Local Government Competent Authorities: Case records of the victim, records of domestic violence and the relocation history of the offender.
5. Agencies Under a Central Competent Authority: Other information regarding victims or respondents in domestic violence cases.

**Data protection.** Data protection is important in various regulations, including the Domestic Violence Prevention Act (DVPA, 2009), the Social Worker Act (SWA, 2009) and the Personal Information Protection Act (PIPA, 2010). They state:

1. The central government must keep “strict confidentiality of the identity of the victim” (DVPA, Article 5).
2. Information obtained from the DVED must be confidential unless otherwise specified by law. Violation of confidentiality will be dealt with under the law (DVPA, Article 8).

3. Social workers and staff in the social work offices should not release data obtained from the database (SWA, Article 15).

4. Case data should be recorded by a social worker and preserved for not less than seven years (SWA, Article 16).

5. Personal information regarding medical treatment, genetic information, sexual life, health examination and criminal record should not be collected, processed or used, unless in specific circumstances specified in law (PIPA, Article 6).

6. Government Agencies should limit the use of personal information to the scope of their work, as provided by laws and regulations and in compliance with the specific purpose of collection, except in specific circumstances (PIPA, Article 6).

7. Non-Government Agencies should limit the use of personal information to the scope of a specific purpose (PIPA, Article 20).

The above laws and regulations stipulate the circumstances for the collection, use and management of case data. Although related legislation has been passed, the DVED is most commonly used by social workers for storing and accessing important information. The Social Worker Act does not describe or regulate electronic recording of case data despite the continuing progress of technology in the realm of social work. The use of technology by social workers and its effects on the profession are the main considerations. The best approach is to examine the features of professional confidentiality and ethical norms with electronic data in the field of social work as used in other countries.

**The protection of electronic data in the field of social work and a comparison of database use in other countries.** The social work field must stay abreast of technological changes in the information age. However, technology use has some limitations that users must carefully consider. In a summary of the critical issues, the NASW stated,
Many technologies are powerful but fragile; crucial information can be lost or intercepted; not all Web sites providing information are reliable; service providers can easily misrepresent themselves and their credentials online; confidentiality in an electronic medium can quickly evaporate; jurisdiction, liability and malpractice issues blur when state lines and national boundaries are crossed electronically; numerous digital divides can thwart access and success; and clients and social workers alike may have unrealistic expectations for what a technology can actually provide. (NASW, 2005, p9)

Although the computerization of information varies widely, all countries have applied technology in the social work field. Some countries, in which professional confidentiality is carefully regulated, including the USA, UK and Australia, have developed standards specifically for technology use in social work.

Technology and social work in the USA. To regulate the security and confidentiality of health insurance information transmission, the USA passed the “Health Insurance Portability and Accountability” (HIPAA) in 1996. Since then, the HIPAA has been updated and amended based on changes in technology and requirements. This bill regulates laws and regulations in three areas: electronic data interchange for health care providers, privacy protection, and personal information safety.

In 2005, the US National Association of Social Workers (NASW) proposed “Standards for Technology and Social Work Practice” (NASW, 2005). The standards covered ethics and values; authorization; cultural competence and minority groups; technology competence; control competence; recognition and verification; confidentiality, privacy, recording and

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security; risk management; and practical competence. Regulations regarding confidentiality, privacy, recording and security specifically state:

1. Social workers should protect the privacy of case subjects when using technological tools for manipulation and recording of services.
2. Social workers must use special firewalls to protect case information stored in electronic files.
3. When using wireless networks or other innovative products, social workers must consider privacy risk and adopt appropriate steps to protect a case subject’s privacy.
4. Social workers must comply with laws and regulations regarding privacy and security during an electronic data interchange, and the rights of the case subject during information applications (including personal information protection, firewalls, password security and monitoring paths).
5. Data should be recorded and maintained in safe and secured files.

**Technology and social work in the UK.** In 1998, the UK passed the *Protection and Use of Patient and Client Information Act*, which was later expanded and extensively amended as the *Code of Practice on Protecting the Confidentiality of Service User Information* in 2009. This legislation established norms for using personal information, information security and data sharing. In 2002, the British Association of Social Workers (BASW) further stipulated in their ethical code for social workers that:

1. Personal information can only be revealed under certain circumstances and only if sufficient evidence is provided by the service providers, social workers or other people, community or environment.
2. A protection and management mechanism must be established to preserve the privacy of case records, irrespective of whether the records are in written or

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electronic format.

3. Cross-Institutional or cross-field case information sharing must comply with privacy and confidentiality norms in the ethical code. Service providers have the right to review the content of their records. The privacy and confidentiality of clients must also be protected in provided content.

4. Social work researchers must also follow the norms of the ethical code. They must comply with research ethics and assume responsibility for protecting case privacy and confidentiality.

**Technology and social work in Australia.** In 2010, the Australian Association of Social Workers (AASW) created an ethical code for social workers, which stipulates social workers should:

1. Inform the subject, or their legal representatives, of the conditions under which case privacy and confidentiality are restricted.
2. In the case of institutional and legislative requests, provide a detailed explanation of regulations regarding the sharing, recording and computerization of information.
3. Declare the reason for obtaining the information and its intended use.
4. Declare the rights of the subject to examine their records.
5. Minimize the risks of passing information to a well-intentioned third party, before revealing case information.

Codes of ethics used in countries such as the US, UK and Australia, have several key similarities:

1. The importance of respecting case privacy and confidentiality.
2. Social workers should explain the necessity and conditions for sharing personal data.

However, one question is whether existing regulations are sufficient for the modern era of rapidly changing technology. Social workers often have a clear understanding of professional ethics issues, which is essential for optimizing the use of technology by social workers.
Methodology

The objective of this study was to understand the views and issues important to current users of the DVED, including both 20 public (A-T) and 17 private (A1-Q1) social services sectors in Taiwan (see Table 3). In 2011, its usage was discussed in two focus groups of 12 social workers and 25 social worker supervisors. A semi-structured discussion guide was used to allow the researcher to focus on the research questions.

The focus group discussions lasted two to three hours. The main process of analysis involved developing categories, themes, and typologies and coding the data into the categories. After reading the transcripts and listening to the tapes several times, the accounts given by the respondents were categorized (Whittaker, 2009). Both interpretative and subjectivist strategies were used to analyse the accounts. Interpretations brought meanings and insights into the words and acts of the participants in the study. Here, the objective was to recognize the reflexive, problematic, and at times, contradictory nature of the data.

Table 3

Demographics of the focus group participants

<table>
<thead>
<tr>
<th>No.</th>
<th>Gender</th>
<th>Age</th>
<th>Work Sector</th>
<th>No.</th>
<th>Gender</th>
<th>Age</th>
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Total :37
Results

Key Issues Raised by Members of the Public Sector

Over-expansion of the authority management mechanism is the main issue raised by the DVPC staff. Many Supervisors from social service divisions use the DVED for background checks of case subjects. If a case under investigation already has records in the DVED, they often transfer the case back to the DVPC to ensure efficient use of resources. The external supervisors may use this as an excuse to gain access to the database for the wrong reasons. Participant B gave the following example of inappropriate information sharing.

Chiefs from other divisions requested access, and the management agreed that we had to give them authority. Additionally, if the chief of another division found a high risk case with a history in the Domestic Violence Prevention Centre, they would transfer the case to us…… These issues were only solved after we rechecked the list of authority and made some amendments under external supervisor’s recommendations.

As Participant H expressed,

Being a social worker, I have been feeling too tired to deal with such a situation. They check the DVED all the time. Just want to transfer the cases to us. It’s so unfair……

Participant P mentioned,

Why can they check the DVED? They don’t supervise my team. They don’t have the rights to the DVED…… I am a supervisor. I think it’s a very serious ethical issue. It not only increases the work time for social workers, but also adds to the risk of missing out on the best time for immediate help.
Over expansion of information sharing authority creates conflicts in database use. This also increases the risk of undermining case privacy. The DVSAPC created specific stipulations for database authority levels and periodical reviews of the management status of the database specifically to solve this problem, their 2010 stipulations included the following:

1. Recommendation that local governments periodically examine lists of the authorization to use the DVED. If acts beyond the given authority are observed, access authority must be amended or cancelled immediately.

2. The MOI should add new functions in the DVED to authorize local governments to suspend staff access authority as needed. Where case administrative officers need to understand the status of a case, it is recommended the principal responsible social worker or supervisor summarize the case service record for their reference, rather than granting them access to the DVED.

Because of the importance of these regulations, ensuring compliance is essential. Specific regulations are particularly important in a bureaucratic culture such as Taiwan, where social workers in a government system usually defer to their superiors. Being able to refer to a specific legal basis for database management is important. Regulations can therefore help social workers mitigate unnecessary administrative pressures or interventions.

**Key Issues Raised by Members of the Private Sector**

**Different positioning of the DVED by central and local governments.** Private agencies have less experience in using the DVED. After completing a government service programme, social workers from private agencies were asked to use the DVED to register case service records. This extended the database for use and influence outside of local governments. Another unresolved issue noted by the users is the central and local governments have different views of how to use the DVED. Participant H1 stated,

The last time we asked the DVSAPC for further information, it appeared the central
government viewed the system as one adopted for the purpose of collecting statistics. However, our understanding is the local government actually considers registered data as a resource which enables them to master case handling with up-to-date information.

The DVED currently has enormous capability. Local governments may mostly use the system as a tool for managing case information rather than as a tool for collecting statistics on service use. However, the use of registered data by private agencies is almost impossible to determine. Users in both public and private agencies must fully understand the key purpose of the DVED. In this way, during cooperation, misinterpretation of the required use of the DVED that might lead to misuse of data could be avoided.

Unequal status of data import and export from the DVED. Although many private agencies already had case management systems, they requested use of the DVED after participating in government projects. Since the statistical function of the DVED was expected to reduce their workload in this area, they all agreed to use it for registering case records. However, such private agencies have found that the statistical function offered by the DVED is inadequate and the workload of social workers in private agencies is increased because two systems are used. Participant C₁ said,

Another problem we found was, although our department has an existing case management system, the DVPC still requested us to register case information in the DVED. Initially, we decided to use only the DVED. However, when we had to process the institutional service case statistics, we found the DVPC data could not be exported. Therefore, we had to register information in two systems, which was time consuming.

The participants mentioned, when private agencies were requested to export relevant data into the DVED, their requests to export service case data were usually rejected. The most common reason was “the DVED cannot meet the expectations of private agencies.”
Private agencies are therefore likely to feel that the DVED does not adequately meet their needs. A clear understanding and consideration of their needs is needed to ensure the smooth working and correct use of the DVED. If the problem is merely a technical issue, the problem should be solved immediately. Therefore, when the current database requires further amendments, private agency participation should be sought. As Participant J1 expressed,

The exporting and importing of case information should be equal. I am not sure if the issue is a technical problem with the database or if the government simply does not care about our needs…… I feel our professionalism is being disrespected.

**Citizen Digital Certificates for database access.** Citizen Digital Certificates\textsuperscript{10} enable the use of a card reader to access the system outside of an office environment, \textit{e.g.}, at home. Interviewed representatives of private agencies were unsure how the Citizen Digital Certificates can be used to monitor the data manipulation process and to avoid risks to confidentiality. The ethical code for social workers and current regulations for managing use of the DVED do not specify regulations for online recording. Relevant legislation and professional self-discipline codes should further specify how to address such issues. Participant D1 from a private agency mentioned,

When the Citizen Digital Certificate is used to access the system, we must pay attention to the worker and the work boundaries…… As the use of the Citizen Digital Certificate system increases, the risk of violating confidentiality increases.

Participant G1 stated,

\textsuperscript{10} Citizen Digital Certificate is internet ID for bilateral identification while citizens are exchanging information on the internet. This citizen digital certificate is issued by the Interior Ministry Certificate Authority of the central government in Taiwan.
Social workers normally comply with the ethical codes. However, data are not always registered in the office because of the heavy workload. I know many social workers continue working after office hours, but it is ok to do this at home.

**Inconsistent use of the DVED by social workers.** Members of private agencies have reported wide variations and inconsistencies in the database forms for registering domestic violence data. Private agency workers who have learned to use the DVED under the supervision of local government social workers often find different social workers have different ways of using the DVED. Private agencies are unsure whether they can refer to a manual or standard procedure for using the DVED. Participant L₁ mentioned,

Regarding the DVED data manipulation procedures, we actually had some lessons. However, every social worker uses different procedures, and their procedures differ from those taught in our training early this year.

Participant Q₁ agreed,

Before using the DVED, I personally recommended the central government to provide an instruction manual for new employees because employee turnover was very high. For example, our provisional access to the system is often processed under the supervision of senior users, instead of having a standardized protocols and an instruction manual. During the earlier evaluation, we were told by the evaluation instructor that we had incorrectly entered the data. We put in links and add new things there each time we add a record. …… After using the system for 3 years, I am still unsure whether the local government has made a standardized instruction manual for our new staff, or even for themselves. Even if they have no time to provide new staff training, we can still perform our own staff training if we have a manual.
The participants raised concerns about the accuracy of data stored in the DVED. Discrepancies in the registered information can affect the accuracy of statistical results, cause mistakes, and seriously endanger the purpose of establishing the DVED. Although the DVED has now entered its third generation, none of these issues has been resolved in the past decade. As the number of users increases, accurate data entry is vital. The difficulty of solving such issues generally increases over time. Carefully planned data input forms and a proper instruction manual could help avoid discrepancies.

**Suggestions**

Technological advances have increased the use of case management databases by professional social work services. During the process of managing protection cases, case status must be updated constantly to ensure the provision of professional services at the right moment. For enhanced case service quality and efficiency, easy and accurate information retrieval is vital. However, the confidentiality of case information must also be ensured. Therefore, it is vital that social workers and other users comply with social worker ethical codes while using the DVED. Information sharing must be balanced with professional confidentiality for optimum efficacy of database use. After examining the relevant issues and interviewing service users, the following changes in the use of the DVED are proposed.

**Strictly Follow and Update the Social Worker Ethical Code**

The current ethical code for Taiwan social workers does not regulate self-discipline and the use of technological databases. Therefore, no professional self-discipline code is available for reference when the appropriate use of data is questioned. The current ethical code for social workers should therefore be amended so it applies sufficiently to the trends and demands of modern technology. Amendments are suggested in three specific areas:

1. Provision of an ethical code for using new technologies such as electronic databases
to deliver social services.

2. The ethical code must be followed when entering case details into a database.

3. The ethical code is applicable whenever the database is used.

Amendments to Establishing and Managing the DVED

Specific stipulations for DVED applications. The DVED was created based on legal guidelines that define it as an information source. In practice, however, no specific regulations for use of the database have been established, and database users have diverse views as to the key uses of the DVED. Some believe the main purpose of the DVED is to comply with statistical procedures of the central government or with the case monitoring procedures of local governments. A consensus is needed regarding the intended and allowed uses of the DVED. The next amendment of the DVED should include specific rules for its use.

Implementation and strict control of access authority for the DVED. As the DVED contains personal data and relocation evaluation service records, ensuring confidentiality of the information is essential. Therefore, effective control of database access is extremely important. Currently, however, only the process of obtaining authority to access the database is regulated. The levels of personnel allowed to obtain access authority are not specified. Excessive authority to use the database increases the risk of violating the confidentiality of the database. Therefore, relevant regulations must stipulate authority levels, and authority controls must be implemented properly. Mechanisms are also needed for inspection and for discipline when the rules are not followed.

Regulations and explanations for using the DVED for academic research and statistics. Laws and regulations stipulating the DVED can be used for collating
statistical data, for academic research, and enabling data to be linked and exported. However, social workers have expressed concerns about the proper use of the DVED for such purposes. Academic research results are often used for reference during policy making and practical application of theories. Databases can be very important in such research. For example, the National Health Insurance Database in Taiwan has been widely used by researchers. In 1997 to 2008 its data was linked with the Inpatient Expenditures by Admissions (DD) and the Registry for Contracted Medical Facilities (HOSB) databases to perform research in domestic violence inpatients (Chiu, Chung, Yang, Kao & Chien, 2010; Chiu, Pai, Chung, Tsai & Chien, 2011; Chiu, Yang, Kao & Chien, 2011; Chung, Chiu, Pai & Chien, 2010). Such research not only helps medical agencies by improving understanding of domestic violence, it also enhances service quality for domestic violence sufferers who are inpatients in hospitals.

Despite the long controversy regarding access to the DVED for research purposes, no specific rules for this access are given in the current regulations. If rules can be amended and specified in the Regulations on the establishment, management and use of the DVED, researchers will have increased confidence in using the DVED. The DVSAPC should improve understanding of how to use the DVED for statistical analysis and research by inviting users from local governments and private agencies to a meeting to provide an open and detailed explanation of the linking function and associated user issues.

**Restrictions on user internet protocols (IP).** A Citizen Digital Certificate enables access to the DVED in any location. The certificate was originally intended to facilitate access by social workers. However, the digital certificate is a potential risk to database integrity. By restricting the user’s internet protocol and by restricting the computers that can be used to access the DVED, the risk of misuse can be curtailed. However, since it can reduce the convenience of using the database, further discussions with users is needed to balance the need for security with practical use of the database.
Technical amendments to ensure coordinated data transfers. The DVED contains information provided by many agencies. This database has now been adopted by both the public and private sectors. However, private agencies are currently unable to export data to the DVED and must keep two sets of records. The database managers must solve this problem either by amending the next expansion of the DVED or by holding a public discussion of solutions for this problem.

Optimizing accuracy of the DVED. Interviews with DVED users revealed concerns about the accuracy of information in the database. As it can be accessed by many people, data may be entered incorrectly, and inaccuracies can compound over time. Clear instructions for DVED use, such as the creation of a manual, careful database design and well-constructed input forms, can help to minimize incorrect recording of cases. Database access can also be restricted so only specific and trained people can access and update information.

Conclusion

The analytical results from the study show the ethical codes for social workers do not provide a clear perspective on working with the technology in Taiwan. The main finding from the focus groups reveals that the social workers have varying difficulties in using the DVED. Perspectives regarding use of the DVED often differ between the public and private sectors. However, this study may be a starting point for improving the problems of the DVED in social work practice (see Table 4).

A comprehensive literature review shows few studies discussed the DVED and the use of such databases in social work and social work research in Taiwan. Maintaining the use and effectiveness of the DVED is essential. For this purpose, monitoring is essential. Further research into the use of the DVED is therefore encouraged.

The discussion with DVED users in this study raises several issues that should be
addressed. A constant dialogue is needed between the various users of the DVED. For example, its use and maintenance and even its possible replacement should be discussed. By carefully considering relevant issues, such as those outlined above, and research and analysis of database use in different countries, future implementations can ensure that the DVED remains a useful tool for Taiwan social workers and that can help, rather than hinder, their important work in ensuring victims of domestic violence get the vital help they need.

Table 4

Conclusions and recommendations of the study

<table>
<thead>
<tr>
<th>Difficulties</th>
<th>Recommendations</th>
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<tbody>
<tr>
<td>The codes of social work ethics do not provide a clear perspective on working with the technology.</td>
<td>Strictly follow and update the code of ethics for social workers:</td>
</tr>
<tr>
<td>Various difficulties in using the DVED:</td>
<td></td>
</tr>
<tr>
<td>1. Over-expansion of the authority management mechanism.</td>
<td>1. An ethical code must be established for using technology to deliver social services.</td>
</tr>
<tr>
<td>2. Different perspectives of the DVED by central and local governments.</td>
<td>2. The ethical code must be followed when recording case details on a database.</td>
</tr>
<tr>
<td>3. An unequal status of data importing and Exporting from the DVED.</td>
<td>3. The ethical code must be followed when using a database and its data.</td>
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<tr>
<td>4. Issues regarding Citizen Digital Certificates for access to the Database.</td>
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<tr>
<td>5. Inconsistent use of the DVED by social workers.</td>
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<tr>
<td>Amendments to establish and manage the DVED:</td>
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</tr>
<tr>
<td>1. Specific stipulations for DVED applications</td>
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<td>2. Implementation and strict control of access authority to the DVED</td>
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<tr>
<td>3. Regulations and explanations for using the DVED for academic research and statistics</td>
<td></td>
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<tr>
<td>4. Restrictions on user Internet Protocols (IP)</td>
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<tr>
<td>5. Technical amendments to ensure coordinated data transfers</td>
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<tr>
<td>6. Increasing accuracy of the DVED</td>
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References


privacysummary.pdf


## Appendix A

### Abbreviations mentioned in this article

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<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AASW</td>
<td>Australian Association of Social Workers: professional membership organisation for social workers in Australia.</td>
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<tr>
<td>BASW</td>
<td>British Association of Social Workers: professional membership organisation for social workers in Britain.</td>
</tr>
<tr>
<td>DVED</td>
<td>Domestic Violence Electronic Database: announced in 2002 and lastly amended in 2007; the main e-information including the report of being informed of domestic violence case, case records of the victims and record of receiving relocation program of the offender.</td>
</tr>
<tr>
<td>DVPA</td>
<td>Domestic Violence Prevention Act: announced in 1998 and lastly amended in 2009; the Act has been incorporated to prevent domestic violence and to protect the interests of the victim of domestic violence.</td>
</tr>
<tr>
<td>DVPC</td>
<td>Domestic Violence Prevention Centres: each level of government shall create and maintain a Domestic Violence Prevention centre by incorporating efforts from police administration, education, health, social administration, household administration and judicial units concerned to protect the interest of domestic violence victims and prevent domestic violence from occurring.</td>
</tr>
<tr>
<td>DVSAPC</td>
<td>Domestic Violence and Sexual Assault Prevention Committee: to promote domestic violence and sexual assault prevention and protection programs, the central government is created the committee under MOI, but from July 2013 is under Ministry of Health and Welfare.</td>
</tr>
<tr>
<td>HIPAA</td>
<td>Health Insurance Portability and Accountability Act</td>
</tr>
<tr>
<td>MOI</td>
<td>Ministry of the Interior in Taiwan</td>
</tr>
<tr>
<td>NASW</td>
<td>National Association of Social Workers: professional membership organisation for social workers in the US.</td>
</tr>
<tr>
<td>PIPA</td>
<td>Personal Information Protection Act: announced in 1995 and amended in 2010; the law is enacted to govern the collection, processing and use of personal information so as to prevent harm on personality rights, and to facilitate the proper use of personal information.</td>
</tr>
<tr>
<td>SWA</td>
<td>Social Worker Act: announced in 1997 and lastly amended in 2009; this Act is enacted to establish a professional service system of social work, to promote the professional status of social worker, to define rights and obligations of social worker definitely, and to assure rights and interests of the target of service.</td>
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## Appendix B

### Articles of regulations mentioned in this article

<table>
<thead>
<tr>
<th>Article</th>
<th>Definitions:</th>
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<tr>
<td>DVPA Article 2</td>
<td>Definitions:</td>
</tr>
<tr>
<td>1.</td>
<td>Domestic violence: Referring to any act of exercising any infringement, mentally or physically, amongst family members.</td>
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<tr>
<td>2.</td>
<td>Domestic violence offense: Referring to any purposeful exercise of domestic violence amongst family members that constitutes an offense defined in any law other than the Act</td>
</tr>
<tr>
<td>3.</td>
<td>Harassment: Referring to any interference, warning, mocking, insulting words and/or actions or any act of fabrication of situations that causes fears and terrors among family members.</td>
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<tr>
<td>4.</td>
<td>Follow: Continuous monitoring and follow-up actions by people, cars, tools, equipment and/or other means.</td>
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<tr>
<td>5.</td>
<td>Batterer’s relocation program: Including but not limited to educational and psychological consultation, mental therapy, drug/alcohol addiction rehabilitation, or any other consultation and treatments enforce on the batterer.</td>
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<tr>
<th>Article</th>
<th>The central government shall perform the following transactions:</th>
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<tr>
<td>DVPA Article 5</td>
<td>The central government shall perform the following transactions:</td>
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<tr>
<td>1.</td>
<td>Develop policies and regulations for the purposes of domestic violence control and prevention;</td>
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<tr>
<td>2.</td>
<td>Coordinate, supervise and evaluate the performance of domestic violence control and prevention bylaws by agencies concerned;</td>
</tr>
<tr>
<td>3.</td>
<td>Promote the service efficiency and competence of the service provided by agencies involved in the control and prevention of domestic violence;</td>
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<tr>
<td>4.</td>
<td>Educate the general public on the control and prevention of domestic violence;</td>
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<tr>
<td>5.</td>
<td>Coordinate provisioning protection and relocation programs for the victims of domestic violence;</td>
</tr>
<tr>
<td>6.</td>
<td>Support both public and private institutions in creating domestic violence management procedures;</td>
</tr>
<tr>
<td>7.</td>
<td>To sponsor the creation of an integrated data base of domestic violence offenders for mutual reference among judges, prosecutors, policemen, medical personnel and other governmental agencies and to keep strict confidentiality of the identity of the victim;</td>
</tr>
<tr>
<td>8.</td>
<td>Support local governments to promote domestic violence control and prevention operation and to provide financial and technical assistance.</td>
</tr>
<tr>
<td>9.</td>
<td>Other items relating to this program.</td>
</tr>
</tbody>
</table>

The central government shall elect from and send professionals, private groups and their representatives to offer relating consultation; amongst those the number of professionals and the representatives of private groups shall be at least half of the total number. Further, the number of female representatives shall be at least half of the total number.

The creation, management and application of the database stated in the preceding subparagraph 7 shall be separately set forth by the central administration.

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Each level of government shall create and maintain a Domestic Violence Prevention centre by incorporating efforts from police administration, education, health, social administration, household administration and judicial units concerned to engage in the following operations to protect the interest of domestic violence victims and prevent domestic violence from happening:

1. A 24-hour hotline shall be created;
2. A 24-hour emergency rescue, seeking medical care, and acquisition of a certificate of diagnosis, emergency relocation;
3. Offer or referral of psychological support, economic support, legal supports, education service, housing guidance to the victim of domestic violence. Also provide gradual, supportive and multiple vocational training and employment service to them;
4. Provide short, medium and long term shelters to the victim and the minors;
5. Referral to physical and mental treatment for the victim;
6. Referral to physical and mental treatment program and follow-up consultation for the offender;
7. Follow-up and management to the referral cases;
8. Education, training and promotion programs to the society;
9. Other domestic violence relating issues.

The Domestic Violence Prevention centre may be incorporated into the Sexual Assault Prevention Centre. There must be social workers, policemen, medical personnel and other related professionals with its charters and practices in the centre and the organization will be set forth by municipality or city/county government.

A social worker shall write a social work record when he is working and the record shall be preserved by practice institution, organization and office for not less than seven years.

Personal information of medical treatment, genetic information, sexual life, health examination and criminal record should not be collected, processed or used. However, the following situations are not subject to the limits set in the preceding sentence:

1. When in accordance with law;
2. When it is necessary for the government agency to perform its duties or for the non-government agency to fulfill the legal obligation, and when there are proper security measures.
3. When the Party has disclosed such information by himself, or when the information concerned has been publicized legally;
4. When the personal information is collected, processed or used under certain methods by a government agency or an academic research institution based on the purpose of medical treatment, personal hygiene or crime prevention statistics and/or study.

The rules of the range, procedure and any other items to be followed concerning Item 4 of the preceding Paragraph should be set by the government authority in charge of the subject industry at the central government level in conjunction with the Ministry of Justice.
Except for the information stated in Paragraph 1 of Article 6, the non-government agency should use the personal information in accordance with the scope of the specific purpose of collection provided. However, the information may be used outside the scope upon the occurrence of one of the following conditions:
1. Where in accordance with law;
2. Where it is to promote public interests;
3. Where it is to prevent harm on the life, body, freedom or property of the Party;
4. Where it is to prevent harm to the rights and interests of other people;
5. Where it is necessary for public interests on statistics or the purpose of academic research conducted by a government agency or an academic research institution, respectively. The information may not lead to the identification of a certain person after the treatment of the provider or the disclosure of the collector;
6. Where a written consent of the Party has been obtained.

When the non-government agency uses personal information for the purpose of marketing pursuant to the preceding Paragraph and has been turned down by the Party, the agency should stop its action.
The non-government agency should notify the Party the measures of refusal at the first marketing action and should pay for the necessary fees.