Global and regional estimates of violence against women: Prevalence and health effects

Dr Avni Amin
Department of Reproductive Health and Research
World Health Organization
Side Event: Commission on the Status of Women
Role of the health sector in addressing violence against women
March 10, 2014
Making the case for addressing violence against women as a widespread public health problem
1. Expanding availability of VAW prevalence data to highlight the magnitude of the problem

2013: 81 countries with data on Intimate partner violence
Prevalence of intimate partner violence and/or non-partner sexual violence, 2010
Globally and by WHO income region, ages 15-69 (total)

LMIC = Low- and middle-income countries
HIC = High-income countries

35% women globally
30% of women worldwide experience physical and/or sexual violence by their partner in their lifetime.
Physical or sexual partner violence ever and in the past 12 months in LAC region

- Bolivia 2003: 53.3%
- Bolivia 2008: 25.5%
- Colombia 2005: 39.7%
- Peru 2007/8: 39.5%
- Ecuador 2004: 32.4%
- Honduras 2005/6: 29.3%
- Nicaragua 2006/7: 27.6%
- Guatemala 2008/9: 26.3%
- El Salvador 2008: 20.4%
- Paraguay 2008: 19.6%
- Jamaica 2008/9: 19.3%
- Haiti 2005/6: 17.5%
- Dominican Republic 2007: 17.0%
7% of women globally have experienced sexual violence by someone other than their partner.
Health consequences of violence against women
Figure 1. Pathways and health effects on intimate partner violence

INTIMATE PARTNER VIOLENCE

PHYSICAL TRAUMA

PSYCHOLOGICAL TRAUMA/STRESS

FEAR AND CONTROL

Mental Health

TWICE as likely to experience depression

ALMOST TWICE as likely to have alcohol use disorders

NONCOMMUNICABLE DISEASES
- cardiovascular disease
- hypertension

SOMATOFORM
- irritable bowel
- chronic pain
- chronic pelvic pain

LIMITED SEXUAL AND REPRODUCTIVE CONTROL
- lack of contraception
- unsafe sex

HEALTH CARE SEEKING
- lack of autonomy
- difficulties seeking care and other services

16% more likely to have a low birth-weight baby

1.5 times more likely to acquire HIV and 1.5 times more likely to contract syphilis infection, chlamydia or gonorrhoea

38% of all murders of women globally were reported as being committed by their intimate partners

4.5 times as likely to attempt suicide
Making the links to MDGs

41% more likely to have preterm birth

1.7 times more likely to experience pregnancy loss

16% more likely to have a low birth-weight baby

TWICE as likely to have an abortion

1.5 times more likely to acquire HIV and 1.5 times more likely to contract syphilis infection, chlamydia or gonorrhoea

MDG 4

MDG 5

MDG 6
VAW & MDG 3: Gender equality & prevalence of recent IPV

**Source:** UNIFEM, Investing in gender equality: Ending violence against women and girls. 2010. UN Women, New York

**About the Data:** Prevalence data for all graphs is drawn from leading international surveys on violence against women: World Health Organization; International Violence Against Women Survey; MEASURE Demographic and Health Surveys (DHS) and the World Bank Domestic Violence Dataset and is based on physical and/or sexual violence by an intimate partner in the previous 12 months. Detailed Technical Notes on the methodology and sources are available on request at evaw.helpdesk@unifem.org.

**Notes on Graph:** Secondary school enrollment is measured as the percentage of eligible girls enrolled in secondary school, based on data from the UNESCO Institute for Statistics on Female Secondary Net Enrollment Rate (2000-2009), with countries categorized from low to high enrollment rates. Prevalence data shown is the average per cent for countries in each category.
Role of the health sector in a multi-sectoral response?

- Provide comprehensive health services for survivors
- Collect data about prevalence, risk factors, and health consequences
- Inform policies to address violence against women
- Prevent violence by fostering and informing prevention programmes
- Advocate for the recognition of violence against women as a public health problem
Thank you! For more information......

http://www.who.int/reproductivehealth/topics/violence/en/

Email: amina@who.int