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Meeting of the Friends of the Chair of the United Nations Statistical Commission on Statistical Indicators on Violence against Women 9 - 11 December 2009 Aguascalientes, Mexico

Statement of the World Health Organization to the Meeting of the

Friends of the Chair of the United Nations Statistical Commission on

Indicators on Violence against Women1

By World Health Organization

¹ Issued without formal editing.

Introduction

- 1. The World Health Organization appreciates the invitation to participate as an observer in the Meeting of the Friends of the Chair Group on Statistical Indicators on Violence against Women and is pleased to be able to contribute to the deliberations, based on its experience and ongoing work in this area.
- 2. The recommendation to establish systematic data collection and analysis of violence against women data in both the Secretary General's Campaign to end violence against women and the United Nations General Assembly Resolution on intensification of efforts to eliminate all forms of violence against women are welcome. Sound data have been and will continue to be important in the global recognition of the problem, in the development of strategies to combat it and in monitoring progress towards this goal.
- 3. WHO recognizes that violence against women is a global problem that harms women's physical, mental, and reproductive health; limits women's social and economic participation in society; and devastates the lives of women and their children, as well as being an abuse of women's human rights. The existing data primarily on physical and sexual intimate partner violence- demonstrate that the problem is widespread in all settings, yet lack of adequate data in many countries still limits our knowledge of the true magnitude and consequences of violence against women globally. The urgent need for internationally comparable statistics that capture the various types of violence against women is clearly articulated in the work of the Friends of the Chair Group on Statistical Indicators on Violence against Women. WHO applauds this effort and supports the development of appropriate indicators for measurement.

Methodological Overview of Surveys on Violence against Women and Indicators for Physical and Sexual Violence against Women

- 4. WHO also recognizes that violence against women can take many forms, and depending on context and perpetrator-- whether the violence occurs at the hands of partners, acquaintances, strangers, or persons in positions of authority-- the risk factors, consequences and intervention strategies will vary accordingly.
- 5. As shown in the overview of surveys prepared by the UN Statistics Commission progress has been made in measuring different forms of violence. Greater consensus on measures and methodology exists internationally on the measurement of some forms of violence against women, specifically physical and sexual intimate partner violence. More work is needed on the measurement of other forms of violence against women, such as psychological and economic violence, and physical or sexual violence by non-partners. While of great importance, these do not benefit from the same level of consensus and psychometric evidence as measurement of physical and sexual intimate partner violence. In some settings most data on physical and sexual violence by non-

partners would be captured through sex disaggregated crime statistics, although not to the same level of detail as in violence against women specific surveys.

- 6. WHO concurs with the recommendation that ideally, data on violence against women should be generated using special surveys. However, given that in many settings this is unlikely due to financial and other constraints, a specific module along the lines of the Demographic and Health Survey (which reflects the WHO Violence against Women Instrument developed for the WHO Multi-country Study) is advisable. The simple addition of a few questions into a survey instrument is known to limit disclosure and thus is not recommended. Depending on the setting, it may be advisable to focus such a module on those forms of violence which particularly affect women, such as those perpetrated by intimate partners and other family members and sexual violence by a range of perpetrators, including employers. In some settings this may have more policy and programmatic relevance than trying to capture all forms of violence by any perpetrator. (The latter also being more likely to raise questions about an exclusive focus on violence against women relative to men.)
- 7. WHO would also like to emphasize that the methodology for measurement of violence against women must ensure the collection of accurate data of high quality while also respecting the ethical and safety concerns of participants who provide data on what remains a sensitive and emotional issue. Data collection efforts must ensure that the ethical and safety concerns of women, including confidentiality, appropriate referral, and protection from reprisal, are adequately addressed prior to implementing a survey, which raises issues regarding the type of surveys on to which a module can be added. These concerns are particularly relevant when asking about intimate partner and family violence and other forms of abuse that women may be subjected to because of their unequal status.
- 8. The development of a dedicated survey that brings together the wealth of knowledge and experience of the community of researchers, advocates, programme specialists, and policy makers studying and addressing violence against women internationally --as is being developed through the UNECE Task Force on VAW-- will be an important advance in the effort to measure and address the issue systematically. However, some countries will need to improve their capacity to carry out such a survey in a safe and effective manner. They may require specific assistance to develop the human and material resources to carry out such a study, as well as the political will to do so. Therefore, consideration should be given to the levels of capacity for data collection, availability of resources, and the ability to address ethical and safety issues in different settings prior to making recommendations for collecting data for the development of indicators on violence against women. Alternate methodologies to gather information, including through improving existing routine data collection systems (e.g. police records, injury surveillance, and legal records) will be necessary as well.

Emotional violence and economic violence indicators

9. WHO thinks it is premature to include a single indicator for emotional abuse and would also caution against including any form of economic discrimination and disadvantage experienced by women under the rubric of violence. These two forms of violence have been documented in the context of intimate partner violence and should be studied in this context. Intimate partner violence usually consists of different acts of physical, sexual and emotional abuse as well as controlling behaviours on the part of a partner or ex partner. Economic abuse is in many studies included as part of emotional abuse and/or controlling behaviours, but can be conceptualized separately.

Indicators on harmful practices

10. Female genital mutilation. Like with other sensitive issues, adding one or two questions on female genital mutilation will likely lead to an underestimation of the problem. WHO would recommend that countries where this issue needs to be studied be encouraged to use the module on female genital mutilation developed by DHS. This would also contribute to maintaining comparability in a way that allows the monitoring of trends over time and across countries.

Other indicators.

- 11. Femicide and spousal homicide In 2008, WHO cosponsored a meeting with PATH, the Inter-American Alliance for the Prevention of Gender-based Violence (Intercambios), and the Medical Research Council of South Africa on Strengthening Understanding of Femicide. Using research to galvanize action and accountability. The meeting brought together researchers, forensic professionals and activists to review different approaches to studying and using data on femicide with the aim of identifying commonalities across settings and potential methodologies to improve understanding of and action on this issue. Participants identified the need for standardized definitions, for more rigorous research, and for strengthening the capacity of police, mortuary staff, medical examiners and others in identifying and documenting femicide. Among other things, it was agreed to develop an addendum to the PATH/WHO manual Researching violence against women, focusing on femicide.
- 12. Physical and sexual violence in childhood. In response to recommendations of the Secretary General's Study on Violence against Children, a working group led by UNICEF, WHO and others is developing indicators for violence against children, including physical and sexual violence. We would recommend using the indicators developed by this group rather than developing a separate or new set of indicators.
- **13.** Impact of incidence of sexual violence against women on sexually transmitted diseases and HIV/AIDS. There is extensive work going on at present on the intersections of violence against women and girls and HIV/AIDS, some of it being led by WHO with

UNAIDS. This is not something which can be captured by any one indicator and WHO considers that this is outside of the scope of this group.

Conclusions

- 14. The true magnitude of the violence against women problem must be better understood globally, and countries must be actively involved in collecting data on violence against women and developing multi-sectoral strategies for preventing its occurrence, treating its survivors, and punishing and rehabilitating its perpetrators. The development of appropriate indicators on violence against women is an important step in this process.
- 15. WHO stands ready to continue to share its experience and lessons learned in measuring violence against women across diverse countries and cultural settings and to support the UN Statistical Commission's efforts in this regard.