

Chapter 6

Violence against women

Key findings

- Women across the world, regardless of income, age or education, are subject to physical, sexual, psychological and economic violence.
- Experience of violence can lead to long term physical, mental and emotional health problems; in the most extreme cases, violence against women can lead to death.
- Intimate partner violence accounts for the majority of women's experience of violence.
- Prevalence of sexual violence is lower than that of physical violence, however, in intimate relationships they are often experienced together.
- Attitudes towards violence are starting to change—in almost all countries where information for more than one year is available, the level of both women's and men's acceptance of violence decreased over time.
- In the 29 countries in Africa and the Middle East where the practice is concentrated, more than 125 million girls and women alive today have been subjected to female genital mutilation.
- In the majority of countries, less than half of the women who experienced violence sought help of any sort, and among those who did, most looked to family and friends as opposed to the police and health services.
- At least 119 countries have passed laws on domestic violence, 125 have laws on sexual harassment and 52 have laws on marital rape.
- Availability of data on violence against women has increased significantly in recent years—since 1995 more than 100 countries have conducted at least one survey addressing the issue.

Introduction

Violence against women is defined as any act of “gender-based violence that results in or is likely to result in physical, sexual or psychological harm or suffering to women, including threats of acts such as coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.”¹ Its dimensions include physical, sexual, psychological/emotional and economic violence occurring in the family and general community or such violence perpetrated or condoned by the State. Violence against women includes domestic violence, child marriage, forced pregnancy, “honour” crimes, female genital mutilation, femicide, sexual and other violence perpetrated by someone other than an intimate partner (also referred to as non-partner violence), sexual harassment (in the workplace, other institutions and in public spaces), trafficking in women and violence in conflict situations.

In all societies, to varying degrees, women and girls are subjected to physical, sexual and psychological abuse that cuts across lines of income, class and culture.² Such violence is recognized as a violation of human rights and a form of discrimination against women, reflecting the pervasive imbalance of power between women and men.³

The experience of violence can affect women in a myriad of ways that are often difficult to quantify. Injuries and health problems are common as a result of physical and sexual violence, but the psychological and emotional wounds they may also inflict are sometimes deeper and longer lasting.⁴ Violence can lead to a reduced ability of a woman to work, care for her family and contribute to society. Witnessing violence in childhood can also result in a range of behavioural and

² *Ibid.*

³ *Ibid.*

⁴ United Nations, 2006a.

¹ United Nations General Assembly, 1993.

Box 6.1**Gaps in gender statistics related to violence against women**

The 1993 Declaration on the Elimination of Violence against Women called on States to promote research, collect data and compile statistics relating to the different forms of violence against women, especially domestic violence. It also encouraged research on the causes, nature and consequences of violence against women and on the effectiveness of measures to prevent and redress it.

Apart from a few exceptions, initially, only small-scale ad-hoc studies that were not nationally representative were available. In the early 2000s, the first initiatives to conduct dedicated, internationally comparable surveys to measure prevalence were the World Health Organization's (WHO) Multi-country Study on Women's Health and Domestic Violence against Women^a and the International Violence against Women Survey, co-ordinated by the European Institute for Crime Prevention and Control. The WHO study focused on a number of specific sites in selected countries. It addressed intimate partner violence and its association with women's physical, mental, sexual and reproductive health, and was instrumental in developing and testing model questionnaires for use in surveys on violence against women. More recently, the United Nations Statistics Division has developed a set of guidelines^b to assist national statistics offices in collecting data and compiling indicators on violence against women, which allow for more standardized and comparable analyses of levels and trends in prevalence at both the national and international levels.

In recognition of the need for better data and standardized measurements, the United Nations Statistical Commission established a "Friends of the Chair" group to identify key indicators on physical, sexual, psychological and economic violence against women.^c

In general, surveys dedicated to measuring violence against women are better at collecting information than administrative data since, if well designed, they more accurately reflect the actual experience of violence than what is reported to officials.^d However, implementing a dedicated survey is often costly. If a dedicated survey is not feasible, inserting a module of questions on experiences of violence into an existing survey, such as one on women's health or general victimization, is an alternative option for collecting some information, provided specific ethical and safety guidelines^e developed for conducting a dedicated survey on this sensitive topic are taken into consideration.

The availability of data on violence against women has increased significantly in recent years. During the period 1995–2014, 102 countries conducted at least one survey addressing violence against women that produced representative results at the national level,—either as a dedicated survey (51 countries) or as a module attached to a wider survey (64 countries). Some countries implemented both types of surveys. Forty-four countries undertook a survey in the period 1995–2004 and 89 countries did so in the period 2005–2014, suggesting growing interest in this issue. More than 40 countries conducted at least two surveys in the period 1995–2014. This means that, depending on the comparability of the surveys, changes over time could be analysed. One hundred countries conducted surveys that included questions on attitudes towards violence, and 29 on female genital mutilation. This covers all countries where the practice of female genital mutilation is concentrated.

Despite the increase in the availability and quality of data on violence against women, significant challenges remain. Different survey questionnaires and methodologies are sometimes used in different countries, leading to a lack of comparability at the regional and international levels. Willingness to discuss experiences of violence may also differ according to the cultural context, and this can affect reported prevalence levels.

Police, court, social services and health statistics represent a potential source of information on violence against women that is often underutilized. However, the usefulness of such information can be mixed. Since many women do not report violence to the authorities, statistics based on reported cases significantly underestimate the phenomenon. Administrative records can be used to track victims' use of services and monitor the system's response to the problem, but even when statistics are available, the sex of the victim and relationship to the perpetrator and/or the sex of the perpetrator are often not recorded, limiting the scope of the analysis. Data on specific forms of violence, such as trafficking and harmful practices such as "honour" killings, from any source, are scarce.

a WHO, 2005.

b United Nations, 2013a.

c Adopted by the United Nations Statistical Commission in 2009, E/CN.3/2009/29. See also United Nations, 2013a for the final list of indicators.

d United Nations, 2013a.

e WHO, 2001.

Number of countries conducting surveys on violence against women, 1995–2014

Type of survey	1995–2014		1995–2004	2005–2014
	At least one survey	At least two surveys	At least one survey	At least one survey
Dedicated survey to measure violence against women	51	7	17	35
Module of questions on violence against women	64	31	25	60
Dedicated survey or module on violence against women	102	43	44	89
Survey with questions on attitudes towards violence	100	62	37	97
Survey with questions on female genital mutilation	29	25	20	27

emotional problems.⁵ Women who have suffered from intimate partner violence are more likely to give birth to a low-birthweight baby, have an abortion and experience depression.⁶ In some regions, they are also more likely to contract HIV, compared to women who have not experienced violence at the hands of a partner.⁷ In some cases, violence against women can lead to death; about two thirds of the victims of intimate partner/family-related homicide are women, in contrast to all cases of homicide, of which 20 per cent of the victims are women.⁸ Whereas other forms of homicide have shown significant declines over time, rates of intimate partner/family-related female homicide have remained relatively stable.⁹

Violence against women also incurs significant economic costs, both direct and indirect. Direct costs include those associated with the police, hospital and other health services, legal costs, and costs associated with housing, social and support services. Indirect costs include those related to reduced employment and productivity and the diminished value of a life lived with violence. A number of countries have conducted studies to estimate the economic toll of violence against women. As the methodologies used for conducting such studies vary, the real costs cannot be directly compared across countries. However they do provide an indication of the substantial economic impact of violence against women and how much needs to be spent to address the problem.¹⁰ Globally, conservative estimates of lost productivity resulting from domestic violence range between 1 and 2 per cent of gross domestic product.¹¹

A call to end all forms of violence against women was made in the Declaration on the Elimination of Violence against Women, adopted in 1993¹² and the Beijing Declaration and Platform for Action, adopted in 1995.¹³ Several initiatives have been undertaken to reduce violence against

women internationally by the United Nations and others, as well as at the national level. The vision of the United Nations Secretary-General's Campaign UNiTE to End Violence against Women is "a world free from violence against women, realized through meaningful actions and ongoing political commitments of national governments, backed by adequate resources." To further draw attention to this often silenced topic, the United Nations designated 25 November as the International Day for the Elimination of Violence against Women. The General Assembly's most recent resolution on the intensification of efforts to eliminate all forms of violence against women (A/RES/69/147), adopted in 2014, calls on States to take measures towards that end in the areas of laws and policies, prevention, support services and responses, as well as data collection and research, with a special focus on women facing multiple forms of discrimination. In the same year, the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (CETS No. 210, known as the Istanbul Convention) entered into force. The Convention sets out a legal framework and approach to address violence against women, focused on preventing domestic violence, protecting victims and prosecuting offenders.

This chapter presents an overview of the prevalence of women's experience of physical and sexual violence, an examination of intimate partner violence and attitudes towards violence. It is followed by a review of forms of violence in specific settings—female genital mutilation, violence in conflict situations and the trafficking of women. It concludes with a look at help-seeking behaviour and state response to violence. In preparing this issue of *The World's Women*, the United Nations Statistics Division undertook a compilation of data collected by surveys addressing violence against women. While every effort was made to incorporate as many surveys as possible, some of them could not be included due either to the timing of their release or the lack of available data for some other reason. Precise definitions and exact methodologies used may vary among data sources. The complete list of surveys and key results are presented in the Statistical Annex.¹⁴

⁵ *Ibid.*

⁶ WHO, 2013a.

⁷ *Ibid.*

⁸ UNODC, 2013.

⁹ *Ibid.*

¹⁰ For example, a study in the United Kingdom examined the cost categories of justice, health care, social services, housing, legal services, lost output, and pain and suffering. The study estimated the cost of domestic violence in England and Wales alone to be US\$25 billion per year. Walby, 2009.

¹¹ World Bank, 2014.

¹² United Nations General Assembly, 1993.

¹³ United Nations, 1995.

¹⁴ See Statistical Annex available at <http://unstats.un.org/unsd/gender/worldswomen.html>.

Box 6.2**Measuring violence against women in Canada using complementary data sources**

Canada's national statistics office, Statistics Canada, uses two complementary data sources to measure violence against women nationally: police-reported administrative surveys and population-based self-reported victimization surveys. These two sources of information have made important advances over the past 30 years, making it possible to better understand the issue and how it differs from violence against men.

Since 1962, aggregate police statistics have been collected in Canada, although it was not until 1988 that collection began of micro-data on the criminal event (including the weapon used and location of the event), on victims (including their sex, age and relationship to the accused) and the accused (including sex and age). This information, collected along with the Incident-based Uniform Crime Reporting Survey, has shed light on the nature and extent of police-reported violence against women in Canada. In addition, the mandatory nature of the survey, along with the use of common definitions across the country, has meant that data on violence against women are nationally representative and comparable over time and across regions. The survey has also been critical in providing insight into how gender-based violence is treated within the criminal justice system, since information is also captured on clearance and charge rates.

The main limitation of police-reported surveys is that they only include those incidents that come to the attention of police, which is not always the case for intimate partner and sexual violence. To address this gap, Canada turned to victimization surveys to get a better sense of the extent of victimization and reasons why people may choose to report or not report an incident to the police. Since 1988, the Canadian General Social Survey on Victimization has been conducted every five years on a representative sample of women and men aged 15 years and older. As with police-reported surveys, self-reported surveys have evolved over time to address data gaps on violence against women.

In 1993, Statistics Canada became one of the first national statistics offices to develop and implement a gender-specific survey on violence, providing the first national indicator of spousal violence against women. Statistics Canada built on the success of this one-time dedicated survey to ensure that the measurement of violence against women would be embedded within an existing survey structure. Modelled on the Violence against Women Survey, a special module on spousal violence was developed within the General Social Survey on Victimization. The broader target population (both women and men) expanded the potential for gender-based analysis and has improved the understanding of violence against both women and men. For instance, results from the victimization survey have shown that while rates of spousal violence against women and men are similar, women are more likely than men to experience the most severe forms of such violence and suffer more chronic abuse, injuries and emotional trauma. Such information has helped guide the development of policies and programmes that better address the unique needs of women.

Source: Statistics Canada.

A. Prevalence of the main forms of violence against women

Violence against women is found in all countries to varying degrees. A number of factors can increase the risk of violence against women and girls. These include: witnessing or experiencing violence in childhood, low levels of education, limited economic opportunities, substance abuse, attitudes that tolerate violence, and limited legislative frameworks for preventing and responding to violence.¹⁵

A number of initiatives have attempted to assess the scale of the problem at the international, regional and national levels. At the international level, WHO estimates that over a third (35 per cent) of women worldwide have experienced physical and/or sexual violence by an intimate partner or sexual violence by a non-partner at some point in their lives.¹⁶

A recent United Nations Multi-country Study on Men and Violence in Asia and the Pacific¹⁷ found that nearly half of the more than 8,000 men interviewed reported using physical and/or sexual violence against a female partner, with the proportion of men reporting such violence ranging from 26 to 80 per cent across sites. In all six countries included in the study, the majority (between 65 and 85 per cent) of men who reported using physical or sexual violence against a partner had committed such violence more than once.

As noted earlier, definitions and methodologies used to collect data on violence against women can vary across countries. Therefore, for comparability purposes, in this chapter, data are presented according to data sources—results from Demographic and Health Surveys (DHS) and Reproductive Health Surveys (RHS) appear together, and results from the recent survey conducted by the European Union (EU) Agency for Fundamental Rights (FRA) are presented together. The EU FRA study was conducted across the 28 Member States of the EU in 2012.

It should be noted that although countries are ranked within each region, this is for presentation purposes only. Ranking should not be seen as absolute ranking since, even in the case of similar survey instruments, data may not be fully comparable and the level of underreporting is likely to be different from one country to another due to many factors, including stigma surround-

¹⁵ End Violence Against Women Now, 2014.

¹⁶ WHO, 2013a.

¹⁷ UNDP, UNFPA, UN Women and UNV, 2013.

ing violence and prevailing social norms in different contexts. Finally, data on violence against women from other sources for selected countries, including those based on victimization surveys, are presented (alphabetically) in dedicated tables.

1. Violence against women by all perpetrators
Physical violence against women

Physical violence consists of acts aimed at physically hurting the victim and include, but are not limited to, pushing, grabbing, twisting the arm, pulling the hair, slapping, kicking, biting or hitting with the fist or object, trying to strangle or suffocate, burning or scalding on purpose, or attacking with some sort of weapon, gun or knife. The proportion of women who experienced physical violence (regardless of the perpetrator) at least once in their lifetime and in the last 12 months is presented in , figure 6.2 and table 6.1.

For countries with available DHS data (figure 6.1), the proportion of women experiencing physical violence in their lifetime ranged from 13 per cent in Azerbaijan (2006) to 64 per cent in the Democratic Republic of the Congo (2007). For physical violence experienced in the 12 months prior to the survey, prevalence ranged from 6 per cent in the Comoros (2012) to 56 per cent in Equatorial Guinea (2011).

Physical violence is high in Africa

Based on available data, reported prevalence of physical violence was highest in Africa, with almost half of countries reporting lifetime prevalence of over 40 per cent. The range of prevalence was widest in Africa, from 14 per cent in Comoros (2012) to 64 per cent in the Democratic Republic of the Congo (2007). The range of lifetime physical violence in Asia was narrower, from 13 per cent in Azerbaijan (2006) to almost 40 per cent in Timor-Leste (2009–10). Data availability is higher in Africa than in other regions.

Among countries for which comparable data are available for multiple years, a number of them showed encouraging declines in the prevalence of physical violence experienced in the past 12 months, including Cameroon (from 45 per cent in 2004 to 27 per cent in 2011) and Uganda (from 34 per cent in 2006 to 27 per cent in 2011). However, results for the majority of countries revealed that the prevalence of violence stayed almost constant, reflecting the persistence of the problem (see Statistical Annex).¹⁸

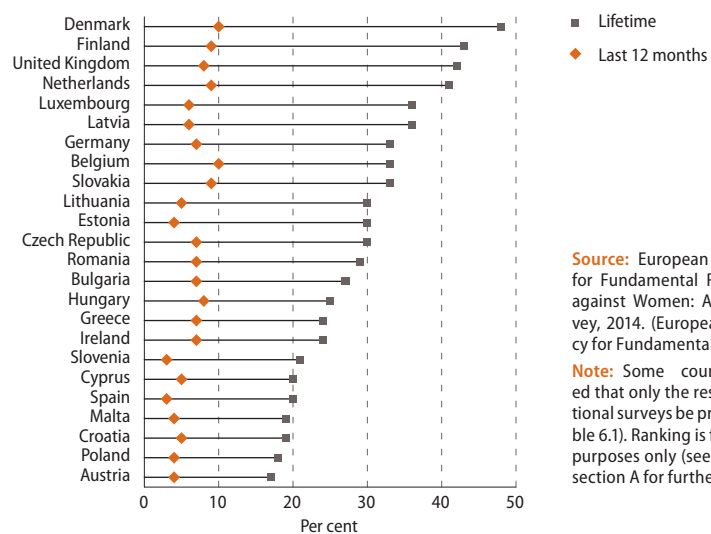
¹⁸ Available at <http://unstats.un.org/unsd/gender/worlds-women.html>.

Figure 6.1
Proportion of women aged 15–49 years experiencing physical violence (irrespective of the perpetrator) at least once in their lifetime and in the last 12 months, 1995–2013 (latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS). (ICF International, 2014).
Note: Ranking is for presentation purposes only (see introduction to section A for further details).

Figure 6.2
Proportion of women aged 18–74 years experiencing physical violence (irrespective of the perpetrator) at least once in their lifetime and in the last 12 months, European countries, 2012



Source: European Union Agency for Fundamental Rights, Violence against Women: An EU-wide Survey, 2014. (European Union Agency for Fundamental Rights, 2014).
Note: Some countries requested that only the results of their national surveys be presented (see table 6.1). Ranking is for presentation purposes only (see introduction to section A for further details).

Table 6.1
Proportion of women experiencing physical violence (irrespective of the perpetrator) at least once in their lifetime and in the last 12 months, 2003–2012 (latest available)

Country	Year	Lifetime	Last 12 months
Australia	2012	34.0	4.6
Canada	2009	..	3.4
China, Hong Kong SAR	2005	12.0	2.0
Costa Rica	2003	47.0	11.0
Denmark	2013	..	1.1
Ecuador	2011	38.0	..
Fiji	2010/11	68.5	..
Finland	2013	..	14.5
France	2007	..	1.8
Iceland	2008	29.8	2.1
Italy	2006	18.8	2.7
Mexico	2011	15.2	6.4
Morocco	2009/10	35.3	15.2
Poland	2004	30.0	5.1
Singapore	2009	6.8	1.0
Sweden	2012	..	1.3
Switzerland	2003	27.0	1.0
Tonga	2009	76.8	..
Tunisia	2010	31.7	7.3
Viet Nam	2010	35.2	..

Source: Compiled by the United Nations Statistics Division from national surveys on violence against women, correspondence with National Statistical Offices.

Note: Age groups covered differ among countries; methodologies, questionnaire designs and sample sizes used in surveys by statistics offices to produce national data may differ from those used in internationally conducted surveys.

For countries included in the EU FRA survey (figure 6.2), half of them reported lifetime prevalence of physical violence of at least 30 per cent. The range of lifetime violence ranged from 17 per cent in Austria to 48 per cent in Denmark, however, recent experience (in the past 12 months) was much more similar across the region, ranging between 3 and 10 per cent.

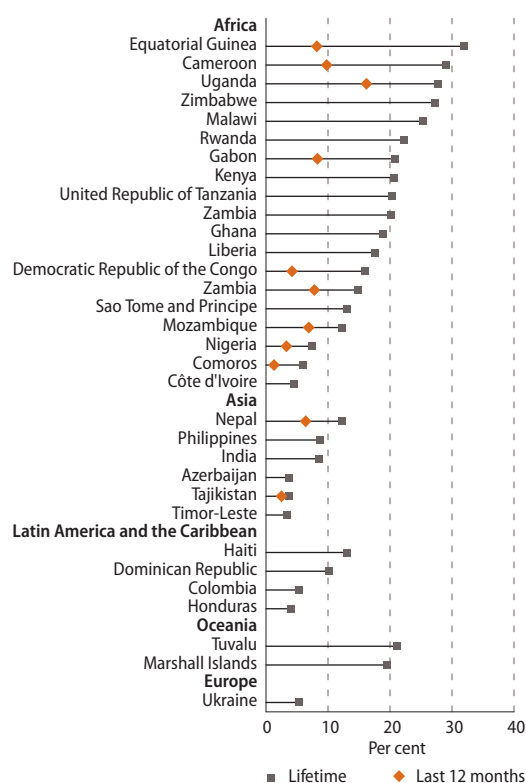
For other countries and areas that conducted national surveys on violence against women (table 6.1), the range of reported levels of lifetime experience of violence was very wide—from 7 per cent in Singapore (2009) to 77 per cent in Tonga (2009). Out of the 15 countries reporting lifetime physical violence, 9 reported prevalence of at least 30 per cent. Experience of violence in the past 12 months was generally much lower than lifetime experience, with prevalence of less than 10 per cent in all but three countries: Costa Rica (2003), Finland (2013) and Morocco (2009/10).

Sexual violence against women

Sexual violence is defined as any sort of harmful or unwanted sexual behaviour that is imposed on someone. It includes acts of abusive sexual contact, forced engagement in sexual acts, attempted or completed sexual acts with a woman without her consent, sexual harassment, verbal abuse and threats of a sexual nature, exposure, unwanted touching, and incest.

In general, the prevalence of sexual violence when measured in surveys is lower than that of physical violence. However, in the case of intimate partner violence, sexual violence is often experienced along with physical violence. The proportion of women who experienced sexual violence (regardless of the perpetrator) at least once in their lifetime and in the past 12 months is presented in , figure 6.4 and table 6.2.

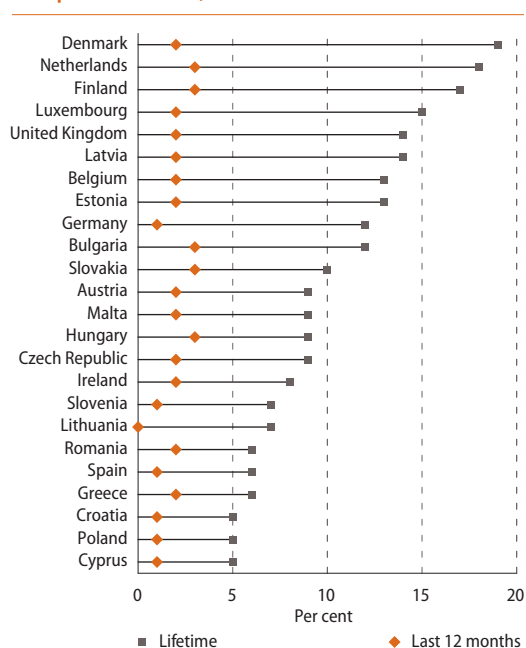
Figure 6.3
Proportion of women aged 15–49 years experiencing sexual violence (irrespective of the perpetrator) at least once in their lifetime and in the last 12 months, 1995–2013 (latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS). (ICF International, 2014).

Note: Ranking is for presentation purposes only (see introduction to section A for further details).

Figure 6.4
Proportion of women aged 18–74 years experiencing sexual violence (irrespective of the perpetrator) at least once in their lifetime and in the last 12 months, European countries, 2012



Source: European Union Agency for Fundamental Rights, Violence against Women: An EU-wide Survey, 2014. (European Union Agency for Fundamental Rights, 2014).

Note: Some countries requested that only the results of their national surveys be presented (see table 6.2). Ranking is for presentation purposes only (see introduction to section A for further details).

Experience of sexual violence is highest in the African region

For African countries with available DHS data (figure 6.3), the proportion of women experiencing sexual violence in their lifetime ranged from 5 per cent in Côte d'Ivoire (2011/12) to 32 per cent in Equatorial Guinea (2011). For sexual violence experienced in the 12 months prior to the survey, prevalence ranged from less than 1 per cent in Comoros (2012) to 16 per cent in Uganda (2011). Reported lifetime prevalence rates were higher across Africa than other regions—more than half of the 19 countries across Africa with data reported prevalence of at least 20 per cent. Across all the other regions only one country reported prevalence over 20 per cent (Tuvalu, 2007). The range of lifetime prevalence was lower across the Asian and Latin American and Caribbean regions—from 4 to 13 per cent. Similar to physical violence, data availability for sexual violence is higher in Africa than in other developing regions.

Table 6.2
Proportion of women experiencing sexual violence (irrespective of the perpetrator) at least once in their lifetime and in the last 12 months, 2003–2012 (latest available)

Country	Year	Lifetime	Last 12 months
Australia	2012	19.0	1.2
Canada	2009	..	2.0
China, Hong Kong SAR	2005	14.0	3.0
Costa Rica	2003	41.0	7.0
Ecuador	2011	25.7	..
Fiji	2010/11	35.6	..
Finland	2013	..	2.3
France	2007	..	0.7
Iceland	2008	24.2	1.6
Italy	2006	23.7	3.5
Mexico	2011	38.9	20.8
Morocco	2009/10	22.6	8.7
Poland	2004	16.5	1.6
Republic of Korea	2013	19.5	2.7
Singapore	2009	4.2	0.3
Sweden	2012	..	1.4
Switzerland	2003	25.0	1.0
Tonga	2009	17.4	..
Tunisia	2010	15.7	7.4
United Kingdom (England and Wales only)	2012/13	19.1	2.0
United States of America ^a	2011	19.3	1.6
Viet Nam	2010	10.8	..

Source: Compiled by the United Nations Statistics Division from national surveys on violence against women, correspondence with National Statistical Offices.

Note: Age groups covered differ among countries; methodologies, questionnaire designs and sample sizes used in surveys by statistics offices to produce national data may differ from those used in internationally conducted surveys.

^a Refers to rape only.

For countries included in the EU FRA survey (figure 6.4), the proportion of women experiencing sexual violence in their lifetime ranged from 5 per cent in Cyprus, Poland and Croatia to 19 per cent in Denmark, with almost half of countries reporting lifetime prevalence of at least 10 per cent. Recent experience (in the past 12 months) was very similar across the region—ranging from less than 1 per cent to 3 per cent.

Among other countries and areas that conducted national surveys on violence against women (table 6.2), more than a quarter reported lifetime prevalence of sexual violence of at least 25 per cent. Experience in the past 12 months was less than 10 per cent in all countries with the exception of Mexico (21 per cent, 2011).

a. Non-partner sexual violence

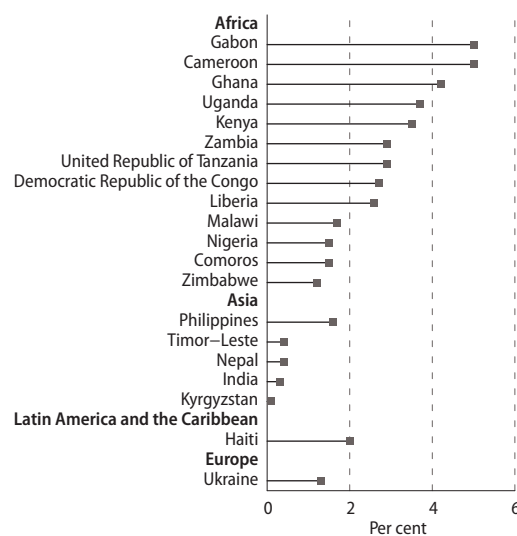
Sexual violence can be perpetrated by women's intimate partners or non-partners. In general, data availability is higher for sexual violence perpetrated by an intimate partner. However, available data suggest that, at the global level, an estimated 7 per cent of women have experienced sexual violence perpetrated by someone other than an intimate partner in their lifetime.¹⁹

In countries for which DHS data are available (figure 6.5), lifetime experience of sexual violence perpetrated by someone other than an intimate partner ranged from less than 1 per cent in India (2005–06), Kyrgyzstan (2012), Nepal (2011) and Timor-Leste (2009) to 5 per cent in Cameroon (2011) and Gabon (2012). In countries included in the EU FRA survey (figure 6.6), it ranged from 1 per cent in Greece to 12 per cent in the Netherlands.

Aside from those countries covered in DHS or EU FRA surveys, very few additional countries have data available for non-partner sexual violence. An exception is the Pacific region, where a recent round of surveys based on WHO methodology for measuring violence against women included questions on non-partner sexual violence, revealing lifetime rates as high as 33 per cent in Vanuatu in 2009.²⁰

Figure 6.5

Proportion of women aged 15–49 years experiencing sexual violence perpetrated by someone other than an intimate partner at least once in their lifetime, 1995–2013 (latest available)



Source: Compiled by ICF International based on Demographic and Health Surveys (DHS). (ICF International, 2014).

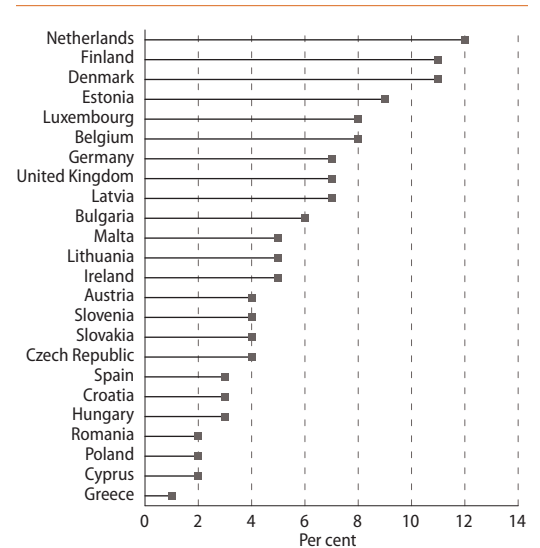
Note: Ranking is for presentation purposes only (see introduction to section A for further details).

¹⁹ WHO, 2013a.

²⁰ Vanuatu Women's Centre, 2011.

Figure 6.6

Proportion of women aged 18–74 years experiencing sexual violence perpetrated by someone other than an intimate partner at least once in their lifetime, European countries, 2012



Source: European Union Agency for Fundamental Rights, Violence against Women: An EU-wide Survey, 2014. (European Union Agency for Fundamental Rights, 2014).

Note: Some countries requested that only the results of their national surveys be presented. Ranking is for presentation purposes only (see introduction to section A for further details).

Violence among vulnerable groups

Violence against women is a widespread and systemic violation of human rights. It affects women and girls at all stages of the lifecycle—from female infanticide and genital mutilation to forced prostitution and trafficking, domestic violence, sexual harassment at work, and abuse and neglect of older women. Violence affects all population groups; however, some groups of women may be more vulnerable than others, such as indigenous women, or face particular types of violence at different stages of their lives, either as children or in later life.

a. Violence against girls

Violence against children²¹ is a worldwide phenomenon. What makes it especially intractable is the fact that some forms of it, such as corporal punishment of children by their parents, are

²¹ The Convention on the Rights of the Child (Article 1) defines a “child” as a person below the age of 18. However, surveys on violence against children have covered different age ranges. There is no international consensus on the methodology for collecting data on this sensitive issue, including on the target population.

widely accepted. That said, all forms of violence against children are a violation of their human rights. Violence against girls, in particular, can have a ripple effect throughout society, leading to lower school attendance and achievement, which is linked to higher fertility rates as well as reduced health outcomes for both women and their children.²²

Wide gaps are found in the data on violence against children. No international standards exist for data collection on the issue, which is generally underreported and undocumented. Compounding the problem is the fact that collecting information on violence against children presents numerous methodological and ethical challenges. Children may be unwilling or, depending on their age and level of development, unable to share their experiences of violence. Moreover, accessing children in the first place may be problematic since consent is often required by the parent or caregiver, who, in some cases, may be the perpetrator of the violence. Ethical issues include the potential for children to become emotionally affected by questions about violence, regardless of whether they have been victimized, and victims of violence can be re-traumatized by being questioned about their experiences. Data from administrative sources, when available, may not be accessible due to confidentiality issues, and different social services may use different approaches for tracking cases of abuse that often cannot be combined or compared.

Despite these challenges, efforts are under way to collect data on violence against children. For example, Violence against Children Surveys (VACS) have been conducted in Kenya, Swaziland, the United Republic of Tanzania and Zimbabwe. Based on these surveys, it was found that 66 per cent of women aged 18 to 24 in Kenya (and 73 per cent of men), and 64 per cent of women in Zimbabwe (and 76 per cent of men) reported incidents of physical violence prior to age 18. In the United Republic of Tanzania, 74 per cent of females aged 13 to 24 (and 72 per cent of males) said they experienced physical violence before age 18, perpetrated by a relative, authority figure or intimate partner. The United Nations Children's Fund (UNICEF) reports that for countries with available and comparable data, use of violent discipline (psychological aggression and/or physical

punishment) in the home ranges from 45 per cent in Panama to almost 95 per cent in Yemen.²³

For children growing up outside the home, violence can be commonplace. Rates of violence against children living in institutional care in Kazakhstan—which has the highest rate of children in institutional care in the world—can be up to six times higher than those of children living in family-based foster care.²⁴

An extreme form of physical violence against girls is female genital mutilation. This is a topic that is covered in a separate section of this chapter since it is a unique form of violence that tends to occur in specific countries and contexts.

In addition to suffering violence at the hands of parents, authority figures and intimate partners, children also experience violence inflicted by their peers—other children. Bullying exists everywhere and can be physical and/or psychological in nature. Research suggests²⁵ that boys are more likely to favour physical violence as a bullying tactic, while girls tend to use psychological violence. New forms of bullying are emerging, including through cell phones and the Internet. Cyber-bullying includes the distribution of sexually explicit photos and videos taken of children to embarrass and shame them. The widespread access to these images and the difficulty in removing them permanently from the Internet means that this type of abuse can have long-lasting consequences.

Child marriage (marriage before the age of 18) is also found throughout the world and is acknowledged to be a harmful practice, as well as a manifestation of discrimination against women and girls. More than 700 million women alive today (aged 18 years and older) were married before the age of 18²⁶ (see Chapter 1 on Population and Families). More than one in three of these women married or entered into union before age 15. Boys are also married as children, but girls are disproportionately affected and are often married to men significantly older than themselves. In Niger, for example, 77 per cent of women aged 20 to 49 were married before age 18, compared to 5 per cent of men in the same age group. Child marriage is most common in South Asia and sub-Saharan Africa, with India accounting for one third of the global total of

²³ *Ibid.*

²⁴ *Ibid.*

²⁵ *Ibid.*

²⁶ UNICEF, 2014b.

²² UNICEF, 2014a.

child brides. Girls in the poorest 20 per cent of the population (poorest quintile) are much more likely to marry at a young age compared to those in the wealthiest quintile, and girls living in rural areas are more likely than those in urban areas to marry young. On a more positive note, the practice of child marriage is declining, especially among girls under age 15. One in four women alive today was married in childhood compared to one in three in the early 1980s.²⁷

In terms of sexual violence, UNICEF reports that around 120 million girls and women under age 20 have been subjected to forced sexual intercourse or other forced sexual acts at some point in their lives.²⁸ In a review of the prevalence of child sexual abuse,²⁹ drawn from 55 studies from 24 countries, it was found that levels ranged from 8 to 31 per cent among females and from 3 to 17 per cent among males.³⁰ Based on results from DHS, the percentage of women whose first sexual intercourse was forced against their will ranged from 1 per cent in Timor-Leste (2009–2010) to 29 per cent in Nepal (2011).³¹ Although most sexual violence takes place in the home, girls are generally more likely than boys to experience sexual violence while travelling to and from school, highlighting the need for adequate measures to enable girls to attend school safely.³²

Girls continue to be vulnerable to sexual violence as they continue their education and attend college. In the United States, the White House has established a Task Force to Protect Students from Sexual Assault. In its report on the issue published in April 2014, the Task Force asserted that “one in five women is sexually assaulted while in college”.³³ It also found that the perpetrator is usually someone the victim knows and that, very often, the victim does not report the assault. The Task Force is encouraging colleges to investigate and act upon this problem, providing toolkits for colleges to conduct surveys on sexual assault, establishing awareness and prevention programmes, and setting out necessary steps for an effective response.

²⁷ *Ibid.*

²⁸ UNICEF, 2014a.

²⁹ Refers to those less than 18 years of age.

³⁰ UNICEF, 2014a.

³¹ Statistical Annex, available at <http://unstats.un.org/unsd/gender/worldswomen.html>.

³² UNICEF, 2014a.

³³ White House Task Force to Protect Students from Sexual Assault, 2014; *Journal of American College Health*, 2009; Krebs and others, 2007.

b. Violence against older women

Although violence peaks in women’s reproductive years, it persists as women age. Neglect, abuse and violence were identified as important issues affecting the well-being of older persons³⁴ during the Second World Assembly on Ageing in Madrid in 2002. These issues were reflected in the Madrid International Plan of Action on Ageing, and highlighted the fact that older women “face greater risk of physical and psychological abuse due to discriminatory societal attitudes and the non-realization of the human rights of women.”³⁵ To draw attention to the global issue of abuse against older people, the United Nations designated 15 June as World Elder Abuse Awareness Day. In addition, to raise awareness of the unique challenges faced by widows, it adopted 23 June as International Widows’ Day.

Violence against older women may take the form of physical, sexual or psychological abuse, as well as financial exploitation or neglect perpetrated by intimate partners, family members, or caregivers. Risk factors include residence in an institution or mental/physical impairment. In many countries, institutions established to provide care for older women and men are not managed properly and low standards of care go unchecked.³⁶

In many instances, the issue of violence against older women is not given the attention it deserves. Sometimes this bias is reflected even in data collection methods and indicators, leading to significant data gaps for older women. Such gaps are becoming increasingly important as countries deal with their ageing populations. For example, the DHS, which are an important source of information on violence against women, include only women aged 15 to 49 in their sample. Surveys conducted to measure violence against women are typically household-based, meaning that the experiences of older women living in institutions that care for the older persons are not included.

³⁴ For statistical purposes, unless otherwise specified, the term “older person” in this chapter refers to those aged 60 and over. However, definitions at the national level can vary.

³⁵ United Nations, 2002.

³⁶ United Nations, 2013b.

c. Violence against indigenous women and girls

Research has shown that indigenous girls, adolescents and young women face a higher prevalence of violence, harmful practices, and labour exploitation and harassment than other girls and women. In Bolivia, 62 per cent of the population is indigenous, and the country's departments of Chuquisaca, Cochabamba, La Paz, Potosi and Oruro have the highest concentrations of indigenous people.³⁷ DHS data show that ever-married girls and women aged 15 to 49 from Potosi have the highest prevalence of reported physical or sexual violence by a current or former partner (29 per cent) compared to the national average (24 per cent). In India, the proportion of the population belonging to 'Scheduled Tribes' (an official term used in that country to refer to specific indigenous peoples) is high in all northeastern states except Assam and Tripura. The 2005–2006 DHS in India found that nearly half (47 per cent) of ever-married girls and women aged 15 to 49 belonging to 'Scheduled Tribes' reported experiences of emotional, physical or sexual violence committed by their husbands, compared to 40 per cent of the total population. In Canada, according to data from the 2009 General Social Survey, the rate of self-reported violent victimization of Aboriginal women was around 2.5 times higher than that of non-Aboriginal women.³⁸ Moreover, Aboriginal women were more likely than non-Aboriginal women to say they feared for their lives as result of spousal violence.

Violence against indigenous girls and women cannot be separated from the wider context of discrimination and exclusion to which indigenous peoples as a whole are often exposed in social, economic, cultural and political life. Challenges—such as land dispossession, conflict insecurity, displacement, low rates of birth registration, limited access to culturally appropriate education and health services (including sexual and reproductive health), the lack of access to justice and other essential services, including social services—create conditions that affect their development, human security and the fulfilment of their human rights.³⁹

³⁷ UNFPA, UNICEF, UN-Women, ILO and OSRSG/VAC, May 2013.

³⁸ Statistics Canada, 2013. Measuring Violence Against Women: Statistical Trends 2013.

³⁹ UNFPA, UNICEF, UN-Women, ILO and OSRSG/VAC, 2013.

Box 6.3

Violence peaks in the reproductive years

The experience of violence peaks when women are in their reproductive years. This is true in both developed and developing countries. Across Europe, women in the youngest age group (18 to 29 years) had the highest prevalence of both partner and non-partner violence in the past 12 months. Prevalence declined with age and was lowest among women aged 60 and over.

Proportion of women who experienced physical and/or sexual violence in the 12 months before the survey, by type of perpetrator, European Union-average, 2012

Age group	Partner violence (%)	Non-partner violence (%)
18–29	6	9
30–44	5	5
45–59	4	3
60+	3	3

Based on data from the Italian Violence Against Women survey conducted in 2006, it can be seen that lifetime experience of violence (partner and non-partner, physical or sexual) was higher among women aged between 25 and 34 years (38 per cent) and 35 and 44 years (35 per cent) than among women aged 55 to 64 years (26 per cent) and 65 to 70 years (20 per cent). As lifetime experience is affected by years exposed to violence, looking at experience in the past 12 months reveals that recent experience of violence declines with age also. Prevalence of violence in the past 12 months was 16 per cent for women aged between 16 and 24 years and less than 1 per cent for women aged between 65 and 70 years.^a

Many surveys conducted in developing countries do not include older women in their sample. However, results from the few that do show that the experience of violence tends to decline as women age. In Fiji,^b results show that younger women are much more at risk of experiencing intimate partner violence in the previous 12 months than older women. In that country, the prevalence of intimate partner violence of a physical nature in the past 12 months declined from 40 per cent in the 18- to 24-year-old age group to 3 per cent in the 55- to 64-year-old age group. A similar pattern was observed for intimate partner sexual violence. In Morocco, the experience of intimate partner physical violence in the past 12 months peaked between the ages of 30 and 34 and then declined, with prevalence halving from 6 per cent in the 40- to 49-year-old age group to 3 per cent in the 50- to 64-year-old age group.^c

Source: European Union Agency for Fundamental Rights, Violence against Women: An EU-wide Survey, 2014.

^a ISTAT, 2006.

^b Fiji Women's Crisis Centre, 2013.

^c Haut-Commissariat au Plan, 2009.

2. Intimate partner violence

Physical and/or sexual violence

In many cases, intimate partner violence accounts for the majority of women's experiences of violence. This was one conclusion drawn from one of the first multi-country studies on violence against women.⁴⁰ Among women who reported incidents of physical or sexual violence, or both, at some point in their lives, at least 60 per cent had been abused by a partner in almost all sites included in the study. The proportion approached 80 per cent or more in most sites. In contrast, less than one third of women in most sites had been abused only by someone other than an intimate partner.

Intimate partner violence is traumatic and debilitating. Victims often feel they have nowhere to turn, especially in societies where it is difficult for women to leave their husbands or live-in partners and live alone. Addressing intimate partner violence requires a range of approaches, including awareness-raising, education, prevention activities, provision of necessary health, legal and social services, shelters and counselling and improved follow-up on reported cases so that women are free from physical injury and fear.⁴¹

Half of all countries reported lifetime prevalence of intimate partner physical and/or sexual violence of at least 30 per cent

For countries with available DHS data (figure 6.7), the proportion of women experiencing intimate partner physical and/or sexual violence in their lifetime ranged from 6 per cent in the Comoros (2012) to 64 per cent in the Democratic Republic of the Congo (2007). Half of all countries reported lifetime prevalence of at least 30 per cent. Prevalence was generally higher in Africa than in other regions, with one quarter of countries in the region reporting lifetime prevalence of at least 50 per cent. Prevalence was lower across Asia, Latin America and the Caribbean and Oceania, with maximum prevalence levels of around 40 per cent. For intimate partner physical and/or sexual violence experienced in the 12 months prior to the survey, prevalence ranged from 5 per cent in the Comoros (2012) to 44 per cent in Equatorial Guinea (2011) and Rwanda (2010). Across all regions, the prevalence of experience

⁴⁰ WHO, 2005.

⁴¹ WHO, 2013b.

of violence in the past 12 months was often similar to lifetime prevalence, a possible indication of how difficult it can be for women to leave violent relationships. For countries where more than one year of data are available, prevalence in the last 12 months showed slight declines in most countries, with Uganda showing an encouraging decline from 45 per cent in 2006 to 35 per cent in 2011.⁴² However, results from Rwanda showed a significant increase—from 26 per cent in 2005 to 44 per cent in 2010.⁴³

For countries included in the EU FRA survey (figure 6.8), the proportion of women experiencing intimate partner physical and/or sexual violence in their lifetime ranged from 13 per cent in five countries—Austria, Croatia, Poland, Slovenia and Spain to 32 per cent in Denmark and Latvia. More than half of countries in the region reported lifetime prevalence of at least 20 per cent. Experience in the past 12 months was generally considerably lower than lifetime, ranging between 2 and 6 per cent.⁴⁴

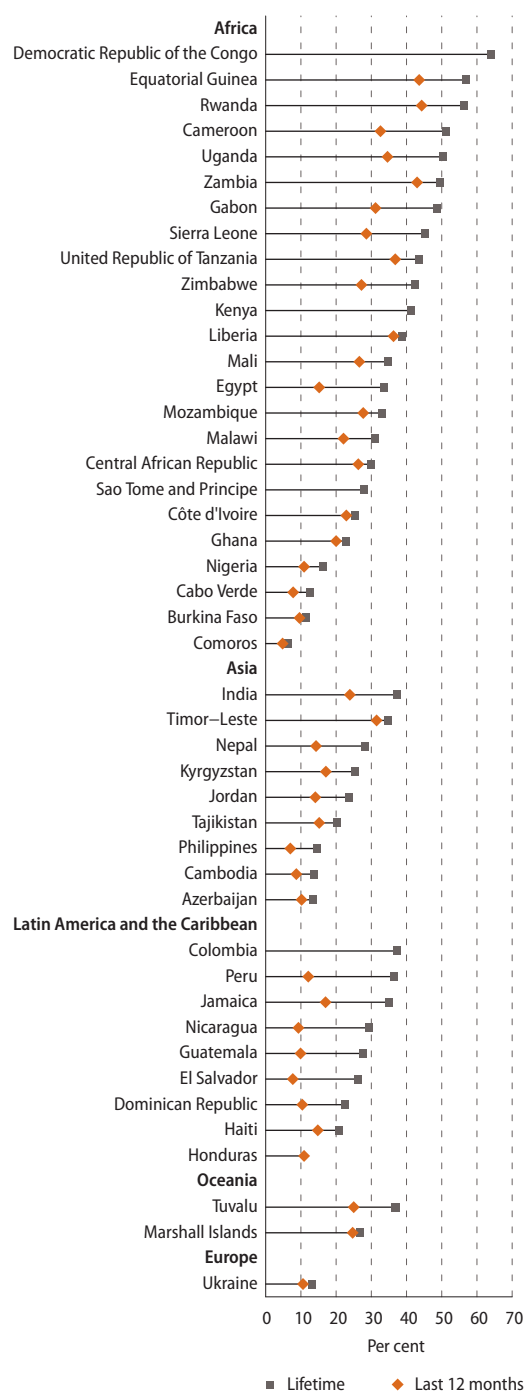
Table 6.3 presents results for countries that conducted national surveys on violence against women. Rates of lifetime intimate partner physical and/or sexual violence were highest in Oceania, with prevalence reaching over 60 per cent in a number of countries in the region. Across all regions, lifetime prevalence was at least 30 per cent in half of the countries. Experience in the past 12 months was typically much lower than lifetime.

⁴² ICF International, 2014.

⁴³ It should be noted that one of the methodological issues related to surveys on violence against women is that, after awareness campaigns, for example, women may find it easier to talk about their experiences. Therefore, disclosure of violence may be higher in a subsequent survey even though the level of violence may not have increased.

⁴⁴ In general, it can be seen that the differences between lifetime experience of intimate partner physical and/or sexual violence and experience in the last 12 months are wider for results from the EU FRA survey than for DHS. This may be due to a number of reasons and further research into this is needed, however contributing factors may be the wider age reference period for the EU FRA survey as compared to DHS (18 to 74 years compared to 15 to 49 years) and also a reflection of the possibility to stop the violence or leave a violent relationship. Higher levels of current (in the last 12 months) violence in developing countries is a common finding and can be expected if women cannot leave the relationship.

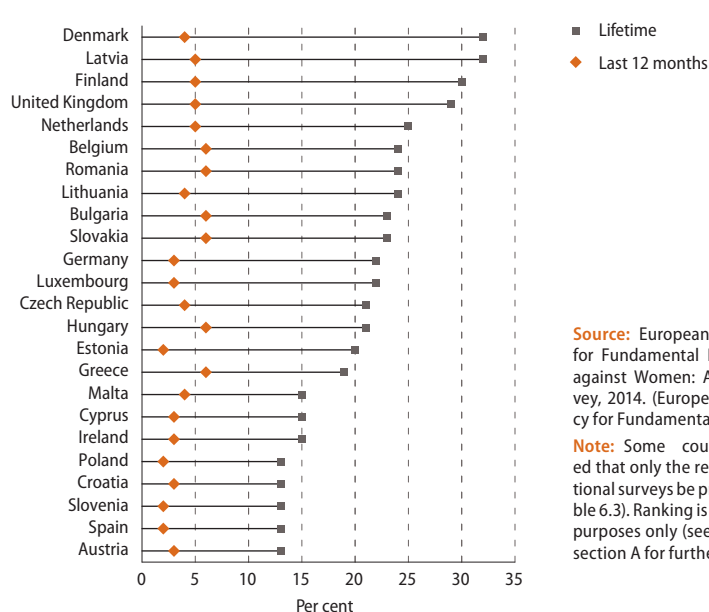
Figure 6.7
Proportion of ever-partnered women aged 15–49 years experiencing intimate partner physical and/or sexual violence at least once in their lifetime and in the last 12 months, 1995–2013 (latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS) and Reproductive Health Surveys (RHS). (ICF International, 2014 and CDC, 2014).

Note: Ranking is for presentation purposes only (see introduction to section A for further details).

Figure 6.8
Proportion of ever-partnered women aged 18–74 years experiencing intimate partner physical and/or sexual violence at least once in their lifetime and in the last 12 months, European countries, 2012



Source: European Union Agency for Fundamental Rights, Violence against Women: An EU-wide Survey, 2014. (European Union Agency for Fundamental Rights, 2014).

Note: Some countries requested that only the results of their national surveys be presented (see table 6.3). Ranking is for presentation purposes only (see introduction to section A for further details).

Table 6.3
Proportion of women experiencing intimate partner physical and/or sexual violence at least once in their lifetime and in the last 12 months, 2000–2013 (latest available)

Country	Year	Lifetime	Last 12 months
Albania	2013	24.6	..
Armenia	2008	9.5	..
Australia	2012	16.9	..
Bangladesh	2011	67.2	50.7
Canada	2009	..	1.3
Ecuador	2011	37.5	..
Fiji	2010/11	64.0	24.0
Finland	2013	..	5.8
France	2007	..	1.0
Iceland	2008	22.4	1.8
Italy	2006	14.3	2.4
Kiribati	2008	67.6	36.1
Maldives	2006	19.5	6.4
Mexico	2011	14.1	6.6
Norway	2008	27.0	6.0
Poland	2004	15.6	3.3
Republic of Moldova	2010	45.5	..
Samoa	2000	46.1	..
Singapore	2009	6.1	0.9
Solomon Islands	2009	63.5	..
Sweden	2012	15.0	2.2
Tonga	2009	39.6	19.0
Turkey	2014	38.0	11.0
Vanuatu	2010	60.0	44.0
Viet Nam	2010	34.4	9.0

Source: Compiled by the United Nations Statistics Division from national surveys on violence against women, correspondence with National Statistical Offices.

Note: Age groups covered differ among countries; methodologies, questionnaire designs and sample sizes used in surveys by statistics offices to produce national data may differ from those used in internationally conducted surveys.

Psychological and economic violence

Psychological violence includes a range of behaviours that encompass acts of emotional abuse and controlling behaviour. These often coexist with physical and sexual violence by intimate partners and are acts of violence in themselves. Examples of behaviours that fall within the definition of psychological violence include:⁴⁵

Emotional abuse—insulting or making a woman feel bad about herself, belittling or humiliating her in front of others, deliberately scaring or intimidating her, threatening to hurt her or others she cares about.

Controlling behaviour—isolating a woman by preventing her from seeing family or friends, monitoring her whereabouts and social interactions, ignoring her or treating her indifferently, getting angry if she speaks with other men, making unwarranted accusations of infidelity, controlling her access to health care, education or the labour market.

Lifetime experience of psychological violence was highest in Africa and Latin America and the Caribbean

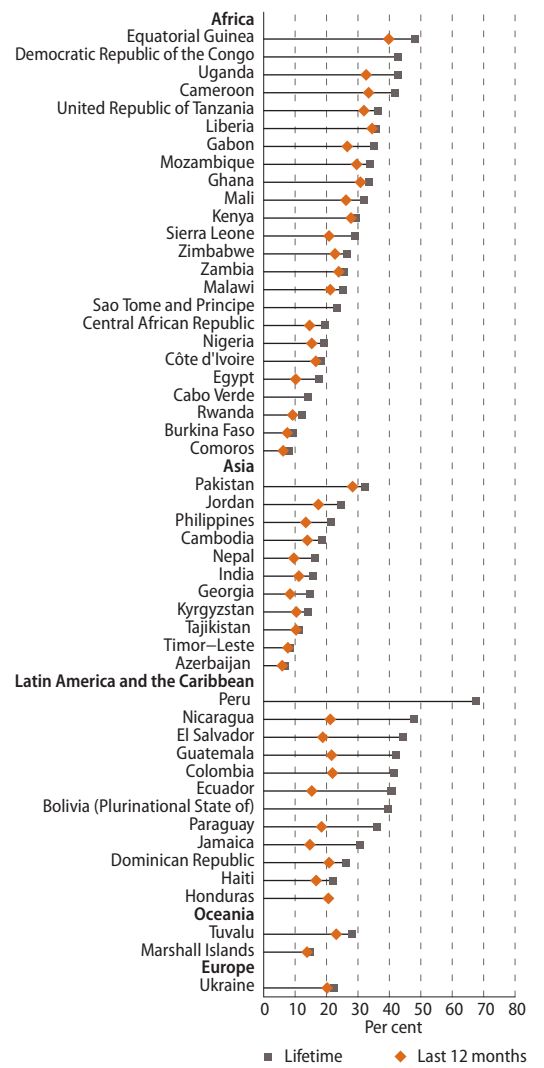
For countries with available data from DHS,⁴⁶ RHS and Multiple Indicator Cluster Surveys (MICS) (figure 6.9), the proportion of women experiencing intimate partner emotional/psychological violence in their lifetime ranged from 7 per cent in Azerbaijan (2006) to 68 per cent in Peru (2013). Lifetime experience was highest in Africa and Latin America and the Caribbean. In Latin America and the Caribbean prevalence is higher than 40 per cent in more than half of countries with data. For intimate partner emotional/psychological violence experienced in the 12 months prior to the survey, prevalence ranged from 6 per cent in Azerbaijan (2006) and the Comoros (2012) to 40 per cent in Equatorial Guinea (2011). Experience in the past 12 months was generally similar to lifetime experience in Africa, Asia and Oceania, however, in Latin America and the Caribbean recent experience was considerably lower than lifetime.

In EU countries, reported psychological violence among women was also very high (figure 6.10). The scope of such violence in the EU FRA survey included controlling and abusive behav-

⁴⁵ United Nations, 2013a.
⁴⁶ It should be noted that the figures reported by DHS refer to the emotional aspect of psychological violence only and do not include the experience of controlling behaviour.

our, economic violence and blackmail with abuse of children. Only lifetime experience was addressed. The proportion of women experiencing intimate partner psychological violence at least once in their lives ranged from 31 per cent in Ireland to 60 per cent in Denmark and Latvia. More than half of the countries reported lifetime prevalence of psychological violence of 40 per cent or higher.

Figure 6.9
Proportion of women aged 15–49 years experiencing intimate partner psychological violence at least once in their lifetime and in the last 12 months, 1995–2013 (latest available)

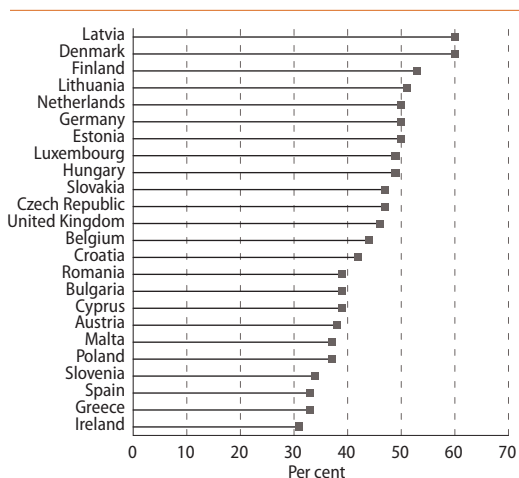


Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS), Reproductive Health Surveys (RHS) and Multiple Indicator Cluster Surveys (MICS). (ICF International, 2014, CDC, 2014 and UNICEF, 2014c).

Note: Ranking is for presentation purposes only (see introduction to section A for further details).

Figure 6.10

Proportion of women aged 18–74 years experiencing intimate partner psychological violence at least once in their lifetime, European countries, 2012



Source: European Union Agency for Fundamental Rights, Violence against Women: An EU-wide Survey, 2014. (European Agency for Fundamental Rights, 2014).

Note: Some countries requested that only the results of their national surveys be presented (see table 6.4). Ranking is for presentation purposes only (see introduction to section A for further details).

Table 6.4 presents data from other national surveys. Lifetime experience of intimate partner psychological violence was higher than 50 per cent in 8 out of the 23 countries with data. Experience in the past 12 months was typically also high, reaching as high as 72 per cent in Bangladesh (2011) and over 50 per cent in 4 out of 20 countries with data.

Economic violence is difficult to define and can vary significantly according to the cultural context and country circumstances. In general terms, economic violence can involve denying access to property, durable goods or the labour market; deliberately not complying with economic responsibilities, thereby exposing a woman to poverty and hardship; or denying participation in economic decision-making.⁴⁷

A number of countries have collected data on women's experience of economic violence. In Mexico, the 2011 survey "Encuesta Nacional sobre la Dinámica de las Relaciones en los Hogares" (ENDIREH)⁴⁸ revealed that one quarter of women who were married or in union had experienced economic violence during their current relationship, with 17 per cent experiencing such violence in the previous 12 months. A 2010 survey in Viet Nam discovered that among ever-married women, 4 per cent had husbands who had taken

⁴⁷ United Nations, 2013a.

⁴⁸ Instituto Nacional de Estadística y Geografía, 2011.

Table 6.4

Proportion of women experiencing intimate partner psychological violence at least once in their lifetime and in the last 12 months, 2000–2013 (latest available)

Country	Year	Lifetime	Last 12 months
Albania	2013	58.2	52.8
Armenia	2008	25.0	..
Australia	2012	24.5	4.7
Bangladesh	2011	81.6	71.9
Canada	2009	11.4	..
Ecuador	2011	43.4	..
Fiji	2010/11	58.3	28.8
Italy	2006	43.2	..
Japan	2010	17.8	..
Kiribati	2008	47.0	30.1
Maldives	2006	28.2	12.3
Morocco	2009/10	..	38.7
Republic of Korea	2013	..	36.4
Republic of Moldova	2010	59.4	25.7
Samoa	2000	19.6	12.3
Solomon Islands	2009	56.1	42.6
State of Palestine	2011	58.8	58.6
Sweden	2012	23.5	6.8
Tonga	2009	24.0	13.0
Tunisia	2010	24.8	17.0
Turkey	2014	44.0	26.0
United Kingdom (England and Wales only)	2012/13	17.2	2.5
United States of America	2011	47.1	14.2
Vanuatu	2010	68.0	54.0
Viet Nam	2010	53.6	25.4

Source: Compiled by the United Nations Statistics Division from national surveys on violence against women, correspondence with National Statistical Offices.

Note: Age groups covered differ among countries; methodologies, questionnaire designs and sample sizes used in surveys by statistics offices to produce national data may differ from those used in internationally conducted surveys.

their earned or saved money from them, 7 per cent had been refused money by their husbands, and 9 per cent had experienced at least one of these acts.⁴⁹ In the 1998 DHS in South Africa, almost one in five currently married women reported that their partner regularly failed to provide economic support, while having money for other things.⁵⁰ Results from Fiji⁵¹ revealed that women who experienced physical or sexual violence by their partners are significantly more likely to have husbands who take their savings or earnings and refuse to give them money, compared with women who have not experienced partner violence.

⁴⁹ Viet Nam General Statistics Office, 2010.

⁵⁰ ICF International, 2014.

⁵¹ Fiji Women's Crisis Centre, 2013.

Box 6.4**Violence against men**

Gender-based violence is a manifestation of the historic imbalance of power between men and women. Although gender-based violence typically focuses on violence against women, data on violence against men are also collected. The figure below presents statistics on the proportion of women experiencing lifetime intimate partner physical violence (women victims) alongside the proportion of women who report ever committing acts of physical violence against their husband/partner when he was not already beating or physically hurting them (women perpetrators).

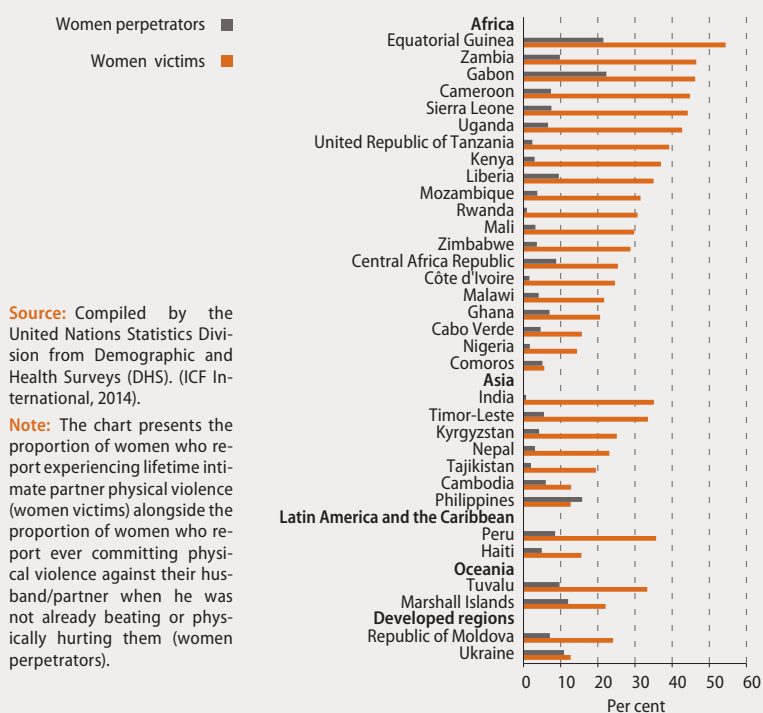
**Women are far more likely to be victims than perpetrators
of intimate partner violence**

Caution should be taken when interpreting these results, since they are based on women's self-reports of perpetrating violence against men as opposed to men reporting their experience of violence perpetrated by women. Based on available data, women are far more likely to be victims than perpetrators of intimate partner violence; in one country, women were over 50 times more likely to be victims (India, 2005–2006). The only country for which violence against men was higher than violence against women was the Philippines (2013). There, the prevalence of violence perpetrated by women against men (16 per cent) was only slightly higher than violence perpetrated by men against women (13 per cent).

Some studies also include men's self-reported experiences of violence. Here again, reported rates of physical violence by men against women are higher than those of physical violence by women against men. Even in countries where reported rates of intimate partner physical violence are similar for women and men, women are more likely to suffer from violence more frequently and to experience the more serious types of violence and emotional stress.^a

^a Ansara, D.L. and M. J. Hindin, 2010.

Proportion of women who report experiencing lifetime intimate partner physical violence, as victims and perpetrators, 2005–2013 (latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS). (ICF International, 2014).

Note: The chart presents the proportion of women who report experiencing lifetime intimate partner physical violence (women victims) alongside the proportion of women who report ever committing physical violence against their husband/partner when he was not already beating or physically hurting them (women perpetrators).

Attitudes towards wife-beating

Wife-beating is a clear expression of male dominance; it is both a cause and consequence of women's serious disadvantage and unequal position vis-à-vis men.⁵² In some countries and cultures, wife-beating is seen as justifiable in a wide range of contexts. This acceptance means it can be difficult for behaviours to change and for women to feel they can discuss their experiences of violence and ask for help. Research indicates that perpetration of and victimization by violence is higher among those who accept or justify such abuse than those who do not.⁵³ However, evidence also suggests that attitudes are beginning to change and that both women and men are starting to view violence as less acceptable. shows the proportions of women and men who agree that a husband is justified in beating his wife for at least one of the following reasons: the wife burns the food, argues with her husband, goes out without telling him, neglects the children or refuses to have sex with him.

**Wife-beating is acceptable in many countries
across the world**

Acceptance of wife-beating was generally higher in Africa, Asia and Oceania, and lower in Latin America and the Caribbean and developed countries. Levels of women's acceptance ranged from 3 per cent in Ukraine (2012) and Serbia (2010) to 92 per cent in Guinea (2012). Levels of men's acceptance ranged from 7 per cent in Serbia (2010) to 81 per cent in Timor-Leste (2009–2010). It should be noted that it is difficult to compare reported levels of acceptance of wife-beating across countries and contexts because the willingness to talk about violence and attitudes towards it vary, which can affect people's response. In almost all of the countries where more than one year of data are available, the level of women's and men's acceptance of wife-beating decreased over time.⁵⁴ Although it may be assumed that wife-beating is more widely justified by men than women, in most countries levels of reported acceptance are actually lower among men than women.

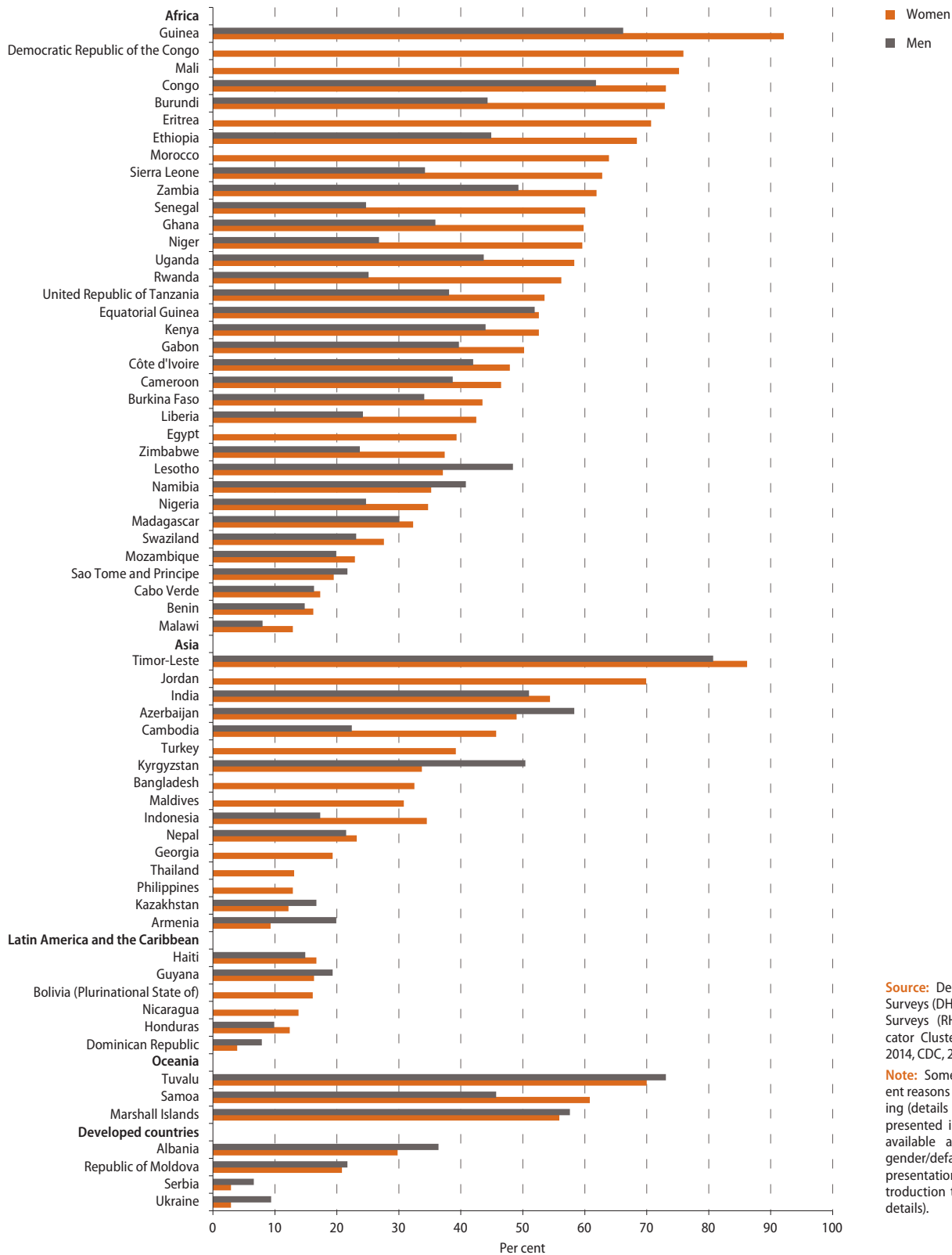
⁵² United Nations, 2010.

⁵³ WHO, 2005; Promundo, International Center for Research on Women, 2012.

⁵⁴ Statistical Annex, available at <http://unstats.un.org/unsd/gender/worldswomen.html>.

Figure 6.11

Attitudes towards wife-beating: proportion of women and men aged 15–49 years who agree that a husband is justified in hitting or beating his wife for at least one of five specified reasons, 1995–2014 (latest available)



Source: Demographic and Health Surveys (DHS), Reproductive Health Surveys (RHS) and Multiple Indicator Cluster Surveys (MICS). (ICF, 2014, CDC, 2014 and UNICEF, 2014c).

Note: Some surveys have different reasons for justifying wife-beating (details of these differences are presented in the Statistical Annex available at unstats.un.org/unsd/gender/default.html). Ranking is for presentation purposes only (see introduction to section A for further details).

B. Forms of violence in specific settings

1. Female genital mutilation

The term “female genital mutilation” (FGM, also known as “female genital cutting” and “female genital mutilation/cutting”) refers to all procedures involving partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons. This harmful practice constitutes a serious threat to the health of millions of women and girls worldwide and violates their fundamental rights. Immediate complications include bleeding, delayed or incomplete healing, and infections. Long-term consequences are more difficult to determine, but may include damage to adjacent organs, sterility, recurring urinary tract infections, the formation of dermoid cysts and even death.⁵⁵

In 2014, the United Nations General Assembly passed the second resolution on intensifying global efforts for the elimination of female genital mutilations (A/RES/69/150) calling on countries to take steps to increase education and awareness training on the issue, enact and enforce legislation, implement national action plans by involving multiple stakeholders, continue data collection and research, and provide support to victims and women and girls at risk. Despite this resolution and other important advances to eliminate female genital mutilation, the practice continues at unacceptably high levels in countries around the world.

In the 29 countries in Africa and the Middle East where the practice is concentrated, more than 125 million girls and women alive today have been subjected to the practice.⁵⁶ Of these, around one in five live in Egypt, where prevalence has been consistently over 90 per cent since data collection on the practice began. In addition, female genital mutilation is practised by immigrants and minority groups in other countries, meaning that the global total of girls and women subjected to cutting is likely to be even higher than 125 million.

⁵⁵ UNICEF, 2013.

⁵⁶ *Ibid.*

Female genital mutilation is less prevalent among younger women

Based on latest available data, the prevalence of female genital mutilation among women aged between 15 and 49 is highest (over 80 per cent) in Djibouti, Egypt, Eritrea, Guinea, Mali, Sierra Leone, Somalia and Sudan.⁵⁷ Among countries studied, prevalence is lowest (less than 10 per cent) in Benin, Cameroon, Ghana, Iraq, Niger, Togo and Uganda. In most countries where the practice is concentrated, prevalence rates have declined over time. Comparing prevalence across age groups can also indicate changes in the practice among younger generations. The proportions of girls and women aged 15 to 19 and 45 to 49 subjected to female genital mutilation are presented in figure 6.12. In all but one country presented here (Niger, which has rates near zero across all age groups), prevalence was lower among the younger cohort, with much lower prevalence rates found among younger women in Burkina Faso, Kenya, Liberia, Nigeria and Sierra Leone (more than 20 percentage points difference). However, in several countries—Djibouti, Guinea, Mali, Somalia and Sudan—prevalence was still very high among the young (more than 80 per cent) and was only slightly lower (5 percentage points difference or lower) in the younger age group, indicating that not much progress has been made overall.

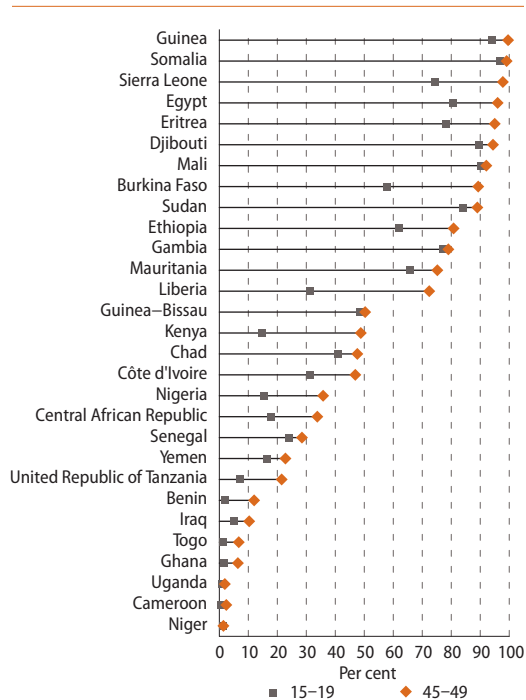
Within countries, prevalence rates vary according to ethnicity, religion, urban or rural residence, economic status, age, education and income. In general, reported levels of female genital mutilation are lower in urban areas, among younger women, and in families with higher levels of household income and mothers with higher levels of education.⁵⁸

Some efforts have been made to estimate the numbers of those at risk of female genital mutilation in countries of destination for people emigrating from areas where cutting is practised. Methods used include applying the prevalence rate in the country of origin to the numbers of immigrants from that country. However, this may lead to significant overestimation, since immigrants may not be representative of the population in the country of origin. Moreover, attitudes towards and the practice of female genital mutilation may be affected by moving to a new country where cutting is not widespread.

⁵⁷ Statistical Annex, available at <http://unstats.un.org/unsd/gender/worldswomen.html>.

⁵⁸ UNICEF, 2013.

Figure 6.12
Girls and women aged 15–19 years and 45–49 years
subjected to female genital mutilation, 2002–2013
(latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Survey (DHS) and Multiple Indicator Cluster Survey (MICS) reports (ICF, 2014 and UNICEF, 2014c).

Note: In the 29 countries where FGM is concentrated, almost all girls undergoing FGM are cut before the age of 15 (UNICEF, 2013). Ranking is for presentation purposes only (see introduction to section A for further details).

Attitudes towards female genital mutilation have also shown some change. In a number of countries, the majority of women (and men, where available) believe the practice should be discontinued. It is often assumed that support for female genital mutilation is higher among men than women; however, in many cases, the proportion of women and men who believe the practice should be discontinued is around the same. Support for discontinuation is mainly high in countries where prevalence is relatively low, such as Benin, Cameroon, Côte d'Ivoire, Ghana, Iraq, Kenya, Niger, Nigeria, Togo, Uganda and the United Republic of Tanzania. However, in Burkina Faso, strong support has been found for discontinuation, even in a high-prevalence context. In most countries where data are available for multiple years, support for discontinuation has increased.⁵⁹

2. Violence in conflict situations

In addition to the trauma of coping with life in the midst of conflict, people in these situations can face heightened levels of interpersonal violence. Sexual violence perpetrated by militia, military personnel or the police during conflict is an important aspect of non-partner sexual violence. However, data in this area tend to be sparse. In an effort to gather specific information on this issue, the Office of the Special Representative to the Secretary-General on Sexual Violence in Conflict has created a website (<http://www.un.org/sexualviolenceinconflict/>) that includes information on violence experienced by people living in conflict situations. The conflicts highlighted include those in Bosnia and Herzegovina, the Central African Republic, Colombia, Côte d'Ivoire, the Democratic Republic of the Congo, Guinea, Liberia, Mali, Somalia, South Sudan, Sudan and the Syrian Arab Republic.

In Somalia, for example, high numbers of incidents of sexual violence continue to be reported. Between January and November 2012, United Nations partners and service providers registered over 1,700 rape cases in Mogadishu and the surrounding areas. Acts of sexual violence continue to be committed against internally displaced women and girls in these areas. Somali refugee women and girls were also targeted for sexual violence while attempting to flee to the border.⁶⁰ Data from eastern Democratic Republic of the Congo, which has experienced sustained internecine violence for over a decade, found that almost half (48 per cent) of male non-combatants reported using physical violence against women, 12 per cent acknowledged having carried out partner rape, and 34 per cent reported perpetrating some kind of sexual violence. This heightened violence included 9 per cent of adult men who said that they had been victims of sexual violence themselves, and 16 per cent of men and 26 per cent of women who reportedly were forced to watch sexual violence.⁶¹ In some instances in Afghanistan, survivors of sexual violence said they were raped a second time by security forces while seeking protection.⁶²

⁶⁰ United Nations, 2014.

⁶¹ Promundo, International Center for Research on Women, 2012.

⁶² United Nations, 2014.

⁵⁹ Based on data compiled by the United Nations Statistics Division from Demographic and Health Surveys.

In cases where women fleeing conflict reach refugee camps, they often do not participate equally with men in the administration of the camps and in the formation and implementation of assistance programmes, with negative effects on equal access to food or other essential items. Vulnerability to sexual violence remains high in refugee camps, and single women or unaccompanied girls may be at higher risk if they are not accommodated separately from men or if there is not sufficient privacy. Long walk distances out of the camps to collect water and firewood for cooking and heating may also expose women to the threat of rape. In some cases, refugee women engage in survival sex to support their families.⁶³

Adopted in 2000, UN Security Council resolution 1325 (2000) on women and peace and security was a milestone in addressing violence against women in situations of armed conflict. Recognizing the need to fully implement laws that protect the rights of women and girls during and after armed conflict, it calls for special measures to protect them from gender-based violence in such situations. The 26 indicators attached to the resolution are designed to monitor implementation and progress not only towards maintaining and promoting the security of women but also towards promoting women's leadership roles for peacekeeping and peacebuilding (see Chapter 5 on Power and Decision Making). Subsequent related Security Council resolutions directly address the issues of sexual violence in conflict as a tactic of war (1820 (2008)) and involving women in post-conflict and reconstruction periods (1889 (2009)).

3. Trafficking

Human trafficking in women is a serious issue and has been addressed internationally by the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, which supplements the United Nations Convention against Transnational Organized Crime. The Protocol, which entered into force in 2003, had been ratified as at December 2014, by 166 parties. According to the protocol, human trafficking involves recruiting, transporting, harbouring or receiving persons under threat or use of force or other types of coercion for pur-

poses of exploiting individuals for prostitution, other types of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

In 2014, the United Nations General Assembly passed a resolution on trafficking in women and girls (A/RES/69/149) calling on countries to sign and ratify relevant treaties and conventions, address the factors that make women and girls vulnerable to trafficking and to take more preventative efforts, including through education, develop comprehensive anti-trafficking strategies, criminalize all forms of trafficking and strengthen national mechanisms to ensure coordinated and comprehensive responses.

Due to its underground nature, accurate data on the scale of human trafficking are difficult to collect. According to a 2014 report on trafficking in persons,⁶⁴ published by the United Nations Office on Drugs and Crime (UNODC), adult women accounted for almost half (49 per cent) of all human trafficking victims detected globally. Women and girls together accounted for about 70 per cent, with girls representing two out of every three child trafficking victims.⁶⁵ Of persons prosecuted for and/or convicted of trafficking in persons over the period 2010–2012, around three quarters were men.⁶⁶ The most common forms of exploitation of known victims of trafficking are sexual exploitation and forced labour. Between 2010 and 2012, victims holding citizenship from 152 different countries were found in 124 countries,⁶⁷ an indication of the global scope of the problem.

⁶³ United Nations, 2006b.

⁶⁴ UNODC, 2014.

⁶⁵ *Ibid.* At present, there is no sound estimate of the number of victims of trafficking in persons worldwide. These gender breakdowns are based on the numbers of detected victims of trafficking as reported by national authorities. These official figures represent only the visible part of the trafficking phenomenon and the actual figures are likely to be much higher.

⁶⁶ *Ibid.*

⁶⁷ *Ibid.*

C. State accountability: Help-seeking and response to violence against women

1. Help-seeking

Only a fraction of women who experience violence seek help. The proportion of women who did seek help from family, friends or institutions such as health services and the police ranged from 18 per cent in Mali (2012–2013) to over 70 per cent in Georgia (2010) (figure 6.13). In the majority of countries, less than 40 per cent of the women who experienced violence sought help of any sort. Among women who did, most looked to family and friends as opposed to the police and health services. For example, among women who sought help in the United Republic of Tanzania (2010), 47 per cent appealed to family, 6 per cent to the police, and 1 per cent to a doctor or other medical personnel.⁶⁸ In Jordan (2012), 84 per cent looked to their family for support and 2 per cent went to the police.⁶⁹

In general, only a small proportion of women who sought help did so by appealing to the police. In almost all countries with available data, the percentage of women who sought help from the police, out of all women seeking help for experience of violence, was less than 10 per cent (figure 6.14). These findings underscore the assumption that, in the vast majority of instances, violence goes unreported and administrative records are not appropriate for assessing the prevalence of violence. One reason women may be reluctant to speak to the police about their experience of violence may be the low representation of women among police personnel. Women make up less than 35 per cent of police personnel in all 86 countries and areas for which data are available, and less than 10 per cent in 26 of these countries.⁷⁰

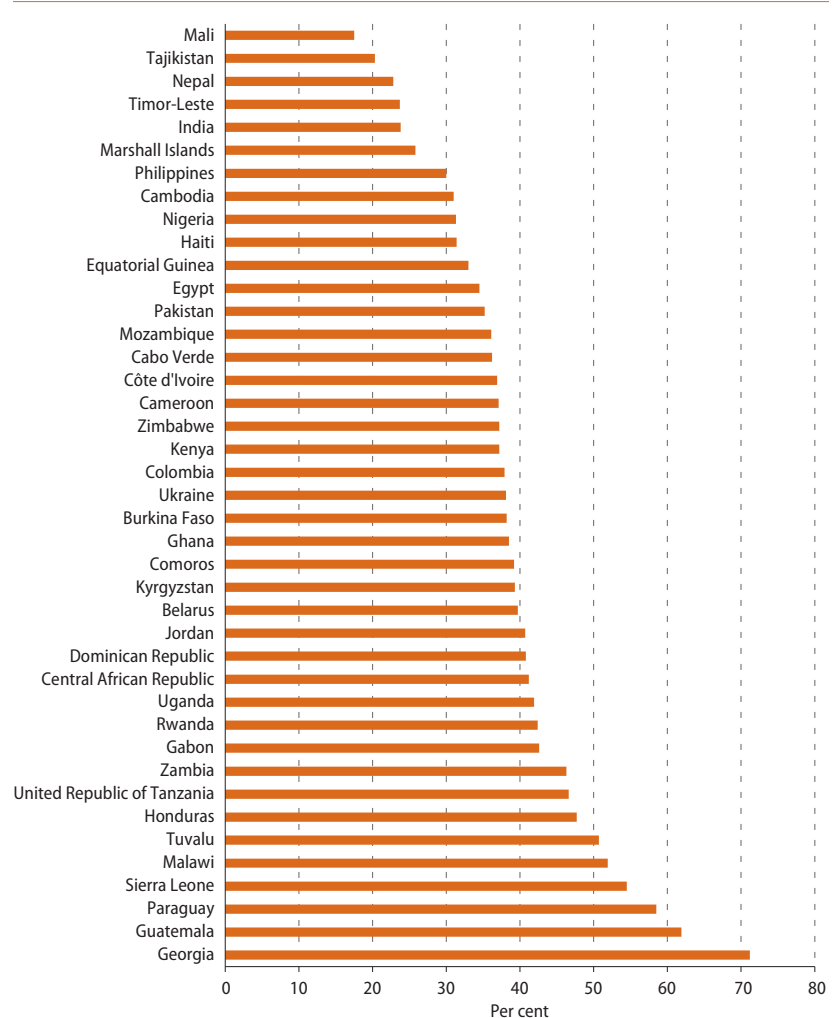
Yet, even when women do seek help, they often face formidable barriers. These include: lack of awareness of or actual lack of services; lack of accessibility to services due to linguistic, cultural, physical or financial constraints; fear of reprisals by the offender as well as family and community members; reluctance due to shame or embarrassment; the potential impact on women's custody of children; fear of reliving the experience of

violence by testifying before the courts; the feeling that the police could do nothing to help; and wanting to keep the incident private.⁷¹

In most countries less than 40 per cent of women who experienced violence sought help of any sort

Figure 6.13

Proportion of women aged 15–49 years who experienced violence and sought help, 2000–2013 (latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS), Reproductive Health Surveys (RHS) and Multiple Indicator Cluster Surveys (MICS). (ICF, 2014, CDC, 2014 and UNICEF, 2014c).

Note: Ranking is for presentation purposes only (see introduction to section A for further details).

⁶⁸ ICF International, 2014.

⁶⁹ *Ibid.*

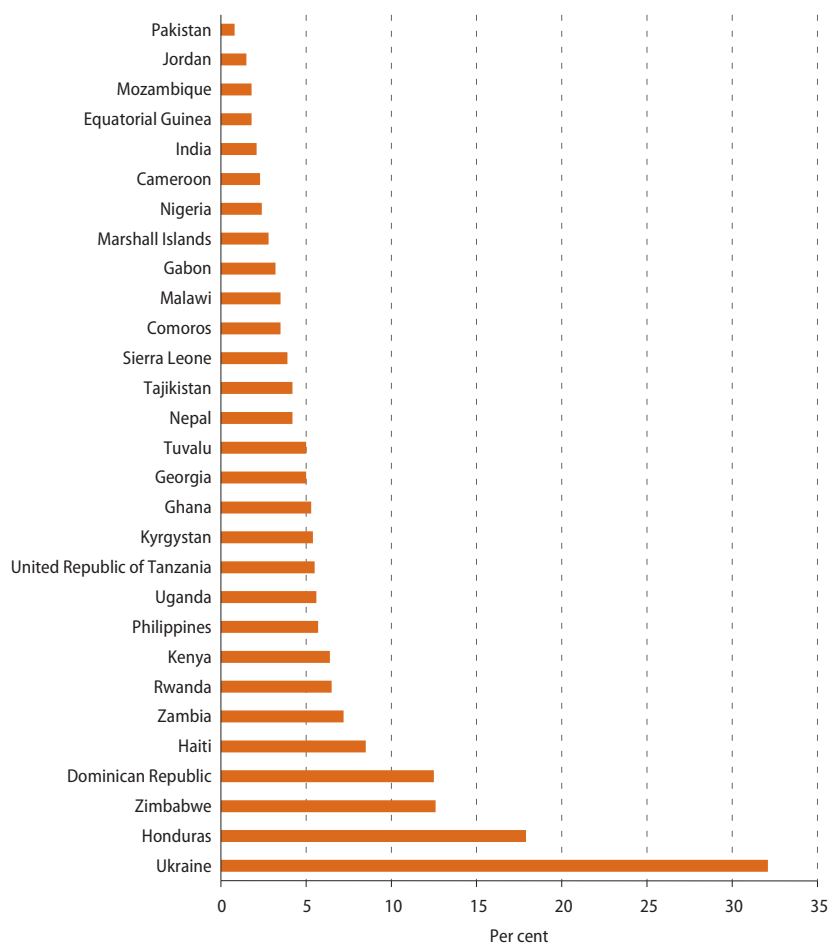
⁷⁰ UNODC, 2015.

⁷¹ Gauthier and Laberge, 2000; Kelly, Lovett and Regan, 2005; Fugate and others, 2005.

Only a small proportion of women victims of violence who sought help did so from the police

Figure 6.14

Proportion of women aged 15–49 years who experienced violence and sought help from the police, as a proportion of those who sought help from any source, 2005/06–2013 (latest available)



Source: Compiled by the United Nations Statistics Division from Demographic and Health Surveys (DHS) and Reproductive Health Surveys (RHS). (ICF, 2014 and CDC, 2014).

Note: Ranking is for presentation purposes only (see introduction to section A for further details).

2. State response to violence against women

In many cases, even when women do seek help from state institutions such as the police, health and social services and the justice system, the response can be inadequate. Not all countries have laws on violence against women, and when they do, they are often more concerned with responding to the violence that has already occurred than with preventing it in the first place. At least 119 countries have passed laws on domestic violence, 125 have laws on sexual harassment and 52

have laws on marital rape.⁷² Even when domestic violence laws exist, this does not always mean they are implemented, or implemented in ways that actually help women. In many cases, victims of domestic violence are economically dependent on their intimate partner and so conviction and imprisonment of the perpetrator, for example, leave the woman bereft of her only source of economic support. Domestic violence laws need to be implemented in tandem with measures for the economic empowerment of women and appropriate social support mechanisms for victims who take the difficult step of seeking legal recourse.⁷³ Prevention of and response to violence requires coordinated approaches across government, working with non-governmental organizations and other stakeholders.

To tackle the problem of violence against women, legislation needs to be enforced and implemented in ways that support victims and not discriminate against them. Many reported cases of violence suffer from attrition, or drop out, as they work their way through national legal systems. Attrition is a particular problem in rape cases.⁷⁴ Results of a study in Gauteng Province, South Africa, for example, revealed that 17 per cent of reported rapes reached court and only 4 per cent ended in a conviction—levels of attrition that are common in many other countries.⁷⁵ In European countries, an average of 14 per cent of reported rapes resulted in a conviction.⁷⁶

Policies and programmes to address violence against women need to be sustainable, properly financed and participatory—involving not only women but men. Comprehensive victim support systems are essential, encompassing hotlines, shelters, health services, legal support, counselling and economic empowerment. However, such systems should be implemented along with initiatives to reduce impunity for perpetrators, prevent violence from occurring in the first place, and change social norms around the use of violence. Monitoring and evaluation should be conducted to assess which approaches work best. In addition, continued improvements in and support for data collection are needed to assess changes over time and progress towards a world free from violence against women in all its forms.

⁷² OECD, 2015; Minimum Set of Gender indicators, 2014.

⁷³ UN Women, 2011/2012.

⁷⁴ *Ibid.*

⁷⁵ *Ibid.*

⁷⁶ Lovett and Kelly, 2009.

Box 6.5**When data on violence against women informs policy: The case of Kiribati**

A dedicated study on violence against women and children^a was conducted in Kiribati in 2008, the first such study in that country. It revealed that Kiribati has one of the highest recorded levels of violence against women in the world: 68 per cent of ever-partnered women said they were victims of physical and/or sexual violence by an intimate partner, 47 per cent reported incidents of emotional abuse, and 90 per cent reported experiencing at least one form of controlling behaviour. Women were more likely to be subjected to severe forms of partner physical violence such as punching, kicking or having a weapon used against them, than moderate forms of physical violence. Twenty-three per cent of women who had ever been pregnant reported being beaten during pregnancy, and women who had experienced intimate partner violence were significantly more likely to report miscarriage and a child who died.

The study also investigated why violence against women was so common in Kiribati and concluded that there were a number of contributing factors. They included: a high level of acceptance of violence, the belief that controlling behaviour in intimate partner relationships was “normal”, and the frequent use of physical punishment to “discipline” women who were thought to be transgressing their traditional gender roles. The most common reason men interviewees gave for hitting their wives was that they “disobeyed” them.

A number of risk factors were identified as being associated with the experience of intimate partner violence, including: being subjected to controlling behaviour by an intimate partner; alcohol consumption by both women and their partners; having been sexually abused as a child; having a partner who was beaten as a child; having a partner whose father beat the partner’s mother; having a partner who fights with other men; and having a partner who has had an affair. These factors were much more significant than most social, economic and demographic variables such as age, education and employment, showing that violence cuts across all sectors of society.

In response, the study proposed a number of actions to address the widespread problem of violence in Kiribati, including establishing a new government body dedicated to gender, developing a national action plan to eliminate violence against women, and strengthening and expanding formal support systems for women living with violence. Since the publication of the survey results, the Government of Kiribati passed the Family Peace Bill, which aims to confront all forms of violence against women. It also approved the Eliminating Sexual and Gender-based Violence Policy and the accompanying National Action Plan 2011–2021, and is partnering with faith-based organizations and civil society to create SafeNet, which provides free services to survivors of sexual and gender-based violence.

^a Secretariat of the Pacific Community, 2010.