



**Fact sheet 10/02
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Public health and violence – European facts and trends¹

The impact of violence on health appears in various forms all over the world. Each year, more than 1 million people lose their lives, and many more suffer non-fatal injuries, as a result of self-inflicted, interpersonal or collective violence. Overall, violence is among the leading causes of death worldwide for people aged 15–44 years.

Like many other health problems, violence is not distributed evenly among regions and countries. Within the WHO European Region, violence rates in low-income countries, particularly the countries of central and eastern Europe (CCEE) and the newly independent states (NIS), considerably exceed those in wealthier western Europe.

Violence has traditionally been seen as problem of crime. Nevertheless, the health sector, which must often deal with the results of violence, is becoming an active and valuable ally in tackling it. The four key steps defining the public health approach to violence are:

- uncovering as much knowledge as possible about all aspects of violence;
- investigating why it occurs;
- exploring ways to prevent it; and
- taking action, which includes disseminating information, and evaluating programmes' effectiveness.

Young people and violence

In 2000, an estimated 199 000 homicides (9.2 per 100 000 population) occurred globally among young people. In the European Region, most of the countries with youth homicide rates above 10.0 per 100 000 are experiencing rapid social and economic change, such as Albania (28.2 per 100 000) and the Russian Federation (18.0 per 100 000). The countries with low rates tend to be in western Europe, such as France, Germany and the United Kingdom of Great Britain and Northern Ireland (0.6, 0.8 and 0.9 per 100 000, respectively). Almost everywhere, homicide rates are substantially lower among young women than among young men.

Between 1985 and 1994, youth homicide rates increased in many parts of the world, particularly among those aged 10–24 years. Homicides in this group increased dramatically in the CCEE and NIS (for example, by 125% in Latvia and over 150% in the Russian Federation), but remained low

¹ This fact sheet is based on data provided by the WHO *World report on violence and health* (http://www.who.int/violence_injury_prevention).

and stable in western Europe in general (although increasing by 28.6% in France and 12.5% in Germany).

The carrying of weapons has become an important risk behaviour among young people of school age. In Scotland, 34.1% of boys and 8.6% of girls aged 11–16 said that they had carried weapons at least once. In the Netherlands, 21% of secondary-school pupils admitted possessing a weapon, and 8% had brought one to school.

Child abuse

Reports of infanticide, mutilation, abandonment, sexual abuse and other forms of violence against children date back to ancient civilizations. The issue received widespread attention from the medical profession and the general public in 1962 with the definition of the battered child syndrome. Forty years later, there is clear evidence that child abuse is a global problem. Infants and very young children seem to be at greatest risk; rates for children aged 0–4 years are more than double those for 5–14-year-olds. The findings of international studies conducted since 1980 reveal that the mean lifetime prevalence of childhood sexual victimization is 20% among women and 5–10% among men.

Reports from parents in some European countries confirm that significant numbers physically punish their children. In Italy, 8% of children receive harsh physical punishment from their parents. A recent survey of households in Romania found that 4.6% of children reported suffering severe and frequent physical abuse, including being hit with an object, burned or deprived of food.

Violence by intimate partners

Violence inflicted by one intimate partner on another occurs in all countries and social, economic, religious and cultural groups. Nevertheless, the risks are greater in some populations, such as the poor. In the overwhelming majority of cases, men inflict this violence on women. In 48 population-based surveys from around the world, 10–69% of women reported being physically assaulted by an intimate male partner at some point. Research suggests that physical violence in an intimate relationship is often accompanied by psychological abuse and by sexual abuse (in one third to over one half of cases).

A 1997 study in the Republic of Moldova revealed 4790 cases of abuse against women by intimate partners. A study in Israel shows that 40–70% of female murder victims were killed by their husbands or boyfriends, frequently as the culmination of an abusive relationship.

Abuse of elderly people

The number of older people in the world (those aged 60 years and over) is predicted to be about 1.2 billion by 2025, more than double the 1995 figure of 542 million. This dramatic increase has prompted public concern about such issues as the mistreatment of older people. The abuse of the elderly was not widely recognized until the 1970s, and the general statistics collected by countries on violent acts vary widely. The likely rates of elderly abuse – in both the community and institutions – may be greater than official figures indicate. The deaths of older people have often been attributed to natural, accidental or undetermined causes when in fact they resulted from abuse or neglect.

Most developing countries have only recently become aware of this problem. Information on its frequency has been derived from five surveys conducted in the past decade in five developed countries, including Finland, the Netherlands and the United Kingdom. The results show a prevalence of 4–6%, if physical, psychological and financial abuse and neglect are all included. The studies in Finland found a higher proportion of female (7.0%) than male victims (2.5%).

Countries are trying to tackle the problem by galvanizing social action and developing legislation and other policy initiatives. Norway has obtained parliamentary approval for a resource centre for information and research on violence, largely as a result of action by campaigners against the abuse of elderly people. In 1989, Israel introduced legislation for the mandatory reporting of abuse of the elderly, to prevent evidence from going unnoticed.

Sexual violence

Although little research has been conducted, evidence at the global level suggests that in some countries nearly 25% of women may experience sexual violence by an intimate partner, and one third of adolescent girls report their first sexual experience as resulting from force. In a survey of a representative sample of the general population aged over 15 years in the Czech Republic, 11.6% of women reported having been forced into sexual contact during their lives, and 3.4% reported that this had happened more than once. In the United Kingdom, 23% of women in North London reported having been subjected to either attempted or completed rape by a partner. The corresponding figures for Finland and Switzerland were 5.9% and 11.6%, respectively.

Sexual trafficking and its consequences are serious problems in the European Region, where thousands of women and girls are sold into prostitution or sexual slavery each year. Research in Kyrgyzstan has estimated that around 4000 people were sold out of the country, with their principal destinations being China, Germany, Turkey and the United Arab Emirates. Of the victims of trafficking, 62% reported being forced to work without pay, while over 50% reported being physically abused or tortured by their employers. A study by the International Organization for Migration (<http://www.iom.int/>) estimated that 10–15% of 2000 known foreign prostitutes in Belgium had been forcibly sold from abroad. In Italy, a study of some 19 000–25 000 foreign prostitutes estimated that 2000 of them were victims of trafficking. Most of these women were under 25 years of age and came from the CCEE and NIS.

Suicide

Around the world, 815 000 people were estimated to have killed themselves in the year 2000, which represents 1 death about every 40 seconds.

Among the Member States in the European Region reporting suicide to WHO, the highest rates are found in eastern countries, such as Lithuania (51.6 per 100 000), the Russian Federation (43.1 per 100 000), Belarus (41.5 per 100 000) and Estonia (37.9 per 100 000). These are twice the rates found in such western countries as Belgium (24.0 per 100 000), Finland (28.4 per 100 000), France (20.0 per 100 000) and Germany (14.3 per 100 000). As to the trends in suicide in the twentieth century, Finland, Ireland, the Netherlands, Norway, Scotland (United Kingdom), Spain and Sweden experienced significant increases, while England and Wales (United Kingdom), Italy and Switzerland experienced significant decreases.

Age is an important demographic marker of suicide risk. Globally, suicide rates tend to increase with age; the rates among people aged 75 and older are about three times higher those of people aged 15–24. This trend holds for both sexes, but is more marked among men.

Collective violence

Collective violence – war, terrorism, genocide, repression, involuntary disappearance, torture and organized crime – took a terrible toll in the twentieth century. WHO estimates that the 25 largest

instances of collective violence were directly or indirectly responsible for the deaths of some 191 million people, 60% of whom were not engaged in fighting.

In the year 2000, war-related injuries are estimated to have killed about 310 000 people: the rate for the WHO European Region was 7.6 per 100 000.

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