Collective violence receives a high degree of public attention. Violent conflicts between nations and groups, state and group terrorism, rape as a weapon of war, the movement of large numbers of people displaced from their homes, and gang warfare—all these occur on a daily basis in many parts of the world. The effects of these different types of event on health in terms of deaths, physical illness, disabilities and mental anguish are vast.

Collective violence may be defined as the instrumental use of violence by people who identify themselves as members of a group—whether this group is transitory or has a more permanent identity—against another group or set of individuals, in order to achieve political, economic or social objectives.

THE EXTENT OF THE PROBLEM
- The 20th century was one of the most violent periods in human history. An estimated 191 million people lost their lives directly or indirectly as a result of conflict, and well over half of them were civilians.
- In 2000, over 300,000 people died as a direct result of violent conflicts. Rates varied from less than 1 per 100,000 population in high-income countries to 6.2 per 100,000 in low and middle-income countries.
- Worldwide, the highest rates of conflict-related deaths are found in Africa (32.0 per 100,000).
- Besides the many thousands killed each year in violent conflicts, there are huge numbers who are physically injured as a result—excluding some who are permanently disabled or mutilated.
- Torture and rape are also used to terrorize and undermine communities, although exact numbers of people subjected to these abuses are difficult to determine. Many people hide the trauma they have suffered and parties to a conflict often try to manipulate or conceal evidence of torture and rape.

THE CONSEQUENCES OF COLLECTIVE VIOLENCE
The impact of violent conflicts on health can be very great in terms of mortality, morbidity and disability.

- Increased mortality rates of civilians during violent conflicts are usually due to:
  - injuries
  - decreased access to food, leading to poor nutrition
  - increased risk of communicable diseases
  - diminished access to health services
  - reduced public health programmes
  - poor environmental conditions
  - psychosocial distress.

Infants and refugees are among the groups most vulnerable to disease and death in times of conflict. Increases in morbidity and mortality rates among these two groups can be dramatic.

The violence and cruelty of conflicts are associated with a range of psychological and behavioural problems, including depression and anxiety, suicidal behaviour, alcohol abuse and post-traumatic stress disorder.

Conflicts disrupt trade and other business activities, and divert resources to defence from other vital services and sectors. They also have an impact on food production or distribution and displace thousands of people from their homes. Famine related to war, other armed conflicts or genocide is estimated to have killed 40 million people in the 20th century.
EXAMPLES OF THE DIRECT IMPACT ON HEALTH OF COLLECTIVE VIOLENCE

<table>
<thead>
<tr>
<th>Health impact</th>
<th>Causes</th>
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| Increased mortality | • Deaths due to external causes, mainly related to weapons  
• Deaths due to infectious diseases (such as measles, poliomyelitis, tetanus and malaria)  
• Deaths due to noncommunicable diseases, as well as deaths otherwise avoidable through medical care (including asthma, diabetes and emergency surgery) |
| Increased morbidity | • Injuries from external causes, such as those from weapons, mutilation, anti-personnel landmines, burns and poisoning  
• Morbidity associated with other external causes, including sexual violence  
• Infectious diseases:  
  – water-related (such as cholera, typhoid, dysentery due to *Shigella* spp.)  
  – vector-borne (such as malaria and onchocerciasis)  
  – other communicable diseases (such as tuberculosis, acute respiratory infections, HIV infection and other sexually transmitted diseases)  
• Reproductive health:  
  – a greater number of stillbirths and premature births, more cases of low birth weight and more delivery complications  
  – longer-term generic impact of exposure to chemicals and radiation  
• Nutrition:  
  – acute and chronic malnutrition and a variety of deficiency disorders  
• Mental health:  
  – anxiety  
  – depression  
  – post-traumatic stress disorder  
• Suicidal behaviour |
| Increased disability | • Physical  
• Psychological  
• Social |

- Social inequality marked by grossly unequal distribution of, and access to, resources. Conflict is most likely in situations where the economy is in decline, thus exacerbating social inequalities and intensifying competition for resources.
- Control by a single group of valuable natural resources, such as diamonds, oil, timber and drugs.
- Rapid demographic change that outstrips the capacity of the state to provide essential services and job opportunities.

Many of these risk factors can be identified before overt collective violence takes place.

WHAT CAN BE DONE TO PREVENT COLLECTIVE VIOLENCE?

There are a number of measures that can be taken to prevent collective violence and – where it occurs – to lessen its impact.

Some of the general policies needed to reduce the potential for violent conflicts include:
- Reducing poverty, both in absolute and relative terms, and ensuring that development assistance is targeted so as to make the greatest possible impact on poverty.
- Reducing inequality between groups in society.
- Reducing access to biological, chemical, nuclear and other weapons.
- Ensuring the promotion and application of internationally agreed treaties, including those relating to human rights.

National governments can help prevent conflicts by upholding the spirit of the United Nations Chapter, which calls for the prevention of aggression and the promotion of peace and security. At a more detailed level, this involves adhering to international legal instruments, including the 1949 Geneva Conventions and their 1977 Protocols.

Investing in health development can contribute to the prevention of violent conflict. A strong emphasis on social services can help maintain social cohesion and stability.

Early manifestations of situations that can lead to conflicts can often be detected in the health sector. Health care workers have a significant role to play in drawing attention to these signs and in calling for appropriate social and health interventions.

For more information, please visit: [http://www.who.int/violence_injury_prevention](http://www.who.int/violence_injury_prevention), or e-mail: violenceprevention@who.int

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