Original Article

Transforming Our World: Implementing the 2030 Agenda Through Sustainable Development Goal Indicators

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Running title: Transforming Our World

Abstract

The United Nations’ 2030 Agenda for Sustainable Development recognizes violence as a threat to sustainability. To serve as a context we provide an overview of the Sustainable Development Goals as they relate to violence prevention by including a summary of key documents informing violence prevention efforts by the World Health Organization (WHO) and Violence Prevention Alliance (VPA) partners. After consultation with the United Nations (UN) Inter-Agency Expert Group on Sustainable Development Goal Indicators (IAEG-SDG), we select specific targets and indicators, featuring them in a summary table. Using the diverse expertise of the authors, we assign attributes that characterize the focus and nature of these indicators. We hope that this will serve as a preliminary framework for understanding these accountability metrics. We include a brief analysis of the target indicators and how they relate to promising practices in violence prevention.

Keywords: sustainable development; violence prevention; indicators; accountability measures
What can and should be done to sustain momentum and strategic direction for global violence prevention?

The 2030 Agenda for Sustainable Development will shape global development policy and actions for the next 15 years. Ensuring momentum and strategic direction for global violence prevention will require concerted action to kick-start the process in the next two to five years. On 22-23 September 2015, in Geneva, the World Health Organization (WHO) hosted the 7th Milestones of a Global Campaign for Violence Prevention Meeting for violence prevention researchers and practitioners from all over the world. The conference theme, “Violence Prevention and the 2030 Agenda for Sustainable Development,” encouraged discussion of the need for specific indicators for measurement, and about priorities for data collection related to the violence reduction targets. We outline selected conclusions below. The Violence Prevention Alliance (VPA) is a network of 63 institutions involved in violence prevention worldwide, bringing together WHO Member States, international agencies, civil society organizations, and academic institutions. The VPA plays a key role in uniting a vision of effective violence prevention through multi-sectoral collaboration. Because of its unique forum, which includes sectors at all levels (community, national, regional, and international), the VPA offers an invaluable opportunity for bridging the gap between theory and practice, evidence and implementation, to identify priority areas for global leadership in violence research.

Figure 1 provides a timeline and summary of key references designed to support the Global Campaign to Prevent Violence. A Global Plan of Action to strengthen Health Services is under development and will be an important strategy for achieving SDG’s
First report on the scope and scale of violence around the globe. Introduced a Typology of Violence and ecological model for understanding violence. Explained the public health approach to addressing and preventing violence. Helped to launch the Global Campaign for Violence Prevention.

Preventing violence and reducing its impact How development agencies can help

A key aim is to stimulate dialogue on the role of international development agencies in the prevention of violence globally, and ultimately to increase investment in a commonly agreed set of applied violence prevention strategies.

Violence prevention: the evidence is a set of briefings on what works to prevent interpersonal violence (including against women and girls), and self-directed violence The Evidence includes: promoting safe, stable and nurturing relationships between children and their parents and caregivers; developing life skills in children and adolescents; reducing availability and harmful use of alcohol; reducing access to guns, knives and pesticides; promoting gender equality; changing cultural norms that support violence; and victim identification, care and support.


World Health Assembly Resolution May 2015 - WHA67.15

Calls for the creation of a Global Plan of Action to strengthen the role of the health systems to address interpersonal violence, in particular against women and girls, and against children.

Goals:
- Goal 5: Achieve gender equality and empower all women and girls
- Goal 16: promote peaceful and inclusive societies for sustainable development, the provision of access to justice for all, and building effective, accountable institutions at all levels.

Targets:
- 5.1 End all forms of discrimination of women and girls everywhere
- 5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and other types of sexual exploitation
- 5.3 Eliminate all harmful practices, such as child, early and forced marriage, and female genital mutilation
- 16.1 Significantly reduce all forms of violence and related death rates everywhere
- 16.2 End abuse, exploitation, trafficking and all forms of violence against and torture of children
- 16.7 Ensure responsive, inclusive, participatory and representative decision-making at all levels

Next steps and specific recommendations for the way forward

It is important to increase our focus on risk and resilience factors that concern violence. The three keys to preventing violence are:

1) Understanding that violence is a complex issue and requires a comprehensive approach;

2) Addressing risk and resilience factors with attention to increased vulnerability due to gender inequality, age, etc.; and

3) Forging an integrated strategy for action.

While investments in violence prevention and response have increased in recent years, overall they have been woefully inadequate and highly disproportionate to the magnitude of the problem. Community and interpersonal violence not only cause immediate health and safety issues—including injuries, death, and emotional trauma—but also long-term sequelae affecting the financial and personal capital of entire communities and societies. Currently, the social welfare, criminal justice, and health sectors bear the largest burden for dealing with the consequences of violence, while programs focus on responses after violence occurs. However, high levels of violence and conflict are major obstacles for inclusive socio-economic development, not to mention a drain to resources. We now know that violence is preventable with commitment and sustained attention. A great deal of research now highlights key societal, community, familial, and individual risk and resilience factors, and we have a growing understanding of interventions that work and are ready for implementation.

The next step, then, requires expanding approaches that prevent violence before it occurs—not only through programs, but through systemic changes in environmental factors and a more comprehensive set of prevention activities, including changes in social norms around gender inequality and violence acceptance; improving and enforcing laws and policies, institutional practices, and public education; and cooperating among multiple partners. Addressing the ‘determinants of health’ includes prioritizing data collection on a few known, universal risk factors, such as firearms ownership and access; alcohol use and access; illicit drug use and drug-trafficking; exposure to violence; social determinants/inequality measures and institutional legitimacy. It also requires looking at the underlying elements that allow these factors to proliferate in the first place. In each of these areas there is strong evidence for interventions that work.

Sustainable violence prevention requires transformation of the systems and institutions committing and supporting state-sanctioned violence into systems supporting legitimacy and inclusiveness, a medium- to long-term undertaking that requires additional quality data. This will require a better understanding of all forms of violence, including collective and structural violence. A stronger focus on innovative studies in this area can create new insights and contribute to the development of measurable indicators to guide global development policies and action toward the sustainable transformation of institutions to promote safety and security.

Recommendations for capacity development and institutional reform.

Preventing violence entails building on partnerships across global and local institutions, identifying and using existing United Nations (UN) instruments, and prioritizing multi-sectorial approaches. We need to refine existing knowledge and, more importantly, to support communities and countries to develop the political will to translate that knowledge into practice. Local authorities and national governments must be the focus and champions of these changes; we must engage key actors like...
police, health professionals, and social workers, who have direct contact with violence on the
ground, and support them to build capacity; and we need to work with multiple sectors to develop
guidelines regarding their roles in addressing and preventing violence within their own mandates.

Ensuring the SDGs Account for Violence Prevention: A Preliminary Discussion

The SDG’s present a golden opportunity for achieving far-reaching and collaborative gains on
violence prevention around the world.4 Of note, the United Nations (UN) Statistical Commission
created an Inter-Agency and Expert Group on SDG Indicators (IAEG-SDGs) in March 2015. It
comprises Member States as well as regional and international agencies as observers. The IAEG-
SDGs are expected to provide a global indicator framework—and associated global and universal
indicators—for consideration by the Statistical Commission at its 47th session in March 2016 (See
http://unstats.un.org/sdgs/iaeg-sdgs/). After consultation with the United Nations UN IAEG-SDG,
we selected preliminary indicators to facilitate monitoring of progress on SDGs.5 Although we
included indicators on lethal and non-lethal violence, we did not include key metrics associated
with violent conflict mortality due to political disagreement and concern over their methodological
rigor.6,7

Whether measuring violence or other development priorities, indicators alone do not fully
capture the dynamics of all situations equally. We must interpret indicators in the context from
which they arise. Their use in isolation from qualitative and other contextual research insufficiently
captures the experience of a given setting or the underlying factors influencing a specific
environment. Nevertheless, indicators serve as critical markers toward a goal and will help
illuminate progress or failure to meet objective targets.

Two SDGs directly address violence and can play an important role in shaping global
violence prevention efforts. These are SDG 5 (“Achieve Gender equality and empower all women
and girls”) and SDG 16 (“Promote peaceful and inclusive societies for sustainable development,
provide access to justice for all and build effective, accountable and inclusive institutions at all
levels”). There are several other SDGs that address important underlying risk factors for
interpersonal violence like alcohol and drugs and safety in schools and cities. SDG 11, for example,
has a potential indicator 11.7.2: “Proportion of women subjected to physical or sexual harassment,
by perpetrator and place of occurrence (last 12 months)” (SDG 11 on safe, inclusive, resilient and
sustainable cities also includes some references to the promotion of security, but we have chosen
not to discuss it within the length of this article). Following these SDGs also helps to illuminate
conditions that impact rates of violence.

Tracking global, national, regional, and municipal indicators can allow us to achieve some
measurements of progress toward the SDGs. Given that many countries, regions, and cities are on
an unequal footing when it comes to data collection, surveillance, and reporting, the road ahead is
challenging.8

There are other barriers to consider. Standard definitions for categories of violence and
means of validating prevalence are necessary before we can analyze and compare the data.
Reaching agreement on a core set of indicators among various constituencies is also a contentious
and demanding process. Any final determination of indicators comes with its own limitations as
‘what gets counted counts’ – and influences the comprehensiveness of any assessment. For
example, measurement of sexual violence often depends entirely on incident reports. We know
from population survey data that many do not report assaults, and that the ways in which the law
defines sexual violence influence what appears in reports. When one selects indicators from
criminal justice or other systems, it is important to acknowledge that these constitute proxy measures for actual incidence and can vary by a multitude of social and cultural factors, making it likely that we are undercounting true incidence. For example, recent analyses of human services data from 24 countries suggested that estimates of gender-based violence prevalence derived from health or police data will result in huge underestimates, with at best 9% of incidents occurring in developing contexts. We also must acknowledge that if violence prevention and response are working, rates of violence according to service surveillance may rise initially, as more people are aware and seek support and services. One way to address this challenge is to use ancillary data to contextualize the primary indicators, which the international committee has selected. This helps to make more certain that we understand the full story surrounding an indicator. For example, ancillary data on the greater availability of rape kits in emergency rooms in a jurisdiction could help explain an increase in criminal charges for sexual assault within that jurisdiction; conversely, a lack of access to rape kits could mean a decrease in criminal charges and investigations regarding sexual assaults.

Metrics can influence the design, implementation, and evaluation of interventions. This is a risk in the SDG process of limiting the types and context of reporting indicators. The way we frame a ‘problem’ in society can influence approaches to the solution. For example, when measuring violence and addressing prevention through surveillance, metrics for crime may provide us with some insight. Communities addressing high levels of crime reports can interpret this as a need for more police officers, but a public health approach would indicate the need to address causal factors through community-based violence prevention, while understanding (and possibly transforming) how we define ‘crime’ and measure it within society. Solutions to violence call for a public health approach with a focus on evidence-informed interventions. (For a more comprehensive discussion of this issue, please see Less Law More Order10,11 and A Manifesto for fragile cities12,13).

The SDG process can benefit from learning from countries and cities where violence prevention has generated results. For a case study of this, we can look to Latin America. After decades of heavy-handed crime prevention – ‘mano dura’ in the vernacular – some Latin American cities such as Bogota, Medellin, and Mexico are changing their tactics dramatically. Since the 1990s, elected officials, private business people, and civil society groups started experimenting with new approaches consisting of “community-level violence prevention” in some of the region’s fragile cities.12 (For more about fragile environments, see also in this Special Issue: Kumar and Willman.14)

Such approaches involve strategies that target places, people, and behaviors. After making some important gains, they are today helping to reshape the global debate on urban safety. Latin America’s new approach to urban crime prevention is producing some spectacular declines in murder and victimization. Even before investing in urban renewal, new forms of policing, at-risk youth programs, or alcohol and firearm restrictions, Latin American leaders focused first on attitudes and values. A first step was to craft a new culture of citizenship, encouraging locals to regulate themselves and one another. In Bogota, for example, local governments paid street mimes (performers who work in public spaces) to deliver ‘behavior cards’ for those who broke rules. This allowed for modeling desired behaviors in an often comedic and expansive way, emphasizing the message or social norm the governments wanted communicated through theater. City planners also started up women’s nights, cleaned up public spaces, created amnesties for collecting firearms, reduced alcohol sales and outlets in hot spots, and created national and metropolitan observatories to track crime and violence. Over time, they complemented these investments in social norm and behavior change with concrete investments in public security and violence prevention programs.
On the basis of a careful reading of the evidence, civic leaders in some major Latin American cities began investing in data-driven and community-based policing and gun collection programs. In some cases, they invested in conditional cash transfer programs (welfare programs that are conditional upon the receivers’ meeting certain criteria), early childhood support for single-headed female households, and afterschool activities for at-risk young males. The last has been especially successful in reducing both violent and property-related crime.

Despite ongoing challenges related to collective violence and displacement, and interpersonal violence, these holistic approaches represent great strides in violence prevention and response, and many of these Latin American innovations in violence prevention reflect best practices now known to the global public health community. Effective use of data and design of comprehensive approaches often succeed where narrowly designed law enforcement measures have failed. The VPA led discussions in Geneva in 2015 that point to a need for indicators to track progress at three levels:

- Immediate effects (‘quick fix’ indicators measuring short term visible gains and creating and/or sustaining political will for ongoing violence prevention actions)
- Medium-term effects (‘proximate’ indicators that can track outcome metrics and measure the intermediate effects of violence prevention on communities)
- Long-term effects (‘structural’ indicators that can measure sustained reductions in the underlying risks of violence in institutions, societies, and at-risk population groups)

Researchers can choose several indicators at all three levels of analysis. Possible immediate effect indicators could track the prevalence of firearms, alcohol and drugs; increases in trauma-informed care, treatment and intervention for offenders and potential perpetrators, parenting support, early childhood development programs, life skills training, community-based social norms change; and promotion of peace education in schools. Medium-term effect indicators could measure social norms and behavior change; urban upgrading and poverty de-concentration programs; reduced community-level trauma; and increased social protection with an emphasis on human dignity. Long-term effect indicators should consist of society-level poverty and inequality reduction, institutional reform, and improved governance.

**SDG Indicators for Sustaining and Directing Momentum: An Outline for further Action**

We will now examine indicators that the IAEG SDG Indicator expert group has selected. The IAEG-SDG meets periodically to determine which indicators researchers will use to measure the SDG targets (accepted indicators are designated as ‘green’) and to guide the efforts of national statistical offices. A critical review of the IAEG-SDG process will support balancing the SDG indicators framework from a public health perspective. Such an analysis can facilitate the implementation of a public health approach to violence prevention and ensure that we employ an ecological approach to reduce violence globally. It might also point the way to future research and partnerships with governments and nongovernmental organizations (NGOs).

Drawing from the current indicator framework of the IAEG-SDG, we have mapped each indicator to a number of attributes relevant to violence prevention. As this is a preliminary analysis and the indicator framework is still in development, further refinement will be necessary. We also accept that creating community-level indicators will depend on data that one captures at a different level from national aggregate data. One can capture data from a variety of levels of organization and from surveys, incidents, encounters, or transactions. Organization of these sources can occur at many levels of aggregation—for example, the number of liquor outlets in a community versus those
in a region or country. Community-level indicators may not be of interest to national reporting systems. In many cases, community-level indicators are outside of major reporting systems and therefore not visible as part of a national surveillance strategy. Hospital encounters at the local level can be very helpful for criminal justice, counseling, and other types of interventions. At this time, emergency visits relating to violence have no connection to criminal justice reporting systems.

We find the examination of indicators that work at multiple levels of aggregation to be useful to this review, as is the characterization of indicators by type. We derive the indicator by type category from the health equity work by the California-based Prevention Institute, a VPA partner and leader in community level interventions for violence prevention. In addition, a “status” attribute identifies whether the indicator is status of a population, an indication of infrastructure or service, or an appraisal of the social environment.

A review of the table, as we shall see, reveals interesting findings. First, there is agreement within the IAEG-SDG on a “homicide” metric, but there is still disagreement on a “violent conflict deaths” indicator. The latter indicator is a significant marker for any effort to manage and reduce violence globally. We cannot know the true intensity of armed conflict and thus the global burden of violence if we exclude conflict mortality from the SDG framework; and to include this, we need a shared understanding of how to measure conflict-related deaths.

Second, the majority of the selected indicators register the incidence and prevalence of some form of victimization and harassment. Many of the indicators will help to establish a baseline for the targets and thus track the longer term. These are essential indicators for characterizing the global scope of violence.

We have noted that there is no specific indicator for violence during pregnancy, a particularly vulnerable time for the health of mothers and children. A lifespan approach that acknowledges the reproductive years beginning in preconception highlights the vulnerabilities as well as opportunities to impact health and well-being. Violence during pregnancy is a major concern for maternal-child health and is a major public health issue. Under 5.2.1, we recommend for consideration an indicator such as “Proportion of ever-partnered women and girls (aged 15-49) subjected to violence during pregnancy”.

Third, there are relatively few indicators that reflect structural drivers or compliance with international standards, norms, and legislation. Finally, many indicators that we recommend will be very difficult to source (e.g. victims of human trafficking) but should nevertheless be on our radar if we are to generate a better understanding of the true implications of violence around the world.

Importantly, the IAEG-SDG indicator framework also focuses on the disaggregation of key indicators from the global to regional, sub-regional, and city levels. The UN, however, is still deliberating on the final shortlist of metrics. It will develop data on the basis of a three-tier approach based primarily on the availability and existence of an established methodology for producing the indicator in question. An informal briefing to the UN shared the following approach for developing the framework globally:

The first important step will be the assessment of the status of the indicators proposed. The indicators will be classified into three tiers: Tier I: an established methodology exists and data are already widely available (“green”); Tier II: a methodology has been established but for which data are not easily available (yellow’); and Tier III: an internationally agreed methodology has not yet been developed (“grey”).

The discussion on SDG indicators is evolving. While we are still at a preliminary level, the framework proposes an ambitious high-level overview and incentive to measure structural drivers, societal norms, the strengthening of protective factors, and the reduction of risks associated with
violence. What ultimately may be more important for prevention efforts are indicators at the local level that help to provide a comprehensive profile of communities, including their social and economic characteristics (including employment, education, access to healthy and nutritious food, social mobility, and wealth distribution), values, norms, and perceptions. A comprehensive approach to measuring SDG indicators would benefit from the WHO-recommended public health approach to violence prevention. The overarching focus of sustainability necessitates an engagement at all levels of governance to establish truly nurturing and thriving human settlements in viable ecosystems.

Table 1: Violence-Related SDG Indicators by Timeframe, Governance, Status and Type

<table>
<thead>
<tr>
<th>Target</th>
<th>Objective</th>
<th>Proposed Indicator</th>
<th>Timeframe (I M L)</th>
<th>Governance: (LRN)</th>
<th>Status: (P S E)</th>
<th>Type: (SBM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.2</td>
<td>Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation</td>
<td>Proportion of ever-partnered women and girls (aged 15-49) subjected to physical and/or sexual violence by a current or former intimate partner, in the</td>
<td>Immediate</td>
<td>Local</td>
<td>Population</td>
<td>Structural Driver/Exposure</td>
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<tr>
<td>5.2.1</td>
<td></td>
<td></td>
<td></td>
<td>Regional</td>
<td>Service Environment</td>
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<td>Target</td>
<td>Objective</td>
<td>Proposed Indicator</td>
<td>Timeframe (I M L)</td>
<td>Governance: (LRN)</td>
<td>Status: (P S E)</td>
<td>Type: (SBM)</td>
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<td>Immediate</td>
<td>LRN</td>
<td>P</td>
<td>B/E</td>
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<tr>
<td>5.2.2</td>
<td></td>
<td>Proportion of</td>
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<tr>
<td></td>
<td></td>
<td>women and girls (aged 15-49) subjected to sexual violence by persons other than an intimate partner, since age 15</td>
<td>Medium</td>
<td>LRN</td>
<td>P</td>
<td>B/E</td>
</tr>
<tr>
<td>5.3</td>
<td>Eliminate all harmful practices, such as early and forced marriage and female genital mutilation</td>
<td>Percentage of women aged 20-24 who were married or in a union before age 18 (i.e. child marriage)</td>
<td>Medium</td>
<td>LRN</td>
<td>P</td>
<td>E</td>
</tr>
<tr>
<td>5.3.1</td>
<td>Percentage of girls and women aged 15-49 years who have undergone FGM/C by age group (for relevant</td>
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<tr>
<td>5.3.2</td>
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<tr>
<td>Target</td>
<td>Objective</td>
<td>Proposed Indicator</td>
<td>Timeframe (I M L)</td>
<td>Governance: (L R N)</td>
<td>Status: (P S E)</td>
<td>Type: (S B M)</td>
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<td></td>
<td></td>
<td></td>
<td>Immediate Medium Term Long Term</td>
<td>Local Regional National</td>
<td>Population Service Environment</td>
<td>Structural Driver Behaviour/Exposure Medical Condition</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Immediate LRN P E B/E</td>
<td>Note: countries only)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Goal 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels.

16.1 Significantly reduce all forms of violence and related deaths everywhere

16.1.1 Number of victims of intentional homicide by age, sex, mechanism and where possible type of perpetrator, per 100,000 population immediate LRN P B/E

16.1.2 *This indicator is still under discussion – Grey*

16.2 End abuse, exploitations, trafficking and all forms of violence against and torture of children

16.2.1 Percentage of children aged medium LRN P B/E
<table>
<thead>
<tr>
<th>Target</th>
<th>Objective</th>
<th>Proposed Indicator</th>
<th>Timeframe (I M L)</th>
<th>Governance: (L R N)</th>
<th>Status: (P S E)</th>
<th>Type: (S B M)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Immediate Medium Term Long Term</td>
<td>Local Regional National</td>
<td>Population Service Environment</td>
<td>Structural Driver Behaviour/Exposure Medical Condition</td>
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<td></td>
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<td></td>
<td>immediate LRN P E</td>
<td>LS B/E</td>
<td></td>
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<tr>
<td>16.2.2</td>
<td></td>
<td>Number of detected and non-detected victims of human trafficking per 100,000; by sex, age and form of exploitation</td>
<td></td>
<td>LRN</td>
<td>PE</td>
<td>SB/E</td>
</tr>
<tr>
<td>16.3</td>
<td></td>
<td>Percentage of young women and men aged 18-24 years who experienced sexual violence by age 18</td>
<td>Long Term LRN</td>
<td>PE</td>
<td>B/E</td>
<td></td>
</tr>
</tbody>
</table>

Additional

*This indicator is still under discussion* - Grey

16.3.1

*This indicator is still under discussion* - Grey

Percentage of victims of violence in the previous 12 Immediate LRN PE SB/E
<table>
<thead>
<tr>
<th>Target</th>
<th>Objective</th>
<th>Proposed Indicator</th>
<th>Timeframe (I M L)</th>
<th>Governance: (LRN) Local Regional National</th>
<th>Status: (P S E) Population Service Environment</th>
<th>Type: (SBM) Structural Driver Behaviour/Exposure Medical Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>16.3.2</td>
<td>By 2030, significantly reduce illicit financial and arms flows, strengthen the recovery and return of stolen assets and combat all forms of organized crime</td>
<td>Unsentenced detainees as a percentage of the overall prison population</td>
<td>Immediate</td>
<td>LRN</td>
<td>P S E</td>
<td>S B/E</td>
</tr>
<tr>
<td>16.4</td>
<td>This indicator is still under discussion - Grey</td>
<td>Total value of inward and outward illicit financial flows (in current US $)</td>
<td>Immediate</td>
<td>RN</td>
<td>E</td>
<td>S</td>
</tr>
<tr>
<td>Target</td>
<td>Objective</td>
<td>Proposed Indicator</td>
<td>Timeframe (I M L)</td>
<td>Governance: (LRN) Local Regional National</td>
<td>Status: (P S E) Population Service Environment</td>
<td>Type: (SBM) Structural Driver Behaviour/Exposure Medical Condition</td>
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<tr>
<td>16.4.2</td>
<td>This indicator is still under discussion - Green</td>
<td>Percentage of seized and collected firearms that are recorded and traced, in accordance with international standards and legal instruments</td>
<td>Immediate</td>
<td>LRN</td>
<td>E</td>
<td>S</td>
</tr>
<tr>
<td>16.7</td>
<td>Ensure responsive, inclusive, participatory and representative decision-making at all levels</td>
<td>Percentage of small arms marked and recorded at the time of import in accordance with international standards</td>
<td>Immediate</td>
<td>N</td>
<td>E</td>
<td>S</td>
</tr>
<tr>
<td>16.7.1</td>
<td>Proportions of</td>
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positions (by age, sex, disability and population groups) in public institutions (national and local legislatures, public service, and judiciary) compared to national distributions

16.10 Ensure public access to information and protect fundamental freedoms, in accordance with national legislation and international agreements

This indicator is still under discussion - Grey

Number of verified cases of killing, kidnapping, enforced disappearance, arbitrary detention and torture of journalists, associated

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<td>media personnel, trade unionists and human rights advocates in the previous 12 months</td>
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<td>16.a.</td>
<td>Strengthen relevant national institutions, including through international cooperation, for building capacity at all levels, in particular in developing countries, to prevent violence and combat terrorism and crime</td>
<td>Percentage of victims who report physical and/or sexual crime to law enforcement agencies during the past 12 months Disaggregated by age, sex, region and</td>
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<td>16.b.</td>
<td>Promote and enforce non-discriminatory laws and policies for sustainable development</td>
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<td>16.b.1</td>
<td>Percentage of population having personally felt discriminated against or harassed within the last 12 months on the basis of a ground of discrimination prohibited under international human rights law. Disaggregate by age, sex, region and</td>
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population group
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References:


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