Using Science to Prevent Violence

SCALE OF PROBLEM
Human Cost
• 1.6 million people are killed due to violence each year; half are suicides; a third are homicides; a tenth are victims of war
• Violence kills more than 4,000 people a day, as many as tuberculosis, and more than the 3,500 who die of malaria every day
• Millions more are injured and psychologically scarred, often with life-long consequences

Economic Cost
Violence costs economies billions of dollars each year in direct health, legal, and welfare costs and in indirect costs due to lost productivity and opportunities.

DEFINITION OF VIOLENCE
“The intentional use of force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment or deprivation.”

A SCIENTIFIC APPROACH TO PREVENTING VIOLENCE
Public health focuses on keeping whole populations well. Using an interdisciplinary and evidence-based approach, public health prevents violence in four steps:

1. Collect data on the nature, magnitude, distribution, and consequences of violence
2. Identify risk and protective factors for and underlying causes of violence
3. Design interventions that target the risk and protective factors and underlying causes; evaluate effectiveness
4. Implement effective programs on a large scale in a variety of settings

FRAMEWORK FOR PREVENTING VIOLENCE
Programs work at each level: individual, relationship, community, and society.
<table>
<thead>
<tr>
<th>TYPE OF VIOLENCE</th>
<th>RISK FACTORS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-directed</td>
<td>Experiencing violence as a child, mental disorders, unemployment, lack of social support and sense of isolation</td>
</tr>
<tr>
<td>Child maltreatment</td>
<td>Violence in the home, prior history of abuse, low social capital, poverty</td>
</tr>
<tr>
<td>Youth violence</td>
<td>Hyperactivity/impulsivity, history of being abused, poor parenting and lack of parent-child attachment, easy access to alcohol, illicit drugs, guns, weak social protection policies, high levels of economic and social inequality</td>
</tr>
<tr>
<td>Intimate partner</td>
<td>Witnessing or experiencing violence as a child, alcohol use, marital conflict and instability, poverty, low social capital, unequal gender norms</td>
</tr>
<tr>
<td>violence</td>
<td></td>
</tr>
<tr>
<td>Sexual violence</td>
<td>Alcohol and drug use; holding attitudes and beliefs supportive of sexual violence (including coercive sexual fantasies); impulsive, anti-social and hostile behavior towards women; associating with sexually aggressive peers; having been sexually abused as a child, growing up in a family characterized by physical violence, little emotional support, and few economic resources</td>
</tr>
<tr>
<td>Abuse of the elderly</td>
<td>People who abuse more likely to be physically aggressive, use alcohol, living with caregiver, dependency between elders and young, social isolation, rapid social and economic decline</td>
</tr>
<tr>
<td>Collective violence</td>
<td>Lack of democratic processes, unequal access to power, unequal distribution of natural and other resources, inequality between groups, ethnic conflict, availability of small arms, rapid demographic and social change</td>
</tr>
</tbody>
</table>

COMMON RISK FACTORS LINK DIFFERENT FORMS OF VIOLENCE
Some factors are shared among the forms of violence. These include household poverty, parental loss, crime, alcohol or substance abuse, and a history of family violence. Poor individuals and societies are at greater risk for violence. However, it’s not the poverty itself, but factors associated with poverty, such as poor housing, lack of education, and unemployment that are root causes of violence. Targeting these common risk factors can prevent multiple types of violence.

PREVENTION PROGRAMS
Risk factors for violence can be changed through well-designed interventions. For example, home visitation programs aimed at improving parenting skills can prevent child maltreatment. Few population-based interventions have been rigorously implemented and evaluated, but success has been shown in these examples:

- homicide prevention programs in Australia, Brazil, Colombia, and the USA
- suicide prevention in Australia, England, Samoa, and the USA
- child maltreatment prevention in Australia, Canada, and the USA
- intimate partner violence prevention in South Africa and the USA
- youth violence prevention in Australia, the United Kingdom, and the USA

An unmet need exists for more rigorously evaluated programs. Investing in prevention is better than waiting for crime and violence to occur and then reacting to the consequences.

RECOMMENDATIONS FROM THE WORLD HEALTH ORGANIZATION'S WORLD REPORT ON VIOLENCE AND HEALTH
- Create and implement national action plans for violence prevention
- Enhance capacity to collect good data; develop international standards
- Define priorities for research and support them
- Promote primary prevention of all forms of violence, which could include: prenatal care for mothers, training in good parenting practices, improvements in urban infrastructure, measures to reduce firearm injuries, and media campaigns to change attitudes, behaviors, and social norms
- Strengthen responses for victims of violence
- Integrate violence prevention into social and educational policies
- Increase collaboration and exchange of information on violence prevention
- Promote and monitor adherence to international treaties
- Respond to the global drug and arms trade

SUPPORTING SCIENCE-BASED, PUBLIC HEALTH APPROACHES
1. Recognize that violence is complex and that prevention efforts demand contributions from a range of sectors and disciplines and from all political levels—local, regional and national
2. Recognize the role in prevention for each sector: criminal justice, public health, education, social welfare, and labor
3. Recognize that the consequences of violence extend well beyond the acute event itself and affect persons across the life span
4. Support research and rigorous evaluation of violence prevention programs in a variety of settings
"...safety and security don’t just happen; they are the result of collective consensus and public investment."


For further information and to download the report, visit [www.who.int/violence_injury_prevention/violence/en](http://www.who.int/violence_injury_prevention/violence/en).

Fran Henry, Coordinator
Global Violence Prevention
P.O. Box 152
Cummington, MA 01026
franceshenry@earthlink.net

**GLOBAL VIOLENCE PREVENTION** is a network of U.S. researchers and practitioners of violence prevention, working to bring resources to low-income and middle-income countries for evidence-based prevention of self-directed, interpersonal, and collective violence.