PART 2: GBV DEFINITION, PREVALENCE, AND GLOBAL STATISTICS

Defining GBV and showing its prevalence through global statistics raise vital awareness about several important issues: what it is and how to recognize it; the scope of the problem; whom it affects; how it affects workers and workplace productivity; and its costs to households and nations.

Knowing what constitutes work-related GBV and the urgency of the problem can help economic growth project implementers, employers, managers, and workers advocate for reducing GBV and increase accountability for safer, more productive workplaces and communities. In the world of work, multiple types of GBV significantly affect individuals and workplaces, as well as wider economic development objectives.

Specific forms of GBV that impact workers and the workplace include:

- Domestic and IPV
- Gender-based workplace discrimination, stigmatization, and social exclusion
- Sexual harassment and intimidation
- Sexual exploitation and abuse
- Trafficking for forced labor and sex work within and across borders.

According to the International Labor Organization (ILO 2011), high-risk groups comprise workers in formal and informal economies and include:

- Office and factory workers
- Day laborers
- Dependent family workers
- Women farmers

U.S. GOVERNMENT’S DEFINITION OF GBV

Violence that is directed at an individual based on his or her biological sex, gender identity, or perceived adherence to socially defined norms of masculinity and femininity. It includes physical, sexual, and psychological abuse; threats; coercion; arbitrary deprivation of liberty; and economic deprivation, whether occurring in public or private life. GBV takes on many forms and can occur throughout the life cycle. Types of gender-based violence can include female infanticide; child sexual abuse; sex trafficking and forced labor; sexual coercion and abuse; neglect; domestic violence; elder abuse; and harmful traditional practices such as early and forced marriage, “honor” killings, and female genital mutilation/cutting.

Both Women and Men Experience GBV

Women and girls are the most at risk and most affected by GBV. Consequently, the terms “violence against women” and “gender-based violence” are often used interchangeably. But boys and men can also experience GBV, as can sexual and gender minorities. Regardless of the target, GBV is rooted in structural inequalities between men and women and is characterized by the use and abuse of physical, emotional, or financial power and control.

• Child laborers
• Forced and bonded laborers
• Migrant workers
• Domestic workers
• Health services workers
• Sex workers.

Women are often overrepresented in temporary, lower paying, and lower status jobs with little decision-making or bargaining power over the terms and conditions of their labor. Risks of work-related GBV may be higher in low-wage industries where women workers predominate and hold few managerial positions, such as certain agricultural commodities or garment production. Lack of bargaining power and labor policies leave millions of workers, particularly women, unprotected and without recourse in the face of gender-based discrimination and workplace violence. Further, workers who do not conform to stereotypical social norms for what a “man” or a “woman” should be or do for their livelihood, or who practice diverse gendered behaviors, can become targets of work-related discrimination, stigma, harassment, exploitation, and abuse.

In conflict and crisis-affected contexts, forcibly displaced persons—including internally displaced persons (IDP), refugees, and those affected by disasters, famine, or political crisis—face existing and increased risks of GBV in their efforts to earn a living. A 2011 United Nations High Commission for Refugees (2011) study of IDP camps in Haiti found that women in all five camps were exploited sexually to obtain cash for basic necessities such as food. “Transactional sex” in situations of crisis and deprivation constitutes a form of economic, psychological, physical, and sexual GBV. IDP attempting to return to previously crisis-affected areas for recovery and longer-term development may also be at heightened risks of GBV in all spheres of life, including at work.

**PREVALENCE AND GBV STATISTICS**

The global prevalence of GBV is staggering. Women are affected disproportionately. Available statistics at national, multinational, and global levels set the context and make a compelling case that cannot be ignored. Economic growth projects must work to prevent and respond to GBV to ensure that it does not undermine economic outcomes and human development.
Available evidence shows that IPV and non-partner sexual violence are highly prevalent and documented forms of GBV that women face around the world. IPV and non-partner sexual violence affect workers, workplaces and productivity outside the home, through lost days of work, lost wages, medical expenses, and pain and suffering. Because of the widespread prevalence of IPV and of non-partner sexual violence, and their effects on workers and workplace productivity, several case examples and references in the Toolkit relate to forms of IPV or non-partner sexual violence, specifically against women.

Forms of IPV and non-partner sexual violence—All affect the world of work

IPV refers to any behavior within an intimate relationship that causes physical, psychological, or sexual harm to those in the relationship. Non-partner sexual violence refers to any experience of being forced to perform any sexual act that a person did not want to by someone other than his or her partner. All forms of IPV and non-partner sexual violence affect workers and can take place within the workplace. One of the most prevalent forms in the workplace is sexual harassment.

Examples of IPV and non-partner sexual violence that affect the world of work include:

- **Emotional (psychological) abuse**, such as sexual harassment, insults, belittling, constant humiliation, intimidation (e.g., destroying things), threats of harm, or threats to take away children;
- **Controlling behaviors**, including isolating a person from family and friends; monitoring their movements; and restricting access to financial resources, employment, education, or medical care;
- **Acts of physical violence**, such as slapping, hitting, kicking, and beating;
- **Sexual violence**, including forced sexual intercourse and other forms of sexual coercion.

While IPV and non-partner sexual violence prevalence are broadly documented, all forms of GBV remain under-researched in and outside of the world of work. Sexual harassment is a widespread form of workplace GBV, and yet substantial information gaps persist across industries and countries.
Documentation of GBV in the workplace against men remains an under-researched area as well, and an information gap. Data gaps must be addressed on gender-based labor discrimination, stigma, harassment, intimidation, exploitation and abuse, and labor and sex trafficking. More research is needed on all forms of GBV that affect work and the workplace.

Recent research and documentation of workplace GBV against women are as eye opening as global GBV prevalence statistics, which show that women are disproportionately affected. In 2011, the Palestinian Central Bureau of Statistics worked in partnership with the International Labor Organization (ILO) and the Institute of Women Studies at Birzeit University to conduct a survey in the occupied Palestinian territory on GBV in the workplace. The study focused on three types of workplace violence:

- Gender harassment,
- Unwanted sexual attention, and
- Sexual coercion.

The survey found that victims of workplace GBV were predominantly young women. Of the 853 women who responded to the survey, 29 percent of those aged 25–29, and 18 percent of those aged 24 and under, reported having experienced one or more of the three forms of violence at work over the previous 12 months. A further 32 percent of women aged 30–40 interviewed also said they had experienced one or more forms of workplace GBV in the last year. Women of all ages are at risk of GBV in the workplace, whether because of the nature of their jobs or overall social status in society.

SEXUAL HARASSMENT IN THE WORKPLACE

Sexual harassment is a global problem. Between 15 percent and 30 percent of working women questioned in surveys conducted in industrialized countries say they have been subjected to frequent, serious sexual harassment—unwanted touching, pinching, offensive remarks, and unwelcome requests for sexual favors. These offensive and demeaning experiences often result in emotional and physical stress and related illnesses, reducing morale and productivity.

“The full picture is incomplete because a large percentage of cases go unreported in every country.” [Dr. Mary] Chinery-Hesse says.

Some studies reveal that sexual harassment caused between 6 percent and 8 percent of women surveyed to change their jobs. According to the ILO, the proportion of one out of 12 women being forced out of a job, after being sexually harassed, could apply to many countries worldwide.

WHY DOES GBV MATTER TO ECONOMIC GROWTH PROJECTS?

All forms of GBV affecting the world of work both reflect and reinforce social, economic, and political gender inequalities, with unequal outcomes in labor markets and for national economies (Glenn, Melis, and Withers 2009). According to an ILO (2011) report, “Gender-based violence not only causes pain and suffering but also devastates families, undermines workplace productivity, diminishes national competitiveness, and stalls development.”

A significant proportion of women workers participating in any economic growth project are likely to have experienced one or more forms of GBV in their lives, in and beyond the world of work. Heise, Ellsberg, and Gottemoeller (2000) estimated that one out of three women has experienced physical, emotional, or sexual violence in an intimate relationship. In 48 population-based surveys from around the world, some 10–69 percent of women reported being physically assaulted by an intimate male partner at some point in their lives (WHO 2002). It is the case that many women workers manage risks and incidences of IPV, non-partner sexual violence, and all forms of GBV at home and in the workplace simultaneously.

HOW COMMON IS IPV?

A growing number of population-based surveys have measured the prevalence of IPV, most notably the WHO multi-country study on women’s health and domestic VAW (Heise, Ellsberg, and Gottemoeller 1999). The study collected data on IPV from more than 24,000 women in 10 countries, representing diverse cultural, geographical, and urban rural settings. It confirmed that IPV is widespread in all its target countries. Among women who had ever been in an intimate partnership:

- 13–61 percent reported ever having experienced physical violence by a partner
- 4–49 percent reported having experienced severe physical violence by a partner
- 6–59 percent reported sexual violence by a partner at some point in their lives
- 20–75 percent reported experiencing one emotionally abusive act, or more, from a partner in their lifetime.

In addition, a USAID-funded comparative analysis of Demographic and Health Survey data from nine countries found that the percentage of ever-partnered women who reported experiencing any physical or sexual violence by their current or most recent husband or cohabiting partner ranged from 18 percent in Cambodia to 48 percent in Zambia for physical violence, and 4–17 percent for sexual violence. In a 10-country analysis of these survey data, physical or sexual IPV reported by currently married women ranged from 17 percent in the Dominican Republic to 75 percent in Bangladesh. Similar ranges have been reported for other multi-country studies.


Women are often victims of violence at home and at work. GBV does not only originate or recur in the home, rather it is perpetuated across all systems in which social norms ascribe what is considered correct behavior for a woman at home, at work, in the community or elsewhere. At work, there are many accounts of women not reporting violence at work for fear of stigma and worsening violence perpetrated against them in the home or community. Shame, fear of ostracization, isolation, and social norms of blaming the victim, compound the effects of GBV and contribute to under-reporting, inadequate statistics, and a lack of needed psychological, medical and legal response services for GBV survivors.
The workplace has become an important site of intervention to reduce GBV and its costly effects not only on productivity, but also on individuals, families, and societies. As new forms of paid labor challenge stereotypical gender norms related to “women’s” versus “men’s” work, new opportunities for women’s economic advancement and development open up. This brings both benefits and risks, depending on the context and availability of services designed to prevent and respond to GBV. Factors related to globalization; the rise of insecure, flexible, and temporary forms of labor; deepening economic inequalities; food insecurity; health and political crises; and conflict—all escalate risks and prevalence of GBV across many contexts.

Also in recent decades, the rise in the number of single female-headed households and increasing feminization of poverty leave many women-headed households among the poorest of the poor (Chant 2007). Increased poverty for single female household heads, combined with a lack of adequate labor protections, heighten their risks of GBV, lost wages, and health problems while further depleting economic assets. Single female-headed households often have great caregiving burdens to juggle along with being the primary breadwinner. Further, where there are small children, the ill, or the elderly with no earnings, having a single and lesser-paid household head increases risks of economic collapse of the entire household. Taken together, a range of factors heighten risks and costs of GBV among economically, socially, and politically marginalized groups, with domestic VAW being most persistently widespread across low-, middle-, and high-income countries and all cultures.

In low- and middle-income countries, women’s economic empowerment has had mixed effects on their risks of GBV. Women’s secondary school completion and higher education, control over productive assets, and land ownership have been found to offer some protection. Several studies have forwarded evidence that women’s asset ownership and control may protect them from experiencing IPV (Bhatla, Chakraborty, and Duvvury 2006; Bhatla, Duvvury, and Chakraborty 2011; Jacobs, K. et al, 2011; Kes, Jacobs and Namy 2011; Panda and Agarwal 2005; Swaminathan, Walker, and Rugadya 2008). A 2014 mixed methods study in Nicaragua and Tanzania examined women’s land ownership, power in an intimate relationships, and experiences of psychological and physical violence (Grabe, Grose and Dutt 2014). The study found that women who owned land exercised greater power in their relationships and were less likely to experience violence than women who did not own land (ibid.). Further, a Peru land titling policy innovation in the 1990s helped contribute to women’s economic empowerment and greater gender equality (Malhotra, A., J. Schulte, P. Patel, and P. Petesch 2009). The policy required mandatory joint land titling for married couples, which led to improved employment opportunities and access to credit provided by the government (ibid.), which in turn may have improved women’s economic fallback position and reduced their risks of violence.

Women’s increased income generation, greater financial autonomy and asset ownership have shown mixed effects on violence against women. Some studies have found that violence against women may increase initially, but then reduce as a result of women’s participation in economic empowerment programs or groups as household stresses decrease when women’s incomes increase (Schuler et al 1996; Hadi 2005). Some research has suggested that women’s involvement in skills training and employment programs help reduce violence against them, as men see benefits of women’s participation (Ahmed 2005). Women’s economic advancement and asset accumulation can bring either protective effects against IPV and non-partner sexual violence, or increased women’s risks of violence, depending on contextual factors, such as dominant gender attitudes restricting women’s involvement in paid work or women managing financial and productive resources (Vyas and Watts 2009). Using logistic regression of adjusted relative risks, a multi-site survey on domestic VAW in India identified gender gaps in
employment, men’s drunkenness, and harassment as risk factors for GBV (International Center for Research on Women and the Center for Development and Population Activities 2000). Protective factors identified included social support, and labor and timesaving appliances in the household (ibid.).

It is important to remember the multiple effects of GBV on workers, productivity, and economic growth project outcomes. Projects can help reduce or unintentionally increase existing or new GBV risks; they can play a critical role in addressing GBV in and related to the workplace. Any economic growth project must take into account the dual effects that GBV can have both on participants and on desired project outcomes.

COSTS OF GBV TO INDIVIDUALS, HOUSEHOLDS, WORKPLACES, AND NATIONS

All forms of violence are costly and negatively impact economic growth and poverty reduction efforts (WHO 2004). Among the many forms of GBV that affect the workplace and worker productivity, domestic VAW and IPV have been the subject of extensive efforts to measure costs to individuals, households, and nations. Such studies have shown that the costs of IPV place an enormous burden on individuals and families, with ripple effects throughout society. Survivors, who are disproportionately women, suffer isolation, inability to work, loss of wages, lack of participation in daily activities, and limited ability to care for themselves and their dependents.

Research specifically on the economic costs of VAW has identified four categories of cost: (1) direct and tangible, (2) indirect and tangible, (3) direct and intangible, and (4) indirect and intangible (Table 1).
### TABLE 1. FOUR CATEGORIES OF COSTS OF VIOLENCE AGAINST WOMEN

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<thead>
<tr>
<th>Category</th>
<th>Description</th>
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<tr>
<td>Direct tangible</td>
<td>These costs are actual expenses paid, representing real money spent in response to GBV. Examples are taxi fare to a hospital and salaries for staff in a safe house or shelter. These costs can be estimated through measuring the goods and services consumed and by multiplying their unit cost.</td>
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<tr>
<td>Indirect tangible</td>
<td>These costs have monetary value in the economy but are measured as a loss of potential. Examples are lower earnings and profits resulting from reduced productivity. These indirect costs are also measurable, although they involve estimating opportunity costs rather than actual expenditures. Lost personal income, for example, can be estimated by measuring lost time at work and multiplying by an appropriate wage rate.</td>
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<tr>
<td>Direct intangible</td>
<td>These costs result directly from a GBV incident but have no monetary value. Examples are pain and suffering, and the emotional loss of a loved one through a violent death. These costs may be approximated by quality or value of life measures, although there is some debate as to whether or not it is appropriate to include these costs when measuring the economic costs of VAW. Those who support including direct, intangible costs seek to quantify, for example, the value of child or elder caregiving that a lost household member may have once provided to support a household member working and earning outside the home.</td>
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<tr>
<td>Indirect intangible</td>
<td>These costs result indirectly from GBV, and may have no direct monetary value. Examples are the negative psychological effects on children who witness GBV. These effects cannot be measured or estimated numerically.</td>
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The International Center for Research on Women (ICRW) recommended that the costs of VAW and IPV in developing countries need to be collected at household and community levels, and should focus on monetary costs (Duvvury, Grown, and Redner 2004). An ICRW multi-site household survey funded by USAID on domestic violence in India found that women lost on average seven workdays after an incident of domestic violence (ICRW and the Center for Development and Population Activities 2000, p. 26). The study also found that domestic violence had an impact on a husband’s ability to work, with 42 percent of women who reported injury also stated that their husband missed workdays after a domestic violence incident. In terms of income loss from waged work, the average cost per domestic violence incident per household was Rs759.30. This represents an estimated nearly 100 percent of a woman worker’s average monthly income1 in day-labor households in rural and urban slum communities.

A study (Siddique 2011) by USAID and CARE Bangladesh found the total cost of domestic VAW in Bangladesh—including direct monetary costs to victims, perpetrators, and families, along with costs to the state and to non-state actors—to be 12.54 percent of the total government budget expenditure and 2.10 percent of the Gross Domestic Product (GDP). In contrast, the Government of Bangladesh’s expenditure for programs designed to combat VAW for the 2010 fiscal year was only about 0.12 percent of total government budget and about 0.02 percent of the estimated GDP for that year (ibid.). Data from this study indicate that the costs of lost workdays, income loss, and increased health expenses disproportionately fall upon the shoulders of individuals and families (Table 2). The state, CSOs, and the private sector can and should provide more protective services to prevent and respond to VAW.

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1. Ibid., p. 26. The study cited women’s average wages at Rs31.7 per day, or Rs 760.80 per month for a six-day workweek.
Developing countries are not alone in bearing these enormous costs. Annual costs of IPV have been calculated at US $5.8 billion in the United States in 2003 and GBP 22.9 billion in England and Wales in 2004 (Walby 2004). Costs to the Australian national economy have been estimated at AUD 8.1 billion (Access Economics, Ltd. 2004). The UN Secretary General’s 2005 study on VAW estimated that, when calculated across 13 countries (Australia, Bangladesh, Canada, Chile, Finland, Jamaica, Nicaragua, Netherlands, New Zealand, Spain, Switzerland, United Kingdom, and United States), monetary costs amounted to US $50 billion per year.

The costs of VAW and IPV to nations, households, and individuals are staggering and threaten social and economic development aims. It can be extrapolated that, if estimated, the costs of all forms of workplace-related GBV only exponentially increase monetary burdens on workers, workplaces, and national economies. The toll violence takes on women’s health exceeds that of malaria and traffic accidents combined (United Nations Millennium Project 2005). Costs to nations span health expenditures, demands on justice and law enforcement, education systems, and student achievement, as well as current and future worker income and productivity (United Nations Population Fund 2005).

Taken together, compelling evidence from costing studies shows that myriad forms of GBV and VAW cannot be ignored if economic growth projects are to achieve their goals. GBV in and outside the world of work results in social and economic inequalities worldwide and perpetuates harmful stereotypes about women’s capacities to fully participate in the workplace.

**GBV PREVENTION AND RESPONSE ARE VITAL TO ECONOMIC GROWTH AND DEVELOPMENT**

Taken together, evidence on the costs of GBV, combined with research on the beneficial effects of women’s economic advancement, shows that GBV prevention and response are vital to economic growth and development at macro- and micro-levels. Recent research from the International Monetary Fund has shown that “there is ample evidence that when women are able to develop their full labor market potential, there can be significant macroeconomic gains” (Elborgh-Woytek et al. 2013). Data

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3. Figure includes direct and indirect individual, employer, and state expenses related to violence.
from 2012 from the ILO have enabled researchers to estimate “that of the 865 million women worldwide who have the potential to contribute more fully to their national economies, 812 million live in emerging and developing nations” (ibid.). Raising female employment to male levels could potentially increase GDP at estimates of between 34 percent (Egypt) and 9 percent (Japan) (Aguirre et al. 2012), and yet GBV unaddressed directly threatens achievement of these projected gains. Efforts to invest in women’s economic advancement and reduce GBV stand to benefit individuals, households, and society. Research has shown that when women earn and control economic resources, they contribute a higher percentage of their income to the household and children than do men, thereby contributing to a healthy and productive next generation (Bruce, Lloyd, and Leonard 1995; Wyss 1995). Women’s participation in economic development projects has been shown to have positive effects on health, violence reduction, social status, mobility, and income (Kabeer 2009a). Therefore, addressing GBV related to women’s work could help to support women’s economic advancement. Reducing all forms of work-related GBV—including gender-based discrimination and stigma, harassment and intimidation, exploitation and abuse, and labor and sex trafficking—is vital to healthy workers and productive workplaces. Increased safety, health, and productivity can drive local and national development, economic growth, and trade.