

# **The costs of violence**

## **Economic and personal dimensions of violence against women in Denmark**

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# Preface

Financial support from the Rockwool Foundation has made it possible for us to describe the costs to society of violence against women in Denmark, including personal costs to the individual woman exposed to violence.

**We are aware that ‘cost’ is used in market transactions, where cost indicates the amount** agreed on by a buyer and seller in the exchange of commodities. Violence against women is far from a commodity agreed on by victim and assailant, **it is a violation of women’s** basic human rights that must be combated, and, hence, the incentive for the project has been the interest of the Danish National Observatory on Violence, the National Council for the Unmarried Mother (Mødrehjælpen)) and the National Organization of shelters for battered women (LOKK) in obtaining information on the economic costs of violence as an element in the combat of the violence.

We would like to extend our special thanks to Police Chief Constable Jørn Bro, who has been responsible for the extensive and precise analysis of the costs to the judicial system, and who authored the corresponding chapter in this report.

The National Organization of Shelters for battered women (LOKK) has contributed with data on the cost of sheltering women at the shelters, and we wish to express our thanks for their cooperation.

A cross-disciplinary reference group with the participation of Torben Tranæs, the Rockwool Foundation, Mette Verner, the Danish School of Media and Journalism, Randi Theil **Nielsen, Women’s Council in Denmark, Kira West**, Mødrehjælpen, and Lene Johannesson and Mette Volsing, LOKK has made substantial contributions to the project.

Finally, we wish to extend our thanks to the Rockwool Foundation for financial support and useful sparring in the course of the project.

Henrik Brønnum-Hansen, Karin Helweg-Larsen, Jan Sørensen and Marie Kruse

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## Summary

This English summary presents the main results of a research project of which a number have been published in international articles, referred to in the reference list, and in a comprehensive Danish Report.

**The aim of the project ‘The Cost of Violence’ has been to give an evidence-based** assessment of the various types of costs of violence against women based on available data sources. The comprehensive Danish register-based data and data from population surveys carried out in 2000 and 2005 by the National Institute of Public Health enable us to identify a study population of women exposed to violence and a reference population of other Danish women not identified as victims of violence. For these two groups, we have gathered data on their socioeconomic conditions, contacts with the healthcare and selected labour market consequences.

We have calculated the costs to the judicial system related to police-reported violence against women on the basis of exact information on, among others, time consumption within the police, the prosecution and courts combined with specific salary and court imposts, as well as costs of imprisonment and court fees. Information on the costs of violence-**exposed women staying at women’s crisis** centers is based on shelter rates and number of stays per year. The costs to society also include the national budget for a number of initiatives started under the Danish national action plans to fight violence against women, 2002-2009. Estimates of the personal costs to violence-exposed women are included, but they depend greatly on a number of known and unknown psychosocial factors.

Victims of domestic violence are different, and the violence which has led to contact with the health services and/or reporting to the police is different from the violence reported in population surveys. Consequently, it is not possible to un-

**ambiguously describe ‘victims of violence’, and it is impossible accurately to assess** the impact of violence to the individual women in the form of pain and suffering, long-lasting health problems and social changes. But on the basis of our analyses we are able to present estimates that show the average impact on **women’s health**-related quality of life, years of healthy life lost and mortality.

Violence manifests itself in many ways; it hits women from diverse socioeconomic backgrounds and in various life situations. The impact of violence depends on a **large number of parameters, including the nature of the violence, the woman’s** relations with the assailant, support from others and the vulnerability of the individual woman, social networks as well as other psychosocial factors.

## Women exposed to violence; identification of violence victims

The study includes two different populations of violence-exposed women, identified on the basis of register-based data and self-reported data in the population surveys, respectively.

From register-based data we have identified a population of 20,482 different women aged 16-64 years, who in the period 2002-2005 reported violence to the police, died as a result of violence, and/or contacted an emergency department following an assault. On average, 7,500 women are annually registered in the Victims Register of the Criminal Statistics because of police-reported violence, in the Cause of Death Register for deaths resulting from violence and/or in the Danish National Patient Register for hospital contact due to violence. The majority of victims of violence, who have stay in shelters, also have reported to the police and/or have contacted an emergency department, and, thus, are included in the register-based population of victims.

The nationwide Danish Health and Morbidity Surveys 2000 and 2005 included questions about violence exposure within the last 12 months. A total of 323 different **women replied 'Yes' to this question, and they are included in this study as** a population of women with self-reported violence exposure.

From the register-based data and population surveys it is possible to analyse whether the two groups of violence exposed women have special characteristics, 'risk factors', that are connected to violence exposure.

### The extent of violence against women

In the period 2002-2006, there were annually between 8 and 22 deaths among women as a direct consequence of domestic violence, out of which approximately half resulted from assault by a present or former partner.

Between 2,900 and 3,270 women annually reported one or more incidences of physical violence to the police, and between 4,700 and 5,000 went to an emergency department on one or more occasions because of violence exposure.

Nearly one in three women who reported violence to the police also contacted an emergency department as a result of violence exposure, and just over half of the women with emergency department contact due to violence reported the violence to the police. Register-based data make it possible to calculate that approximately 7,500 women are each year exposed to physical violence. This means that annually four in 1,000 women experience violence.

In the nationwide Danish Health and Morbidity Surveys 2000 and 2005, nearly four in 1,000 women reported having been exposed to physical violence in the last 12 months. Roughly estimated this means that each year approximately 70,000 women are exposed to violence on one or several occasions, that is, 10 times as many as calculated from register-based data.

Each year, nearly 2,000 women stay at **women's crisis centers because of exposure** to domestic violence, in 2009 totally 1,880, of which some may be repeats. More than half of these women report the violence to the police, and an unknown proportion are also in contact with an emergency department in connection with the violence exposure.

The vast majority of violence-exposed women are aged 16-64 years, although older women are also exposed. The risk of violence is greater for women who are under 30 years of age, unemployed or receiving a disability pension, living in a large city, single/divorced and of non-Danish origin.

The population surveys show a relationship between alcohol consumption, low decision latitude at work, marital and earlier family-related problems, psychological problems and violence exposure.

## Domestic violence (partner violence)

Based on information in the national health surveys in about 40 pct. of cases of violence against women, the offender was a current or former partner or boyfriend.

Among cases of violence reported to the police, less than 30 pct. could be identified as partner violence, and among contacts to emergency departments less than 40 pct. might be due to partner violence.

## The cost of violence

Violence against women costs the Danish society approximately DKK ½ billion (about 70 mio. Euro) each year. This corresponds to an annual cost to society of approximately DKK 65,000 per violence-stricken women, who has either reported the violence to the police or contacted an emergency department because of violence. The annual costs are nearly DKK 280 (40 Euro) per women in the age group 16-64 years in the Danish population.

These costs primarily cover women who are exposed to violence which is brought to public knowledge through contact to crisis centers (shelters), emergency departments or by being reported to the police.

The stated costs relate, among others, to the health service, the police and the judicial system, to sheltering and counseling in crisis centers, and to short-term losses in societal production. They include costs related to national action plans and interventions to combat violence.

We have not included estimates of the potential costs of more women contacting crisis centers, reporting to the police or contacting the health service because of having been exposed to violence. As described, the occurrence of violence-exposed women is 10 times greater based on self-reported data in questionnaire surveys than on register-based data, however these women do not contact police, health services or shelters as a direct result of the exposure to violence.

### Personal costs

A precise cost price cannot be calculated for the personal price to be paid by **victims of violence, that is, the impact of violence on the individual woman's living conditions, quality of life and later vulnerability.** It depends, among others, on individual psychosocial factors, including existing vulnerability, power of resistance and social network.

But analyses show that victims of violence suffer a substantial loss of health-related quality of life and of expected healthy life years, which is not just due to the fact that violence victims seem to constitute a special socially vulnerable group. It is estimated that violence-stricken women can expect nearly three more years with long-standing, limiting illness compared to other women, and that their life expectancy is significantly shorter than that of women not exposed to violence.

Long-term costs to society as a result of premature death and loss of health-related quality of life are not included in the total costs of violence.

### Calculations of costs

Costs were calculated in 2009 prices and are gathered in the following table. In addition, an average cost per women per year has been calculated based on two different populations of 16-64-year-old women: **A)** The specific number of women that the individual cost component concerns; **B)** The total population of 7,500 violence-stricken women who annually report violence to the police and/or contact a hospital as a result of violence. The costs may be related to the number of 16-64-year-old women in the Danish population; in 2009, totally 1,762,710 women.

The total costs do not include the substantial funding support granted to research on violence against women in recent years, nor do they include the costs of government departments and local administration of transfers to shelters and other disbursements, which can be related to violence against women.

A national expenditure of approximately DKK 21 million per year covering public compensation to victims of violence is not included. This expenditure is a transfer of money to violence victims that does not result in any costs to society.

Cost components	Number of annual victims A	Annual costs mio.DKK. B	Costs DKK per concerned victim of vi- olence DKK A/B	Costs DKK per victim of vi- olence (identi- fied through register data) (N=7.500)	The basis for cost estimations
Health care contacts due to injury by violence	5.690	10,7	1.880	1.430	Based on data in National Patient Register identifying contacts due to violence and specific diagnose-related taxes (DRG)
Attributable health care costs	5.210	73,3	14.070	9.770	Population of victims compared to reference population. Specific diagnose-related taxes for hospital contacts, taxes for primary health care services and prizes for prescript medicine.
<b>Labour market</b>					Statistics Denmark: comparison between population of victims and non-victims adjusted by socioeconomic status and age
Income impact	3.600	63,8	17.720	8.500	
Production loss	2.225	30,7	13.800	4.090	
<b>Judicial system</b>				18.700	Based on exact figures on reported cases, personnel consumption per hour, salaries, court fees and costs of imprisonment
Police reported physical violence	3.500	118,0	33.700		
Police reported threats	3.900	13,0	3.330		
Domestic disputes	8.775	6,0	670		
Restrictions imposed by police	400	3,0	7.500		
<i>Police reported rape</i>	400	31,0	77.500		-
<b>Shelters</b>	1.800	146,9	81.600	19.590	Data registeret by central social services (servicestyrelsen)
<b>National Action Plans 2002-2008/9</b>		20,5		2.740	Evaluations of the national action plans by Rambøl-consultants
<b>Total annual costs <i>inclusive police reported rape</i></b>		<b>485,9 517</b>		<b>63.620</b>	

## Components of the cost estimates

The annual cost for sheltering and counseling at women's crisis centers (DKK 147 million) is the largest item and amounts to just over 30 percent of the total costs. In addition, a budget is granted annually on the basis of national action plans for specific activities pertaining to shelters, including the activities of the National Organisation of Shelters (LOKK), Grevinde Danner, the National Council for the Unmarried Mothers (Mødrehjælpen) and other organizations. These costs are included in the annual cost of approximately DKK 20 million for the national action plan, which is mainly granted from Satspuljemidler (designated national grant funds in the Finance Act).

The annual cost to the judicial system derived from police-reported threats and physical violence against women, domestic disputes and injunctions is calculated at approximately DKK 140 million, corresponding to nearly 30 percent of total costs, and it is, thus, the second largest total cost component. Of this, costs within the police comprise approximately 14 percent, costs within the police advocacy, for the defence and courts approximately 4 percent, and costs for imprisonment of persons sentenced for violence amount to approximately 60 percent. The remaining costs to the judicial system are related to the handling by the police of domestic disputes and injunction cases. The costs of police-reported rape and/or attempted rape are approximately DKK 31 million per year.

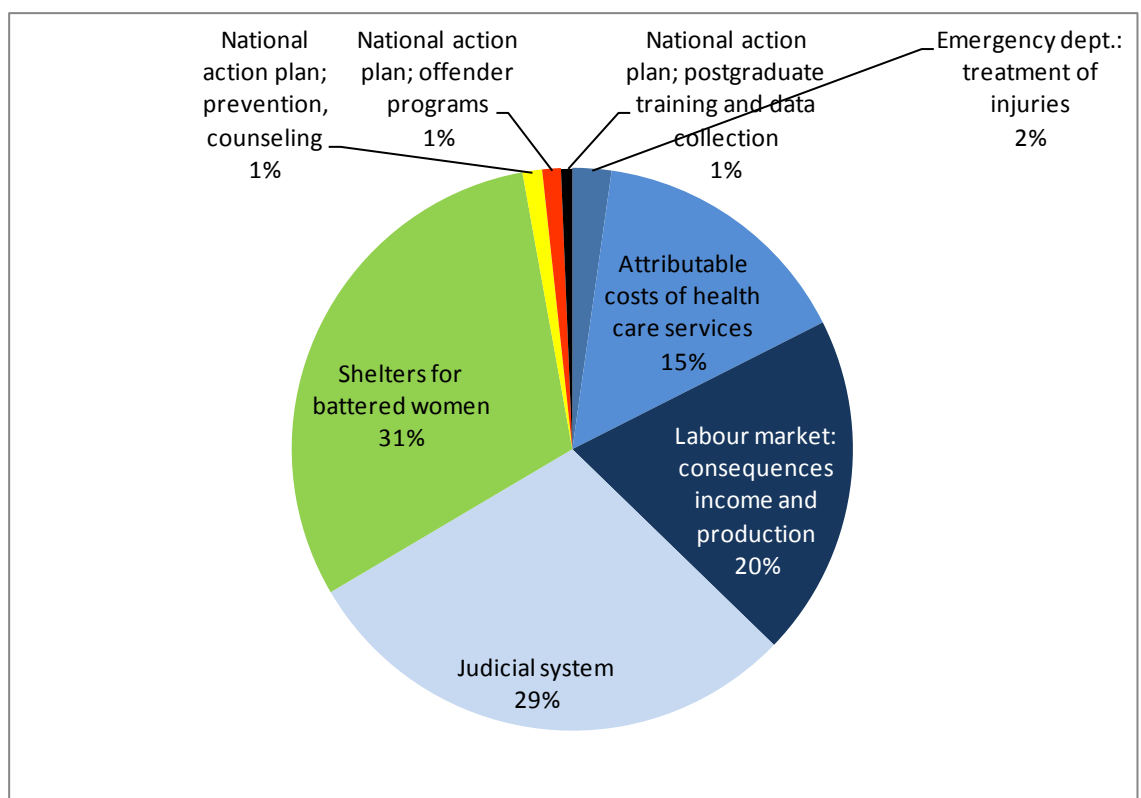
From a conservative estimate, the immediate cost to society of the production loss caused by violence against women is approximately DKK 95 million per year, corresponding to a little less than 20 percent of the total costs. It includes income impact and production loss measured on the basis of registered sickness absence.

Annual costs in the health service for the immediate treatment of injuries resulting from violent assaults add up to nearly DKK 11 million. In addition, victims of violence make more use of the services of the healthcare system than do other women. A comparison between the average total cost of contact to somatic and

psychiatric hospitals, district psychiatry, primary health service and prescription drugs incurred by women exposed to violence and other women shows that the additional cost of healthcare services provided to women exposed to violence is approximately DKK 73 million per year, meaning that the costs of the health service pertaining to violence against women can be estimated at around DKK 84 million (17 percent of total costs).

The costs of national action plans and interventions to combat violence have been conservatively estimated at around DKK 21 million annually in the period 2002-2008 (approximately 3 percent). This amount does not include grants for the prevention of violence against women within the jurisdictions of the Ministry of Social Affairs, the Ministry of Refugee, Immigration and Integration Affairs and the Ministry of Justice.

Fig. 1.1 Distribution of costs on the various components; Total 0.5 Billion DKK



*Note: The attributable/additional cost in the health service is the average greater cost of healthcare services provided to women exposed to violence compared to other women, , non-violence-exposed women. It includes all types of healthcare services: somatic and*

*psychiatric hospital contacts, contacts to the primary health services, district psychiatry and prescription drugs.*

### Costs, not included in the estimates

Besides these, quantified, costs violence generates costs that it has not been possible to account for in this analysis. These costs pertain, among others, to a number of social costs of municipal interventions, which are traditionally not assessed in a way that allows an analysis of their causes. Costs for the families involved, and especially children affected by a family member being exposed to violence, are not included. There is no doubt that these costs are considerable.

In addition, violence gives rise to a number of financial expenses, such as compensation payments and financial provision for those exposed to violence. But such expenses are not included in a social economic cost analysis, because the amounts are transferred between various groups in society and, as such, do not constitute an actual spending (only a modest cost related to administration), and they are therefore not considered as a social economic cost. For the national purse and the municipalities, however, these expenses are real enough, since part of the national/municipal budgets must be reserved for such financial transactions.

In this analysis we have calculated the national costs for compensation to victims of violence at approximately DKK 21 million per year, and the annual costs for sickness absence at approximately DKK 30 million.

## Personal costs

Violence-exposed women differ from other (non-violence-exposed) women by having a reduced health-related quality of life, reduced life expectancy, and by their life expectancy usually being more burdened by self-rated poor health and long-standing, limiting illness.

Consequently, violence may be a significant risk factor for mental and physical health and, thereby, have significant personal costs. Women exposed to violence seem to constitute a particularly vulnerable group which, independently of violence exposure, may be burdened by heavy psychosocial problems. This is evident by, among others, a significantly greater number of contacts to the psychiatric sector and by poorer self-reported mental wellbeing among women exposed to violence compared to other women.

## Costs related to violence in close relationships (partner violence)

In Danish registers partner violence is not defined as a specific category, which makes it impossible with certainty to define the extent of partner violence on the basis of register data and to estimate with certainty the costs related to this type of violence against women in Denmark.

On the background of previous studies that comprised a prospective registration of contacts to emergency departments and comprehensive analyses of police-reported cases of violence against women, it is estimated that approximately one third of the 7,500 women who are annually exposed to violence and either reported the violence to police or contacted an emergency department have been exposed to partner violence.

A rough estimate would be that the annual costs in the health service and judicial system incurred by exposure to physical partner violence amount to approximately DKK 76 million. In addition, the vast majority of domestic disputes and injunctions are due to partner violence with an annual cost to the judicial system of nearly DKK 9 million.

The proportion of the nearly DKK 90 million calculated by production loss that is related to partner violence is uncertain; but the estimate is approximately one third of the costs, equaling approximately DKK 30 million per year.

**The cost of sheltering at women's crisis centers** is predominantly pertaining to partner violence, that is, an annual cost of approximately DKK 147 million.

**The government's action plan had an average annual budget of DKK 21 million in the period 2002-2008**, and the intervention covered by this budget was primarily targeted at partner violence. To this should be added a non-specified budget within the individual ministries.

A rough estimate is, therefore, that the annual costs related to partner violence amount to at least DKK 280 million, that is, nearly two thirds of the calculated costs of violence against women.

## Potential costs of more contacts by more victims of violence

The number of violence victims is approximately 10 times greater when based on self-reported violence than on the number of women who have made contact to public authorities and/or crisis centers as a consequence of violence exposure.

A small proportion of the 323 women who in the Danish Health and Morbidity **Survey 2000 and/or 2005 answered 'Yes' to questions about violence exposure in** the last year have also been in touch with the police and/or an emergency department and are, thus, part of a population of 7,500 different victims of violence included in the calculations of the cost of violence against women.

**The remaining 'self-reported' victims** of violence did not report the violence to the police and have not had a significantly greater use of healthcare services than other women, and consequently they do not present a cost to society which can be related to violence exposure.

There will of course be a rise in the annual costs of violence against women if more women chose to report the violence to the police, experience a need for **contact to the health service and/or contact women's crisis** centers. But a reasonable estimate of the size of a potential rise in costs cannot be presented, since there is too poor a knowledge of the nature of self-reported violence and the reaction patterns of those exposed to violence as well as their need for support from outside their close social network.

# 1. Perspectives

The analysis was carried out to estimate the total costs to society of violence against women in Denmark. It shows the size of the potential savings, if it is assumed that all violence can be avoided. However, consideration should be given to the complexity that violence-exposed women are a vulnerable group generally characterised by poor living and social conditions.

It is unrealistic to believe that all violence can be prevented, and that is one reason why the absolute figure sizes are not so relevant unless placed in context with other areas of prevention, for instance costs of accidents, or in relation to other societal problem areas, such as unhealthy lifestyle or traffic-related air pollution. There are, however, comparatively few systematic analyses of such areas. About 15 years ago, the Ministry of Health carried out an analysis of the economic costs to society of alcohol consumption. The analysis calculated the costs to society at around DKK 13 billion in 1996. Viewed in this context, the economic costs to society of violence against women are less important.

This, however, should not be construed to mean that an increased effort to reduce the occurrence of violence is unnecessary. To the individual woman who is exposed to violence and her family it is of the utmost importance that a lot of effort is made by society to combat violence.

Thus, the relevant political question is not whether an effort should be made to prevent violence, but rather *how* violence may be prevented, and the size of the effort that is (politically) viable. That is a question which can only partly be explained by this analysis.

We have not analysed whether an effort amounting to approximately DKK 20 million per year for information, counseling, treatment offers for assailants and competence development of staff would be sufficient, nor have we assessed the impact of various kinds of prevention initiatives.

Although this analysis has described the societal impacts of violence against women on a systematic and empirical basis, there is still a need for careful studies of the impact of the initiatives taken by various sectors:

1. Can teaching of children and adolescents reduce the risk of committing violence and being exposed to violence?
2. Is the present general information to the population (e.g. campaigns) able to reduce the risk of violence exposure?
3. Do present social offers for women exposed to violence give a reduced future risk of being violence exposed?
4. Are the offers effective enough to relieve the impact of negative social and health consequences related to violence exposure?

To answer these questions it is necessary to develop and assess new interventions and methods to prevent violence and to reduce negative impacts of violence. Ideally, such interventions should be assessed according to sound research-based principles, that is, a systematic assessment of the achieved effects is carried out and the effects are compared with other relevant interventions, preferably in a controlled design.

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**The English summary presents main results of a project conducted by the National Institute of Public Health to describe the costs to society of violence against women in Denmark. It includes the costs in the health care sectors, the judicial system, shelters for battered women, selected labour market consequences and the budget in the Danish National Action Plans to combat domestic violence.**

**Personal consequences of exposure to violence include reduced life expectancy and an increase in years of life with health problems.**

**Results are published in a comprehensive report in Danish and international scientific journals.**

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