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National surveys of the population, knowledge and effective intervention

I should like to begin this intervention by acknowledging this initiative, especially to the National Focal Point, Ms Elza Pais, President of the CIG, Commission for Citizenship and Gender Equality.


I would also like to greet all those present, international and national experts, with special attention to the members of the Council of Europe and my colleagues from the Council of Europe *Task Force to Combat Violence against Women, including Domestic Violence*, whom I would like to welcome to this country, hoping that it might be enjoyable not only because of the sun, but also for the knowledge of the subjects we will be discussing.

It is in fact with great pleasure that I see that this event is taking place in Portugal, an event dedicated to the

scientific investigation and data gathering in what concerns “violence against women”. Hopefully one can see this as a sign of recognition of the work that’s being done, despite of the work still ahead.

In the last twelve years, Portugal experienced great change in its level of knowledge of the subject of violence against women, including domestic violence. We went from knowledge focused on case studies to a much wider vision, with a national level evaluation of the prevalence of domestic violence.

The first studies were without a doubt important, but they did not prove to be effective when it came to influencing public policies. In this intervention, I shall take you through the path of not only what, stage by stage, we were able to understand, but also what we are still hoping to accomplish.



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Surveys of the Portuguese Population

- (1995) – National Survey Violence Against Women (FCSH - Universidade Nova de Lisboa and Comissão para a Igualdade e para os Direitos das Mulheres) [First Portuguese National Survey about the violence against women]
- (2002) – National Survey The Social and Economic Costs of Violence Against Women (FCSH - Universidade Nova de Lisboa and Comissão para a Igualdade e para os Direitos das Mulheres) [First Portuguese National Survey about the social costs of violence against women]
- (2003) – National Survey Health and Violence Against Women (Health Care Centers) (FCSH - Universidade Nova de Lisboa and Direcção Geral de Saúde) [First Portuguese National Survey about the health costs of the violence against women]
- (2006-2007) – Violence Against Women and the Economic Costs with their Health (Health care Centers and Hospitals) (FCSH - Universidade Nova de Lisboa and Direcção Geral de Saúde) [First Portuguese Survey about the economic health costs of the violence against women]
- (2007-...) – National Survey of Gender Violence (Men and Women) (FCSH - Universidade Nova de Lisboa and Comissão para a Igualdade e para os Direitos das Mulheres) [First National Survey that aims to keep under surveillance the evolution of violence against women in Portugal in the last decade. First National Survey that compares the victimization of both men and women]

In 1995, when we conducted the first national survey about violence against women – the second to be made in Europe, right after Holland – we began with a doubt:

To what extent in Portugal, a Latin country where the values of masculine domination are so present, a country where this phenomenon had a weak visibility and was confined to the private and intimate spheres, would it be possible to observe violence against women, in a scientific way, at a national level and through a sociological survey?

The study's conclusions, made at the time by a research team of the New University of Lisbon (Universidade Nova de Lisboa) and requested by CIDM, were, in my opinion, of the utmost importance. For the first time we came to understand that more than half of the responding Portuguese women, older than 18, claimed to have been victims of at least one of the 52 acts of violence considered as such at the time by CIDM.

We also discovered that this violence expressed itself in different ways – physical, psychological, sexual or even as social-cultural discrimination – and that these ways were associated with the victims' different social-cultural profiles. We realised that much of the phenomenon was still con-

cealed, silenced in private social spaces, or even within women's innermost feelings, as Michelle Perrot states: the majority of the acts took place at home and only 1% of the victims pressed charges with the police or at a court of law.

These results, which might appear simple, turned out to be of great importance especially in what concerns the support provided to the definition of future public policies and also in the direct intervention to fight the problem, by enhancing its efficiency.

In reality, domestic violence was legally re-defined as a public crime, improving protection and support mechanisms for victims and its ability to repress the offenders, making the phenomenon more public. However, the team of the New University of Lisbon that continued to work in this domain was confronted with new issues.

The first was the question to what extent the use of the definition of domestic violence proposed by CIDM, as stated on the list of the 52 acts of violence, was insufficient for the understanding of violence which was perceived and felt as such by the women that claimed to be victims. The second issue was that finally, we understood that we were facing a phenomenon with multiple social and cultural con-

nections. How could we more deeply comprehend those social-cultural dynamics? Two new national studies, also conducted by the team of the New University of Lisbon, searched for answers to these interrogations:

- ▶ The first is a nation-wide interdisciplinary research, with the inclusion of Sociology, Medicine, Psychology and Educational Sciences perspectives, requested by CIDM and conducted in 2002. Its sample was representative and the survey was directed at women aged 18 years or more. It was the first nation-wide study on the analyses of the social costs of violence against women.
- ▶ The second was projected to analyse the consequences of violence on a health level. The Direcção Geral da Saúde took the initiative and the study was preformed in 2003 and was directed at women, of a statistically significant sample, who were health care centre users.

In these studies, the concept of violence was not confined to the 52 acts that in 1995 were identified by CIDM as violent. We tried instead to find out what was these women's perception of the acts that they conceived as violent.


The phenomenon was still, in its majority, within the domestic sphere

and still fairly invisible – coming out to the police, lawyers and courts of law did not exceed 13%. But the great conclusion of these studies is that violence against women has, unmistakably,

several types of costs and they can be empirically observed.

When we compare victims and non-victims, we can observe that these costs are statistically significant

on the professional, health and children's education level, as well as being accountable for leaving severe sequels on physiological and physical health levels.



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Professional Costs ⁽¹⁾


- **Difficulty in getting a job** [69% more likely among the victims]
- **Difficulty in being promoted** [74% more likely among the victims]
- **Being discharged and/or voluntary discharged** [107% more likely among the victims]

Costs with children

- **Sick Children** ⁽¹⁾ [90% more likely among the victims]
- **Children with unhealthy school work environment at home** ⁽²⁾ [3400% more likely among the victims]

Source: (1) Manuel Lisboa, in *Prevenir ou Remediar*
(2) António Nóvoa and Sofia Marques da Silva, in *Prevenir ou Remediar*

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Physical Health [more likely among the victims]

- **Echymoses/Bruises** [82% +]
- **Wounds** [100% +]
- **Coma** [94% +]
- **Haemorrhages** [94% +]
- **Intoxications** [79% +]
- **Genital lesions** [73% +]
- **Obesity** [57% +]

Source: Manuel Lisboa and Luísa Branco Vicente (2005). *Saúde e Violência Contra as Mulheres*. Lisboa: DGS.

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...Physical Health [more likely among the victims]

• Asthma	[46% +]
• Burns	[46% +]
• Palpitations	[44% +]
• Tremors	[43% +]
• Colitis	[42% +]
• Chronic Headaches	[40% +]
• Frequent Vomiting	[40% +]
• Dermatitis	[37% +]
• Gastric-duodenal Ulcer	[37% +]
• Respiratory distress	[37% +]
• Sweats	[36% +]
• Hypertension	[26% +]
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Source: Manuel Lisboa and Luísa Branco Vicente (2005). *Saúde e Violência Contra as Mulheres*. Lisboa: DGS. 6

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Physiological Health [more likely among the victims]

• Psychological/psychiatric appointments	[200% +]
• Desperation – always	[556% +]
• Felling of void – always	[479% +]
• Discouragement – always	[368% +]
• Self-blame – always	[355% +]
• Sorrow and grief – always	[344% +]
• Pleasure and happiness – never	[211% +]
• Self-depreciation – always	[128% +]
• Anxiety – always	[112% +]

Source: Manuel Lisboa and Luísa Branco Vicente (2005). *Saúde e Violência Contra as Mulheres*. Lisboa: DGS. 7


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... Physiological Health [more likely among the victims]

• Loss of hope	[61% +]
• Loneliness	[58% +]
• Audiovisual hallucinations	[117% +]
• Fainting sensation	[200% +]
• Suicide plans	[300% +]
• Suicide attempts	[600% +]

 Source: Manuel Lisboa and Luísa Branco Vicente (2005). *Saúde e Violência Contra as Mulheres*. Lisboa: DGS.

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We also understood that the costs:

- ▶ fall directly on the people involved, but are also paid by all of society, specifically through taxes – shelters, police, magistrates, social workers etc.;
- ▶ have an economic expression, but also impact on other harder to quantify dimensions which are nevertheless important – physiological, social and cultural;
- ▶ are visible short-term but continue to add up throughout the life span – post-traumatic stress is an example – and may even affect future generations through children.

Another aspect that should be highlighted is the methodology which was used: for the first time in a nationwide survey it was possible to articulate the quantitative survey data with in-depth interviews. These interviews were performed on type cases, previously identified through a Multivariate Analysis, which allowed a more refined analysis of the dynamics of the social-cultural process underlying violence.

Of the several conclusions drawn on this subject, I would like to highlight one, which I believe is of utmost importance:

- ▶ Violence against women, domestic or not, has outlines of economical, political, social and cultural ine-

quality, something which shapes a gender inequality problem.

It is a structural phenomenon, historically constructed and culturally ingrained in several segments of Portuguese society.

Naturally, these findings are extremely important when defining intervention policies. To fight violence against women and especially domestic violence, it is not enough to adopt short-term measures, it is also necessary to take medium and long-term preventive measures.

In other words, it is necessary to act directly upon the social and cultural encystations historically ingrained in the regulation of the power relations between men and women, which present a truly structural obstacle to the problem's resolution.

The steps should aim for a sustained change of social structures and mentalities where violence is produced and reproduced.

Having reached this point of scientific knowledge about the phenomenon in Portugal and of the utilization of the results to design effective intervention mechanisms, the research team faced new questions.

- ▶ How to deepen the knowledge of the evaluation of the costs to society?
- ▶ How to obtain reliable indicators that allow a wider knowledge of vi-

olence as a phenomenon that arises from gender inequality, on a national level and not merely in some cases?

- ▶ How to monitor gender violence? Through an analysis of its change over time, or through a comparative analysis with other national and international information sources?

In Portugal, the answers to these questions began to be outlined two years ago. An interdisciplinary team in Sociology and Economy of the New University of Lisbon, in collaboration with the Direcção Geral de Saúde, is now finishing a study specifically on the Economic Costs with Health, following violence against women. From the preliminary results it is already possible to conclude that in an “episode of medium disease”, the health costs are 32% higher among victims of violence against women and that 72% of the victim's costs are borne by the SNS (National Health Service).

The research is promoted by the Direcção Geral de Saúde and the data was collected in health care centres and hospitals.

Concerning the national analysis of gender violence, a new study promoted by CIG is projected, a study that for the first time will include indicators specially constructed to observe gender violence. This study is

also the first in Portugal that will allow for a comparative analysis of violence against women and men based on a gender perspective. This nationwide survey, already in progress, will also allow for an evaluation of the evolution of violence against women in Portugal in the past decade – through the use of a methodology that enables a comparison of the 1995 data with the data gathered in 2007.

This matter is of the utmost importance in terms of the phenomenon's surveillance, especially since multiple legislative and other measures were already adopted and will necessarily be taken into account.

At the same time, this study takes into account variables and indicators of other international studies: both from studies conducted by international organisations like the United Nations and the World Health Organ-

ization, and from studies promoted in other countries that are members of the Council of Europe. Hopefully, this will be the first step in the path that we have been pursuing, leading to the production of international statistics about gender violence, allowing for as much comparison as possible.

Despite the existing experience with using national data derived from other sources, for instance from National Statistics, the Forensic Medicine Institutes or from the police, we think that an increased effort must be made in the future to articulate these data with the Nation Wide Population Surveys. After all, the social problem is the same. What changes are the windows that we open to observe it. In that sense, I welcome the measures made public about a month ago, in the presentation of the National Plan for Gender Equality and also by the Na-

tional Plan to Fight Domestic Violence, in what concerns the “systematic data gathering”. We hope that the intentions stated there evolve, themselves, into good practices.

We know that it's a long and arduous journey for everyone – for men and women, for youngsters and adults. But that's exactly why we should start making our way as soon as possible. The women and men of tomorrow – and of today – demand it.

In fact, I believe that a country that is not adamant to combat all forms of violence against women will always be a country with a democratic deficit. Not only because it will, in the present, limit the full extent of democracy, but also because, by not taking any action, it will mortgage generations to come. ★