Methodology to Assess Economic Cost of Violence against Women and Girls

Applications to Seychelles and Lesotho

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On behalf of the Commonwealth Team
New York, 9th March 2020
Methodology and Data

It composed of 4 blocks..

1. Public Services (health, law enforcement, education, social services)
2. Out of pocket expenses
3. Personal income loss (death, temporary incapacity to attend work)
4. Shelter

It use 3 costs types..

1. Unit cost = doctor fees
2. Proportional cost = 30% of police budget
3. Total operational cost = Shelter

It covers..

1. Public Services
2. Out of pocket expenses
3. Personal income loss

It consider 2 cases..

Typical Case (Lesotho data)
Uses administrative victim data (= 9,453)
Sample Survey data
\[ \text{Economic Cost}_j = \text{Unit Cost}_j \times \text{Victims}_j \]
(based on administrative data)

Full Coverage Case (Lesotho data)
Uses derived victim data (victim =195,149) based on GBV prevalence rates
Female population data (15-64)
\[ \text{Economic Cost}_j = \text{Unit Cost}_j \times \text{Victims}_j \]
(based on derived data)

Data

- Administrative data
- Available Survey on GBV
- Special survey (Lesotho)
- Special FGD (Seychelles)
- Expert consultations
### Seychelles

**Demographics**
- **Age** - mean: 43; median: 39; minimum: 19; maximum: 63
- **Have children below age 16** - No: 10%; Yes: 90%
- **Percentage of survivors sought help** - 20%
- **Bedridden** - 12%
- **Days incapacitated** - 8
- **Household work disrupted** - 67%

#### Prevalence rate by types of violence (%)

<table>
<thead>
<tr>
<th>Type of Violence</th>
<th>Prevalence Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional IPV</td>
<td>44%</td>
</tr>
<tr>
<td>Economical IPV</td>
<td>27%</td>
</tr>
<tr>
<td>Physical IPV</td>
<td>22%</td>
</tr>
<tr>
<td>Sexual IPV</td>
<td>8%</td>
</tr>
</tbody>
</table>

### Lesotho

**Demographics**
- **Age** - mean: 35.3; median: 32; minimum: 19; maximum: 63
- **Have children below age 16** - No: 37%; Yes: 63%
- **Percentage of survivors sought help** - 62.4%
- **Bedridden** - 15%
- **Days incapacitated** - 8
- **Household work disrupted** - 29.2%

#### Prevalence rate by types of violence (%)

<table>
<thead>
<tr>
<th>Type of Violence</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Emotional IPV</td>
<td>53.7%</td>
</tr>
<tr>
<td>Physical IPV</td>
<td>24.6%</td>
</tr>
<tr>
<td>Economical IPV</td>
<td>15.2%</td>
</tr>
<tr>
<td>Sexual IPV</td>
<td>6.5%</td>
</tr>
</tbody>
</table>
### Economic Cost of VAWG

#### SEYCHELLES

<table>
<thead>
<tr>
<th>Cost Categories</th>
<th>Typical case</th>
<th>Full coverage case</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Million SCR</td>
<td>% of GDP</td>
</tr>
<tr>
<td>A. Direct cost</td>
<td>205.8</td>
<td>1.066</td>
</tr>
<tr>
<td>B. Indirect cost</td>
<td>29.88</td>
<td>0.155</td>
</tr>
<tr>
<td>C. Total cost</td>
<td>235.7</td>
<td>1.221</td>
</tr>
</tbody>
</table>

- **Cost to Girls**: 0.296 per cent of GDP
- **Cost to Adult female**: 2.332 per cent of GDP
- **Cost to public sector**: 1.222 per cent of GDP
- **Cost to the Private sector**: 1.997 per cent of GDP
- **Cost to the Whole society**: 4.625 per cent of GDP

#### LESOTHO

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<th>Cost Categories</th>
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<th>Full coverage case</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Million Loti</td>
<td>% of GDP</td>
</tr>
<tr>
<td>A. Direct cost</td>
<td>428.1</td>
<td>1.233</td>
</tr>
<tr>
<td>B. Indirect cost</td>
<td>34.7</td>
<td>0.100</td>
</tr>
<tr>
<td>C. Total cost</td>
<td>462.8</td>
<td>1.333</td>
</tr>
</tbody>
</table>

- **Cost to Girls**: 0.822 per cent of GDP
- **Cost to Adult female**: 2.780 per cent of GDP
- **Cost to public sector**: 2.300 per cent of GDP
- **Cost to the Private sector**: 1.946 per cent of GDP
- **Cost to the Whole society**: 5.548 per cent of GDP
**WHY**

- Inaction would lead to cost accumulation

- High return from low investment GBV investment

**WHERE TO**

1. Strengthening capacity of service providers
2. Adopting multisectoral approach to development
3. Improving data collection by agencies for improving statistics for better costing assessment
4. Imparting training on methodology for periodic monitoring
5. Adopting the whole system approach to ending VAWG.