Causes and cures VII: Structural violence

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Abstract
The past two years have been a landmark moment for violence prevention, with the publication of The Global Status Report on Violence Prevention 2014; a historic resolution on violence by the 67th World Health Assembly; and the release of multiple documents on violence by international and United Nations entities, with a corresponding building of momentum in scholarship. Most notably, in September 2015, the United Nations General Assembly adopted the 2030 Agenda for Sustainable Development, addressing the need for violence prevention at an unprecedented scale. In this context, more than ever, violence studies have become a field of its own right. Still, a systematic approach of the topic has been lacking, and no textbook yet synthesizes the knowledge of multiple disciplines toward a cogent understanding. This article is the seventh of a series of fifteen articles that will cover, as an example, an outline of the Global Health Studies course entitled, “Violence: Causes and Cures,” reviewing the major bio-psycho-social and structural-environmental perspectives on violence. Structural violence refers to a form of violence wherein social structures or social institutions harm people by preventing them from meeting their basic needs. Although less visible, it is greater in scope and in implication than another type of violence and might include health, economic, gender, and racial disparities. The concepts behind structural violence can help guide a program for violence prevention that incorporates the notion of positive peace.

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We are living through a landmark moment for violence prevention. The past two years, especially, have seen an outpouring of documents reflecting a growing focus on the problem of violence and multilateral collaborations to solve it. In December 2014, for example, the World Health Organization, the United Nations Office on Drugs and Crime, and the United Nations Development Programme (WHO, UNODC, & UNDP, 2014) joined forces to launch The Global Status Report on Violence Prevention 2014, detailing the efforts of 133 countries to address interpersonal violence. It is the first major report on violence since the World Report on Violence and Health (Krug, Dahlberg, Mercy, Zwi, & Lozano, 2002), an influential document that consolidated all the existing science on violence for the first time. In the same year, the 67th World Health Assembly [WHA, 2014] adopted a historic resolution addressing violence, bringing particularly to focus women, children, and other vulnerable members of the populations subject to systematic structural and institutional violence. Furthermore, Global Study on Homicide 2013: Trends, Contexts, Data (UNODC, 2014), Hidden in Plain Sight: A Statistical Analysis of Violence against Children (United Nations Children’s Fund [UNICEF], 2014a), Ending Violence against Children: Six Strategies for Action (UNICEF, 2014b), Preventing Suicide: A Global Imperative (WHO, 2014), and Preventing Youth Violence: Taking Action and Generating Evidence (WHO, 2015), all appeared within a two-year time span, highlighting some of the major forms of violence. Most notably, on September 25, 2015, the United Nations General Assembly adopted the 2030 Agenda for Sustainable Development.
Development (United Nations [UN], 2015), addressing the need for violence prevention at an unprecedented scale and recognizing the interdependence between sustained peace and sustainable development. In this context, more than ever, violence studies need to become a field of its own right, with university-level instruction capable of addressing the complexities and commonalities of the different forms of violence that have not unified due to existing disciplinary barriers. Meanwhile, ongoing worldwide events make all the more urgent the need for a cogent understanding of this all-important, life-or-death topic. Over several issues, Aggression and Violent Behavior has graciously offered to publish a lecture series that has been implemented through the Global Health Studies Program at Yale College in a course entitled, “Violence: Causes and Cures.” While it does not purport to be the definitive sequence for reviewing all the major bio-psycho-social and structural-environmental perspectives on violence, it proposes a systematic approach. This article consists of the seventh of this fifteen article series, which carries the following order: 1. Introduction: Toward a New Definition, 2. The Biology of Violence, 3. The Psychology of Violence, 4. The Symbolism of Violence, 5. The Sociology and Anthropology of Violence, 6. The Political Science and Economics of Violence (in this issue), 7. Structural Violence (in this issue), 8. Environmental Violence, 9. Consequences of Violence, 10. Criminal Justice Approaches, 11. International Law Approaches, 12. Public Health Approaches, 13. Global Medicine Approaches, 14. Nonviolence Approaches, and 15. Synthesis and Integration.

1. Introduction

Few tragedies can be more extensive than the stunting of life, few injustices deeper than the denial of an opportunity to strive or even to hope, by a limit imposed from without, but falsely identified as lying within. - Stephen Jay Gould, The Mismeasure of Man (1996)

Structural violence, though mostly hidden, is a concept important enough in any study of violence to prompt a full article in this series. Given its scope, importance, and implications in terms of causing other forms of violence, we may even argue that it is a central concept. It refers to the avoidable limitations society places on groups of people that constrain them from achieving the quality of life that would have otherwise been possible. These limitations could be political, economic, religious, cultural, or legal in nature and usually originate in institutions that have authority over particular subjects. Because of its embedding within social structures, people tend to overlook them as ordinary difficulties that they encounter in the course of life. A sample scenario might be when people desperately need education, healthcare, political power, or legal assistance but are unable to access them easily. Unlike the more visible forms of violence where one person perpetrates physical harm on another, structural violence occurs through economically, politically, or culturally driven processes working together to limit subjects' from achieving full quality of life (Gupta, 2012). For example, if someone died of tuberculosis, autoimmune deficiency syndrome (AIDS), or other preventable diseases in the present state where advanced medications are available, then that would be a form of structural violence (Ho, 2007). We consider it a form of violence because these deaths are now preventable and only occur because of the disparities in distribution of healthcare among the different strata or regions. The harm is structural because it is a product of the way we have organized our social world; it is violent because it causes injury and death.

In the first article of this Causes and Cures series (Lee, 2015), we discussed how the World Report on Violence and Health (Krug et al., 2002) has been instrumental in shaping global discourse on violence, beginning with a standard definition. It is remarkable in that it embeds in it a larger concept of violence that goes beyond physical force to include: “... power, threatened or actual, that either results in or has a high likelihood of resulting in ... maldevelopment or deprivation” (p. 5). Structural violence directly illustrates a power system wherein social structures or institutions cause harm to people in a way that results in maldevelopment or deprivation. Because it is a product of human decisions and not natural occurrences, and because it is correctable and preventable through human agency, there is increasing advocacy that we call it violence (Winter and Leighton, 2001), rather than simply social injustice or oppression. A key aspect of structural violence is that it is often subtle, invisible, and accepted as a matter of course; even more difficult than detecting this type of violence is assigning culpability, for the actors are often impossible to identify. However, if we took into account the victim's (or observer’s) and not just the perpetrator's perspective, structural violence has similar effects as behavioral violence, including death (Morgan et al., 2014). Structural violence, in fact, is by far the most lethal form of violence as well as the most potent cause of other forms of violence (Butchart and Engström, 2002). The excess rates of death and disability resulting from the social and economic structure of our society—that is, its division into rich and poor, powerful and weak, and superior and inferior—are measurable using life expectancy data, as we will see in the next section. Between 10 to 20 million per year (Høivik, 1977), these are about ten times the rates of those from suicide, homicide, and warfare combined. This is why failing to capture structural violence, therefore, is akin to letting loose big fish while retaining “small fry.”

From an ecological perspective, all violence originates from a continuum of bio-psycho-social-environmental causes, and no form is entirely individual or entirely without agency, and therefore structural violence is equally of collective responsibility as any other type of violence. Societal structures are what we choose while deciding as a society, as every society does, how to distribute or not to distribute, or how to share or not to share, the collective income and wealth that the society produces. For example, Indian economist Amartya Sen (1982) in part won the Nobel Prize for showing that the mass deaths occurring during famines were not the result of a shortage of food but rather a shortage of money on the part of the poor, who simply could not afford to purchase the food that was available in their countries. The millions of deaths occurring because of the AIDS epidemic in low-income nations, such as those of sub-Saharan Africa, are not the result of natural causes but of poverty: that is, the inability of individuals suffering from AIDS to afford to pay for the medicines that could save their lives and currently are saving millions of lives of similar victims in high-income countries. The effects of unequal control over the distribution of resources worsen if the persons low on income are also low on education, on health, and on power—as is frequently the case because these dimensions interlink in the social structure. In order to account for all these areas of harm, we need to adopt a larger definition of violence that does not confine itself to existing fields of inquiry but adapts inquiry to the need for understanding.

2. Origins of the concept

While an embryonic idea of structural violence may be as old as the notions of conflict and injustice, the concept as a topic of scientific study gained salience through a seminal essay by the Norwegian sociologist Johan Galtung (1969). He defined structural violence as a deliberate impairment of fundamental human needs by actors of power. He rejected the narrow definition of violence as somatic incapacitation or deprivation of health alone, with killing as the extreme form, at the hands of an actor who intends the consequence. If this were all violence is about, he argues, highly unacceptable social orders would still be compatible with peace. If people were starving when this is objectively avoidable, then violence has occurred, regardless of whether there is a clear subject-action-object relation, as it is less and less relevant to world economic relations today. Therefore, he stated the idea that violence is present when forces influence human beings so that their actual
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