

# Violence Against Women and COVID Pandemic – Double the Trouble!

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## Abstract

Violence against women remains terribly pervasive and affects 1 in 3 (roughly 736 million) women across their lifetime. This violence can be from an intimate or non-intimate partner and have been fairly unchanged over that last decade since the onset of the COVID-19 pandemic, there has been emerging data from front line workers that violence of all forms against women and girls has intensified. Addressing this shadow pandemic is a health care crisis of global proportions, but of special significance in the patriarchal Indian scenario and needs to be prioritized amidst the COVID care issues. The first step forward is awareness, followed by access and availability of services. This cannot be achieved overnight but by a step-wise approach. There is an urgent need to adapt our approach, integrate these issues into our health care systems so that survivors can access appropriate medical and social services.

**Keywords:** Domestic violence, sexual violence, COVID-19, Shadow Pandemic

## Background: The Problem

*“Violence against Women is perhaps the most shameful violation of human rights. It knows no boundaries of geography, culture or wealth. As long as it continues, we cannot claim to be making real progress towards equality, development and peace.”* – Kofi Annan, United Nations General Assembly, New York, 5-9 June 2000.

Although this statement was made over 20 years ago, not much seems to have changed! Violence against women (VAW) remains terribly pervasive. More than 736 million have experienced some form of this across their lifetime.<sup>[1]</sup> This violence can originate from an intimate or non-intimate partner and has remained fairly unchanged over the last decade.

The Shadow Pandemic is an increase of violence

against women during the COVID-19 crisis. Before the pandemic, one in every three women experienced physical or sexual violence from a partner.<sup>[1]</sup> However, since the onset of the COVID-19 pandemic, there has been emerging data from front line workers that violence of all forms against women and girls has intensified. The situation is exacerbated by the fact that many essential and health services have reached capacity due to the increased number of COVID-19 cases worldwide. Addressing the Shadow Pandemic needs to be prioritized amidst the COVID-19 crisis as violence against women and young girls is a blatant assault on human rights.<sup>[2]</sup>

Phumzile Mlambo-Ngcuka, Executive Director of UN Women has said:

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“Even before the pandemic, violence against women was one of the most widespread violations of human rights. Since lockdown restrictions, domestic violence has multiplied, spreading across the world in a shadow pandemic. This is a critical time for action, from prioritizing essential services like shelter and support for women survivors, to providing the economic support and stimulus packages needed for broader recovery.”<sup>[3]</sup>

The severity of this problem cannot be understated. In 2017, six out of ten women intentionally murdered worldwide were killed by an intimate partner or a different family member.<sup>[4]</sup> The situation is worsened by the fact that a large majority of women survivors of violence never officially report their incidents. Less than 2/5 of women seek the help of any kind; less than 10% of female victims seeking help after violence reach out to the police.<sup>[4]</sup>

Making the situation worse, due to the strain of the COVID-19 Pandemic, billions of individuals across the world are encouraged to shelter at home. The Coronavirus Pandemic is unrelenting in its effect on public health, but it also has dramatic effects on household dynamics when homes are put under augmented strain arising from worries about health and money, coupled with confinement to cramped living conditions, levels of household violence spike. Not surprisingly, Government authorities and civil societies worldwide are reporting heightened calls for help against domestic violence.<sup>[3]</sup>

## Underlying Factors Contributing to Domestic Violence (DV) Against Women in India

DV is a sensitive topic and usually stays hidden. It is difficult to identify causes for the same. Few theories for this high frequency in India are around the deep-rooted male patriarchal roles and widespread propagated cultural norms that depict the women as subordinates throughout their lifespan.

- As per NFHS 3 (2005-06), 45% of young women get married below 18 years of age. This increases the risk of DV. Although this number has improved, NFHS 4 (2015-16) still shows 26.8% of young married women being wedded below the age of 18 years. Till date (July 2021), national figures from NFHS 5 (2019-20) are not available, but Maharashtra shows a prevalence of 21.9%, which is lower than 26.3% of NHFS 4.<sup>[5]</sup>
- In their reproductive career, mothers who have only female children may be more vulnerable to abuse and neglect financially, nutritionally, and socially.

- Among older women, culturally bred views in relation to widowhood may also make women susceptible to DV by other family members.
- Vices and negative health behaviours have links to DV, as do poor mental and physical health. These include tobacco consumption, lack of contraceptive and condom use, diminished utilization of health-care, higher frequencies of depression, PTSD, attempted suicide, sexually transmitted infections, asthma, anaemia, and chronic fatigue.

In India, we should account for the culturally prominent forms of DV identified by the Indian qualitative literature and social media, survey abuse inflicted by non-partner perpetrators, survey multiple forms of abuse, and ideally, include a measure of DV severity.

During the pandemic lockdowns, India saw a 100% increase in the number of women calling emergency lines for help against gender-based violence. Importantly, domestic violence goes unreported most of the time, so this number is almost certainly higher.<sup>[6]</sup>

## COVID-19 and Violence Against Women

Loss of income leads to reduced control over economic security and thereby making people exert more control on their partners. This is especially seen in males and becomes more pronounced if the female is employed and the male is unemployed. Employment and income source for females is a positive since this income supports the family financially. This acts as a block against DV. Unemployment of females takes away this buffer, causing them to be easier targets of violence at the hands of their spouses. In addition, females being unemployed also entails being dependent on a male spouse, small or non-existent social circle and being locked with perpetrators 24 by 7, which again makes them vulnerable to violence.<sup>[7]</sup>

The absence of domestic help, forced to be in close proximity continuously, increased workload and loss of personal space worsens any ongoing friction between the couple and leads to higher chances of DV. The stress of economic instability itself has resulted in increased consumption of alcohol, thereby increasing DV independently. India noted a surge of porn usage and sale of condoms and sex toys, reflecting an increase in sexual activity thereby indirectly indicating an increase in chances of sexual rights violation. 86% of women in India do not report DV.<sup>[8]</sup>

An additional reporting channel was introduced shortly after the introduction of the lockdown to enable women to report complaints through WhatsApp chats. This novel and highly accessible way of report-

ing violence may have increased the reporting of pre-existing cases. Interestingly, 33% of domestic violence complaints were made through WhatsApp in India, during April of 2020.<sup>[9]</sup> This suggests that women need a more discreet method of signaling for help against gender-based violence. There have also been efforts to continue allocating money to vital government-funded agencies such as the Emergency Response Support System and One-Stop Centers that offer aid to domestic violence.

## Global Scenario in Covid Pandemic

A study conducted by United Nations Population Fund in South East Asia<sup>[10]</sup> found that internet searches related to violence are on an upward trend. Keywords such as “violent relationship” and “cover bruises on face” rose by 47% in Malaysia, 63% in the Philippines, and 55% in Nepal during the timespan from October 2019 – before the pandemic – and September 2020 – 8 months into the pandemic. Queries on subjects such as “violent partner” were a major chunk of searches in South East Asian countries during this time period. Online searches about sexual abuse have been rising, and sexual harassment has not just remained confined to domestic life. There has also been a reported increase in trolling and victim-blaming: forms of online misogyny.

In South-East Asia, shadow pandemic numbers are especially bad. The most common form of domestic violence in this area is intimate partner violence. Compared to the global level of 1/3 of women who experienced DV, in this region violence is estimated to be 2/5 women or 40%.<sup>[11]</sup>

The unrelenting COVID-19 pandemic has intensified violence against women across much of Latin America. For instance, during March and April of 2020 in Brazil, femicides increased by 22% in 12 Brazilian states as compared to the same time span last year. In El Salvador, there was reported to be 71 femicides between January and August of 2020. One woman is killed every twenty-four hours in El Salvador, making it one of the world’s leaders in femicide rates. In Mexico, one woman was killed every two and a half hours in the first four months of 2020 – a 5% increase compared to the same time last year. Although Brazil, El Salvador, and Mexico account for the majority of gender-based violence in this region, gender-related violence is a concern for all women across South America.<sup>[12]</sup>

The U.K.’s leading provider of specialist domestic abuse services, the British Charity Refuge, received

63% more hotline calls in 2020 compared to 2019. In France, their leading gender-based violence hotline received 70% more calls than the previous year. In England and Wales, two women are murdered every week by a current or previous partner. With this, in 2020 the police received a call concerning domestic violence roughly every 30 seconds.<sup>[13]</sup>

In France, the National Federation of Women’s Solidarity reported that during the first part of the lockdown all of the safety shelters were completely filled up after hotlines were flooded with an abundance of domestic violence-related calls. Because of this, France was forced to open new safe places where victims of gender-based violence could go and seek refuge. The director of the National Federation of Women’s Solidarity stated that after the first COVID-19 shutdown, there was a large number of women and girls who were experiencing post-traumatic stress disorder.<sup>[13]</sup>

## Our Experience

Sexual assault can present in many ways. In a study by Dr. Reena Wani at a tertiary care center where many cases are being referred,<sup>[14]</sup> we evaluated presentation, trends and demographics of violence against women and children over a 3-year period. We found that 75% of survivors were young women (below 25 years), and only 20.7% came in time for the collection of forensic samples. Despite available facilities, only 61% availed of on-site counseling. We had concluded then that there is still much to be done to improve the care of survivors.

Pandemics, natural disasters and other large-scale events affect the rates of domestic violence are affected. However, there is limited research available regarding the reasons behind this.<sup>[15]</sup>

In the current scenario of the COVID pandemic, we found fewer survivors coming forth for assistance especially during the first phase when national and state lockdown measures were announced. In particular, we had more severe presentations such as a post-coital tear following marital rape (leading to hemoperitoneum) and three underage survivors presenting for termination of pregnancy after the legal limit of 20 weeks as per MTP Act 1975.

## Strategic Recommendations to Combat Violence

*“All that is necessary for the celebration of evil is for good men to do nothing” – Edmund Burke*

A step-wise approach is required to tackle this deep-rooted problem of DV. Awareness is the first step, a basic prerequisite. After this, services for the assistance

of DV survivors should be available and, more importantly, assessible.

- **Improve reporting of domestic violence**

Domestic violence cases are more likely to be reported by survivors. More often than not this is done after the suspect has left the crime scene.<sup>[16]</sup> Victims may often not get a chance to report the crime because the perpetrators remain with the victim due to lockdown restrictions. Lack of access for these victims makes it more important for neighbours, community members and other bystanders to take active efforts for reporting. Katz and Moore have suggested that there must be training given in the community regarding the identification and reporting of cases.<sup>[17]</sup> This training can be done by the government or even through advertising. Community members must be encouraged to report cases of domestic violence in their neighbourhood. When providing information, a positive message that is solution-centred (bystander behaviour) is more effective than a negative message that throws light on the problem (domestic violence). Nationwide lockdowns have made reporting logistics significantly more difficult.

- **Improve the speed at which reporting is addressed**

Speed of law enforcement in follow up of a case report is important. Delays can occur due to investigation about the survivor, especially if there is a history of drug abuse or other prior issues. In fact, due to factors like fear of status loss and embarrassment, fear of retaliation, opportunity cost or exposure of one's own criminal past, some survivors may not want to go through with legal actions or have police involvement.<sup>[18,19]</sup> Due to lockdown and social distancing measures, if legal actions are not carried out quickly it may be difficult to separate the two parties. National lockdown measures likely limited the access of women to those reporting channels, with police, first responders and health services being overburdened and operating at limited capacity. Courts were either closed or operating at reduced hours, leading to delays in processing cases.

A study by Tasca and the team observed that although suspect identification is more likely when the suspect and the victim are related, arrests occur more often when victims and suspects are strangers.<sup>[20]</sup> Policymakers must provide guidelines on how to respond to domestic violence during the pandemic. Response speed will increase if resources including human resources, financial support, and law-enforcing power related to domestic violence cases are provided to government organizations.

- **Identify who are vulnerable in complaints**

A strategy is required to identify whether the vulnerable are also experiencing a higher proportion of violence. The migrant population is especially vulnerable and due to lockdown they may be unable to return to their native place.<sup>[21]</sup> Additional groups who are more vulnerable to COVID-19 infection are people with a higher risk of severe illness, immune-compromised individuals, older adults, and people with pre-conditions such as asthma, HIV, liver diseases. These groups are more at risk for domestic violence as well. The anti-oppressive model suggested by Dominelli and Campling<sup>[22]</sup> seeks to educate vulnerable communities about the necessary services and resources required to live safely away from domestic violence.

- **Digital monitoring**

Governments should strive to keep hotlines open 24/7. This will increase confidence in the people that help is always just a call away.

Specialist apps (applications) can be used to track vulnerable people as well as potential suspects. This can be activated with an SOS system with in-built features for the user to report issues associated with domestic violence. Here, one must toe the fine line between surveillance and the infringement of the rights of an individual. In addition, the credibility of the team running the tracking app must be confirmed before use.

- **Build psychological capital**

Research of well-being suggests that creating positive psychological capital (including hope, resilience, optimism, and self-efficacy) is vital for creating a positive future. Rather than a reactive approach (acting after violence has occurred), a proactive approach to combat domestic violence during Covid-19 may help to reduce social and economic crisis.

The World Health Organization (WHO) has called on healthcare stakeholders in regions of particularly high rates of domestic violence during the shadow pandemic to take a role in addressing this dilemma as a serious public health issue. WHO is commending nations who have been taking steps to address the Shadow Pandemic by introducing new gender-sensitive measures and is urging continued action in various ways during the pandemic.<sup>[11]</sup>

## Conclusion

Violence against women is a public health problem of epidemic proportion which is being aggravated by the pandemic situation. Addressing the Shadow Pandemic needs to be prioritized amidst the COVID-19

crisis as violence against women and young girls is a blatant assault on human rights. There is an urgent need to adapt our approach and integrate these issues into our health care systems so that survivors can access appropriate medical and social services.

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