

Journal Pre-proof

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PII: S0022-3956(20)31165-1

DOI: <https://doi.org/10.1016/j.jpsychires.2020.12.057>

Reference: PIAT 4218

To appear in: *Journal of Psychiatric Research*

Received Date: 7 June 2020

Revised Date: 10 December 2020

Accepted Date: 19 December 2020

Please cite this article as: Md. Noman AH, Ismail MN, Griffiths MD, Pervin S, The Detrimental Effects of the COVID-19 Pandemic on Domestic Violence Against Women, *Journal of Psychiatric Research*, <https://doi.org/10.1016/j.jpsychires.2020.12.057>.

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The Detrimental Effects of the COVID-19 Pandemic on Domestic Violence Against Women

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Keywords: COVID-19, pandemic, domestic violence against women

The ongoing coronavirus disease 2019 (COVID-19) pandemic has brought about a ruinous effect globally and killing more than 1,579,000 individuals worldwide (Worldometer, 2020), shutting down sources of income and means of livelihood of millions of families across the world (Hossain, 2020). The actual social and economic costs of the outbreak have yet to be ascertained. However, another major detrimental effect of the pandemic is domestic violence against women, which is having a severe physical and psychological impact on the health of women (World Health Organization [WHO], 2020). After the outbreak of the COVID-19 pandemic, the rates of domestic violence against women increased in many countries: 300% in China, 50% in Brazil, 30% in Cyprus, France and New Zealand, 25% in the United Kingdom (UK), and 20% in Spain (Graham-Harrison, Giuffrida, Smith & Ford, 2020; Bradbury-Jones & Isham, 2020; New Zealand Family Violence Clearinghouse, 2020). However, it should be noted that the estimates concerning the increased incidence of the violence come from diverse data sources including police reports, hotline contacts, and one-stop crisis centers, which varies both between and within countries. However, violence against women may be even worse in some African, Middle East, and South Asian countries where – even before the advent of the pandemic – women are not treated equally. This correspondence highlights the reasons of domestic violence against women during the ongoing pandemic, and way forward to mitigate such violation.

Violence against women results in severe mental, psychological, sexual and reproductive health problems including sexually transmitted infections, unplanned pregnancies, and (in extreme cases) death (WHO, 2020). In a bid to inhibit the spread of COVID-19 and acting in accordance with WHO directives, almost all countries implemented various preventive measures such as a partial or complete lockdown to ensure individuals stayed at home, self-quarantine for suspected infected people, and ‘work from home’ policies. These measures have increased the risk of domestic violence against women in a number of different ways.

First, the ‘stay home-stay safe’ strategy can create physical, economic, and mental stress amongst couples due to limited access to various economic and social resources. Under such circumstances, such homes can become places for the occurrence for increased physical, psychological and/or sexual abuse. The dynamic power relationship in the home is often violated by one-sided male control, thereby undermining the woman’s position and outsider intervention (Bradbury-Jones, & Isham, 2020). Strict restrictions and movement control due to lockdowns and home quarantining may in some cases prevent women escaping from the home to seek help from friends and family, or from contacting shelter centers, victim-survivor groups, and domestic abuse helplines. As a result, the ‘stay home-stay safe’ strategy in many countries increases the chances of domestic violence and death occurring. For instance, a report in the UK noted that 16 domestic violence deaths had been reported during the initial months of the COVID-19 pandemic (Williamson, Lombard & Brooks-Hay, 2020).

Second, women from both LMICs (low and middle-income countries) and HICs (high-income countries) may also encounter domestic violence due to their partners' sudden unexpected negative economic circumstances (Wanqing, 2020). Owing to the lockdown and stagnant economic conditions, the number of unemployed people has increased across markedly throughout the world with 120 million unemployed in India, 30 million in the United States, 26 million in China, and 6.5 million in the UK (Sharma, 2020; Hossain, 2020). Based on previous research, increasing economic adversity and inequality generated by the pandemic is likely to be one of the causal factors underlying the increased incidence of abuse (Renzetti, 2009).

Third, in the course of the COVID-19 pandemic, the responsibility of undertaking restrictive measures to control violence is likely to be the 'heads of a household' (typically males within patriarchal societies), who for a minority exhibit an abuse of power by exerting unwanted control, coercion, and surveillance on the victim as opposed to protect them (Arizona Coalition to End Sexual and Domestic Violence, 2020). What occurs within people's homes has remained behind-closed-doors and outside the view of others. Moreover, women have been scared to lodge complaints to the police for fear of aggravating the situation even more (Roy, 2020).

Fourth, due to COVID-19 preventive measures, women have become more isolated from their friends, families, and community members who may have been a source of support and protection to them from their angry and/or violent partner.

Fifth, owing to a spike in COVID-19 cases, support services such as shelter houses, helplines, and legal action organizations have had to stop or significantly reduce their services. This has impeded the ability of victims of domestic violence to seek the help they need. In addition, female victims are unable to leave the environment to evade the situation because they fear being infected by the virus.

Violence against women is a highly predominant and widespread issue. Evidence indicates that one in three women globally have experienced either physical, sexual, or mental violence in their lifetime (WHO, 2020). However, the numbers of women experiencing such violence appears to have increase during the pandemic. Before the pandemic, three times as many women were engaged in household and unpaid care across the world compared to men (Lowcock and Kanem, 2020). Therefore, the stakeholders involved in the COVID-19 response need to create policies and initiatives to mitigate the situation. This includes making women more extolled and socially included, increasing the number of hotlines, crisis centers, shelter houses, and medical facilities, and raising the awareness of community members, friends, and family members to assist during the crisis.

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Statement of conflict of interest

We wish to confirm that there is no known conflict of interest associated with this publication and there has been no significant financial support for this work that could have influenced its outcome.

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