Violence against women during COVID-19

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Home is not a safe place for me. What can I do?

If you are experiencing violence, it may be helpful to reach out to family, friends and neighbors, to seek support from a hotline or, if safe, from online service for survivors of violence. Find out if local services (e.g. shelters, counselling) are open and reach out to them if available.

Make a safety plan in case the violence against you or your children escalates. This includes:

- Identifying a neighbour, friend, relative, colleague, or shelter to go to in case you need to leave the house immediately for safety.
- Have a plan for how you will exit the house safely and how you will reach there (e.g. transport).
- Keep a few essential items (e.g. identification documents, phone, money, medicines, and clothes) available, and a list of telephone numbers in case of an emergency.
- If possible, develop a code with a trusted neighbour so they can come to your aid in case of an emergency.

I need medical attention because of violence. Who can help me and where should I go?

If you need urgent medical attention, call for an ambulance or contact your country’s emergency health services. If you need any other support, contact a specialized service if available or a health provider.

I am safe, but I am suffering from mental / sexual / social / long-term physical health problems because of violence. Is there anyone who can help me during COVID-19?

As much as possible, reduce sources of stress:

- Maintain contact with and seek support from family and friends via phone, email, text, etc.
- Try to maintain daily routines and make time for physical activity and sleep.
- Use relaxation exercises (e.g. slow breathing, meditation, progressive muscle relaxation, grounding exercises – see WHO Clinical handbook p.70) to relieve stressful thoughts and feelings.
- Engage in activities that in the past have helped with managing adversity.
• Seek information about COVID-19 from reliable sources and reduce the time spent consuming news (for example, 1-2 times per day, rather than every hour).

Seek care from a trained health provider for symptoms and conditions including injuries that need medical attention. Due to restrictions on movement, and pressure on health systems, it may be difficult to access healthcare in person at this time. In this case, find out what is available in your locality and seek alternatives, including information and support offered by phone or online.

If you are currently receiving healthcare and support for violence-related issues this could continue during COVID-19 – this could even be by phone or online if feasible and appropriate for your health needs.

I am worried about someone I know. How can I help?

If you know of, or are concerned about, someone in an abusive relationship there are some things you can do:

• Keep regularly in touch with the person to check that they are safe, ensuring that it is safe for them to be in touch with you. Assume that a perpetrator of violence can see, hear and or monitor communications, so find out how best to communicate with the person that you are concerned about. Send them an SMS or message via email or social media, in a way that is safe for them. Be discrete in connecting with them when the abuser is present in the home so that they are not placed at risk of additional harm. Check each time, as this may change.
• Find out what services for survivors of violence against women (e.g. shelters, hotlines, counselling services, women’s organizations) are functioning during the COVID-19 pandemic and make this information available through your networks and social media. Only provide this information directly if you can do so discretely without the abuser finding out.
• If someone you know needs urgent help for whatever reason, be prepared to call emergency health services, the police, health centre, or hotline.

I want to report an incidence of violence during COVID-19. What should I do?

If you want to report an incidence of violence, you should follow your country’s guidance on how to report violence and contact the service where you are most likely to get a survivor-centred response.

Some countries are making exceptions to movement restrictions for reporting of violence specifically. Remember that reporting may put you at risk, so ensure you have a safety plan in place.
You may find making a report mentally or emotionally difficult. Seek the support of friends, relations, neighbours or colleagues, or local support services for survivors of violence.

**I have harmed or am worried about harming or hurting my partner (and children) with my words or actions. How can I stop?**

- If you feel yourself getting angry or very annoyed, step away into another room if you can, or outside for a deep breath.
- Count to ten and breathe in and out until you feel calmer. Count down from 10, or do anything else that may help you stay calm.
- Talk to a trusted friend, relative, or religious leader and if necessary seek help from local health services or specialized services if available.
- Recognize that everyone in your family is experiencing stress during this time.
- Demonstrate kindness and patience in your words and actions.
- Eliminate or reduce your alcohol consumption as much as possible.

The current measures to address the COVID-19 pandemic, such as restrictions on movement, as well as financial instability caused by the crisis, are likely to add to your stress. This is normal, and you can control how you react. Take measures to ensure you manage your stress in a way that is respectful and safe to you and your family. Try to be kind to yourself, your partner, children and anyone else in the family.

**I am a health worker. How can I help women survivors of violence during COVID-19?**

As a health worker, there are things you can do to help mitigate the impacts of violence on women and children at any time, including during the COVID-19 pandemic.

Whilst your time and resources may be stretched during this health emergency, you have a duty of care to women who may seek help from you – often to address physical and mental hurt caused by violence.

You may need to adjust how you deliver services, if face-to-face care is not possible. Depending on your resources consider mobile phone, WhatsApp or other communication channels to deliver support, always ensuring you can do this in a way that is safe for the survivor. Communicate openly with women about any changes in service delivery.

If a woman with suspected or confirmed COVID-19 seeks your care because of violence, your response should be the same as for any other survivor. You should however ensure that you are protected from infection, by maintaining distance where possible, wearing protective clothing, practicing respiratory hygiene, and washing hands and surfaces with soap and water regularly and after touching, to avoid infection.
In any circumstances, including during the COVID-19 pandemic, health workers should provide first-line support, using the LIVES approach to help women survivors of violence:

Listen closely, with empathy and no judgement

Inquire about women’s needs and concerns

Validate women’s experiences. Show you believe and understand.

Enhance their safety.

Support women to connect with additional services.

I run a health facility. What can I do to support women survivors of violence during COVID-19?

- Identify information on local services for survivors, including on hotlines, shelters, rape crisis centers, and counselling.
- Find out opening hours, contact details and whether these services can be offered remotely, and establish referral linkages.
- Make these available to health care providers and easily accessible to patients/clients coming to your facility.
- Support the health care providers in your facility to continue to support women survivors of violence during this time.
- Be prepared to shift rapidly to providing care through alternative ways, by creating effective response plans; for example, by ensuring frontline healthcare workers have phones and can charge them.
- Ensure there is a protocol in place to ensure continued safe document storage in case of sudden lockdown.
- Inform survivors of ways they can protect themselves, and provide small credit card-size cards listing relevant phone numbers for support.

I am a policy maker. What can I do to prevent and address violence against women during COVID-19?

- When making preparedness and response plans for the COVID-19 pandemic, include essential services for violence against women.
- Allocate adequate resources for services for survivors and identify ways to make them accessible – particularly in the context of measures to restrict people’s movement.
- Explore the use of telemedicine, digital health, or mhealth to enhance access to support and services for survivors, while ensuring this is safe for them.
- Explore alternative shelters for women who may require this.
• Ensure that lockdown measures do not penalize women for seeking support when experiencing violence, such as by going to the police or hospital to report violence.

Has violence against women increased since the beginning of the COVID-19 pandemic?

Violence against women is highly prevalent, and intimate partner violence is the most common form of violence. During health emergencies, such as the COVID-19 pandemic, violence against women tends to increase.

Whilst data are scarce, reports from across the world, including China, the United Kingdom, the United States of America, and other countries suggest a significant increase in domestic violence cases related to the COVID-19 pandemic. Reports from other countries suggest a reduction in survivors seeking services due to a combination of lockdown measures and not wanting to attend health services for fear of infection.

How does COVID-19 increase risks of violence for women?

Stress, the disruption of social and protective networks, loss of income and decreased access to services all can exacerbate the risk of violence for women.

In many countries, where people are encouraged or required to stay at home, the risk of intimate partner violence is likely to increase. Please see the following resource for more detail: https://www.who.int/reproductivehealth/publications/emergencies/COVID-19-VAW-full-text.pdf

In addition, access to sexual and reproductive health services will likely become more limited. Other services, such as hotlines, crisis centers, shelters, legal aid, and protection services, may also be reduced, making it difficult for women to access the few sources of help that would usually be available.

Who is most vulnerable?

Women who are displaced, who are migrants or refugees, and those living in conflict-affected areas, older women and women with disabilities are particularly at risk of violence and are likely to be disproportionately affected by violence during COVID-19.

Why should I care about violence against women during COVID-19?

Violence against women is a grave violation of women’s human rights, no matter when, where, or how it takes place. There are many forms of violence against women, which have many potential negative health consequences for women and their children.

Violence against women can result in injuries and serious physical, mental, sexual and reproductive health problems, including sexually transmitted infections, HIV, and unplanned pregnancies. In extreme cases, violence against women can result in death.
The effects of violence are very often long-lived. Violence – in all its forms – can have an impact on a woman’s well-being throughout the rest of her life. This is unacceptable, and the risks of violence that women and their children face during the current COVID-19 crisis cannot be ignored.

When we are able to prevent violence, or to support women survivors of violence, we help to safeguard women’s human rights, and promote physical and mental health and well-being for women throughout their lives. This also helps to alleviate pressure on already stretched essential public services, including the health system.

Source: https://www.who.int/news-room/q-a-detail/violence-against-women-during-covid-19