



COVID-19 and violence against women

What the health sector/system can do

26 March 2020

Violence against women remains a major global public health and women's health threat during emergencies

- Violence against women is highly prevalent. Intimate partner violence is the most common form of violence.
 - Globally, 1 in 3 women worldwide have experienced physical and/or sexual violence by an intimate partner or sexual violence by any perpetrator in their lifetime. Most of this is intimate partner violence.
- Violence against women tends to increase during every type of emergency, including epidemics. Women who are displaced, refugees, and living in conflict-affected areas are particularly vulnerable.
- While data are scarce, reports from China, the United Kingdom, the United States, and other countries suggest an increase in domestic violence cases since the COVID-19 outbreak.^{1,2}
 - According to one report, the number of domestic violence cases reported to a police station in Jingzhou, a city in Hubei Province, tripled in February 2020, compared to the same period the previous year.³
- The health impacts of violence, particularly intimate partner/domestic violence, on women and their children, are significant. Violence against women can result in injuries and serious physical, mental, sexual and reproductive health problems, including sexually transmitted infections, HIV, and unplanned pregnancies.

How COVID-19 can exacerbate risks of violence for women

- Stress, the disruption of social and protective networks, and decreased access to services all can exacerbate the risk of violence for women.
- As distancing measures are put in place and people are encouraged to stay at home, the risk of intimate partner violence is likely to increase. For example:
 - The likelihood that women in an abusive relationship and their children will be exposed to violence is dramatically increased, as family members spend more time in close contact and families cope with additional stress and potential economic or job losses.
 - Women may have less contact with family and friends who may provide support and protection from violence.
 - Women bear the brunt of increased care work during this pandemic. School closures further exacerbate this burden and place more stress on them.
 - The disruption of livelihoods and ability to earn a living, including for women (many of whom are informal wage workers), will decrease access to basic needs and services, increasing stress on families, with the potential to exacerbate conflicts and violence. As resources become more scarce, women may be at greater risk for experiencing economic abuse.⁴
 - Perpetrators of abuse may use restrictions due to COVID-19 to exercise power and control over their partners to further reduce access to services, help and psychosocial support from both formal and informal networks.
 - Perpetrators may also restrict access to necessary items such as soap and hand sanitizer.⁵
 - Perpetrators may exert control by spreading misinformation about the disease and stigmatize partners.⁵
- Access to vital sexual and reproductive health services, including for women subjected to violence, will likely become more limited.
- Other services, such as hotlines, crisis centers, shelters, legal aid, and protection services may also be scaled back, further reducing access to the few sources of help that women in abusive relationships might have.

The risks of violence that women and their children their face during the current COVID-19 crisis cannot be ignored.



Health systems have an important role to play in ensuring services for women who have experienced violence remain safe and accessible during the COVID-19 outbreak

While recognizing that COVID-19 has placed an immense burden on the health systems and health workers in caring for the sick, there are things that can help mitigate the impacts of violence on women and children during this time:

- All stakeholders involved in COVID-19 response need to be aware of and raise awareness of the potential impacts that physical distancing, stay at home and other measures to address this pandemic are likely to have on women who are subjected to violence and their children.
- Health workers, the majority of whom are women in many settings, may be at risk for violence in their homes or in the work place. The latter is a serious problem that may be exacerbated when health systems are under stress. Health managers or facility administrators need to have plans to address the safety of their health workers. Front-line providers dealing with COVID-19 might experience stigmatisation, isolation and being socially ostracised. Providing psychosocial support, non-performance-based incentives, additional transport allowance, child-care support should be planned.⁶

What can be done to address VAW during the COVID-19 response

While recognizing that COVID-19 has placed an immense burden on health systems including frontline health workers, there are things that can help mitigate the impacts of violence on women & children during this pandemic.



Governments and policy makers must include essential services to address VAW in preparedness and response plans for COVID-19, resource them, and identify ways to make them accessible in the context of social distancing measures.



Health facilities should identify information about services available locally (e.g. hotlines, shelters, rape crisis centers, counselling) for survivors, including opening hours, contact details and whether these can be offered remotely, and establish referral linkages.



Health providers need to be aware of the risks and health consequences of VAW. They can help women who disclose by offering first-line support and relevant medical treatment. First line support includes: listening empathetically and without judgment, inquiring about needs and concerns, validating survivors' experiences and feelings, enhancing safety, and connecting survivors to support.



Humanitarian response organizations need to include services for women subjected to violence and their children in their COVID-19 response plans and gather data on reported cases of VAW.



Community members should be made aware of the increased risk of violence against women during this pandemic and the need to keep in touch and support women subjected to violence, and to have information about where help for survivors is available. It is important to ensure that it is safe to connect with women when the abuser is present in the home.



Women who are experiencing violence may find it helpful to reach out to supportive family and friends, seek support from a hotline, or seek out local services for survivors. They may also find it useful to have a safety plan in case the violence escalates. This includes having a neighbor, friend or relative or shelter identified to go to in the event they need to leave the house immediately for safety.

¹ Melissa Godin, "As Cities Around the World Go on Lockdown, Victims of Domestic Violence Look for a Way Out," *Time*, March 18, 2020, <https://time.com/5803887/coronavirus-domestic-violence-victims/>

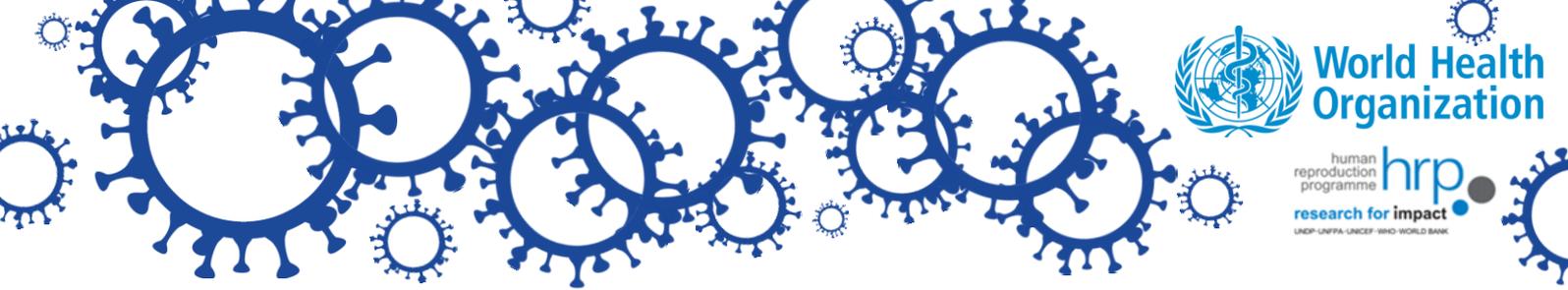
² Women's Aid UK, "The Impact of COVID-19 on Women and Children Experiencing Domestic Abuse, and the Life-Saving Services that Support Them," March 17, 2020, <https://www.womensaid.org.uk/the-impact-of-covid-19-on-women-and-children-experiencing-domestic-abuse-and-the-life-saving-services-that-support-them/>

³ Bethany Allen-Ebrahimian "China's Domestic Violence Epidemic," *Axios*, March 7, 2020, <https://www.axios.com/china-domestic-violence-coronavirus-quarantine-7b00c3ba-35bc-4d16-afdd-b76ecfb28882.html>

⁴ Jhumka Gupta, "What does coronavirus mean for violence against women?," *Women's Media Centre*, March 19, 2020, <https://womensmediacenter.com/news-features/what-does-coronavirus-mean-for-violence-against-women>

⁵ National Domestic Violence Hotline, "Staying Safe During COVID-19," *National Domestic Violence Hotline*, March 13, 2020, <https://www.thehotline.org/2020/03/13/staying-safe-during-covid-19/>

⁶ <https://www.georgeinstitute.org.in/frontline-health-workers-in-covid-19-prevention-and-control-rapid-evidence-synthesis>



Tips for coping with stress at home and actions to take if you or your family members are experiencing violence:

- Be aware that social isolation, quarantine, and distancing can have impacts on you and your family's psychological well-being.
- To the extent possible, reduce sources of stress by:
 - Seeking information from reliable sources and reducing the time spent consuming news (1-2 times per day, rather than every hour).
 - Seeking support from family and friends via phone, email, text, etc.
 - Trying, to the extent possible, to maintain daily routines and make time for physical activity and sleep.
 - Using relaxation exercises (e.g. slow breathing, meditation, progressive muscle relaxation, grounding exercises) to relieve stressful thoughts and feelings.
 - Engaging in activities that in the past have helped with managing adversity.
- Women who are experiencing violence may find it helpful:
 - To reach out to supportive family and friends who can help practically (e.g. food, child care) as well as in coping with stress.
 - To develop a safety plan for their and their children's safety in case the violence gets worse. This includes keeping numbers of neighbors, friends and family whom you can call for or go to for help; have accessible important documents, money, a few personal things to take with you if you need to leave immediately; and plan how you might exit the house and access help (e.g. transport, location).
 - To keep information about violence against women hotlines, social workers, child protection or nearest police station, shelters or support services that are accessible. Be discrete so that your partner or family members do not find out and you keep safe.

Where to find more WHO resources on violence against women

- [Health care for women subjected to intimate partner violence or sexual violence](#)
- [Strengthening health systems for women subjected to intimate partner violence or sexual violence: A health manager's manual](#)
- [Caring for women subjected to violence: A WHO curriculum for training health-care providers](#)
- [Clinical management of rape and intimate partner violence survivors: Developing protocols for use in humanitarian settings](#)
- [Violence against women infographic](#)