INTRODUCTION

This brief highlights emerging evidence of the impact of the recent global pandemic of COVID-19 on violence against women and girls. It makes recommendations to be considered by all sectors of society, from governments to international organizations and to civil society organizations in order to prevent and respond to violence against women and girls, at the onset, during, and after the public health crisis with examples of actions already taken. It also considers the economic impact of the pandemic and its implications for violence against women and girls in the long-term.

It is a living document that draws upon the knowledge and experience of a wide range of experts who support solutions to end violence against women and girls, attentive to the country context in which the crisis is occurring.
The Shadow Pandemic: Violence Against Women and Girls and COVID-19

Globally, 243 million women and girls aged 15-49 have been subjected to sexual and/or physical violence perpetrated by an intimate partner in the previous 12 months.

The number is likely to INCREASE as security, health, and money worries heighten tensions and strains are accentuated by cramped and confined living conditions.

Emerging data shows that since the outbreak of COVID-19, violence against women and girls (VAWG), and particularly domestic violence, has INTENSIFIED.

In France, reports of domestic violence have increased by 30% since the lockdown on March 17.

In Cyprus and Singapore helplines have registered an increase in calls at 30% and 33%, respectively.

In Argentina emergency calls for domestic violence cases have increased by 25% since the lockdown on March 20.

Increased cases of domestic violence and demand for emergency shelter have also been reported in Canada, Germany, Spain, the United Kingdom and the United States.

As stay-at-home orders expand to contain the spread of the virus, women with violent partners increasingly find themselves isolated from the people and resources that can help them.

87,000 women were intentionally killed in 2017. The majority of these killings were committed by an intimate partner or family member of the victim.

Violence against women and girls is pervasive but at the same time widely underreported. Less than 40% of women who experience violence report these crimes or seek help of any sort.

The global cost of violence against women had previously been estimated at approximately US$1.5 trillion. That figure can only be rising as violence increases now and continues in the aftermath of the pandemic.

The surge in COVID-19 cases is straining even the most advanced and best-resourced health systems to the breaking point, including those at the frontline in violence response.

Domestic violence shelters are reaching capacity, or unable to take new victims due to lockdown and social distancing measures. In other cases, they are being re-purposed to serve as health centers.

National responses to COVID-19 must include:

Services to address violence against women and girls, including increased resources to support shelters,hotlines and online counseling. These essential services should be expanded and adapted to the crisis context to ensure survivors access to support.

Psychosocial support for women and girls affected by the outbreak, gender-based violence survivors, frontline health workers and other front-line social support staff must be prioritized.

A strong message from law enforcement that impunity will not be tolerated. Police and justice actors must ensure that incidents of VAWG are given high priority and care must be taken to address the manifestations of violence emerging in the context of COVID-19.
Violence against women and girls (VAWG) is a human rights violation, a universal issue, with great impact on victims/survivors, their families, and communities.1

Almost 18 per cent of women and girls aged 15 to 49 years who have ever been in a relationship have experienced physical or sexual violence by an intimate partner in the previous 12 months.2 The figure rises to 30 per cent when considering violence by a partner experienced during women’s lifetime.3 More than a third of women who are intentionally killed are killed by a current or former intimate partner.4

Although violence by a partner is one of the most common and widespread forms of violence against women and girls, they experience violence in a variety of contexts – in times of peace or conflict, or in the wake of conflict – and in diverse spheres: the family, the community and broader society. Rapid advances in technology provide another avenue for cyberviolence against women. Available data show that less than 40 per cent of the women who experience violence seek help of any sort. Among those who do, most look to family and friends. Less than 10 per cent of those women seeking help seek help from the police.5

The existing crisis of VAWG is likely to worsen in the context of COVID-19. Emerging data shows that since the outbreak of COVID-19, reports of violence against women, and particularly domestic violence, have increased in several countries as security, health, and money worries create tensions and strains accentuated by the cramped and confined living conditions of lockdown. More than half of the world’s population was under lockdown conditions by early April.

In France, for example, cases of domestic violence have increased by 30 per cent since the lockdown on March 17.6 Helplines in Cyprus and Singapore have registered an increase in calls by 30 per cent and 33 per cent, respectively. In Argentina, emergency calls for domestic violence cases have increased by 25 per cent since the lockdown started.

In Canada, Germany, Spain, the United Kingdom, and the United States, government authorities, women’s rights activists and civil society partners have indicated increasing reports of domestic violence during the crisis, and/or increased demand for emergency shelter.
In Australia, a Women’s Safety New South Wales survey reveals that 40 per cent of frontline workers have reported increased requests for help by survivors, and 70 per cent have reported that the cases received have increased in their level of complexity during the COVID-19 outbreak. Increase in reports of domestic violence is happening at the same time that services are being compromised. Life-saving care and support to women who experienced violence (i.e. clinical management of rape and mental health and psycho-social support) may be disrupted when health service providers are overburdened and preoccupied with handling COVID-19 cases. Even where basic essential services are maintained, a collapse in a coordinated response between different sectors, i.e., health, police and justice and social services response, and social distancing will mean that sectors will be challenged to provide meaningful and relevant support to women and girls who are experiencing violence.

In other cases, where movement is restricted, and/or where access to quality essential services is limited, or being administered differently, as a result of social distancing (e.g. counselling by phone, emails or other platforms), requests for help have been decreasing. A domestic violence helpline in Italy, for example, reported it received 55 per cent fewer calls in the first two weeks in March because many women found it difficult to ask for help during the lockdown. A similar drop in calls was reported by a women’s shelter network in the north of France. This is a worrying sign of women without recourse, who cannot access resources which can help them to cope or escape situations of violence. Women and girls at this time may not be able to reach networks, organizations that provide support and recognize abuse (e.g. women’s rights networks, teachers, health workers, faith leaders, community development officers, etc.). Also, given the existing gender digital divide, women and girls in many countries, especially those who face multiple forms of discrimination, may not have access to a mobile phone, computer, or internet to access services or be able to safely use these at home as they may be closely monitored by the perpetrator and other family members.

Where women have access to technology, on-line violence against women is also increasing. Before COVID-19, one in 10 women in the European Union reported having experienced cyber-harassment since the age of 15 (including having received unwanted, offensive and sexually explicit emails or SMS messages, or offensive, inappropriate advances on social networking sites). During COVID-19 and moving restrictions, the use of online platforms has increased in the last few weeks. This has been used by some as an opportunity to groom young people into exploitative situations. According to Europol, online activity by those seeking child abuse material is increasing. Millions of women and girls are using videoconferences frequently, sometimes daily, to work and study. According to diverse media outlets, social media posts and women rights experts, different forms of on-line violence are on the rise including stalking, bullying, sexual harassment, and sex trolling. Examples include unsolicited pornographic videos while they are dialling into a social event via a virtual chat room.

Alongside increased reports of VAWG, we are also seeing greater complexity of violence.

The Ebola pandemic demonstrated that multiple forms of violence are exacerbated within crisis contexts, including trafficking, child marriage, and sexual exploitation and abuse. COVID-19 is likely driving similar trends at present. Women’s fear and experience of sexual violence and other forms of violence in public spaces is also likely to escalate, as we have already seen in the Philippines and India, as COVID-19 takes a foothold in urban and rural areas, where social distancing has emptied streets, and transport, except for those who are performing essential services.

Workers in healthcare professions at the forefront of the COVID-19 response, 70 per cent of whom are women, also face multiple risks to their health, wellbeing, and safety. There have been increased reports of both physical and verbal attacks on healthcare workers in China, Italy and Singapore.
The social and economic costs of violence against women and girls are substantial, with broader costs associated with delivering services to victims, as well as the costs related to the criminal justice response. The global cost of violence against women and girls (public, private and social) is estimated at approximately 2% of global gross domestic product (GDP), or US$1.5 trillion. That figure can only be rising as violence increases now, and continues in the aftermath of the pandemic. A predicted rise in the different forms and manifestations of violence against women and girls will not only exacerbate the economic impacts of the COVID-19 crisis but will also slow down economic recovery across the world.

The economic impact of COVID-19 resulting from the widespread closure of businesses and industries puts increased financial strain on communities, particularly in segments of the population that are already vulnerable. Women disproportionately work in insecure, lower-paid, part-time and informal employment, with little or no income security and social protection, such as health insurance – and are therefore less protected from economic recession in times of crisis.

Experience from the Ebola and Zika outbreaks shows that epidemics exacerbate existing inequalities, including those based on economic status, ability, age and gender.

The stark socio-economic inequalities will place the most vulnerable groups of women at an even higher risk of violence. In the aftermath of the crisis, violence against women and girls will continue to escalate, at the same time as unemployment, financial strains and insecurity increase. A loss of income for women in abusive situations makes it even harder for them to escape.

The financial impact of COVID-19 will also affect the capacity of local women’s organizations, to advocate for policy reforms on violence against women and girls and for service provision to survivors of violence over the long-term.
EXAMPLES OF RESPONSES FROM GOVERNMENTS AND CIVIL SOCIETY ORGANIZATIONS

Ensuring Safety of Women

• In Canada, domestic violence shelters are to remain open during the lockdown. A Canadian aid package was recently announced to include $50 million to support shelters for those facing sexual violence and other forms of gender-based violence. In Quebec and Ontario, domestic violence shelters are deemed as essential services and must remain open during the lockdown.

• In Italy, instead of the survivor having to leave the house of an abuser, prosecutors have ruled that in situations of domestic violence the perpetrator must leave the family home.

• In France, as shelters exceed capacity, alternative accommodation is being provided for domestic violence survivors by hotels, and other countries including in the Caribbean are also exploring alternative accommodations.

• In China the hashtag #AntiDomesticViolenceDuringEpidemic has taken off as part of advocacy with links to online resources - helping to break the silence and expose violence as a risk during lockdown.

• In the Eastern Cape, South Africa, support is being allocated to accelerate community-level service delivery for survivors of GBV, with dedicated focus on women in the informal economy, as well as young girls and women affected by HIV and AIDS.

• Australia, France and the UK allocated additional dedicated funding to support women experiencing violence and to organisations providing services.

Innovative Solutions

• Many online and mobile technology service providers are taking steps to deliver support to survivors during this period of limited mobility and increased demand, such as free calls to helplines in Antigua and Barbuda agreed by two telecommunications firms.

• In Madrid, Spain, an instant messaging service with a geolocation function offers an online chat room that provides immediate psychological support to survivors of violence.

• In the Canary Islands, Spain, women can alert pharmacies about a domestic violence situation with a code message “Mask-19” that brings the police in to support.

• In Cumbria, UK, police have enlisted postal workers and delivery drivers in looking out for signs of abuse. A popular app called ‘Bright Sky’ provides support and information to survivors, but can be disguised for people worried about partners checking their phones.

Virtual Justice System

• Strategies and tools to address the slowdowns in the justice system because of institutional closures are important to avoid impunity. In Kazakhstan, lockdown has caused cancellation of planned court sessions and cases of violence are being adjourned.

• Argentina has taken steps to address delays in the judicial processes and has extended protection orders for survivors to 60 days.

• In Colombia the government has issued a decree to guarantee continued access to services virtually, including legal advice, psychosocial advice, police and justice services including hearings. Other countries are using virtual means to keep the justice system operating, such as having a domestic violence survivor teleconference into a court proceedings.
RECOMMENDATIONS FOR ACTIONS

It is critical to address the increase of violence against women during COVID-19 through accelerated and concerted efforts of governments, international and national civil society organizations and UN agencies. The needs of women and girls who face multiple forms of discrimination need to be prioritized.

GOVERNMENTS—UNITED NATIONS AGENCIES

1. Allocate additional resources and include evidence-based measures to address violence against women and girls in COVID-19 national response plans.

2. Strengthen services for women who experience violence during COVID-19
   • Treat services for women who experienced violence as essential services.
   • Strengthen services, including shelters, through capacity rapid assessments, and through design of risk assessments, safety planning and case management, adapted to the crisis context, to ensure survivors’ access to support.
   • Ensure psychosocial support for women and girls who experienced violence and frontline health and social support workers.
   • Expand the capacity of shelters, including re-purposing other spaces, such as empty hotels, or education institutions, to accommodate quarantine needs.
   • Strengthen helplines, including through protection from sexual exploitation and abuse (PSEA), online counselling and technology-based solutions such as SMS, online tools, and social support networks.

3. Build capacity of key services to prevent impunity and improve quality of response
   • Raise awareness of police and judiciary about the increase of violence against women and girls during COVID-19 and provide training on how to respond, protect and refer victims and survivors to appropriate services.
   • Train first responders on psychosocial support, including health workers, law enforcement and court officials and emergency shelter and counselling staff still operating during the crisis.
   • Provide training for education and child services staff on safety and referral information for children who may be experiencing abuse at home or who may be vulnerable to online predators.

4. Put women at the centre of policy change, solutions and recovery
   • Ensure support for grassroots women’s rights organizations, especially those that provide essential services to hard-to-reach, remote and vulnerable populations.
   • Ensure women’s organizations and women’s community organizations participate in the decision-making processes so that needs and concerns are identified and included in prevention of and responses to violence against women and girls.
   • Consider the role of women’s organizations in recovery plans and the longer-term solutions to address the increase of violence against women and girls during COVID-19.

5. Ensure sex-disaggregated data is collected to understand the impact of COVID-19 on violence against women and girls and inform the response
   • Collect sex-disaggregated data on the incidence of violence against women and girls, including domestic violence (including psychological and economic violence) and sexual violence, recording place of occurrence.
   • Collect data on the needs and capacity of services to respond to the increased demand from women and girls in the context of COVID-19.
   • Ensure any data collection efforts does not put women and girls at greater risk of violence and distress.
Strengthen advocacy and engagement of different actors to address violence against women and girls during COVID-19

- Build strong advocacy and awareness about increased violence against women and girls during COVID-19.
- Proactively challenge gender stereotypes and harmful masculinities, accentuated under COVID-19 circumstances (e.g. increased household care work for women, financial insecurity/unemployment), with targeted messages for men in order to encourage healthy ways of coping with stressful situations.
- Engage with media outlets to continue to raise the visibility of increased violence against women and girls, demonstrating how the risk factors that drive violence are exacerbated in the context of COVID-19.
- Provide information, including through public service announcements, to survivors of domestic violence, for example, on service referrals, or how to safely continue employment, using accessible formats for different groups of women.
- Sensitize and engage the private sector using available global guidance on how to prevent and respond to violence against women and girls, including female employees who work from home during COVID-19 and experience domestic violence.
- Ensure that local and regional authorities make public spaces safe for women and girls throughout different stages of the pandemic.

UN Women is working with its partners to ensure that measures to address violence against women and girls are included in the COVID-19 response and recovery at country, regional and global levels, in line with the principle of leaving no one behind.

The UN Trust Fund to End Violence against Women (UN Trust Fund) is reviewing all current grants to identify prospective budget lines that could be quickly reallocated to provide immediate assistance to local women’s organizations in these challenging times. Subject to donor contributions, the UN Trust Fund will also establish a COVID-19 Funding Window with two specific streams:

1. Support for existing civil society organizations funded by the UN Trust Fund (grantees) – with priority for small women’s organizations – providing additional core funding to help them adjust to challenges arising as a result of the COVID-19 crisis and to ensure the stability of projects and sustainability of the organization in the longer term.

2. A “COVID-19 Response” targeted Call for Proposals that will fund new projects specifically designed to support women and girl survivors of violence in the contexts created by the COVID-19 pandemic.
UN WOMEN’S PARTNERSHIPS IN ACTION

Gender-responsive and locally relevant responses to COVID-19 and violence against women and girls, with women in key decision-making roles

- Globally, through our UN Safe City and Safe Public Spaces Initiative, we work with local governments, justice/police/health sectors, and grassroots women’s organizations, to deepen support across municipal departments (transportation, parks, public work spaces, sanitation, and housing) in ensuring safe public spaces for women and girls during the crisis.

- Several offices monitor and/or undertake rapid assessments of violence against women and girls and COVID-19 (Fiji, Malawi, South Africa, Tonga, Vanuatu), as well as service providers capacity, support helplines, and disseminate relevant guidelines, including through the Safe and Fair programme in the ASEAN region.

- As a result of these assessments, the Safe and Fair programme reports increased risk of sexual exploitation and violence by border police and armed guards, for returnees travelling home, and increased risk of psychological violence to women migrant workers who lost their jobs and are no longer able to support their families.

Provision of quality essential services adapted to the current pandemic context

- UN Women Kenya is training and equipping frontline health providers with mental health and wellbeing programmes for families.

- Partners are supported to update referral pathways and service delivery protocols (Vanuatu, Sudan, Trinidad and Tobago).

- In Fiji, guidance on on-line services provision to survivors of violence was provided. A code of conduct is in place to do no harm in working with community representatives and village leaders.

- As part of the EU-UN Spotlight Initiative, in Jamaica and Grenada, support through technological capacity building is provided to the Bureau of Gender Affairs, the law enforcement sector and the judiciary to respond to COVID-19.

Increase of knowledge and awareness—support for community mobilization

- Partners are contributing to mass media/social media sensitization on COVID-19, increase of violence against women and girls and its prevention. This includes a focus on positive masculinities/sharing of household responsibilities and supporting domestic and vulnerable workers (Antigua and Barbuda, Malawi, Sudan, Tanzania, Uganda, Zimbabwe and Morocco).

- Engaging with telecom mobile companies to deliver messages and provide services (Antigua and Barbuda, South Africa).

- As part of the EU-UN Spotlight Initiative, in Guyana, interventions challenging violent masculinities and CSOs advocacy on ending violence against women and girls are adapted to COVID-19 context, including through technology.

- In Georgia and Turkey, we advocated for companies to support their personnel, including survivors of domestic violence.
26. Almost 10 million people have filed for unemployment benefits over the last two weeks, New York Times, 2 April 2020.