

SOCIETY, BEHAVIOUR AND HEALTH

VIOLENCE AGAINST WOMEN DURING COVID-19 PANDEMIC

Who is this publication for?

- Government
- Policymaker



↑57%

Talian Kasih calls from women in distress during MCO in Malaysia

WHAT IS INTIMATE PARTNER VIOLENCE?

Intimate partner violence (IPV) is defined as any violence act between a couple that affects the physical, psychological or sexual harm within an intimate relationship.



“Violence against women is a major public health issue and one of the objectives of Sustainable Development Goals (SDG) is to eliminate it [1].”

BACKGROUND/ ISSUES

Intimate partner violence is the most common violence and violence against women is prevalent. 1 in 3 women globally has experienced physical and/or sexual violence by an intimate partner in their lifetime [2]. Many countries reported increased in violence against women cases since COVID-19 outbreak [3].

IPV is an important public health issue that has many individual and societal costs. IPV could lead to physical injury and death. About 35% of female IPV survivors experience some form of physical injury related to IPV [1]. There are also many negative health outcomes associated with IPV.

Among the risk factors associated with IPV are individual factors such as young age, low level of education; relationship factors such as conflict or dissatisfaction in the relationship and community factors such as gender-inequitable social norms and poverty [4].

THE CURRENT SITUATION

Based on the statistics, there were many pieces of evidences that violence against women cases increased during movement control order (MCO). For example, in China, Singapore and Indonesia have reported an increased number of IPV or violence against women during the starting of MCO [5]. In Malaysia, there was an increase of 57 per cent in Talian Kasih hotline (the Women and Family Development Ministry hotline for domestic violence) (or 1,893 calls) from women in distress up to 26th March 2020[6]. This is very serious as the victims could not seek help as they spent more time with the abuser at home. As many of the healthcare staffs are over-worked with handling COVID-19 cases, this may cause to interruption of the life-saving care and support to women who experienced violence such as for mental health and psychosocial support, thus increase the number of domestic violence cases.

Although the stay at home order is to protect the public and to cut spreading the infection, many IPV victims are trapped with the abuser at home [7].

Since the public are required to stay at home during MCO, this could lead to tension and stress especially to those who could not generate income during this period. As a result, this contributes to quarrel and violence between the partner as they are confined at home all days and exaggerate the abusive partner's desire to exert power and control because of the isolation and health or financial concern [8].

As the movement of the victim is being monitored by the abuser, it makes the victim difficulties to seek help. They have less contact with family and friends who provides support. Moreover, school closures could increase the burden and stress to the victim as they need more attention and time to take care of their children and spouse [7].

RECOMMENDATIONS

The responsible bodies (Department of Social Welfare Malaysia and Ministry of Women, Family and Community Development) are to help the existing intimate partner victim by placing them at the temporary shelters instead of stay at home [8]. This could prevent them by being further abused by abusive partners. The potential intimate partner violence cases also should be screened and detected earlier by doing a rapid risk assessment to the people involved and provide the best possible solution to them such as providing temporary shelter to them [4]. By doing this, we could prevent an increase in intimate partner violence cases. Adequate temporary shelters should be offered to the victims by the government. The victims should utilise empty hotels or educations institutions to protect the victims temporarily.

A standard operating procedure(SOP) should be issued by the government in response to intimate partner violence and domestic violence cases and to make sure all the frontline officers involve in handling the cases adhere to the SOPs [9]. The government should able to instruct the involve parties such as National Domestic Violence Committee, a multi-stakeholder committee led by the Women, Family and Community Development Ministry to strengthen the services to the victims via rapid assessment through the design of risk assessment, safety planning and case management, adapted crisis context in order to ensure the victims can access to the support. The government also should publicise the support pathway to the victims so that when they are facing a problem and need the emergency help, they know what and whom they should contact urgently [5]. This could aid the victims to prevent further abuse from their intimate partner. This can be done via public service announcements to intimate partner violence victims such as on service referrals and how to safely continue work using the suitable medium.

The government is also recommended to install rules and regulations to allow flexible reporting and immediate actions so that it help a victim to report easier within a short duration [10].

Apart from that, the government or policymaker also should provide the adequate key resources in term of financial funding, human resources and law enforcing power related to domestic violence cases to government bodies to speed up this process [10]. For example, there is a need to increase the number of staffs to answer the Talian Kasih so that there are adequate staffs to accommodate the phone calls from the victims.

As recommended by The Women's Aid Organisation (WAO), the government need to tackle the intimate partner violence cases by implementing the emergency response measures during this COVID-19 outbreak [9].

Fast response within an acceptable window period by the bodies involved could help to safe the victims, especially in term of legal action [10]. By speeding up the law enforcement to arrest the perpetrator or abuser as soon as possible, this will encourage the victim or bystander to report against the violence without a delay and subsequently reduce the violence case. The awareness of police and judiciary need to be increased especially on the increase of violence against women [4]. They need to provide training on how to respond, protect and refer victims to proper the channel. The victim also should be able to obtain the Interim Protection Order and Emergency Protection Orders from the authority and the responsible bodies so that they are protected from the prosecutor during this outbreak [9].

Apart from that, support via self-help groups, friends, and online support groups could help the victim to handle the violence appropriately. The victims preferably need the on-site support as they are unable to go out seeking help due to MCO. By establishing digital monitoring such as creating special applications to track potential suspect, SOS system to allow the complainant to report issues associated with intimate partner violence enhance the helpline services to the victims [10].

The involvement of the neighbour or community member to allow them to report the violence cases can be done by training or educating them through the government agencies regarding the intimate partner violence that occurs at their surroundings [9].

The long term cares to the survivors such as follow-up if necessary to make sure the victims to reduce the trauma by providing psychological support to the survivors.

Recommendations:

- Place the victims at the temporary shelter
- Rapid risk assessment to screen the potential victims
- Issue SOP for frontline officers to adhere
- Publicise the support pathway to the victims
- Allow flexible reporting and immediate actions
- Implement emergency response measure
- Speed up law enforcement to arrest the abuser
- Increase awareness of police and judiciary
- Train and educate neighbours and community regarding the intimate partner violence to allow them to report if it occurs in their surroundings.
- Follow-up by providing psychological support to the survivors.

CONCLUSION

All the involved bodies such as Ministry of Health, the Sexual, Women and Children's Unit (D11) of Royal Police Malaysia, Department of Social Welfare Malaysia and Ministry of Women, Family and Community Development and communities should play crucial roles to make the collaboration between the parties successful in handling the victim, especially during the COVID-19 outbreak.

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