

## **Impact of the Covid-19 pandemic on domestic violence**

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Among the many side effects of the Covid-19 pandemic, it has become clear that the current health crisis provided a breeding ground for an increase in domestic and intra-family violence [1,2]. The concept of violence is to be taken here in the broadest sense, as defined by WHO: "the intentional use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, maldevelopment, or deprivation." [3].

As early as the beginning of April 2020, the UN issued an alert on the increasing incidence of violence against women worldwide. In France, the incidence of violence against women is estimated to have increased by 30% during the first round of containment [4]. This observation motivated a communication campaign on reporting tools, in particular, in pharmacies and shopping centers, which made it possible to draw attention to domestic violence. The voluntary sector had to adapt to the constraints induced by the health crisis, particularly through the introduction of new digital tools [5].

At national level, the number of police interventions for familial discords has increased significantly during containment, even if the proportion of these interventions following a qualified offence remains low. While an overall decrease in violent incidents was recorded during the first containment, the share of spousal and intra-family violence increased on the whole compared to 2019; after an initial decrease during the first two weeks, a net increase was observed from March 30 [5], reaching a peak in April and returning to a level similar to that of the months prior to containment [6]. These variations are corroborated by statistical analyses of forensic medicine consultations during this period [7].

In addition to the effect of containment, this rising trend had already been observed for several months, following the "Grenelle" against domestic violence, one of the primary objectives of which was to help victims break the silence. During the second containment announced on October 28, victimology consultation activity decreased again, but it did not fall as massively as at the beginning of the first containment. Furthermore, the apparent decrease in other types of violence continued throughout the entire containment, probably linked to the limitation of gatherings and movements.

These observations seem to reflect, after a period of adaptation corresponding to the announcement of the containment and the transition to an all dematerialized system, an apprehension of victims to go to medico-legal units (UMJ) located in hospitals during the pandemic period, but also a decrease in the reporting of such violence by third parties (social workers, schools, doctors).

In total, the activity of the UMJs increased overall for domestic violence during confinement, but the abuses observed were not more serious than in normal times. Nevertheless, victims of domestic violence were able to give up care for fear of moving, which had an impact on the health of victims and reduced the possibility of physical or psychological violence report with a view of legal action. Nevertheless, victims of domestic violence have been able to forego

**In this period of confinement or curfew, the National Academy of Medicine recommends:**

- to continue the efforts already undertaken in terms of raising the public awareness of conjugal and intra-family violence and to strengthen the emergency reporting systems set up in pharmacies and shopping centers;
- to facilitate access to victim reception services by providing personalized care, setting up coordinated pathways in consultation with emergency departments, medico-legal units and law enforcement agencies, and by generalizing simplified complaint procedures;
- to encourage the involvement of community workers by increasing the human resources made available to them and to ensure that all services dedicated to the care of victims of violence are clearly identified as essential.

[1] Campbell AM. An increasing risk of family violence during the Covid-19 pandemic: Strengthening community collaborations to save lives. *Forensic Sci Int Rep* 2020 ; 2 : 100089.

[2] Evans ML et al. A Pandemic within a Pandemic - Intimate Partner Violence during Covid-19. *N Engl J Med* 2020 ; 383 : 2302-4.

[3] WHO. World Report on Violence and Health, Genève 2002.

[4] United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women). COVID-19 and Ending Violence Against Women and Girls, <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/issue-brief-covid-19-and-ending-violence-against-women-and-girls-en.pdf?la=en&vs=5006>.

[5] French Interministerial Mission for the Protection of Women against Violence and the Fight against Trafficking in Human Beings (MIPROF). Domestic violence during confinement: evaluation, follow-up and proposals.

[6] Ministerial Statistical Service for Internal Security. Conjunctural analysis of crimes and offences recorded by the police and gendarmerie at the end of June 2020. *Interstats Conjonct* N°58.

[7] Savall F et al. Accueil des victimes de violences au sein du couple dans le contexte d'épidémie de COVID-19. *Presse Médicale Form* 2020 ; 1 : 334-6.