

Entry

Domestic Violence against Women and COVID-19

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Definition: Domestic violence against women is defined as harmful behavior that occurs within a home and it involves aggressive and violent conduct towards women. Since the outbreak of the COVID-19 pandemic, and following the restrictions imposed to combat the pandemic (lockdowns, staying at home, isolation), domestic violence against women has increased worldwide. The current entry presents existing knowledge and discusses issues important for public awareness.

Keywords: domestic violence; violence against women; COVID-19; pandemic; lockdown

1. Introduction and History of Domestic Violence

According to Carl Rogers, “*The strongest force of our universe is not overriding power, but love*” [1] (p. 204). Domestic violence is not a new phenomenon [2]. Unfortunately, domestic violence has existed since the dawn of human civilization. Additionally, even today, in some cultures and belief systems, and regardless of the existing human rights, domestic violence within families or towards women, is still encountered [2]. It has been reported that 1 in 3 women have been subject to gender-based violence by their intimate partner or by a non-partner at least once in their lifetime in different regions [3].

Domestic violence against women is not a new phenomenon [4]. It is a multidimensional and complex phenomenon that many have attempted to explain throughout the years [5–7]. It has been influenced mainly by the views of Christian and Judeo cultural and ideological beliefs, law, and Greek philosophy that purported patriarchy—male-dominant behavior which views the male as a superior figure [8]. During the Roman era and under Roman law, a woman was considered to be the property of her husband to do with as he pleased (abuse, beat or kill) as a way of demonstrating who was in control in the home [9]. According to some religions, during the 15th century the husband had the right to judge a woman for the way she behaved and acted [9]. At this stage, domestic violence against women was not evident or yet defined, as a man beating his wife was considered to be an indication that he cared about his wife’s soul [9]. During the 15th century in the United Kingdom, a man had the right to be abusive towards his wife in order to maintain discipline in his home and family [9]. All these stereotypes and beliefs were carried over from generation to generation for centuries, making it extremely difficult to prevent these views on gender-based violence [5,10]. Colonial (patriarchal) institutions benefited by the inequality between genders and colonization (power, control, and patronage) as men were further empowered to abuse women [10,11]. This brutality broke down the confidence of many women, and their sense of self, and as a result women were victimized for years [10]. During the 16th and 17th century, women who disobeyed their husbands were still punished [8,11]. For instance, during 1711–1713 in London, it was reported that a man named Antony Pitts beat, kicked, and locked-up his wife, because she disobeyed his order [8].

A new era has begun since 1960, whereby domestic violence against women became more well-known to the media as more cases started being revealed [12]. Additionally, starting in the 1970s, in some States, men were banned from having the right to beat their wife as a stricter enforcement of laws against violence was observed [12,13]. In the 1970s,



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2 to 4 million women still reported abusive behavior by their partners annually [9]. A major change in communities and in many societies began after 1970, when the Women's Movement raised awareness on domestic violence against women. The definition of domestic violence changed form, and laws appeared to be more evident in theory and practice after 1973 [14]. The term "domestic violence", after the Women's Movement, was first used in 1973 without yet being clearly defined [14].

Between 1975 and 1978, 170 shelters for abused women opened worldwide [9,14]. In the U.S. in 1978, more than 300 shelters were established to prevent domestic violence against women. Finally, during the end of the 1970s, domestic violence was defined and considered as a crime as many interventions were justified by the Criminal Justice System of the USA [15]. After the 1980s, emergency hotline services also became more visible, as well as legislation reform, new government programs and policies, and emergency support for women who were victims of domestic violence [9]. Since 1980, more legislation was enacted in different countries demonstrating the massive need to prevent domestic violence against women, a continuous battle that requires further progress [12]. During the 19th century, violence against women from their partners began to be understood [16]. As a social phenomenon, it began to be recognized. Sometimes it was implicitly accepted, and at other times, this phenomenon was ignored completely.

Laws against domestic violence and police interventions became a reality during the 20th century; in fact, convictions and arrests started taking place [16]. It is important to note, however, that since incidents of domestic violence are not always physical and apparent there are reported cases that are not convicted. For instance, the reporting of shouting in a neighbor's house might not be recorded as a notifiable crime [17].

However, since the outbreak of the COVID-19 pandemic, statistical data shows a rapid increase in cases of domestic violence against women [18]. This mainly stemmed from the implications of the restrictions imposed due to the pandemic, such as staying at home and quarantining [19]. Staying at home during COVID-19 is a method used for safety, but not every home felt safe. Domestic violence is a social phenomenon that pervades all cultures, countries, and societies, regardless of demographics, traditions, socioeconomic class, education, and health. Nowadays, it is recognized as a direct or indirect crime. This phenomenon seems to affect the entirety of society [20]. This entry will present an overview of domestic violence in crisis situations and domestic violence's association with COVID-19. It will mainly outline the types of domestic violence, the cycle of abuse, the role of the victim and perpetrator, as well as the effects, after-effects, challenges, and interventions.

2. Defining Domestic Violence, Pandemics, and COVID-19

2.1. Definition of Domestic Violence

There are numerous definitions of *Domestic Violence*, also referred to as "Domestic abuse" and "Controlling behavior" and it is defined as any form of behavior that uses control and power on a person without their permission and occurs amongst members under the same household [21]. Abuse can occur in many different types of relationships, such as couples living together, separated, married, dating, as well as in any other type of human relationship and not just between intimate partners. However, the most common form of abuse worldwide is "violence against women". *Violence against women* refers to any act of violence directed against a woman because of her gender. Violence against women is hence seen as gender-based violence [22], and is defined as a chronic syndrome characterized by physical, sexual, emotional or psychological harm in the private or public life of a woman which may include threats, acts of violence, deprivation of liberty, and coercion [23]. Violence against women can be identified in all societies to some degree, including criminal assaults within or outside the home, enforced isolation, not being allowed to contact family or friends, and many others [24].

2.2. Definition of Pandemics

A pandemic is defined as any type of disease that extends massively to large geographical areas, categorized as trans-regional, inter-regional and global [25]. Pandemics are eras of emergencies that have extreme mechanisms of spread which empirically have a spectrum of etiologies and no single accepted definition or explanation of their cause. Some of the most well-known pandemics around the world include COVID-19, HIV, cholera, the black death, influenza, AIDS, West Nile disease, plague, dengue, and obesity [26,27].

2.3. Definition of COVID-19

According to the World Health Organization [WHO], COVID-19 is defined as a disease that is infectious and is mainly caused by a virus called SARS-CoV-2 [28]. It rapidly emerged in December 2019 and continued spreading aggressively worldwide since [29]. It is believed that anyone can become infected with COVID-19 and become ill at any age. The most commonly reported symptoms include headaches, fever, tiredness, cough, loss of smell or taste, loss of appetite, sore throat, diarrhea, rash on skin, and red eyes [28]. Some more serious symptoms that people with COVID-19 experience are: chest pain, difficulty breathing, confusion, loss of speech. Therefore, most cases develop mild or moderately mild symptoms, and the majority of patients recover without being hospitalized. Unfortunately, there are cases whereby hospitalization is necessary, as people experience severe symptoms, becoming seriously ill, and needing longer periods of recovery [28]. By the 10th of December 2021, more than 267,865,289 cases of COVID-19 were reported, of which 5,285,888 died from the disease [30]. According to the WHO [28], as of 9th of December 2021, 8,158,815,265 vaccines were administered worldwide to prevent the spread of the virus [28]. Preventative measures for COVID-19 suggested by the WHO [28] are: (1) vaccination, (2) social distancing, (3) wearing a fitted mask, (4) washing hands regularly (or rubbing hands with antiseptic), (5) covering nose and mouth when sneezing and coughing, (6) choosing open places when visiting others, and (7) self-isolate when feeling unwell and stay at home until fully recovered from the virus [28].

3. Domestic Violence against Women and COVID-19

During the pandemic and lockdowns due to COVID-19, domestic violence increased dramatically [31–34]. Evidence supports that domestic and sexual violence are exacerbated due to numerous factors that stem from disasters (such as war, disease, illness, tsunami, etc.) and pandemics [3,35–41]. Previous research found an association between cases of gender-based violence and crises, with inequity worsening during such periods [32,42–45]. Evidence shows an increase in sexual violence and harassment against women when individuals attempt to procure necessary needs during a crisis, such as food, water, and firewood [32]. It was found that one of the main reasons that domestic violence increases during a virus outbreak is the breakdown and reformation of laws [19], which includes the implementation of lockdowns. Such periods of forced proximity between partners increases the time spent together, and impedes victims of domestic violence from “escaping” their home (such as going to work or to social events) [46,47]. Additionally, due to the fact that social services and police have different emergencies and priorities during a pandemic, victims of domestic abuse may not be as well supported as they were before the pandemic. Similarly, perpetrators are not dealt with in the same manner as they would have been prior to a crisis; therefore, there is a lack of immediate punishment or restrictions [40]. It is worth noting that there have been reports showing that interpersonal ineffectiveness and violence within families increase rapidly during crisis situations [48]. Consequently, the need to increase support for victims has been emphasized, which might minimize violence when people are asked to quarantine or stay at home for longer periods during a crisis [32].

Research focusing on the association between the COVID-19 pandemic and domestic violence is still developing. Previous periods of crisis can provide an indication of what could be expected. Research suggests that intimate partner violence increased in previous disasters, for example, during the Earthquake in Haiti in 2007 [46], during the tsunami in

Asia in 2004 [32], and during Hurricane Katrina in 2005 [46]. Specifically, after the tsunami in Sri Lanka, violence against women and sexual abuse were proven to have an increase in cases [32]. Some outbreaks of previous viruses or diseases, such as Cholera, Nipah, and Ebola caused a huge increase in incidents of domestic violence against women [49,50]. In Africa, when the disease of Ebola began to spread, cases of sexual assault, rape, and violence against women increased as well [51]. Furthermore, crisis situations and domestic violence against women are interlinked [51] due to the many effects and circumstances that occur in people's lives either externally or internally.

Existing evidence supports that COVID-19 has also led to an increase in intimate partner violence, especially towards women [3], or has at least made it more common [52]. Since the outbreak of the pandemic, authorities, governments, and various organizations have begun to warn the public about the possible impacts it will have on areas such as domestic violence [53]. The transmissibility of the virus led many countries to declare mandatory lockdowns to reduce deaths and the further spread of the virus [53]. A global economic crisis ensued, and the circumstances of this crisis triggered many incidents of domestic violence. The stress and discomfort of people began to appear during the lockdowns [54] as people were asked to spend more time at home [55] which had a massive impact on their lives, especially on their psychological well-being. People were asked to confine themselves at home and stay away from family members, friends, schools, and even their workplace in some cases [55]. The latter has severely impacted families as it increased isolation, unemployment, and financial insecurity. All of these factors can escalate domestic violence both by men with a history of abusive behavior, as well as by those without [55].

In addition, domestic violence has become more prevalent during the COVID-19 pandemic [31] due to the increase in drug use [56], unemployment [57], criminal activity [58,59], educational difficulties [60], psychological difficulties [31], and isolation [46,47]. A drastic change in people's everyday life occurred during the pandemic as individuals had to deal with economic uncertainty, mental health problems, well-being difficulties, and negative feelings such as loneliness and anxiety [32]. Moreover, there is ongoing research for global information with regard to the association between domestic violence and COVID-19 worldwide [33,61–78].

3.1. Statistical Data and Percentages of Domestic Violence against Women during COVID-19

Statistical data were gathered, by country, to identify the effect COVID-19 had on domestic violence against women. In Albania, more than 245 cases were reported up to March 2020 [76]. In Argentina, more than 1280 reports were made for violence within families [62]. In Australia, an increase of 40% in calls made by victims asking for immediate help [70] was reported and there was a 75% rise in online searches for "Domestic Violence: How to get help" [71]. In Belgium, there was a 70% increase in calls during the first 16 weeks following the first lockdown [64] by victims. In Canada, 55,000 calls were made to Women's Domestic Helplines, 11,630 of which were never answered due to the massive number of calls received [74].

Inadequate funding for shelters, helplines, staff salaries, and other operating costs in such a hectic period during the pandemic was also a limitation in preventing domestic violence against women in many countries [66]. In China, 90% of reports were related to domestic violence [78]. In Colombia, 225% increase in cases were recorded during the first lockdown [69]. In Cyprus, a 30% increase was observed in helpline calling centers during the announcement of the first restrictions and the first lockdown [79]. In Fiji, 500 calls were made by women in April 2020 alone [63] and 1000 reports of violence against women were recorded by the Ministry [68]. In France, a 36% rise in domestic violence was identified by the police in Paris [71]. India reported 587 cases of domestic violence in only March and April of 2020 [75]. Israel reported a 35% increase in domestic violence from March until May 2020 [77].

For many countries, there is no information available regarding domestic violence against women. Additionally, with the continuation of the pandemic and the associated

challenges, updated statistics are continuously available. An increase in domestic violence against women has been noted in countries such as the Netherlands, New Zealand, Pakistan, Russia, Singapore, Spain, Tunisia, Turkey, United Kingdom, United States, and Venezuela [40]. Worth mentioning is the fact that the opposite effect was also observed in some countries. For instance, in Denmark there was a rise in homelessness by men who reported experiencing conflicts during the pandemic crisis [73]. Some countries, such as Switzerland and Italy, announced that there was a decrease in calls reporting domestic violence at the beginning of this crisis, which could have been caused by the fact that women might have found it difficult to ask for help during the first lockdown [67]. Additionally, in Germany, at the beginning of the pandemic, domestic violence against women was reported to be 28% lower than during the period of 2018–2019 [61].

3.2. Types of Domestic Violence and Their Association with COVID-19

If the general, the public were asked about the types of violence they associate with domestic violence, and the majority of the respondents would most probably answer that they associate physical violence with domestic violence [80]. Physical abuse is the most recognizable form of abuse as it is clearly the most visible one [81]. It is likely the only abusive behavior we all know. However, it is not the only type of abuse [82]. There are several types, and each type affects people differently. As expected, some types of abuse are perceived to be riskier to an individual than others [83]. Nevertheless, no type of abuse should be regarded as more important than the other. Some of the most common forms of abuse against women include: physical, sexual, psychological, verbal, financial, spiritual, and emotional [84]. The person using abusive behavior would use control and gender privilege to commit any of the aforementioned types [85]. All those types escalated during COVID-19, mainly due to lockdowns and isolation [86]. Recent research concluded that from all the different types of abuse, the psychological one appeared to be the one most frequently reported by victims during COVID-19 [87]. 50% of women reported experiencing verbal/psychological abuse, 40% sexual abuse, and 36% physical abuse [87]. Additionally, 90% of women that experienced abuse during the first lockdown stated that they did not ask for help, and 73% of victims that experienced domestic violence before COVID-19 stated that they also experienced abuse during the first lockdown [88]. There is a lack of research on the types of abuse victims of domestic violence experience the most frequently during COVID-19. This information would have allowed researchers to focus on a particular type of domestic violence. Whether common or not, prevention of all types should be sought.

4. The Effects of COVID-19 in Domestic Violence against Women

Previous pandemics, such as swine flu, influenza, as well as the current COVID-19 pandemic, were found to have many psychological effects on people [72]. Domestic violence against women during COVID-19 has affected women in various ways including experiences of chronic pain, sleep disturbances, changes in everyday life routine, depression symptoms, post-traumatic stress disorder, other types of abuse, brain injuries, sexual diseases, substance abuse and many other psychological symptoms, such as avoidance, anxiety, hyperarousal, low mood, re-experiencing trauma. [72,89–94]. It is clear that the multitude of effects domestic violence has on its victims is exacerbated during periods of crisis. According to the United Nations, there are several reasons why domestic violence incidents against women did not show an increase at the start of the pandemic, yet have increased as the pandemic progressed [40]. During the lockdowns, many women lost their jobs or had to work from home, they provided home schooling for their children, and those who lost their jobs became more financially dependent on their partners. Financial dependence on partners is identified as one of the factors that can increase domestic violence against women [95] as it makes it harder for the victim to leave the perpetrator. During lockdowns, individuals also reported experiencing higher levels of distress and depression symptoms [96]. Women coping with mental health difficulties before COVID-19, or who

were abused during COVID-19, reported having severe symptoms of stress, depression, and anxiety [96]. Additionally, women abused before and during the pandemic were at a higher risk for mental health-related difficulties [96].

In addition, alcohol sales increased during the lockdowns [97,98], and evidence shows that alcoholism tends to increase the incidence of domestic violence against women [99]. Additionally, closed proximity to male partners during quarantine gives very little to no freedom to women, which can also lead to more domestic violence at home [40]. The fact that many men lost their jobs and income during COVID-19, altered the power dynamics in many homes. Some male figures were left feeling unable to serve the role of provider for their families, which in turn made them experience inadequacy and emasculation [100,101]. Those negative feelings experienced by men were also shown to increase domestic violence against women [101]. Additionally, law enforcement was overwhelmed with new demands during COVID-19, and because of the minimal training and lack of preparation, this resulted in the reduced protection of women who experienced domestic violence by their partners [102]. This also led the victims to become hesitant to report the abuse, and led perpetrators to feel more in control and to continue the abuse. An increase in domestic homicides was also identified since the start of the pandemic [103]. Suicides were also linked to domestic violence and the pandemic [103]. Homicides and suicides illustrate the seriousness of domestic violence during COVID-19, as many women lost their lives due to this aggressive social phenomenon.

4.1. The Role of the Victim

Most victims tend to believe that abuse befalls everyone, that it is unavoidable and difficult to escape [104]. Victims feel that they are being betrayed by their intimate partner every time an abusive behavior occurs. This betrayal, accompanied with the experience of some type of abuse, causes emotional pain to the victim, and often physical injuries as well. In addition, the victim's psychological well-being and health deteriorates [105]. In particular, victims often experience some of the following: (1) live in fear and constant worry about their safety and safety of others, (2) experience loss of self-worth and low self-confidence, (3) dependency on their abuser emotionally and financially, (4) difficulty to end their marriage, (5) daily experience of danger, (6) fear of the unknown if they leave the abuser, (7) passive behavior to protect themselves and others from the experience of more abuse [104].

As mentioned earlier, some countries reported that there was no increase in domestic violence against women. According to the United Nations, this was mainly due to three reasons [40]. Firstly, the women were stuck in the same home as the abuser, which made it more difficult for the victim to escape and reach out for support. Secondly, the women felt uncertain and hesitant to ask for help as they did not know what to expect during lockdowns. Thirdly, domestic violence against women was not the only priority for social services and law enforcement during the pandemic and lockdowns [40]. Victims of domestic violence might have felt abandoned during the pandemic and their assistance options were reduced [104,106]. Additionally, many of the victims might have had to stay with their abuser during quarantines which might have caused them further distress. In cases in which victims were able to access support at a shelter home during lockdowns, the newness of the shelter home added an extra source of insecurity [104,106]. Victims of domestic violence also might have been scared to leave their homes and visit a police station to report domestic violence or visit a hospital to treat their injuries as they feared contracting the virus [106]. Undoubtedly, domestic violence victims have had to face several difficulties during the pandemic.

4.2. The Role of the Perpetrator

Perpetrators demonstrate abusive and aggressive behavior, which may vary in frequency; there are those whose behavior is exhibited more frequently and those who display the behavior on rarer occasions. Abusers usually act compulsively and their behavior can

inflict serious emotional and/or physical injuries [104]. Some men with abusive behavior find satisfaction from the suffering of the victim, and abusers can be diagnosed with various personality disorders, aggressive patterns, sociopathic tendencies, and psychological or psychiatric problems [107]. However, perpetrators are not always diagnosed, as most abusers report intense anger and feelings of remorse and guilt after an outburst [104]. Some abusers use aggressive and controlling behavior to achieve what they want. Perpetrators sometimes act in a premeditated fashion and at other times they act compulsively. For a perpetrator, personal gain is more important than what could happen to the victim [104]. Evidence shows that abusers are aware of the impact that their actions could have on a victim but act abusively nonetheless [104,105].

During the pandemic, several studies illustrated that lockdowns gave greater control, power, and freedom to perpetrators to abuse their victims [20,108]. Especially during lockdowns, abusers found it easier to enforce their tactics on their victims since they now had access to any conversation the victims had, access to their social media, their phones, and generally, access to their lives [104]. Additionally, the fact that victims had limited support options during the pandemic, accentuated the power that perpetrators felt over their victims. [109]. The increase in the power and control of the perpetrators, increases the risk of domestic violence against women.

4.3. *The Cycle of Violence/Abuse*

The cycle of violence identifies three stages (honeymoon period, tension building, and explosive phase), and illustrates that the perpetrator is not always abusive towards a victim [110,111]. This on/off abusive behavior by the perpetrator is what entices victims to stay. A sense of care and love wrongly convinces the victim that there is a good period as well as the honeymoon period. The honeymoon phase usually occurs at the beginning of the relationship. Abusers can highly manipulate their victims, giving them a false belief of security, love, and safety [110]. During this period, there is no sign of violent behavior, and perpetrators often behave in a way that makes their victims desire and appreciate them.

The tension-building phase is usually the time when the victim notices the tension in the relationship and some negative traits of the abuser, such as anger, jealousy, and irritation [110]. At this stage, the victim begins to feel fearful, humiliated, embarrassed, and angry. However, at this stage the perpetrator tries to act 'normal', sometimes trying to explain how they feel, but always nurturing the victim [110]. Lastly, the explosive phase is when the abusive behavior escalates. During this phase, victims may experience emotional, sexual, verbal, physical, or other types of abuse. At this stage, perpetrators have full control and power over the victim and the victim feels frightened, numb, helpless, and trapped [110]. This stage is always followed with apologies and promises for better behavior in the future. The cycle of abuse is experienced repeatedly in many domestic violence cases. During COVID-19, abusers found an opportunity to exercise more coercive control over their victims [112], thus maintaining the tension-building and explosive phases longer than usual.

5. **Interventions for the Prevention of Domestic Violence against Women during COVID-19**

The rise of domestic violence against women during COVID-19 emphasizes the challenges faced globally and the need for immediate action. The early detection of domestic violence is the first step to intervention. Early detection often occurs by health care professionals during routine check-ups, as research has shown that victims often complain of various symptoms (chronic pain, back pain, headaches, among others) requiring medical attention [113]. However, early detection involves everyone, including health, social and mental health care professionals, people who work in criminal justice settings and abuse services, police officers, victims of violence, and the general public among others [114]. Awareness of the signs of domestic violence and reporting such an awareness to the appropriate agency is important for both professionals and the general public. Evidence suggests

that multi-disciplinary interventions can minimize the shadow of domestic violence [115]. Some interventions suggested in related research include (1) reform or development of regulations and laws, (2) development of educational programs, (3) development of new shelters, (4) improvement of mental health support, (5) development of face-to-face solutions, (6) creation of virtual solutions, and (7) creation of new escape plans [115].

5.1. Reform or Development of Regulations and Laws

The reform and development of regulations and laws can further improve the prevention of domestic violence against women. A possible way is through the development of a national registration system for abusers that would allow people to investigate whether their partner has a history of abusive behavior [115]. Thus, reducing the potential dangers faced by victims. This database could also provide valuable insight for future cases and could potentially improve the prevention of domestic violence. A national registration system for domestic violence was created in July of 2020 and it is currently being used in China [116]. In some countries, after victims report domestic violence, due to threats and fear for their lives, they drop the charges. New legislation that would accelerate the court action process and at the same time ensure the continuation of the investigation, regardless of whether the victim has recanted the charges, will further prevent the recurrence of domestic violence [19]. It is important, once a report is filed by victims, for police and social services to demand immediate court action according to the assessed risk [19].

5.2. Development of Educational Programs

Educating individuals about domestic violence, the different types of violence, how to seek help and gather support, is important in acknowledging this social phenomenon and preventing it [117,118]. Many non-governmental associations and government organizations are developing psycho-educational programs to inform the public about domestic violence. These psycho-educational programs are available for different communities, such as schools, businesses, companies, universities, among others. Psycho-educational campaigns could inform more women that might be experiencing abuse on how to acknowledge abuse and seek help from the appropriate services [115]. Raising awareness about domestic violence can help both victims and perpetrators seek support and minimize their engagement within the abusive environment. Educating different communities could also help to prevent women from experiencing domestic violence in the future. Changing norms, values, and prejudices towards gender-based violence is a goal that should be relentlessly pursued.

5.3. Development of New Shelters

The essentials that a domestic violence victim requires at a time of crisis are: access to medical support, food, psychological support, social support, and shelter [119]. The opening of more women's shelters that provide the essentials above is vital during times of crises (such as in pandemics and lockdowns). During COVID-19, and especially during lockdowns, many shelters were at full capacity and struggled to accommodate the massive number of domestic violence cases [120–123]. More shelter support services would help to accommodate the higher number of domestic violence victims during crises.

5.4. Mental Health Support and Solutions

Whilst the COVID-19 crisis remains, restrictions such as social distancing and lockdowns will continue to exist. The barrier of social distancing and the inability for in-person interaction due to restrictions, indicate some of the reasons domestic violence victims face difficulties in getting support. The inadequate mental health support services offered during lockdowns can have a great impact on domestic violence cases. During COVID-19, the lack of mental health support was evident, and many people were placed on waiting lists in order to receive support from a psychologist, psychiatrist, or other mental health professionals; something that was also noticed during previous crises [124–127]. Research

however suggests, that technology-based interventions can benefit victims that experience domestic violence and can reduce symptoms of anxiety, low mood, and depression, and reduce exposure to abusers [128,129]. Findings suggest that technological interventions and approaches have the potential for better outcomes than face-to-face interventions [130].

Many countries have helplines and virtual help solutions for victim support [131]. There is evidence that online silent services are very effective as victims can ask for help without being easily noticed by the perpetrator [131]. In the UK, statistical data gathered from the “Respect Helpline”, which is a helpline that deals with domestic abuse, showed that 581% of victims gathered support through Respects’ website, 185% through email, and 97% gathered support through Respects’ helpline [132]. Another empowering service is the ad hoc online platform which provides support to victims that are in immediate need. The ad hoc service is already used in France, Norway, Italy, Germany, and Spain, providing in one website, all the resources that a victim of domestic violence needs [115,133]. Developing such platforms worldwide is very important in preventing domestic violence, as these systems were shown to be very effective [134]. During COVID-19, domestic violence helplines, reported that some requests were delayed due to the massive number of victims’ requests [135]. More professionals and staff need to be hired to support these services and victims of domestic violence. Governments in different countries need to develop further online help-seeking services and telephone helplines to minimize the effort and time victims need to find or request help [134]. Victims’ immediate access to resources and information is another prevention method for domestic violence.

Women tend to find it easier to share information about domestic violence when they are using online support rather than in-person [136]. However, it is crucial that the victim is separated from the abuser when receiving mental health support online as the sharing of domestic violence incidents in front of the abuser can escalate the abuse [115]. Advancing technology-based interventions globally, and offering mental health support worldwide would be beneficial for preventing domestic violence against women [137]. Creating a global mental health system that connects many experts in mental health, would allow victims of domestic violence to receive support promptly [138]. Governments and organizations would have more control of domestic violence cases and would be better equipped to prevent abuse against women and children.

5.5. Real-Time Solutions

During lockdowns, victims of domestic violence only had access to businesses that were essential for survival, mainly supermarkets and pharmacies [115]. Those businesses created a valuable outlet and perhaps their only opportunity to seek help. Some governments established silent mechanisms, such as coded messages, sounds, and alarm buttons and signals, to assist women that experienced abuse to be able to ask for help without being noticed by the abuser [139–141]. Many countries, such as Norway, Spain, the Netherlands, France, and Italy have already created a coded message, namely “Mask 19”, that abused women can use to seek help for domestic violence [140,142,143]. In the UK, the code-word “ANI”, meaning “Action Needed Immediately”, is used by victims of domestic violence in order to request help [144]. With the use of the code-word police or social services are notified, without attracting the attention of the perpetrator [140,144]. It is worth noting that many countries do not yet have coded messages for domestic violence. The use of coded messages could potentially help to reduce domestic violence incidents. For example, training staff of global chain restaurants and coffee shops, in recognizing coded messages could ensure the notification of the appropriate services (police, social services). Additionally, creating one global code message for seeking help could eliminate potential confusion and allow individuals to be cognizant of the meaning of the message and the actions they should undertake.

5.6. Escape Plans

A need to develop new escape plans for victims of domestic violence is highly recommended in times of crisis. More professionals need to be trained and educated on escape plans and risk assessment. Additionally, sound collaborations between services and professionals in multidisciplinary teams, has been found to be more effective for victims when planning escape plans [115]. This is because it is hard for a victim of domestic violence to leave when the perpetrator is at home [83]. A lack of detailed escape plans can place the victim at higher risk, as an escape from the perpetrator can be very dangerous [83]. Victims usually feel more settled when they can obtain some supplies and important documents before they escape. Some important things that domestic violence victims are asked to have access to when planning an escape plan are: bank account details, copies of important documents for victim and children, clothes, house keys, and a phone without tracking settings [145]. Special protection programs for victims need further development in order to ensure the anonymity of the victim for safety purposes [146]. Additionally, the fact that some domestic violence victims are not able to prepare an escape plan, leads to a need for more support during the process after escaping. Some victims are not able to gather some essentials before leaving their home, and services or volunteers in shelters can support these victims and their children by providing these necessities. Creating shelters that not only provide safety but also, psychological support, food, clothing, phone, access to important documents, is vital.

6. Conclusions

- The pandemic resulted in an increase in incidents of domestic violence against women worldwide.
- Domestic violence affects everyone in the society and especially women.
- During the COVID-19 pandemic, restrictions led to grater isolation, financial dependency, insecurity, and passivity of the victim.
- The pandemic period, the perpetrators power and control over the victims was increased.
- The tension-building and explosive phases of the cycle of violence were prolonged.
- It is evident that there is a lack of psychological and practical interventions that could promote mental health and well-being, during the COVID-19 pandemic, particularly for domestic violence victims.
- New multidisciplinary teams and interventions can be established for victims of domestic violence, which may further encourage movements to globally minimize domestic violence tendencies.
- In the context of COVID-19, more research on domestic violence in times of crisis needs to be conducted. Such research should focus on identifying possible solutions, raising awareness of the problem and the resources available to combat the problem, and on the development of new interventions to help the victims.

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