The impact of COVID-19 on gender-based Intimate/

Partner Violence (IPV): A scoping review

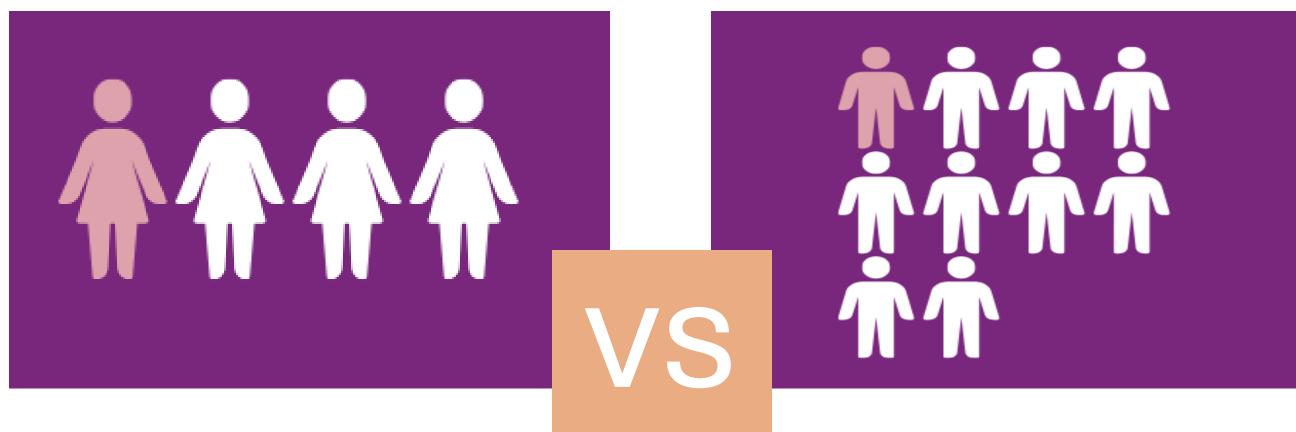
A disclosure on the existing research gaps...

30%

Domestic Violence increase in France during lockdown measures

Background

Each year, 1 in 4 women vs 1 in 10 men suffer from intimate partner violence (IPV) worldwide. In addition to this gender inequality, the COVID-19 pandemic amplified the risk of IPV perpetration.



Aims & Questions

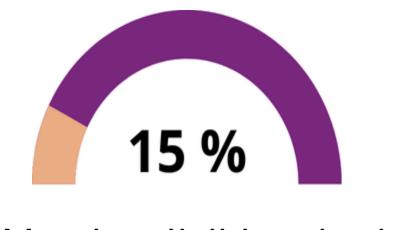
To identify the key triggers leading to the exacerbation of genderbased violence its key solutions in order to enhance future research and motivate stakeholders to take action adequately.

Methodology

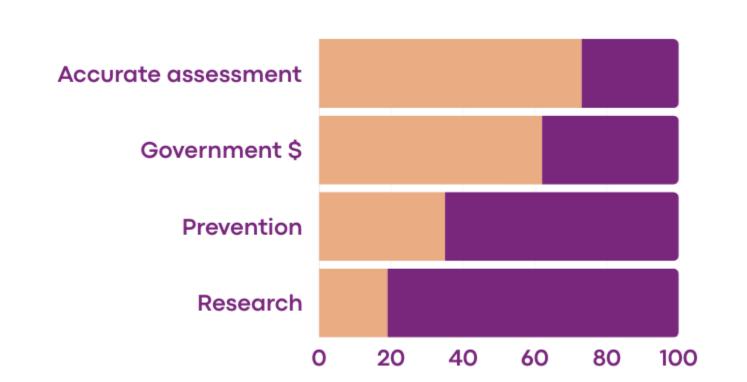
English-speaking articles published from 01-01-2020 to 06-30-2020 addressing IPV during the COVID-19 pandemic in:

- Database (Medline, PubMed & PsychInfo)
- Customized framework
- Coding Scheme
- Deductive approach
 - Theoretical Framework: Behaviour Chain of Violence

Results & Limitations



Met the eligible criteria for this review.

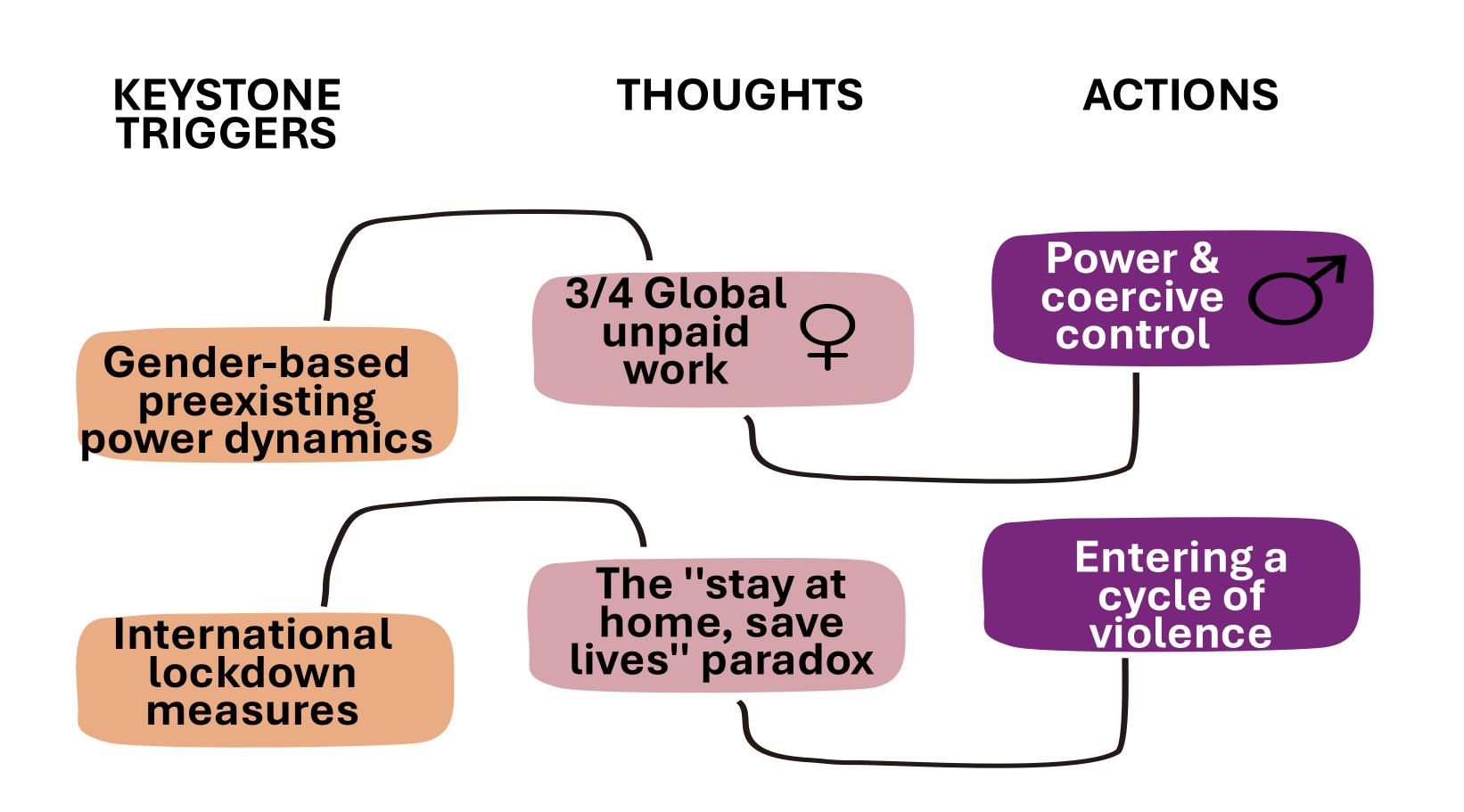


KEY SOLUTIONS TO REDUCE IPV

LIMITATIONS:

- Peer review of the electronic search strategy
- Other databases : CINAHL, Grey litterature

Analysis & Discussion



Subsequent triggers	Thoughts	Actions	
Psychological	 Fear of COVID-19 infection, anxiety, PTSD, depression, future uncertainty, grief, anger 	 Negative coping mechanisms (substance abuse) Family tensions 	
Physical	 Increased risk of physical health conditions Neurobiological predisposition to violence 	• Access to weapons	
Social distancing	 Reduced options for support, social & functional isolation, unreliable support system, fewer witnesses, no surveillance, school/home closures 	 >Exposure to violence <police interventions<="" li=""> <access justice,<br="" to="">hospitals, shelters</access> Difficulty leaving the abuser </police>	
Economic	 Financial uncertainty, barriers to health care access 	 Abuser's need to "prove masculinity" after \$ losses 	

Consequences

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	IPV		

Related forms of perpetration

- Higher prevalence amongst adult women with men as perpetrators
- Physical (beating)
- Sexual (harassment) Psychological (coercive control)
- Economic (money subtraction)
- Stalking (obsessive control of messages)

Recommendations

1. Research	2. Prevention	3. Funding	4. Accurate assessment
 Assess DV since the lockdown Assess short and long-term risks related to IPV Identify innovative strategies to collect data Standardize reporting modalities 	 Deploy communication strategies (mass media) Rase public awareness (campaigns) Communicate firearm safety instructions Include women in decision-making 	 Budget and stakeholder's coordination Response plans Resources for 24hr hotlines, shelters, trained multidisciplinary staff, reinforce available patrol, etc. 	 Proper IPV surveillance and screening (identify high risk patients) Ensure access to resources (Telemedicine) Sensitize health workers Prioritize the needs of minority Virtual legal/advocacy support

ALIVES framework for inquiring about and responding to a disclosure of domestic violence

A			V	E	S
Ask	Listen	Inquire	Validate	Enhance Safety	Support

Conclusions

What?:

Adequate funding of IPV prevention and research and an accurate assessment of the victims.

How?:

Prioritize telemedicine and health workers' sensitization **Why?:**

a.Insight and retrospective on the leading triggers of IPV during a pandemic context.

b.Persistent difficulty to obtain data without compromising the victims.

When?: Recognizing the growing challenges of this important obstacle is the first step towards gender equality. We have a moral responsibility to address this problem emergently.

