STUCKINA BAD SITUATION

How actions taken to slow the spread of COVID-19 affect family violence

By Andrew M. Campbell and Sandy Runkle

s the COVID-19 pandemic continues to upend life as we knew it, LEOs are likely aware of the dramatic effects society's efforts to prevent the spread of the virus are having on family violence.

Actions such as social distancing and sheltering in place, plus rising rates of risk factors for abuse such as unemployment and stress, are increasing the risk of family violence significantly. Further complicating matters is the fact that the closure or limitation of community resources such as schools, social service providers, libraries, and places of worship have made detecting incidents of abuse even more difficult.

Acts of family violence (intimate partner violence, child maltreatment, elder abuse, and pet abuse) have a significant impact on everyone in the home. Researchers have long connected physical or emotional victimization with lifelong physical and mental health difficulties, and family violence also puts one at increased risk for perpetrating future acts of abuse or violence in the home and/or community.

In some communities, reports of abuse in the home rose immediately after mandatory lockdown orders went into effect. In others, the opposite occurred, but not because the violence had ceased. Reports dropped off as many victims suddenly found themselves trapped in a home with an abuser—not knowing how long the situation might last, and unable to reach out for help.

Even before COVID-19 lockdowns, family violence was its own silent pandemic, impacting families and communities across the globe. In the U.S., at least 1 in 3 women and 1 in 4 men will be victimized by intimate partner violence (IPV) during their lifetimes. Victims are at high risk of significant, long-term emotional and physical injury—even death.

Some communities reported a dramatic increase in IPV homicides during the initial months of the pandemic. One sheriff whose community had more IPV homicides in three months of lockdown than all of 2019 expressed a concern that "there are likely more bodies out there we just don't know about yet."

FEWER REPORTS, MORE INCIDENTS

Reports of child abuse have fallen in most places. Normally, this would be occasion to celebrate, but the current decrease likely indicates only a reduction in reporting, not a reduction in actual occurrences. Since March, there have been fewer opportunities for families and children to be observed or ask for help.

Reports of child maltreatment often come from schools, camps, and afterschool programs, all of which have had closures and cancellations during the pandemic. Even as communities slowly begin to reopen, child abuse will likely remain hidden because so many youth-serving activities and outlets are being closed or curtailed.

While reports of child abuse have declined, rates of emergency room visits for children with abuse-related injuries and child abuse-related fatalities have climbed in many places. There is a growing fear that current circumstances may not only increase the risk of abuse in the home, but also increase its severity, since little is in place to detect or slow the progression of violence. And if community reopening efforts stall, the risk and severity of violence are likely to increase rapidly.

Less information exists on how shelter-in-place initiatives have impacted elder abuse and pet abuse. Elders and pets, along with children, are the most vulnerable beings in homes where violence or abuse occurs, and they share a high risk of severe injury or death. Pet abuse differs from other forms of family violence in that the majority of report sources are neighbors or passersby, so reporting has continued.

Neighbors are more likely to remain in their homes as a result of pandemic measures and thus, have more opportunities to detect and report concerns regarding pets. We must take these reports seriously, considering evidence that shows a clear correlation between risks of harm to humans in homes where animals are harmed intentionally. Calls reporting animal abuse and neglect may be our best source of information about other violence in the home.

A LASTING EFFECT

There are similarities between the current conditions and those reported after past natural disasters. Increased reports of controlling behaviors or aggression, high levels of stress, declining mental health, high rates of unemployment, limited resources, diminished social support systems, and increases in family violence have all been noted in research on past events. The increases in family violence that often occur after natural disasters can last for up to a year after the event concludes. As life returns to "normal," victim services professionals should be prepared for a prolonged increase in reports as trapped victims finally get the opportunity to escape their abusers and reach out for help.

The pandemic offers an opportunity to strengthen community partnerships and create new ones to further efforts to end family violence. Talk with people who live and work in the community and discuss the need for vigilance in reporting suspicions of abuse. Encourage the community to check on family and friends and be good neighbors by reporting any concerns they may have regarding the welfare of those who live nearby.

Store clerks, delivery persons, postal workers, home contractors, garbage collectors, and others are active in their communities even during mandatory lockdowns. They can be an important resource in bridging the gaps in abuse detection. You can continue the new relationships you form during the pandemic after it subsides to make them an ongoing source of information, support, and assistance.

Usually the first on scene when family violence victims call for help, and second only to educators in reporting child maltreatment, law enforcement plays a critical role in protecting vulnerable families across the country. The authors of this article greatly appreciate your dedication and undying determination to be there for those who need you most—before, during, and after COVID-19.

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