Intimate Partner Violence Amidst COVID-19

Brigham and Women’s Hospital’s 6th Annual Event Honoring

V-DAY
UNTIL THE VIOLENCE STOPS
Event Overview

Introductory Remarks and Event Overview
• Jeffrey Katz, MD, MSc: Professor of Medicine and Orthopedic Surgery, HMS; Director, Orthopedic and Arthritis Center for Outcomes Research, BWH
• Emma Williams, BA: Research Assistant, Orthopedic and Arthritis Center for Outcomes Research, BWH

V-Day and IPV During COVID
• Kaetlyn Arant, BA: Research Assistant, Orthopedic and Arthritis Center for Outcomes Research, BWH

Presentations
• Nisha Cirino, MSW, LCSW: Passageway Advocate, Southern Jamaica Plain Health Center
• Bharti Khurana, MD: Director, Trauma Imaging Research and Innovation Center; Emergency Radiologist, BWH; Assistant Professor of Radiology, HMS
• Andrea MacDonald, DNP, MSN/MBA, CEN, SANE-A, RN
• Eve Rittenberg, MD: Primary Care Physician, BWH; Assistant Professor, HMS

Panel Discussion
• Moderated by Leena Mittal, MD, FACP: Director, Division of Women’s Mental Health; Department of Psychiatry, BWH; Instructor of Psychiatry, HMS
• Featuring our presenters

Please submit questions publicly in the Zoom chat or via private message to Mardi Chadwick Balcom!
Visit https://www.brighamandwomens.org/about-bwh/community-health-equity/passageway-domestic-abuse-intervention-and-prevention to view curated resources for clinicians!
What is V-Day?

“A global activist movement to end violence against women and girls”

• Nonprofit organization started by Eve Ensler, playwright of *The Vagina Monologues*, in 1998
• Mission: raise awareness, funds, and motivation to continue to combat violence against women
• Includes annual stagings of *The Vagina Monologues* and *A Memory, A Monologue, A Rant and A Prayer*, benefits, films (*Until the Violence Stops*), educational events, campaigns for “One Billion Rising”, global outreach
Call For Submissions! by February 14th, 2021 @Visforvoices.com
Key Terminology

• **Trauma**: an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.

• **Interpersonal Violence**: violence between individuals, which includes family and intimate partner violence and community violence.

  • **Intimate partner violence (IPV)** can include acts of physical violence, sexual violence, emotional (psychological) abuse, and controlling behaviors.
A WHO study in 10 countries found that up to 60% of women reported experiencing violence by a partner.

Over 1 in 3 women in the US experience intimate partner violence during their lifetimes.

World Health Organization, 2012
National Intimate Partner and Sexual Violence Survey, 2015
“Pandemic within a Pandemic”

- Survivors restricted to home environment
- Limited access to support services
- Limited access to medical care
## Increases in IPV during COVID-19

<table>
<thead>
<tr>
<th>Country</th>
<th>% Increase in Abuse during COVID-19</th>
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<tbody>
<tr>
<td>United States</td>
<td>21-35%</td>
</tr>
<tr>
<td>France</td>
<td>32-35%</td>
</tr>
<tr>
<td>Brazil</td>
<td>40-50%</td>
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<tr>
<td>Argentina</td>
<td>25%</td>
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<tr>
<td>Australia</td>
<td>5%</td>
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<tr>
<td>Singapore</td>
<td>33%</td>
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<tr>
<td>China</td>
<td>200%</td>
</tr>
</tbody>
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Roesch, *BMJ*, 2020  
Usher, *Intl Journal of Mental Health Nursing*, 2020  
Contributing Factors

IPV was likely exacerbated by:

• Financial strain of individuals being laid off, told to stay home, etc.
• Increased stress as a result of closures of schools and childcare facilities
• Fewer interactions with mandated reporters (teachers, clinicians)
• Court closures that created new obstacles to filing restraining orders
• Reporting IPV that occasionally must be done in person
• Lack of privacy in telehealth encounters that do not offer the same guaranteed confidentiality to screen for IPV
What Does This Mean?

• How do we screen for IPV when survivors are reticent to come to medical facilities or have virtual visits (where confidentiality may be compromised)?

• How do we care for IPV survivors in the face of COVID-19 where survivors are trapped at home with abusers, unable to report violence and under exceptional financial and emotional stress?

• What adaptations have emerged to address these challenges over the course of the pandemic?