

Locked up at home

A cross-sectional study into the effects of COVID-19 lockdowns on domestic violence in households with children in Belgium

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Domestic violence and the COVID-19 pandemic



Domestic violence is a major public health problem worldwide...

Domestic violence:

Any behaviour in the family or domestic context, causing physical, psychological, sexual or socio-economic suffering to someone else.

Domestic violence goes beyond intimate partner violence and also includes child, sibling, and elder abuse.

... which has negative consequences on the health and wellbeing of the victims, their families, but also their surroundings.

Domestic violence can engender physical, psychological, sexual, social and economic consequences and may even contribute to intergenerational transmission of violence leading to potential future violence.

Increase in reported domestic violence during the COVID-19 pandemic

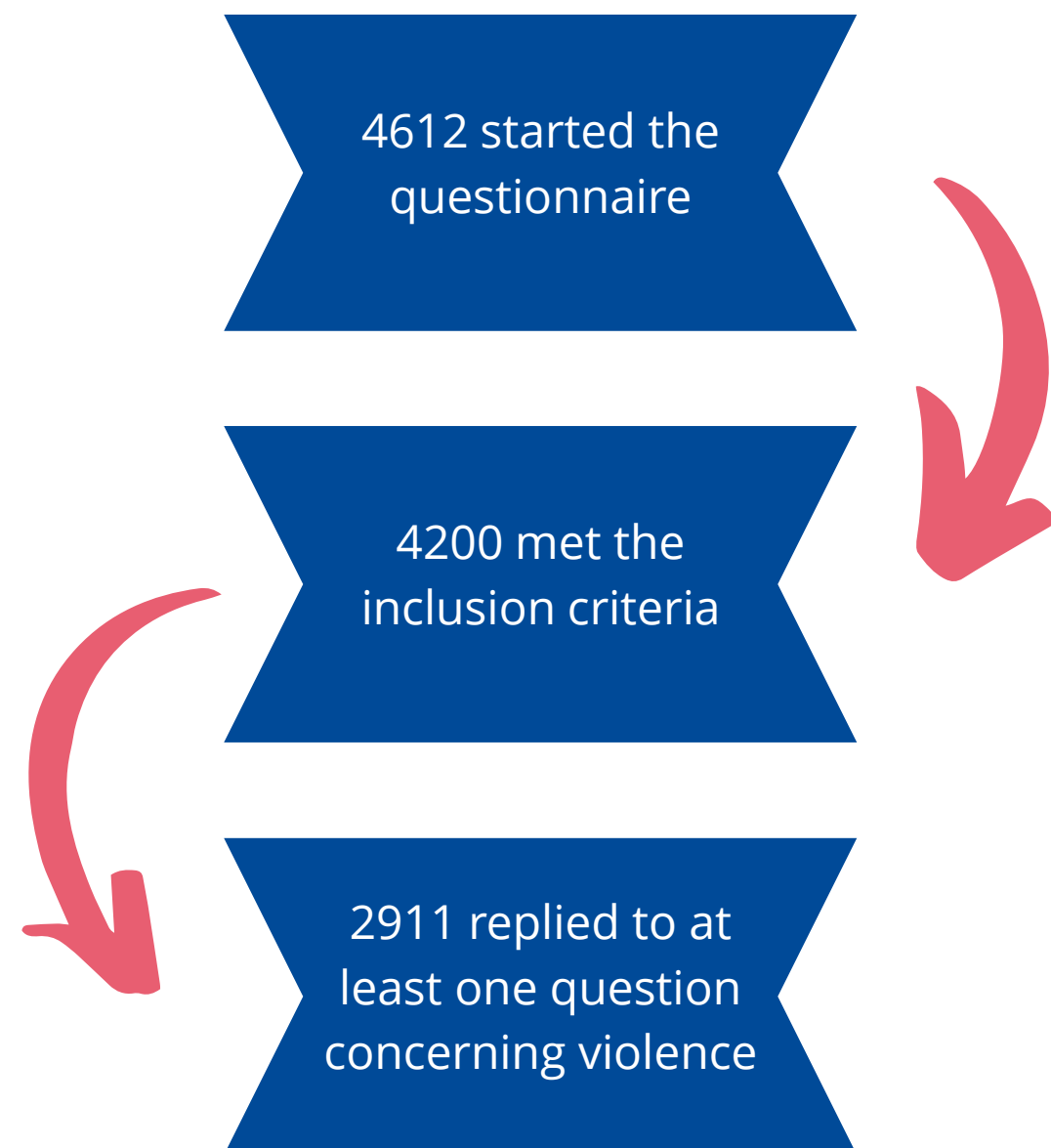
A combination of a physical threat to health, isolation, unwanted and unexpected changes in financial and social stability, and the potential loss of loved ones in COVID-times, **fueled feelings of stress, anxiety, and frustration**

Reports related to:

- **Further escalation of existing domestic violence**
- **Occurance of domestic violence in households where this had never happened before**



A study on “Relationships, Stress and Aggression in times of COVID-19”



Inclusion criteria

- Live in Belgium
- > 16 years

Data collection

- Between 14/01/2021 - 28/02/2021

5 parts

- Socio-demographics
- Relationships & social contacts
- Stress & mental well-being
- Negative experiences (psychological, physical and sexual violence)
- Help-seeking behavior

3 time periods

- Before the first wave (before 13/03/2020 = start of 1st lockdown)
- First wave (13/03/2020 - 31/10/2020)
- Second wave (1/11/2020 - until data collection)

Total sample: n = 2911

Exposure to (in)direct violence



A broad definition of violence

Forms of psychological, physical or sexual harm inflicted on another

Sexual violence: Hands-off and hands-on forms, starting from behaviour against one's will

Questions about specific behaviour to avoid interpretation problems

"Did someone do something to intimidate you ?"

"Did someone (try to) stab, burn, maim, mutilate, strangle or kill you ?"

"Do you know of someone having shown their intimate body parts to someone else in your household in a sexual way and/or masturbated in front of him or her when he or she didn't want to see it ?"

Relationship between assailant-victim

"To whom did this happen ?"

"Who was it that did this ?"

Data analysis plan

From simple univariate to complex multivariate analysis



Descriptive statistics

- Socio-demographics
- Relationships & social contacts
- Stress, mental well-being and coping mechanisms
- Exposure to (in)direct violence



Group differences

Chi² tests (and Fisher's exact tests) to gain a quick insight in the composition of

- 1.households that reported no child abuse versus
- 2.households that did report child abuse



Model building

Stepwise forward binary logistic regression with moderators

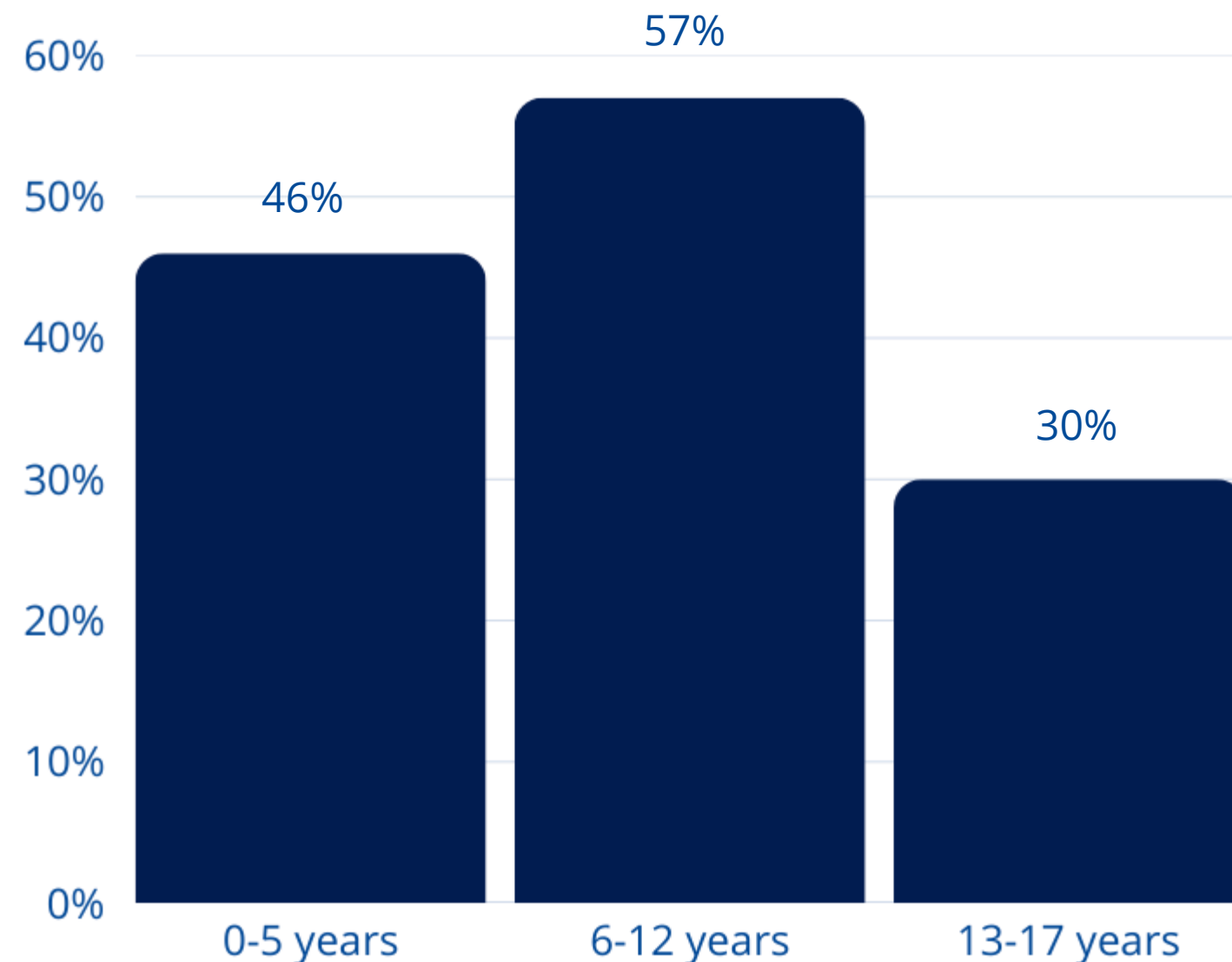
- respondent being the assailant
- respondent's age
- age of the children in household

in the relationship between all predictor variables and child abuse (outcome)

Specific inclusion criteria for this subsample: Households with children under the age of 18



Age of the respondent's children



870 respondents with at least 1 child and all children < 18 years

81% female; 81% finished higher education; mean age of 40 years

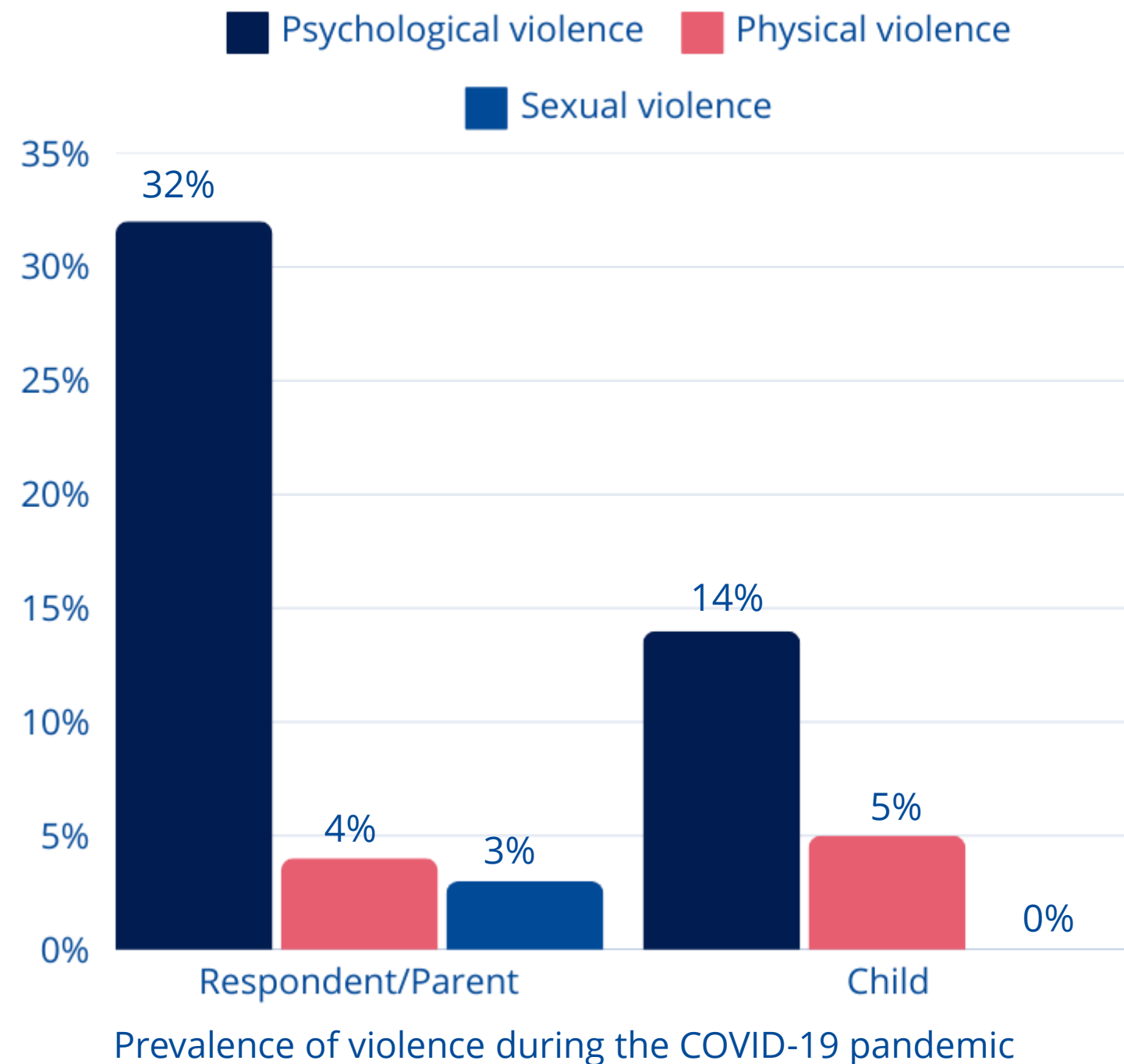
8% lived alone with 1 child, 30% lived with 2 other household members, 45% with 3 and 18% with more than 3

Alarming mental health status of the respondents/parents during the **COVID-19** pandemic

- 21% had (3 or more) acute stress symptoms (PC-PTSD-5)
- 78% with a moderate-to-high perceived stress level (PSS)
- 33% moderate-to-severe psychological distress (PHQ-4)
- 50% problematic alcohol intake (AUDIT-C)
- 17% suicidal thoughts

33% of the respondents directly exposed to domestic violence

15% of the respondents reported at least 1 victimized child in their household



Higher prevalence of child abuse in respondents that were directly exposed to violence themselves

Before the COVID-19 pandemic as well as during the COVID-19 pandemic

The **assailants** were mainly **part of the household**

- 28% respondent her/himself (parent of the child)
- 35% (ex-)partner of the respondent (parent of the child)
- 10% sibling of the victimized child
- 42% assailant that was not part of the family

Gender of the assailants: **63% male & 45% female**

Associations with occurrence of child abuse

Household with **child(ren) aged 0-5**

Half the risk for households with young children

Household size

Higher risk for large households
2.7x >4 members
3.2 x > 5 members

Perceived stress

2.5 x higher risk if respondents report high perceived stress levels

Respondent as **victim of violence before the pandemic**

3.5 x higher risk if respondents report a history of domestic violence themselves

Respondent as **victim of violence during the pandemic**

1.7 x higher risk if respondents were victimized as well during the pandemic

Conclusions & recommendations

Increased stress leading to more domestic violence !

Extra efforts should be made to **improve well-being** when maintaining sanitary measures by target mental health, stress management, and positive family coping strategies.

Clustering of risk of child and adult violence exposure & cumulative impact of exposure to violence !

Key actions to fight domestic violence:

- **Train healthcare workers** to screen for and assess risks of domestic violence, refer and follow-up on people at risk
- Provide **schools with tools and training**
- Expand **interventions** with individuals/couples who report high levels of stress/abuse to **include children** as well

Policy makers should make prevention of and response to domestic violence a priority in their current and future action plans.



Contact us

By e-mail

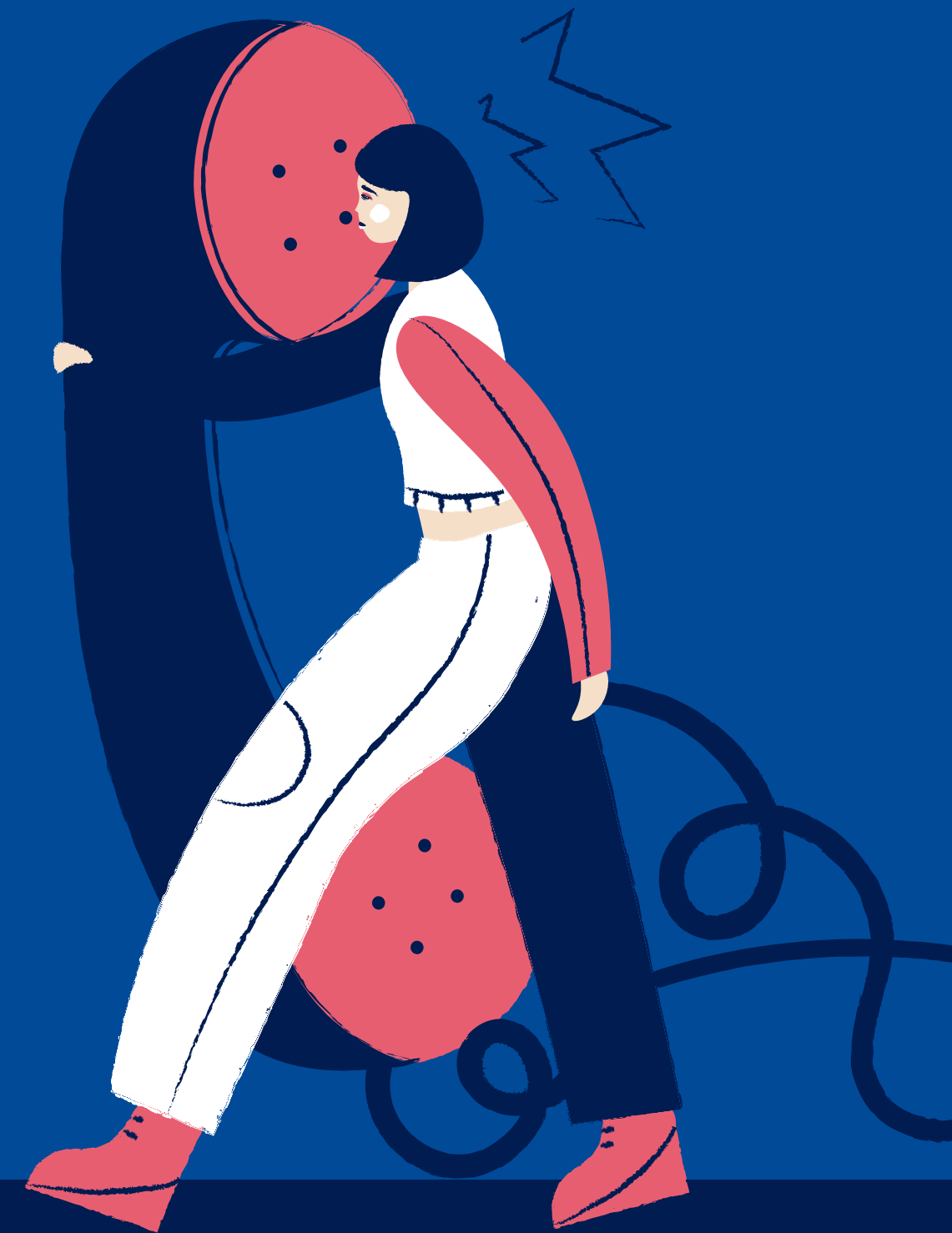
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