# **Practice Brief**

## **Executive Summary**

Emerging research suggests that the COVID-19 pandemic, and its accompanying containment measures, inadvertently created ideal conditions for the proliferation of intimate partner violence (IPV). Researchers at RESOLVE Manitoba and the Family Violence Prevention Program (Government of Manitoba) conducted a research project to understand how pandemics, such as COVID-19, impact survivors of IPV and the organizations that serve them in Manitoba. Research findings show that the COVID-19 pandemic increased the frequency and severity of IPV and enabled perpetrators to utilize new tactics of abuse and control. The influx of IPV during the pandemic also put increased strain on organizations serving survivors of IPV and made trauma-informed service provision difficult. Utilizing technology for online services, addressing barriers to digital access, developing innovative methods for connecting with survivors, implementing holistic services, increasing public awareness of IPV and pandemic supports, and strengthening system responses is needed to address the issue.

## **COVID-19** and the Experiences of Intimate Partner Violence Survivors and Service Providers

## Introduction

The COVID-19 pandemic was the first global pandemic to occur in nearly 100 years. Governments around the world implemented drastic measures to curb the spread of the virus, including lockdowns or "stay at home" orders, social distancing, and the closure of public spaces. While these drastic measures were necessary to prevent the spread of the highly infectious virus, they inadvertently exacerbated yet another public health epidemic that many have been battling at home for years—intimate partner violence (IPV). Emerging research suggests that the circumstances of the pandemic have increased the frequency and severity of IPV, and strained IPV resources under increasing demands for service.

To understand the impacts of the pandemic on IPV in Manitoba, researchers at RESOLVE Manitoba and the Family Violence Prevention Program (Government of Manitoba) developed a research study titled: *COVID-19 and the Experiences of Intimate Partner Violence Survivors and Service Providers.* This brief shares findings from the research with the aim of informing service provider responses to IPV during pandemics and other emergent or crisis events.

## **Research Overview**

The specific objectives of this research were to:

- Establish a foundational understanding of the nature and scope of the impact of pandemics on the social issue of IPV
- 2. Explore the impact of pandemics on IPV survivors
- 3. Identify how pandemics can put IPV survivors at additional risk
- 4. Explore the impacts of pandemics on IPV service providers
- 5. Explore how IPV-serving organizations in Manitoba responded to COVID-19, including what barriers they encountered
- 6. Develop policy and practice recommendations for policymakers and service providers

To address these objectives, the project utilized a mixed methods approach. Three sources of data were gathered in total, including an online survey for service providers, follow-up interviews with service providers, and in-depth interviews with survivors of IPV in Manitoba. Data from the online survey was analyzed using quantitative analysis software (SPSS) and data from the in-depth interviews was analyzed using qualitative analysis software (Dedoose).

#### Results

#### Increases in the Frequency and Severity of IPV

Increases in the frequency and severity of IPV were reported after the implementation of lockdown or "stay at home" orders. Increases in frequency were characterized by experiencing violence more often or beginning to experience violence in the relationship during the pandemic, while increases in severity were characterized by a rise in severe physical injuries and the escalation from non-physical to physical forms of IPV.

#### **New Tactics of Abuse**

Perpetrators utilized the unique circumstances of the pandemic to enact new tactics of abuse such as lying about available services, forcing survivors to collect the Canada Emergency Response Benefit (CERB), and destroying materials needed to work from home (e.g., computers and phones).





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For study details,

#### **Increases in Mental Health Challenges and Substance Use**

An increase in co-occurring issues, including mental health challenges and substance use among survivors and perpetrators of IPV during the pandemic were noted by survivor and service provider participants. Addressing IPV, mental health, and substance use among survivors was challenging, as few integrated services for these issues are available.

#### **Barriers to Help-Seeking**

The pandemic presented new barriers to seeking help for survivors including the reduction or closure of services, a lack of privacy due to lockdown or "stay at home" orders, confusion or a lack of information surrounding services, and vaccination status.

#### **Changes and Challenges to Service Provision**

Organizations adapted service provision during the pandemic in several ways including increasing or decreasing services, implementing online services, accommodating longer shelters stays, and utilizing hotels to accommodate increased demand at shelters. However, organizations found it challenging to stay up-to-date with changing public health orders, meet the overwhelming demand for service, and maintain social distancing and sanitary procedures during this time. Service providers also stated that it was difficult to provide trauma-informed care under pandemic public health requirements.

#### **Detrimental Impacts on Service Providers**

The challenges of service provision during the pandemic had negative impacts on service providers including mental and physical health issues (anxiety, depression, stress, and exhaustion), a lack of work-life balance, and isolation from supports such as friends and family.

## Recommendations

- Utilize Technology for Online Services and Address Barriers to Digital Access
- Utilizing technology to deliver online or virtual services to survivors is important when in-person service delivery is not possible. The need for online or virtual IPV and mental health services and text or chat-based crisis supports was specifically mentioned. However, the need to increase online or virtual access—particularly for those in rural, remote, and Northern communities—must also be addressed in order for these populations to access services.
- Develop Innovative Methods to Connect with Survivors and Implement Holistic Services
- Developing innovative ways of delivering services and connecting with survivors is needed during pandemics or other emergencies, such as the Signal for Help tool. Additionally, the need to expand these services and develop a more holistic approach to service delivery by addressing other social and economic issues impacting survivors has been underscored.

Increase Public Awareness of IPV and Pandemic Supports
Increased public awareness and knowledge of IPV and available supports is needed to foster change and connect survivors with needed resources. Distributing this information is particularly important during pandemics and other emergent or crisis events, as it can increase service access when survivors may be confused or told misleading information by perpetrators of IPV.

#### • Strengthen System Responses to IPV and Foster Coordination

### Lessons and Insights for Service Providers

The COVID-19 pandemic had a tremendous impact on survivors and those supporting them in various service areas. There are steps that service providers can take during future pandemics and other emergent or crisis events to increase preparedness and ensure that survivors have access to necessary services. These steps largely involve creative, innovate, and alternative measures for connecting with survivors under extraordinary circumstances.

IPV survivors described negative experiences with the sectors they frequently interacted with, such as the justice system and CFS. Participants underscored the need to improve responses to IPV within these sectors, which included IPV education, training, and testing for police, lawyers, and judges, and addressing access to justice issues for survivors. The need to foster coordination and collaboration between these sectors was also underscored, as their "siloed" nature could lead to poor outcomes for survivors.