

CHARTIS TOP READS

The rise of the shadow pandemic: Domestic violence soars with COVID-19

Week of January 9 - January 15, 2022

| JAN 14, 2022

<https://www.chartis.com/insights/rise-shadow-pandemic-domestic-violence-soars-covid-19>

Health Disparities

The Buzz This Week

The term “shadow pandemic” has emerged in recent months, referring to increasing rates of violence against women, adolescents, and children during the COVID-19 pandemic. A systematic review and meta-analysis of 18 studies found that officially reported domestic violence increased by 7.9% internationally and 8.1% in the United States after stay-at-home orders were implemented.

In one weekend, calls to domestic violence helplines went up by 65% in the United Kingdom, per a [United Nations \(UN\) report](#). In NYC, caseloads doubled at the city’s domestic violence agency as victims of domestic violence were “trapped at home with their abusers” during the lockdowns, as [reported by the World Economic Forum](#). It should be noted that estimates of domestic violence rates are likely to be low — the UN estimates that less than 40% of women who experience violence seek any kind of help, and less than 10% of those who do go to the police.

The term “shadow pandemic” alludes to the correlation between the coronavirus pandemic and the apparent rise of domestic violence rates — those rates have followed the path of the pandemic, like a shadow follows a person. Others have used the term slightly differently, implying that domestic violence is not adequately addressed, left in the shadows, in part because of underreporting, because it is a sensitive topic, and because of the difficulty in addressing something that mostly occurs in a private space. And now, that “pandemic” is becoming overshadowed by COVID, as women’s shelters and programs are scaled back due to virus containment efforts and lack of staff, healthcare professionals are prioritizing COVID care, and depleted law enforcement departments are focusing on more serious crimes.

The Director of WISE Collective stated in the [Independent Online](#) in 2020, “An existing pandemic that is known to the powers that be has now become a shadow of the COVID-19 pandemic. It cannot be a shadow, it should not be a shadow.” A representative from Human Rights Watch commented at a [United Nations Girls Education Initiative event](#), “It’s not a ‘shadow.’ It’s there. It’s very obvious. It just takes acceptance to turn it into the pandemic that it really is.”

While there are likely a multitude of varying reasons behind the worldwide uptick in reported domestic violence, public health and policy experts have regularly [pointed to](#):

- Economic stressors, such as male unemployment, and financial insecurity (and related food and housing insecurity).
- Stress from childcare, homeschooling, and simply being stuck at home together with reduced personal space and time.
- Unhealthy coping strategies, including the increase of alcohol and other substance use — rates of which are thought to have increased during the pandemic.

Why It Matters

As the world continues to fight the COVID-19 pandemic, efforts should be made to help address the domestic violence pandemic, the rate of which appears to be increasing in relation to COVID-19, especially when stay-at-home or lock-down orders are imposed. More generally, women need extra support as they have disproportionately been affected by the pandemic — losing more jobs than men and bearing more of the childcare and homeschooling burdens than men, per a [report](#) by Brookings, among others.

Yet to date, per the [Global Health 50/50 Report](#), fewer than 2 in 10 COVID-19 health programs consider gender in their design or are tailored to gender in any way. Several advocates for health equity, including [Think Global Health](#) (part of the Council on Foreign Relations), insist that gender analysis is essential in the development of programs related to COVID-19. Gender analysis “requires asking how socially constructed roles and identities affect vulnerability to and experiences of an outbreak.” While it is concentrated on differences between women/girls and boys/men, it also takes into account inequities related to sexuality, race, ethnicity, and religion.

As is stated in the Think Global Health report, “Gender inequities exacerbate outbreaks...and responses that do not incorporate gender analysis exacerbate inequities.” Similarly, leaders at the [Lancet Commission on Gender-Based Violence and Maltreatment of Young People](#) urged, “...amidst the ‘pandemic within a pandemic’ of violence against women and children, it is more urgent than ever that policy makers tailor their policy responses...to help avert the human calamity and economic sinkhole of violence.”

If progress toward health equity between women and men made over the last few decades is to be sustained and advanced rather than shattered by the pandemic, and if the domestic violence “shadow pandemic” is to be acknowledged and adequately addressed, programs that are geared towards women’s specific needs during the pandemic are vital.

Related Links

[CCJ](#)

[UC Davis](#)

[UN Women](#)

[WHO and UN](#)

Our services

[STRATEGIC TRANSFORMATION](#)

[PERFORMANCE TRANSFORMATION](#)

[DIGITAL & TECHNOLOGY TRANSFORMATION](#)

[CHARTIS CENTERS FOR AI & STRATEGIC INTELLIGENCE](#)

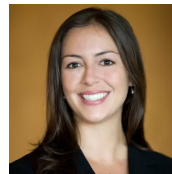
[PAYER TRANSFORMATION](#)

[STRATEGIC COMMUNICATIONS & CHANGE MANAGEMENT](#)

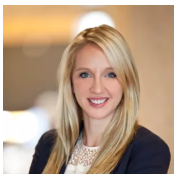
LEARN MORE ABOUT THE AUTHORS



Roger Ray, MD
Chief Physician Executive



Alexandra Schumm
Partner and Vice President of Research



Abigail Arnold
Associate Vice President of Research