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ABSTRACT

We aimed to discuss the impact of the coronavirus pandemic on the VAW scenario and how it affects women's mental health. The short communication from secondary data collected from the official websites of seven countries in Latin America was performed. The sample was non-probabilistic, for convenience. The collection took place in January 2021. During the COVID-19 pandemic, the increased contact of the victim with the aggressor (if he/she is the spouse), deepening of economic disparities, stressful environment, and loss of social support mechanisms are some of the factors that explain the possible increase in VAW rates. VAW is a sociological phenomenon whose bases are rooted in historical, political, religious, and economic conditions. In addition to the biological dimension of the pandemic, it is necessary to reflect on the long-term impacts of this new social configuration, especially on more vulnerable groups such as women in underdeveloped countries.

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KEYWORDS

COVID-19; Gender identity; Women's health; Mental health; Violence against women

Introduction

After the emergence of a cluster of pneumonia cases, which were caused by a novel β -coronavirus, SARS-CoV-2, in Wuhan, China, in December 2019 (Li et al., 2020), the world scenario has suffered economic, social, and public health impacts that changed contexts and instigated new reflections on relevant themes. Due to the high lethality rate of the disease caused by the virus, COVID-19 (1–3.4%) (Mizumoto & Chowell, 2020), the greatest and most effective weapon that society has against this virus is its spread prevention, including measures like vaccine, masks, social distancing or even stay-at-home restrictions for entire regions or countries (Güner et al., 2020).

The risk of violence against women (VAW) has been increasing worldwide. Since the beginning of the measures to control COVID-19, there have been significant differences between the rates of VAW before and after the quarantine period around the world, especially in Latin America, where there has been a high number of cases each year (Marques et al., 2020). For instance, a 50% rise in domestic abuse has been seen in Rio de Janeiro, Brazil (EBC News, 2020). Furthermore, in Colombia, according to the Presidential Counselor for Equity for Women, during the first days of the national quarantine, there was a 51% increase in domestic VAW cases. In Venezuela, during April in 2020, there was a 65% increase in femicides compared to April 2019 (International Rescue Committee (IRC), 2020).

However, the identification of what may be the possible amplifiers of the VAW situation in the context of COVID-19 pandemic requires some reflection. Some factors may contribute to the aggravation and persistence of violence situations. Women are overloaded with housework and care of children, elderly, and sick family members, which can reduce their ability to avoid conflict with the aggressor. It also makes them more vulnerable to psychological violence and sexual coercion. Moreover, due to the reduction of the victim's social contact with friends and family, there are less possibilities for women to create and/or strengthen a social support network and to seek help (Marques et al., 2020). Therefore, we aimed to discuss the impact of the VAW scenario in the COVID-19 pandemic context and expose the causes for its increase in seven Latin American countries (Argentina, Brazil, Colombia, Guatemala, Mexico, Paraguay and Peru) selected for convenience by the authors. Furthermore, we will present solutions to control this kind of violence and to support the victims.

Discussion

Domestic violence against Latin American women and its socioeconomic determinants, and COVID-19

The United Nations defines VAW as 'any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life' (United Nations Human Rights, 2021). Thus, increases in domestic violence cases may be caused by pre-existing social and economic problems that are exacerbated by the stress and tension from disasters, economic retraction, displacements, and uncertainties (Kofman & Garfin, 2020).

It is noteworthy that among the seven studied countries (Table 1), there was a significant increase in VAW, especially in Argentina (145%), Peru (101%), Mexico (97%), and Colombia (94%). According to BBC data, three of these countries were among the most affected economies in Latin America during the COVID-19 pandemic. These countries and their economic growth indexes are Peru (-12.8%), Argentina (-10.9%), and Mexico (-9%), respectively. It is known that the interruption of livelihoods (Kofman & Garfin, 2020) and the decrease in the ability to meet the family's financial needs, caused by COVID-19, reduce access to basic needs and services, causing stress and fear (Haq et al., 2020) in the aggressors (potentializing the chances of violent acts) and victims (worsening psychological suffering). Besides, the aggressors, mostly represented by intimate partners, can restrict access to money, health services or resources, such as soap and medicine, which become an aggravator for the COVID-19 transmission (Roesch et al., 2020).

The smaller increase in VAW was seen in Brazil (11%) and Guatemala (5%). Some peculiarities of these two countries' situation may contribute to this small variation: (I) absence of well-structured policies to promote women's health and combat VAW before and during the COVID-19 pandemic (BRASIL, 2021; Haq et al., 2020; Roesch et al., 2020, Vieira et al., 2020); (II) relatively new discussion in these two countries of the topic among the population in general (Guimarães & Pedroza, 2015); (III) Greater vulnerability (social and economic) of the most affected groups (Afrodescendent and young women). These three elements amplified by the status of the COVID-19 can lead to under-reporting.

Afrodescendent and young women in Brazil are the ones that suffer the most violence according to the Dossier of the Brazilian Ministry of Economy prepared in 2020. Barufaldi et al., (2017) ratified this information when analyzing reports of VAW rates (between 2011-2015) and mortality rates in women victims of aggression (between 2011-2016) in Brazil. The authors point out that

afrodescendent and young women in Brazil depend more financially on their families (due to aggressions, absences/ delays for work are greater). In addition, the authors show that the risk of death in women who report their aggressors is twice as high as in the general population (Barufaldi et al., 2017). In Guatemala, according United Nations (UN) Women (2021) 4,000 girls 10-14 years of age give birth every year. The authors also report that Guatemala is among the countries with the highest poverty index in Latin America, high levels of social inequality (Gini index of 0.57) and presents highest rate of violent deaths among women (9.7 in 100,000) (UN Women, 2021).

According to BBC data, in the 'Interactive map showing the restriction measures adopted by Latin American countries in the COVID-19 pandemic, the countries that took the earliest and more restrictive measures to curb the spread of viral transmission were Peru, Argentina, Paraguay, and Colombia. Brazil is among the countries whose measures are less restrictive, and surveillance is less performed. However, according to Table 1 data, three of the four countries with the strictest measures had an increase greater than 90% in VAW cases (Argentina - 145%, Peru - 98%, and Colombia - 93%), in which Brazil presents one of the lowest indexes (11%). Mexico's indices may not have been as high as the analysis time (one month) is shorter compared to other countries.

Literature data highlight that the social isolation caused by the current pandemic has amplified women's pre-existing vulnerabilities, since staying at home has become a trigger for domestic violence, especially in women that were already in abusive relationships. In China, police records of VAW tripled during the pandemic. In Italy, France and Spain an increase in the occurrence of VAW was also observed after the implementation of mandatory quarantine (Vieira et al., 2020). This situation reduces women's autonomy, especially in patriarchal houses, creating a distressing paradox for victims: staying at home at the risk of intensifying domestic violence or leaving and being more likely to be exposed to the virus (Haq et al., 2020; Roesch et al., 2020).

However, it is noteworthy that this discussion does not intend to criticize social isolation and its benefits, which have been exhaustively proven in the medical literature, as a tool to combat the COVID-19 spread, but to raise hypotheses about phenomena concurrent with the pandemic and that deserve to be brought to the international discussion on public health, such as VAW (Haq et al., 2020; Roesch et al., 2020; Vieira et al., 2020).

Table 1. Trends in domestic and gender violence in seven Latin America countries before and after the new coronavirus outbreak.

Latin American countries	Hotlines	Comparison period	2019	2020	Percentage (%)
Argentina	Línea 137 e 144	Jan–Oct	36.678	90.022	145%
Brazil	Ligue 180	Jan–Jul	52.952	58.827	11%
Colombia	Línea 155	Mar-Nov	13.337	25.868	94%
Guatemala	Línea 1572	Jan–Dec	2657	2787	5%
Mexico	Línea Mujeres	April	875	1.724	97%
Paraguay	Línea 137	Jan–Dec	8.374	11.029	32%
Peru	Línea 100	Jan-Nov	108.331	218.218	101%

Source: Governments of Latin American Countries (Annex 1 - List of Sources).

Repercussions of domestic violence on the mental health of women victims of violence

VAW situations cause several negative results on the victims' physical and mental health, including increased substance use, risky sexual behaviors, higher risk of chronic diseases, depression, post-traumatic stress, and excessive social media use (Almeida et al., 2020). The latter is a characteristic of anxiety disorders and depression that are used as a refuge against the violence suffered (Sediri et al., 2020; Wolitzky-Taylor & Schiffman, 2019).

During the pandemic, social isolation precipitates feelings of anger, fear, anxiety, panic, loneliness, boredom, and guilt for not being in contact with loved ones. A survey conducted from April to May 2020 with Tunisian women assessed the impact of social isolation on domestic violence and on these women's health. VAW increased from 4.4 to 14.8%, with all respondents reporting having suffered psychological violence, followed by economic (41%) and physical (10%) violence, which was associated, during isolation, with more cases of depression, anxiety, and stress (Sediri et al., 2020).

Before the social distancing variable, the impact of mental illnesses on the female population was associated with emotional vulnerability and hormonal changes during the premenstrual, pre and postpartum, and menopause periods, as well as with gender inequalities, which strengthen labor overload and VAW. This reality is much more significant in underdeveloped countries (Souza et al., 2020).

According to literature data, other factors that explain the increased incidence of mental disorders in women during the pandemic are being a young adult, living in regions with high rates of cases and mortality from COVID-19, history of anxiety and depression, medication use, reduced or absent physical activity and leisure, and unemployment (Souza et al., 2020). Based on the 'Work Panorama of Latin America and the Caribbean 2019 (Panorama do Trabalho da América Latina e do Caribe 2019), the unemployment rate in these countries was around 8.1% before the pandemic. As for women, the increase in participation in the labor market, although expressive (50.2%) compared to the last analysis, is still 20 points below that of men. The countries presented in Table 1, whose economic downturn was the greatest, were also the ones with the highest increase in VAW cases. According to the report produced in October 2020 by the International Monetary Fund (IMF) the GDP (Gross Domestic Product) growth rate in 2020 for Argentina (-11.8%), Peru (-13.9%), Mexico (-9.0%) and Colombia (-8.2%) was negative (International Monetary Fund, 2021).

In addition, women with previous psychiatric disorders may have their pathologies decompensated and amplified by the pandemic situation and exposure to violence (Chatterjee et al., 2002). Thus, with the increase in domestic violence rates during social isolation, women's physical and mental health demands greater attention from health teams and violence prevention networks (Roesch et al., 2020). Health professionals must be vigilant to recognize domestic violence signs and provide the necessary care for victims,

with psychological monitoring programs being virtual tools that may be used to follow-up victims, minimizing the psychological damage caused by violence (Almeida et al., 2020; Chatterjee et al., 2002).

Conclusion

VAW is a sociological phenomenon whose bases are rooted in historical, political, religious, and economic conditions. During the COVID-19 pandemic, the increased contact of the victim with the aggressor (if he/she is the spouse), withdrawal from the victim's relatives/support networks, deepening of economic disparities, stressful environment, and loss of social support mechanisms are some of the factors that explain the possible increase in VAW rates.

Finally, it is important to highlight the limitations in this paper: (I) absence of easily accessible data from other countries in Latin America, which, therefore, have not been shown in Table 1; (II) under-reporting of cases - only those women/family members who used the hotline to report VAW were counted. These biases are inherent in the secondary nature of the data.

Disclosure statement

No potential conflict of interest was reported by the authors.

References

Almeida, M., Shrestha, A., Stojanac, D., & Miller, L. (2020). The impact of the COVID-19 pandemic on women's mental health. Archives of Women's Mental Health, 23(6):741-748.

Barufaldi, L. A., Souto, R. M. C. V., Correia, R. S. B., Montenegro, M. M. S., Pinto, I. V., & Silva, M. M. A. (2017). Violência de gênero: comparação da mortalidade por agressão em mulheres com e sem notificação prévia de violência. Ciência e Saúde Coletiva, 22 (9), 20930-20938.

BRASIL. Instituto de Pesquisa Econômica Aplicada - IPEA (2021, July 19). A violência contra a mulher. https://ipea.gov.br/retrato/ pdf/190215_tema_d_a_violenca_contra_mulher.pdf

EBC News (2020, January 23). Coronavírus: casos de violência doméstica crescem 50% durante isolamento social. EBC Rádios. https://radios.ebc.com.br/tarde-nacional-rio-de-janeiro/2020/03/ coronavirus-casos-de-violencia-domestica-crescem-50-durant e-periodo-de

Chatterjee, S., Barikar, C. M., & Mukherjee, A. (2002). Impact of COVID-19 pandemic on pre-existing mental health problems. Asian Journal of Psychiatry, 51(102071), 1-2.

Guimarães, M. C., & Pedroza, R. L. S. (2015). Violência contra a mulher: Problematizando definições teóricas, filosóficas e jurídicas. Psicologia & Sociedade, 27(2), 256-266. https://doi.org/10.159 0/1807-03102015v27n2p256

Güner, R., Hasanoğlu, I. ., & Aktaş, F. (2020). COVID-19: Prevention and control measures in community. Turkish Journal of Medical Sciences, 50(SI-1), 571-577. https://doi.org/10.3906/sag-2004-146

Haq, W., Raza, S., & Mahmood, T. (2020). The pandemic paradox: Domestic violence and happiness of women. PeerJ, 8, e10472. https://doi.org/10.7717/peerj.10472

International Monetary Fund - IMF (2021, July 19). Perspectivas econômicas. As Américas. A persistência da economia obscurece a recuperação. file:///C:/Users/Jucier/Downloads/textp.pdf

International Rescue Committee - IRC (2020, January 23). IRC data shows an increase in reports of gender-based violence across Latin

- America. International Rescue Committee (IRC). https://www.rescue.org/press-release/irc-data-shows-increase-reports-gender-based-violence-across-latin-america
- Kofman, Y., & Garfin, D. (2020). Home is not always a haven: The domestic violence crisis amid the COVID-19 pandemic. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1), S199–S201. https://doi.org/10.1037/tra0000866
- Li, Q., Guan, X., Wu, P., Wang, X., Zhou, L., Tong, Y., Ren, R., Leung, K. S. M., Lau, E. H. Y., Wong, J. Y., Xing, X., Xiang, N., Wu, Y., Li, C., Chen, Q., Li, D., Liu, T., Zhao, J., Liu, M., ... Feng, Z., et al. (2020). Early transmission dynamics in Wuhan, China, of novel Coronavirus-Infected Pneumonia. *The New England Journal of Medicine*, 382(13), 1199–1207. https://doi.org/10.1056/NEJMoa2001316
- Marques, E., Moraes, C., Hasselmann, M., Deslandes, S., & Reichenheim, M. (2020). A violência contra mulheres, crianças e adolescentes em tempos de pandemia pela COVID-19: Panorama, motivações e formas de enfrentamento. *Cadernos de Saúde Pública*, 36(4):e00074420-6. https://doi.org/10.1590/0102-311x00074420
- Mizumoto, K., & Chowell, G. (2020). Estimating risk for death from coronavirus disease, China, January-February 2020. *Emerging Infectious Diseases*, 26(6), 1251–1256.

- Roesch, E., Amin, A., Gupta, J., & García-Moreno, C. (2020). Violence against women during covid-19 pandemic restrictions. *BMJ*, 369(1712), 1-2.
- Sediri, S., Zgueb, Y., Ouanes, S., Ouali, U., Bourgou, S., Jomli, R., et al. (2020). Women's mental health: acute impact of COVID-19 pandemic on domestic violence. *Archives of Women's Mental Health*, 23(6):749-756.
- Souza, A., Souza, G., & Praciano, G. (2020). Women's mental health in times of COVID-19. *Revista Brasileira de Saúde Materno Infantil*, 20(3), 659–661. https://doi.org/10.1590/1806-93042020000300001
- Vieira, P., Garcia, L., & Maciel, E. (2020). Isolamento social e o aumento da violência doméstica: o que isso nos revela? *Revista Brasileira de Epidemiologia*, 23(200033), 1–5. https://doi.org/10.1590/1980-549720200033
- United Nations Human Rights (2021, January 24). OHCHR. Violence against women. https://www.ohchr.org/en/issues/women/wrgs/pages/vaw.aspx
- United Nations Women (UN Women) (2021, July 24). Americas and the Caribbean. Guatemala. https://lac.unwomen.org/en/dondeestamos/guatemala
- Wolitzky-Taylor, K., & Schiffman, J. (2019). Predictive associations among the repeated measurements of anxiety, depression, and craving in a dual diagnosis program. *Journal of Dual Diagnosis*, 15(3), 140–146. https://doi.org/10.1080/15504263.2019.1589660