

## Infographic

---

# Infographic: Intimate Partner Violence Interventions Relevant to Women During the Covid-19 Pandemic

Christie Stilwell<sup>1</sup>, MA; Lori E Weeks<sup>2</sup>, PhD; Melissa Rothfus<sup>3</sup>, MLIS, PhD; Alyssa Weeks<sup>2</sup>, BA; Marilyn Macdonald<sup>2</sup>, RN, PhD; Lois Jackson<sup>4</sup>, PhD; Suzanne Dupuis-Blanchard<sup>5</sup>, RN, PhD; Andrea Carson<sup>2</sup>, PhD; Elaine Moody<sup>2</sup>, RN, PhD; Heather Helpard<sup>6</sup>, RN, PhD; and Anika Daclan<sup>2</sup>

<sup>1</sup>Faculty of Health, Dalhousie University

<sup>2</sup>School of Nursing, Dalhousie University

<sup>3</sup>Kellogg Health Sciences Library, Dalhousie University

<sup>4</sup>School of Health and Human Performance, Dalhousie University

<sup>5</sup>School of Nursing and Research centre on Aging, Université de Moncton

<sup>6</sup>Rankin School of Nursing, St. Francis Xavier University

Christie Stilwell  <https://orcid.org/0000-0001-8234-3522>

DOI: <https://doi.org/10.15273/hpj.v1i2.11048>

---

### Abstract

The COVID-19 pandemic has seen increased rates of intimate partner violence (IPV). This is attributed to greater stress on households and families (e.g., reduced income, limited access to childcare and schools), and isolation from friends and family. Public Health guidance on physical distancing and/or remote delivery of services are helpful for reducing the spread of infection, yet these restrictions can create further challenges and barriers for women seeking IPV services. In this review, we synthesized evidence from 4 systematic reviews and 20 individual studies to suggest how IPV services, supports, or interventions for women might be adapted within the context of the COVID-19 pandemic. Interventions generally fit into four main categories: 1) Preventing IPV through early recognition and awareness of IPV; 2) Counteracting abuse and breaking free; 3) Supporting women while living with and/or leaving an abusive partner; and 4) Supporting women after leaving an abusive partner. Many initiatives depend primarily on technology such as mobile phones and an internet connection for delivering information and interventions (e.g., mHealth, telehealth, websites, digital applications). However, it is important to consider that technological interventions are not available to all women given the financial resources necessary to secure a device and access to reliable internet. The results of this review can inform the service provision during the remainder of the COVID-19 pandemic and may be especially important for supporting women who have little access to face-to-face services (e.g., women living in rural and remote places where there are few in-person services).

---

## References

- Abeid, M., Muganyizi, P., Mpembeni, R., Darj, E., & Axemo, P. (2015). A community-based intervention for improving health-seeking behavior among sexual violence survivors: A controlled before and after design study in rural Tanzania. *Global Health Action, 8*, Article 28608. <https://doi.org/10.3402/gha.v8.28608>
- Aromataris, E., Fernandez, R., Godfrey, C., Holly, C., Khalil, H., & Tungpunkom, P. (2020). Umbrella reviews. In E. Aromataris, & Z. Munn (Eds.), *JBIM Manual for Evidence Synthesis*. Joanna Briggs Institute. <https://synthesismanual.jbi.global>. <https://doi.org/10.46658/JBIMES-20-11>
- Aromataris, E., & Munn, Z. (2020). *JBIM Manual for Evidence Synthesis*. Joanna Briggs Institute, Adelaide, Australia. <https://synthesismanual.jbi.global>. <https://doi.org/10.46658/JBIMES-20-01>
- Bogart, N. (2020, May 3). Advocates scramble to help domestic violence abuse victims as calls skyrocket during COVID-19. CTV. <https://www.ctvnews.ca/health/coronavirus/advocates-scramble-to-help-domestic-abuse-victims-as-calls-skyrocket-during-covid-19-1.4923109>
- Enright, M. (2020, May 1). Calls are down to women's shelters during the pandemic, but it's not good news. The Sunday Edition, CBC Radio. <https://www.cbc.ca/radio/sunday/the-sunday-edition-for-may-3-2020-1.5547652/calls-are-down-to-women-s-shelters-during-the-pandemic-but-it-s-not-good-news-1.5547818>
- Ford-Gilboe, M., Varcoe, C., Scott-Storey, K., Perrin, N., Wuest, J., Wathen, C. N., Case, J., & Glass, N. (2020). Longitudinal impacts of an online safety and health intervention for women experiencing intimate partner violence: Randomized controlled trial. *BMC Public Health, 20*(1), Article 260. <https://doi.org/10.1186/s12889-020-8152-8>
- Khaki, L. (2016). *Comparing the effectiveness of an interactive internet based safety-seeking decision aid for African American and white women in abusive relationships* (Publication No. 10241710) [Doctoral dissertation, Morgan State University]. ProQuest Dissertations and Theses Global.
- McDonald J. & Green R. (2001). A dispersed refuge model for women escaping domestic violence: A regional case study. *Australian Journal of Primary Health, 7*(1), 85–89. <https://doi.org/10.1071/PY01014>
- World Health Organization. (2020). *COVID-19 and violence against women: What the health sector/system can do*. <https://www.who.int/reproductivehealth/publications/vaw-covid-19/en/>

## INTIMATE PARTNER VIOLENCE INTERVENTIONS RELEVANT TO WOMEN DURING THE COVID-19 PANDEMIC



Stilwell, C., Weeks, L. E., Rothfus, M., Weeks, A., Macdonald, M., Jackson, L., Dupuis-Blanchard, S., Carson, A., Moody, E., Helpard, H., & Daclan, A. (2021)

Full article submitted to *Violence Against Women Journal*

### THE ISSUE:

- Violence against women/intimate partner violence (IPV) often increases during emergencies like the COVID-19 pandemic
- Public health measures that aim to slow the spread of COVID-19 increases the time isolated at home with abusers
- Physical distancing, gathering limits, and closures can create barriers for accessing and providing IPV support



We conducted a systematic review of IPV services and interventions for women that are delivered in a way that meets COVID-19 public health guidelines

### ABOUT THE IPV INTERVENTIONS INCLUDED IN THIS REVIEW:



Focused on preventing IPV from occurring.



Focused on identifying IPV, recognizing IPV, and tracking/sharing information about IPV incidents.



Focused on supporting women while living with and/or leaving an abusive partner.



Focused on supporting women after leaving an abusive partner.

**A majority of studies described IPV interventions that were delivered using technology (i.e., mHealth, telehealth, online tools, forums, emails, apps, video or phone call, and radio)**

### EXAMPLES OF RELEVANT IPV INTERVENTIONS:



A violence/abuse awareness and education program transmitted via radio (Tanzania)



*Identification and Referral to Improve Safety (IRIS)*, an internet-based IPV safety decision aid to flag abusive behaviours and assess safety options (USA)



*iCanPlan4Safety* online support tool to aid in risk assessment of an IPV situation and learn about options (Canada)



Marg's Place: an innovative emergency shelter model for women and children using separate smaller residences (Australia)

TECHNOLOGY IS GREAT! BUT...

- **SAFETY:** Preventive initiatives focused on digital literacy, competence, safety, and security are essential for women to be able to confidently access online resources
- **COST:** Digital/virtual devices and internet connectivity can be costly: Provide resources for women to access technology and devices
- **ACCESS:** Advocacy is needed to ensure the stability of communication networks, especially in rural or remote areas and in low-income countries
- **EFFECTIVENESS:** More research and evaluation is needed to measure outcomes and effects of current IPV services and supports
- **DIVERSITY:** IPV intervention studies must include diverse participants and an intersectional lens. Missing crucial data on: older women; women with disabilities, immigrant/refugee women, women in the LGBTQ+community, racialized women,...



**INFORMATION SOURCES:**

**Our search found 24 sources that described a total of 238 interventions:**

- 4 systematic reviews (n=218) from United States, Canada, and Germany
- 20 individual studies from United States (n=14), Canada (n=2), Australia (n=2), Hong Kong (n=1), and Tanzania (n=1)

A full description of our methods can be found in the forthcoming article or by contacting us

**Contact:** Dr. Lori Weeks, School of Nursing, Dalhousie University  
Halifax, Nova Scotia Canada lori.weeks@dal.ca | 1-902-494-7114

**SSHRC**  **CRSH**  
Social Sciences and Humanities Research Council of Canada  
Conseil de recherches en sciences humaines du Canada

