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The Different Contexts of Domestic Violence Before and During the COVID-19 Pandemic: A Portuguese Overview

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ABSTRACT

The COVID-19 pandemic and the subsequent restrictions impacted the world in numerous ways. These restrictions resulted in victims of domestic violence spending more time with their abuser, contributing to a rise in requests for help. The contexts for domestic violence include intimate partner violence (IPV), abuse of children/adolescent and victimization of the elderly within the family. This article compares the prevalence of domestic violence contexts between a pandemic and a non-pandemic year. Based on the assessment of data, taken from a Service Management Platform (PLAGA) and provided by the Portuguese Association for Victim Support (APAV), 12,576 requests from 2019 to 2020 were analyzed. Findings revealed that a 13.3% increase in requests for help, mainly from child/adolescent victims, was registered in 2020 compared with 2019, with a 100.7% increase solely during the lockdown period. Physical and psychological violence, often reported by victims of IPV, children/adolescents and elders, also increased during this period. Requests for help through distance support increased substantially in the pandemic year. The importance of support for victims during the pandemic and the need for new support strategies have been highlighted if victims, bystanders and professionals are to be assisted.

KEYWORDS

Children/adolescents abuse; COVID-19; domestic violence; elderly abuse; intimate partner violence; victim support

Introduction

Domestic violence is a crime that affects people of all ages and genders, regardless of nationality, professional occupation, academic abilities or social background. The legal definition of domestic violence varies from one country's jurisdiction to another (Gulati & Kelly, 2020). However, it is deemed to occur when one person has control of another within the context of the family (Huecker & Smock, 2020) and is typically associated with psychological, social, cultural and economic factors (Garcia-Moreno et al., 2006).

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Furthermore, domestic violence includes intimate partner violence (IPV), child and adolescent abuse and abuse of the elderly. The perpetrator may use physical violence (the use of force to intimidate and sanction, often causing bruising and/or wounds, e.g. beatings; torture), psychological violence (intimidation, control and punishment administered verbally or physically, e.g. manipulation; threats), sexual violence (the use of nonconsensual sex to threaten, intimidate and control, e.g. unwanted intercourse; harassment), economic violence (the use of economic resources and money to sanction, threaten and control, e.g. obsessive financial control; withholding money), stalking (e.g. control through the use of persecution; phone calls or messages) and, finally, neglect (a deliberate lack of care on the part of the caregiver; Almiş et al., 2020; Brozowski & Hall, 2010; National Research Council (NRC), 2003; World Health Organization, 2020a).

The increased prevalence of domestic violence during 2020 continues to be reported on a global scale. In China, reports of domestic violence tripled in February 2020 compared to February 2019 (Fraser, 2020). In France and Argentina, 30% and 25% increases, respectively, were reported when lockdown policies came into force in March 2020 (UN Women, 2020). Helpline calls also reported an increase of 30% in Cyprus and 33% in Singapore (UN Women, 2020). Many American States recorded a 10% to 18% increase in calls reporting domestic violence during lockdown, and an increase of 18% to 27% was recorded when comparing March 2019 with March 2020 (Boserup et al., 2020). A 22% increase in arrests associated with domestic violence was also reported by Portland's Police Bureau when the lockdown policy was implemented (Portland Police Bureau, 2020). In the first 8 days of lockdown, South African police reported 87,000 calls relating to domestic violence (Digital, 2020). Brazil reported a 40% to 50% increase in domestic violence, Spain noted a 20% increase in the volume of calls to helplines while the United Kingdom recorded a 25% increase when lockdown policies were implemented (Sharma & Borah, 2020). On the contrary, Portugal's Public Security Police and the National Republican Guard recorded a 4.9% decrease in reports of domestic violence – specifically relating to intimate partner violence – from 2019 to 2020 (Instituto Nacional de Estatística, 2021).

The COVID-19 pandemic has had a worldwide impact on the global economy, tourism, education, mental health and industry. This impact has resulted in multiple consequences in both psychosocial and individual areas: a rise in financial instability (Piquero et al., 2021) and the inability to meet financial obligations (Beland et al., 2020), a disruption in industrial productivity as well as in services and transportation (Pak et al., 2020), and increase in unemployment (Pak et al., 2020; Piquero et al., 2021), substance abuse (Anurudran et al., 2020; Piquero et al., 2021) and mental health problems (Anurudran et al., 2020). In addition, a growth in the prevalence of crimes such as domestic violence has been seen (e.g., Boserup et al., 2020). Social distancing, containment and lockdown policies, although essential in limiting the spread of the disease, have all contributed to an increase in violence against intimate partners (e.g., Agüero, 2020) and elderly people (e.g., Chang & Levy, 2021) and a decrease in violence against children/adolescents (Campbell, 2020) within the family context. The increase of stress and frustration (Bouillon-Minois et al., 2020), combined with prolonged periods of time spent together (Sharma & Borah, 2020), has made it easier for aggressors to control and exert power over their victims and has, in turn, contributed to the victims' isolation and inhibited requests for help (Bouillon-Minois et al., 2020; Kaukinen, 2020; Piquero et al., 2021).

The continuing prevalence of COVID-19, as well as a rise in the number of requests for help in cases of domestic violence, has highlighted the need to study how the pandemic has impacted the victims of intimate partner violence and abused children/adolescents and older people. It is, therefore, important to study and compare the prevalence of domestic violence during 2019 and 2020, focusing primarily on the three aforementioned contexts (IPV, child/adolescent abuse, and abuse of the elderly).

Intimate partner violence (IPV)

IPV is defined as “any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in the relationship” (World Health Organization, 2021). This type of violence affects the victims’ health, more specifically their physical and emotional well-being (Ellsberg et al., 2008). Many risk factors are associated with IPV, inter alia when the victim is a woman and when a low level of education, poor economic resources, unemployment (Beydoun et al., 2017; Breiding et al., 2008; Cunradi et al., 2009; Froimson et al., 2020), alcoholism, and mental health disorders are present in the aggressor (Beydoun et al., 2017; Cunradi et al., 2009). Furthermore, it has been noted in patriarchal societies where the role of men as the main figure in decision-making within the family is reinforced, that this contributes to an increase in violence and, consequently, IPV (Parrott & Zeichner, 2003). Additionally, high levels of stress promote the perpetration of violence among couples, it being 3.5 times more likely to occur than when stress levels are low (Sharma & Borah, 2020).

It has been shown that social isolation contributes to an increase in the vulnerability of a victim in terms of his/her health as well as economically in the absence of established social support systems (Boserup et al., 2020). Lockdown measures have provided the abusive partner with control over the victim to an extent that physical violence may be used less often (Kaukinen, 2020). A 9% higher incidence rate was reported during lockdown when compared to previous periods, along with an increase in the number of phone calls to helplines (Agüero, 2020). On the other hand, Froimson et al. (2020) reported a decrease in calls received due to victims being confined with their abusive partner, hence making it more difficult to access a mechanism of support. Moreover, coercion has been used by abuse partners to prevent their victims from seeking medical or psychological treatments using the threat of exposure to COVID-19 (Jarnecke & Flanagan, 2020). Partners with psychological issues may also have a detrimental effect on the psychological well-being of their victims (Joseph et al., 2020).

Child/adolescent abuse

Defined as violence against people under 18 years of age (World Health Organization, 2020b), violence against children and adolescents in the context of domestic violence includes neglect and physical, sexual and emotional abuse (Huecker & Smock, 2020; World Health Organization, 2020b). It is estimated that 60% of violence within the family involves the presence of children and pets in the household who are vulnerable to physical and/or emotional harm (Campbell, 2020). Exposing children and adolescents to intimate partner violence and other contexts of domestic violence are also considered to be a form of maltreatment with a different set of repercussions (Chiesa et al., 2018; World Health

Organization, 2020b). Girls are at greater risk of sexual abuse while both sexes are equally at risk of physical and emotional abuse, as well as neglect. Violence against children and adolescents causes immediate and long-term consequences such as stress, academic underachievement, mental health disorders, physical injuries, disabilities, suicide attempts or even death (Almıř et al., 2020; World Health Organization, 2020b).

The COVID-19 pandemic and its restriction policies have impacted children and adolescents and increased the risk of violence within households (Bradbury-Jones & Isham, 2020; Campbell, 2020; Donagh, 2020). Many children and adolescents who were being provided with care support (e.g., mental health services) by their school, found themselves compromised by the lockdown procedures (Phelps & Sperry, 2020). During this period of restriction, physical and emotional violence against children and adolescents were, for the greater part, reported (Javed & Mehmood, 2020), together with social isolation, depression and loneliness (Piquero et al., 2020). Nevertheless, Campbell's study (Campbell, 2020) revealed that a decrease in requests for help was reported during lockdown, which may have been due to fewer opportunities to detect violence against children and adolescents.

Abuse of the elderly

Violence against the elderly constitutes an undeniable and serious violation of human rights and affects the physical and psychological integrity of the victim. It is a complex multidisciplinary social problem that requires cooperation between institutions and professionals. Violence against the elderly is not a new phenomenon, it is a worldwide problem that has become more pronounced in contemporary societies due to an aging population. A new social conscience has developed during the latter decades integrating human rights perspectives, scientific study of the phenomenon and community awareness, with an emphasis being placed on the development of social mechanisms of prevention and intervention (Poole & Rietschlin, 2012). Abuse of the elderly takes several forms including psychological, physical, sexual and financial abuse, as well as neglect and self-neglect (National Research Council (NRC), 2003). Thus, constant threats, harassment and intimidation are considered some of the possible forms of psychological violence (Burnett et al., 2014; National Research Council (NRC), 2003). Significant differences are not found in prevalence between older women and older man, but the issue needs more systematic research (Yon et al., 2014).

This section of society is especially vulnerable to the effects of COVID-19 (Han & Mosqueda, 2020), and, even more so, to domestic violence. Chang and colleagues' study (Chang & Levy, 2021) reported a 21.3% prevalence of abuse of the elderly since the onset of the pandemic in the United States, which represents an 83.6% increase in the figure from the previous year.

Victim support in the context of the pandemic

Victim support can be implemented in two main ways: face-to-face contact or support from a distance (remote support). With the pandemic lockdown policies, the latter has been employed more frequently, especially via telephone calls and other digital technological platforms (e.g., Zoom; Anka et al., 2020; Safe Lives, 2020). Several studies have shown an

increase from 7.5% to 25% in calls to helplines during this period of time (Agüero, 2020; Armbruster & Klotzbücher, 2020; Bradbury-Jones & Isham, 2020). On the contrary, however, other studies reported a decrease in the volume of calls received (Froimson et al., 2020; Sirur & Krishnan). With regard to online support, an increase of 25% in the number of online messages was recorded by the UK's National Domestic Abuse Helpline (Kelly & Morgan, 2020). The UK also saw an increase of 150% in visits to Refuge's website (a domestic abuse organization; Kelly & Morgan, 2020).

While most studies suggest an increase in requests for help related to domestic violence during 2020 (e.g., Boserup et al., 2020) which may be justified by an increase in victims actively deciding to seek help (Piquero et al., 2021), others show that an actual decrease in such requests may be due to restriction policies posing a risk factor by inhibiting victims from seeking help (Sharma & Borah, 2020). Support from family and relatives and access to sheltered homes and legal protective actions are not often immediately available during restriction policies, thus the intensity of violence is likely to increase (Sharma & Borah, 2020).

After having reviewed the existing literature relating to the domestic violence phenomenon and the COVID-19 pandemic impact, the main goal of this article is to compare the prevalence of domestic violence contexts (IPV, children/adolescents and elderly victims) between a pandemic and non-pandemic year, as well as the type of response provided by a victim's support association. Furthermore, a hypothesis based on scientific literature will be analyzed: Compared to 2019, an increase of requests for help during 2020 will be expected in the different contexts of domestic violence, especially in lockdown. To fulfill this goal, it will be analyzed data from the Portuguese Association for Victim Support (APAV) in a national level. It will be taken in consideration the variables that define the different contexts of domestic violence in order to characterize the phenomenon and the variables that define the victim's support provided by APAV professionals. A comparative analysis between 2019 and 2020 will be presented to identify the changes during a year with and without a pandemic crisis in the different time periods.

Method

Characterization of the sample

This study gathered 12,576 requests for help from the Portuguese Association for Victims Support (APAV), of which 5,897 were received during 2019 (46.9%) and 6,679 during 2020 (53.1%). These requests for help were gathered from all of Portugal's districts and Islands. APAV was founded in 1990 and is a nonprofit making organization with offices nationwide. Officially recognized, APAV's aim is to inform, protect and support citizens who are the victims of crime, along with their families and friends, by providing them with free and confidential services. The professionals employed by this organization provide general emotional support for victims in need, but APAV also specializes in three further areas of support: Psychological, Legal and Social Support. The first consists of performing psychological risk evaluations and providing the most adequate support service, while also using skills recognition in order to help minimize future situations that may lead to victimization. The second, Legal Support, comprises clarification of the different steps involved in a legal process, informing victims of their rights and assisting with filling in the necessary legal

documents. Finally, Social Support includes assessing victims' social needs (e.g.,: housing, education, employment), providing information about social resources and helping them when contacting the services or institutions (APAV, 2021).

Of the information gathered, it is possible to know that the biological sex of victims was, for the greater part, female ($n = 10,431$, 82.9%). The age of victims ranged from 1-month old to 98 years of age ($M = 41.4$ years old; $SD = 21.1$) and more than half of the sample was professionally inactive ($n = 4,945$, 39.3%). In terms of the victims' nationality, 88.8% were Portuguese ($n = 10,835$) and the remain were of a different nationality ($n = 1,363$, 11.2%). In contrast to the victims, the alleged aggressors were mainly male ($n = 8,986$, 71.5%) with ages ranging from five to 98 years of age ($M = 45.4$ years old; $SD = 15.2$). Of the total sample, 22.2% of the persons accused of aggression were professionally active ($n = 2,795$; Table 1).

Table 1. Characterization of the sample taken from 2019 and 2020.

	2019		2020		Total	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Victims						
Sex						
Women	4,944	83.8	5,487	82.2	10,431	82.9
Men	944	16	1,182	17.7	2,126	16.9
Intersex	9	.2	10	.1	19	.2
Age						
≤10 years old	389	5.7	527	6.9	916	6.4
11–20 years old	750	11.1	839	11	1,589	11
21–44 years old	2,381	35	2,373	31	4,754	32.9
45–64 years old	1,702	25	1,631	21.3	3,333	23
65–84 years old	805	11.8	789	10.3	1,594	11
≥85 years old	172	2.5	181	2.4	353	2.4
N/A	602	8.9	1,327	17.3	1,929	13.3
Professionally Inactive	2,366	40.2	2,588	38.7	4,945	39.3
Unemployed	794	33.6	730	28.3	1,524	30.8
Retired	729	30.8	783	30.4	1,513	30.6
Students	481	20.3	689	26.8	1,172	23.7
Others	362	15.3	386	14.5	736	14.9
N/A	2,140	36.2	2,674	40	4,814	38.3
Alleged Aggressors						
Sex						
Men	4,381	86.4	4,605	84.1	8,986	71.5
Women	683	13.5	867	15.8	1,550	12.3
Intersex	7	.1	4	.1	11	.1
N/A	139	2.4	950	14.2	1,089	8.7
Age						
≤10 years old	8	.1	5	.1	14	.1
11–20 years old	152	2.2	178	2.3	330	2.3
21–44 years old	1,497	22	1,582	20.6	3,079	21.3
45–64 years old	1,232	18.1	1,229	16	2,461	17
65–84 years old	352	5.2	338	4.4	690	4.8
≥85 years old	33	.5	40	.5	73	.5
N/A	3,526	51.8	4,295	56	7,821	54.1
Professionally Active	1,434	24.3	1,361	20.4	2,795	22.2
Service and sales workers	610	42.5	550	40.4	1,160	41.5
Craft and related trades workers	309	21.5	304	22.3	613	21.9
Professionals	180	12.6	187	13.7	367	13.1
Technicians and associated professionals	141	9.8	120	8.8	261	9.3
Others	194	13.5	200	14.7	394	14.1
N/A	3,589	60.9	4,502	67.4	8,091	64.3

Note: N/A = No answer

Materials and data analysis

For data collection, a Service Management Platform (PLAGA) maintained by the Portuguese Association for Victim Support (APAV) was used. PLAGA was financed by the Internal Security Fund – Police (ISF Police). It is a digital platform developed based on risk factors identified in scientific literature that allows APAV professionals to insert information concerning sociodemographic characteristics of victims and alleged aggressors (e.g. sex, age, professional activity), victimization characteristics (e.g.: type of violence, relationship between victim and the person accused of victimization) and support provided by APAV (psychological, social and/or legal support). PLAGA has a multiple-choice selection system that allows exporting the data to other softwares (such as IBM-SPSS).

The variables analyzed in this study are the year, time periods, context of violence, type of request for help (online, face-to-face, phone calls), sociodemographic characteristics of victims and alleged aggressors, type of violence perpetrated (e.g. psychological, physical) and relationship between victims and the person accused of victimization.

IBM SPSS Statistics 26 was used for data analysis to conduct descriptive statistics.

Procedure

Victims sought the help from APAV mainly through phone calls, online interfaces and face-to-face support between January 1, 2019 and December 31, 2020. The information gathered was then inserted in PLAGA by the professionals responsible for the support given, after which it was entirely exported to the SPSS database to be analyzed. Only requests related to domestic violence were included, hence the remaining cases unrelated to this phenomenon were excluded for this study. Missing data was handled by listwise deletion to exclude cases with more than 80% of missing information. Therefore, from 19,542 requests for help, 6,966 were excluded, resulting in the analysis of 12,576 requests for help for domestic violence during 2019 and 2020. Due to the categorical nature of the data, imputation of missing values was not considered to reduce possible bias associated (cf., Stavseth et al., 2019). Hence, variables with 20% of missing data or more were also not included in this analysis forasmuch this percentage of missing values is common in psychological studies (Enders, 2003). The only exception was the characterization variable *Professional Occupation* and variables related to the characterization of the persons accused of aggression (such as age and professional occupation). Therefore, from 49 available variables, only the 16 previously mentioned variables were included in this descriptive analysis.

The study was conducted in accordance with the Declaration of Helsinki, and the protocol was approved and financed by the Portuguese Foundation for Science and Technology (FCT) which commissioned the project “Violence Against Women and Domestic Violence (VAWDV) in Times of Pandemic: characterization, challenges and opportunities in remote support,” in July 2020, in co-partnership with The Commission for Citizenship and Gender Equality (CIG).

Results

The analysis of the data has been organized into two main parts: the first part focuses on the prevalence of domestic violence comparing 2019 and 2020, especially during the lockdown, and on the characteristics of the different contexts of domestic violence; the second part is focused on the support provided by APAV to each context of domestic violence.

Prevalence of domestic violence in a pandemic and non-pandemic year

To compare the prevalence of the requests for help regarding domestic violence in 2019 and 2020, descriptive statistics were undertaken and a percentage change was calculated. A 13.3% global growth in requests for help concerning domestic violence in Portugal was reported by APAV from 2019 ($n = 5,897$) to 2020 ($n = 6,679$). As for the lockdown period in Portugal (from March 22 to May 4 2020), an increase of 100.7% requests for help was reported when compared to the same period of time in 2019.

With regard to the specific contexts of domestic violence, a slight decrease of 4.9% and 4.5% in requests for help from IPV and elderly victims, respectively, was registered in 2020 compared to 2019. In comparison to this, the requests for help received relating to child/adolescent abuse leaped by 48.9%, while other contexts of domestic violence (i.e., victims aged between 18 and 65 with no romantic relationship to the individuals identified as possible attackers) saw a rise of 41.5%. However, when comparing the lockdown period (from March 22 to May 3 2020) to the same time period in 2019, an overall increase of reports across all contexts of violence is denoted by 100.7%. The greatest increase of requests for help reported was by IPV victims (an increase of 123.6%), followed by elderly victims (103.6%) while children and adolescent victims registered an increase of 28.6% requests for help (Table 2).

Analyzing the different contexts separately, from the total sample of requests for help in the IPV context (2019: $n = 3,559$, 51.3%; 2020: $n = 3,382$, 48.7%), it is clear that 90.5% of victims are female (2019: $n = 3,220$, 90.6%; 2020: $n = 3,058$, 90.4%). The youngest victim was 15 years old and the oldest was 88 ($M = 34.1$; $SD = 43.8$). 52.5% of victims ($n = 2,165$) were professionally active. In contrast to the victims, 90.3% of alleged aggressors are male (2019: $n = 3,212$, 90.3%; 2020: $n = 3,051$, 90.2%). The age of alleged aggressors ranged from 15 to 98 ($M = 46.9$, $SD = 15.2$) and, as common to the victims, the highest percentage of persons accused of aggression were professionally active ($n = 1,980$, 59.1%). When considering the relationship between the victim and the alleged aggressor in IPV, the type of intimate relationship was compared. Six types of relationship are considered: spouse (someone who is married to another), ex-spouse (someone who is divorced to another), romantic partner (someone who has a civil partnership with someone else), ex-romantic partner (someone who had a civil partnership with someone else), boyfriend/girlfriend (intimate relationship between people who have no civil union or are married) and ex-boyfriend/girlfriend (a former intimate relationship between people who had neither a civil union nor were married). The majority of the persons accused of

Table 2. Requests for Help within the Context of Domestic Violence: Comparing 2019 to the 2020 Lockdown Period (March, 22nd to May, 3rd).

	2019		2020		Total		Growth
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%	
Intimate Partner Violence	140	30.9	313	69.1	453	100	+ 123.6%
Children and Adolescents	49	43.8	63	56.3	112	100	+ 28.6%
Elderly	28	32.9	57	67.1	85	100	+ 103.6%
Other Contexts*	20	17.7	93	82.3	113	100	+ 365%
N/A	35	63.6	20	36.4	55	100	
Total	272	33.3	546	66.7	818	100	+ 100.7%

Note: * when the victim is between 18 and 64 years old and has no romantic relationship with the alleged aggressor; N/A = No answer

aggression are the victim's spouse (2019: $n = 1,463$, 43.3%; 2020: $n = 1,335$, 42.2%), romantic partner (2019: $n = 677$, 20%; 2020: $n = 711$, 22.5%) or ex-romantic partner (2019: $n = 585$, 17.3%; 2020: $n = 499$, 15.8%). Furthermore, in most requests for help, victims had a heterosexual relationship with the alleged aggressor (2019: $n = 1,892$, 96.1%; 2020: $n = 3,277$, 96.9%). Regarding the violence reported, it is registered an increase of 10% psychological violence in 2020 ($n = 1,076$) when compared to 2019 ($n = 978$). However, during the lockdown period, the increase was more accentuated in 2020 ($n = 100$) than in the same period of time in 2019 ($n = 432$; [Table 3](#)).

The requests for help from children/adolescents (2019: $n = 613$, 40.2%; 2020: $n = 913$, 59.8%) counted with more than half of female victims (2019: $n = 315$, 51.4%; 2020: $n = 513$, 56.2%), while the youngest victim was 1 month old or less and the oldest was 17 years old ($M = 9.6$; $SD = 4.9$). Most young victims did not complete or even enroll in elementary school ($n = 733$, 61.3%) and, in general, the children and adolescents were living with their parents at the time of the request for help (2019: $n = 364$, 91.5%; 2020: $n = 236$, 93.3%). The statistics showed that child/adolescent alleged aggressors were mostly male (2019: $n = 431$, 70.3%; 2020: $n = 617$, 67.6%), irrespective of the victims' sex. The age of the individuals identified as possible attackers ranged from five to 83 years of age ($M = 41$, $SD = 11.5$), the majority of whom were professionally active ($n = 454$, 71.9%). In terms of the relationship between young victims and alleged aggressors, most requests for help revealed that the persons accused of aggression were the victims' parents (2019: $n = 256$, 82.6%; 2020: $n = 343$, 81.7%). Concerning the violence informed, an increase of 57.3% of psychological and physical violence was registered in 2020 ($n = 236$) comparing to 2019 ($n = 150$). During the lockdown period, the increase was not so accentuated as with IPV victims in 2020 ($n = 23$) compared to the same time in 2019 ($n = 14$; [Table 3](#)).

The total of requests for help made by elderly victims (2019: $n = 514$, 51.1%; 2020: $n = 491$, 48.9%) showed that the greater part comprised female victims (2019: $n = 399$, 77.6%; 2020: $n = 366$, 74.5%). The victims' age ranged from 64 to 98 ($M = 77.8$; $SD = 7.9$) and, in general, they were professionally inactive ($n = 785$, 97.3%) given that most were retired ($n = 770$, 98.2%). Again, the statistics showed that elderly alleged aggressors were mainly male (2019: $n = 265$, 51.6%; 2020: $n = 304$, 61.9%), regardless of the victims' sex. The age range of these individuals identified as possible attackers went from 15 to 89 ($M = 46.2$, $SD = 12.1$), and, in contrast to the aforementioned contexts, the persons accused of aggression were primarily professionally inactive ($n = 260$, 69.3%). Most requests for help revealed that alleged aggressors were mainly the elderly victims' children (2019: $n = 244$, 84.4%; 2020: $n = 298$, 81.9%). Lastly, findings about the violence reported show a decrease of 8.8% psychological and physical violence in 2020 ($n = 155$) when compared to 2019 ($n = 170$). Nevertheless, during the lockdown period there was an increase in 2020 ($n = 20$) in relation to the same period of time in 2019 ($n = 10$; [Table 3](#)).

Analysis of the support provided by APAV

Victims contacted APAV mainly through phone calls ($n = 7,520$, 59.8%), regardless of the period of time and year. During lockdown, an increase of phone calls by 47.7% in 2020 ($n = 447$, 74.4%) is reported comparing to the previous year ($n = 154$, 25.6%), as well as a decrease of face-to-face support by 56.8% (2019: $n = 97$, 85.8%; 2020: $n = 16$, 14.2%; [Table 4](#)).

Table 3. Types of violence that victims reported: Comparing the lockdown period in 2020 to the same period in 2019.

	Intimate Partner Violence						Children/adolescents						Elderly Victims					
	2019		2020		Total		2019		2020		Total		2019		2020		Total	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Psychological and Physical Violence	71	57.3	155	51.7	226	53.3	14	42.4	23	45.1	37	44	10	47.6	20	43.5	30	44.8
Psychological Violence	43	34.7	100	33.3	143	33.7	19	57.6	20	39.2	39	46.4	9	42.9	22	47.8	31	46.3
Physical Violence	-	-	30	10	30	7.1	-	-	5	9.8	5	6	-	-	1	2.2	1	1.5
Others*	10	8.1	15	5	25	5.8	-	-	3	5.9	3	3.6	2	9.5	3	6.5	5	7.5
Total	124	100	300	100	424	100	33	100	51	100	84	100	21	100	46	100	67	100

Note: * Different types of violence combined (e.g.: psychological, physical and sexual violence); N/A = No answer

Table 4. Requests for Help Received During Different Time Periods in 2019 and 2020.

	2019		2020		Growth
	<i>n</i>	%	<i>n</i>	%	
Phone Call	3,036	51.5	4,484	67.1	+47.7%
Face-to-face	2,385	40.4	1,031	15.4	-56.8%
Online	408	6.9	1,075	16.1	+163.5%
Other	68	1.2	89	1.3	+30.9%
Total	5,897	100	6,679	100	
March, 22 nd to May, 3 rd *					
Phone Call	154	56.6	447	81.9	+190.3%
Face-to-face	97	35.7	16	2.9	-83.5%
Online	19	7	79	14.5	+315.8%
Other	2	.7	4	.7	+100%
Total	272	100	546	100	

Note: * Period of time associated with the lockdown in 2020

Furthermore, the data presents an increase of support provided to victims by APAV by 24.7% in 2020, comparing the previous year (2019: $n = 4975$, 84.4%; 2020: $n = 6202$, 92.9%). A 63.4% increase of victims receiving general emotional support was also denoted in the pandemic year (2019: $n = 3,279$, 53.7%; 2020: $n = 5,358$, 86.4%). When considering the specific support provided by professional, psychological and legal supports were the most highlighted (2019: $n = 1,141$, 38.2%; 2020: $n = 620$, 16.2%), followed by legal support only (2019: $n = 495$, 16.6%; 2020: $n = 1,248$, 32.6%).

Discussion

The COVID-19 pandemic and the subsequent restriction and lockdown policies implemented throughout have had a global impact on the victims of domestic violence. In this study, it is denoted that 82.9% of victims are female. This is a data often reported in many studies, regardless of the age of the victim (e.g.,: Almiş et al., 2020; Beydoun et al., 2017; Breiding et al., 2008; Cunradi et al., 2009; Froimson et al., 2020; Yon et al., 2014). Furthermore, from the available information, most victims are unemployed during the pandemic year, which can potentially increase the possibility of domestic violence when they live with the alleged aggressors during the lockdown (Beydoun et al., 2017; Breiding et al., 2008; Cunradi et al., 2009; Froimson et al., 2020). These two factors contribute for the risk factors of domestic violence among other risks that were not possible to assess in the current study. Nevertheless, the main aim of this article was to compare the domestic violence and its contexts, as well as victim's support provided, between a non-pandemic and pandemic year (2019 and 2020). For this, one hypothesis was tested: compared to 2019, an increase of request for help during 2020 is expected in the different contexts of domestic violence, especially lockdown. Results showed a general consistence to this hypothesis.

First, the analysis of the APAV data presents an 13.3% increase of requests for help in domestic violence. This was corroborated by the findings of a number of reports from other countries that also described an increase in reports of domestic violence (e.g.,: Boserup et al., 2020). On the other hand, this result contrasts with the Portugal's Public Security Police and the National Republican Guard finding that demonstrated a decrease of 4.9% in domestic violence reports (Instituto Nacional de Estatística, 2021). This discrepancy might be

associated with victims being more likely to reach out for help on a Victim's Support Association, rather than to report a crime of domestic violence. Furthermore, a slight decrease in requests for help from IPV and elderly victims was noted in 2020 when compared to 2019. This decrease might be explained by a difficulty in reaching out for help due to a control that the persons accused of aggression possibly exerts on the victim (Froimson et al., 2020). Conversely, there was a considerable increase in requests from children/adolescents and other victims in 2020. This increase might represent a major concern to some family members regarding the well-being of children/adolescents' victims and might also represent the difficulties associated with the management of individual and social restrictions by this group of victims and their families during the pandemic.

The lockdown period in 2020 saw a 100.7% increase in requests for help for domestic violence. This increase was greater than that reported worldwide (e.g., Fraser, 2020), which may be explained by the comparison of different periods of time and the type of institutions that provide information regarding the number of requests for help in each country. The increase in requests for help from IPV and elderly victims during lockdown was consistent with Chang and Levy (2021) study, which also showed an increase. However, the rise in child/adolescent requests for help was contrary to the findings of Campbell's (2020) study that reported a decrease in domestic abuse in this category of victims. The unexpected increase of requests for help during lockdown might be explained with more opportunities (related or not with the availability of different types of remote support) provided to children/adolescents to request for help.

When analyzing the characteristics of each context of domestic violence, it is possible to understand that the most common relationship between the IPV victim and alleged aggressor was spouse, followed by romantic partner; in the context of child and adolescent abuse, most persons accused of aggression were the victim's parents or stepparents; regarding elderly victims, the relationship with the individuals identified as possible attackers was most likely son or daughter. This result suggests that a direct or close relationship between the victim and the alleged aggressor (such as one connected through marriage, a civil union or by parenthood) potentially increases the risk of domestic violence. Furthermore, psychological violence increased during lockdown in IPV victims. The possible use of coercion exerted on victims to prevent them seeking medical or psychological treatments because of the danger of being infected with COVID-19 might be one of the reasons for this increase (Jarneck & Flanagan, 2020).

Psychological and physical violence increased during lockdown in children/adolescents and elderly victims of domestic violence, also corroborated with the literature (e.g., Javed & Mehmood, 2020). In general, findings present an increase of all types of domestic violence perpetrated (physical and/or psychological) in both contexts during lockdown. Emotional stressors related to the imposed restrictions (e.g., financial loss, anger; Brooks et al., 2020) might reflect in the violent behavior of alleged aggressors, not only increasing the violence in a psychological level but also in a physical one.

As it was indicated, an increase of remote support in 2020 (i.e., phone calls and online interfaces) was reported, given the restrictions of the COVID-19 pandemic. This result corroborates with the findings of several studies (e.g., Agüero, 2020; Armbruster & Klotzbücher, 2020; Bradbury-Jones & Isham, 2020). Furthermore, a noteworthy increase of 190.3% in phone calls was also registered during the lockdown period (i.e., March 22 and May 3) which might possibly be explained by the urgent need of requesting for help resorting

to a device that allows to communicate and access more directly and easily than with other remote support widgets (such as videoconference or e-mail) while maintaining a certain anonymity when compared to face-to-face support. The analysis of the type of support by the APAV professionals indicated a 24.7% increase of victims requesting for help in general. Taking in consideration the specific support provided, psychological and legal supports were the most highlighted, counting also with an increase in 2020 compared to 2019.

Lastly, although not the main focus of our study, a notable growth of 41.5% in requests for help was seen in 2020 in the context defined as “Other.” This was of particular interest since the diversity of victims in this context was greater than in any of the other contexts due to the variation in age (from 18 to 65) as well as the variation in relationship with the persons likely to have attacked a victim, which was predominantly a direct family member such as parent or daughter/son.

Some limitations to this study should be highlighted. First, given the exploratory nature of this study, only descriptive analyses were conducted. The limited use of statistical methodologies was related to the categorical nature of the data, hence further analysis was not possible. Interviewing victims of domestic violence during the pandemic years focusing on more risk factors (e.g., economic resources) would improve the quality of the data regarding the negative impact that a pandemic situation can cause in crime. An additional study focusing on the perspective of the alleged or accused aggressors of domestic violence during lockdown would also contribute for other important findings, especially concerning the main beliefs and motivations behind the violent behavior. Secondly, several database variables had to be excluded due to large quantities of missing data and, had these variables been included, they could have biased the results. The missing data is explained by the fact that APAV’s current digital platform (PLAGA) includes several variables that are often optional and that are dependent on the nature of each individual crime. Despite this, the study comprised a considerable sample that provided a different insight into the individual contexts of domestic violence.

The importance of victim support during the pandemic and lockdown period should not be disregarded. Even with the existence of different technologies and platforms, phone calls were still the most prolific method of contact when requesting help. The development of new strategies to support victims, especially when face-to-face support is often not possible, is desirable. This is especially highlighted to children and adolescents to decrease long-term consequences (e.g., the development of mental disorders; Almiş et al., 2020; World Health Organization, 2020b) that might reflect in adulthood. Phone applications that could provide online counseling and intervention, self-help strategies, direct access to domestic violence hotlines and available places in shelters would be beneficial, particularly for younger victims. These applications could also be used by witnesses to report known situations of domestic violence when victims are unable to. Some studies have already proposed strategies to help intervene in incidents of domestic violence during the pandemic (cf., Emezue, 2020; Sacco et al., 2020).

The use of databases can be an important tool for developing a systematic analysis regarding an evolution of the phenomenon in different realities. These are able to link the records from different help associations, helplines and the police to health centers/hospitals would improve the speed of identification of victims at risk. They could also help those who might be too afraid to report the victimization to the police or helplines but are identified in

hospitals. These databases could help identify victims with reduced financial resources to report the crime using devices to access support from a distance.

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References

- Agüero, J. M. (2020). COVID-19 and the rise of intimate partner violence. *World Development*, 137, 105217. <https://doi.org/10.1016/j.worlddev.2020.105217>
- Almış, B. H., Gümüştaş, F., & Kütük, E. K. (2020). Effects of domestic violence against women on mental health of women and children. *Psikiyatride Guncel Yaklasimlar*, 12(2), 232–242. <https://doi.org/10.18863/pgy.567635>
- Anka, A., Thacker, H., & Penhale, B. (2020). Safeguarding adults practice and remote working in the COVID-19 era: Challenges and opportunities. *The Journal of Adult Protection*, 22(6), 391–399. <https://doi.org/10.1108/JAP-08-2020-0040>
- Anurudran, A., Yared, L., Comrie, C., Harrison, K., & Burke, T. (2020). Domestic violence amid COVID-19. *International Journal of Gynecology & Obstetrics*, 150(2), 255–256. <https://doi.org/10.1002/ijgo.13247>
- APAV. (2021, June 2). *Caracterização da violência contra as mulheres e violência doméstica em tempos de pandemia [Webinar]*. Webinar de Apresentação de Resultados. <https://www.youtube.com/watch?v=vlBPbgfj-KQ>
- Armbruster, S., & Klotzbücher, V. (2020). *Lost in lockdown? Covid-19, social distancing, and mental health in Germany* (No. 2020-04). Diskussionsbeiträge.
- Beland, L. P., Brodeur, A., Haddad, J., & Mikola, D. (2020). Covid-19, family stress and domestic violence: Remote work, isolation and bargaining power. *Institute of Labor Economics*. 13332, 1–35. <http://hdl.handle.net/10419/223774>
- Beydoun, H. A., Williams, M., Beydoun, M. A., Eid, S. M., & Zonderman, A. B. (2017). Relationship of physical intimate partner violence with mental health diagnoses in the nationwide emergency department sample. *Journal of Women's Health*, 26(2), 141–151. <https://doi.org/10.1089/jwh.2016.5840>
- Boserup, B., McKenney, M., & Elkbuli, A. (2020). Alarming trends in US domestic violence during the COVID-19 pandemic. *The American Journal of Emergency Medicine*, 38(12), 2753–2755. <https://doi.org/10.1016/j.ajem.2020.04.077>

- Bouillon-Minois, J. B., Clinchamps, M., & Dutheil, F. (2020). Coronavirus and quarantine: Catalysts of domestic violence. *Violence against Women*, 1–3. <https://doi.org/10.1177/1077801220935194>
- Bradbury-Jones, C., & Isham, L. (2020). The pandemic paradox: The consequences of COVID-19 on domestic violence. *Journal of Clinical Nursing*, 29(13–14), 2047–2049. <https://doi.org/10.1111/jocn.15296>
- Breiding, M. J., Black, M. C., & Ryan, G. W. (2008). Prevalence and risk factors of intimate partner violence in eighteen US states/territories, 2005. *American Journal of Preventive Medicine*, 34(2), 112–118. <https://doi.org/10.1016/j.amepre.2007.10.001>
- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. *The Lancet*, 395(10227), 912–920. [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- Brozowski, K., & Hall, D. R. (2010). Aging and risk: Physical and sexual abuse of elders in Canada. *Journal of Interpersonal Violence*, 25(7), 1183–1199. <https://doi.org/10.1177/0886260509340546>
- Burnett, J., Achenbaum, W. A., & Murphy, K. P. (2014). Prevention and early identification of elder abuse. *Clinics in Geriatric Medicine*, 30(4), 743–759. <https://doi.org/10.1016/j.cger.2014.08.013>
- Campbell, A. M. (2020). An increasing risk of family violence during the Covid-19 pandemic: Strengthening community collaborations to save lives. *Forensic Science International: Reports*, 2, 100089. <https://doi.org/10.1016/j.fsir.2020.100089>
- Chang, E. S., & Levy, B. R. (2021). High prevalence of elder abuse during the COVID-19 pandemic: Risk and resilience factors. *The American Journal of Geriatric Psychiatry*, 29(11), 1152–1159. <https://doi.org/10.1016/j.jagp.2021.01.007>
- Chiesa, A. E., Kallechey, L., Harlaar, N., Ford, C. R., Garrido, E. F., Betts, W. R., & Maguire, S. (2018). Intimate partner violence victimization and parenting: A systematic review. *Child Abuse & Neglect*, 80, 285–300. <https://doi.org/10.1016/j.chiabu.2018.03.028>
- Cunradi, C. B., Todd, M., Duke, M., & Ames, G. (2009). Problem drinking, unemployment, and intimate partner violence among a sample of construction industry workers and their partners. *Journal of Family Violence*, 24(2), 63–74. <https://doi.org/10.1007/s10896-008-9209-0>
- Digital, P. (2020). *Covid-10 Lockdown: Police Receive 87 000 Gender-Based Violence Calls*. <https://www.power987.co.za/news/covid-19-lockdown-police-receive-87-000-gender-based-violence-calls/>
- Donagh, B. (2020). From unnoticed to invisible: The impact of CoViD-19 on children and young people experiencing domestic violence and abuse. *Child Abuse Review*, 29(4), 387–391. <https://doi.org/10.1002/car.2649>
- Ellsberg, M., Jansen, H. A., Heise, L., Watts, C. H., & Garcia-Moreno, C. (2008). Intimate partner violence and women's physical and mental health in the WHO multi-country study on women's health and domestic violence: An observational study. *The Lancet*, 371(9619), 1165–1172. [https://doi.org/10.1016/S0140-6736\(08\)60522-X](https://doi.org/10.1016/S0140-6736(08)60522-X)
- Emezue, C. (2020). Digital or digitally delivered responses to domestic and intimate partner violence during COVID-19. *JMIR Public Health and Surveillance*, 6(3), e19831. <https://doi.org/10.2196/19831>
- Enders, C. K. (2003). Using the expectation maximization algorithm to estimate coefficient alpha for scales with item-level missing data. *Psychological Methods*, 8(3), 322. <https://doi.org/10.1037/1082-989X.8.3.322>
- Fraser, E. (2020). *Impact of COVID-19 pandemic on violence against women and girls*. VAWG Helpdesk Research Report.
- Froimson, J. R., Bryan, D. S., Bryan, A. F., & Zakrisson, T. L. (2020). COVID-19, Home Confinement, and the Fallacy of "Safest at Home". *American Journal of Public Health*, 110(7), 960–961. <https://doi.org/10.2105/AJPH.2020.305725>
- Garcia-Moreno, C., Jansen, H. A., Ellsberg, M., Heise, L., & Watts, C. H. (2006). Prevalence of intimate partner violence: Findings from the WHO multi-country study on women's health and domestic violence. *The Lancet*, 368(9543), 1260–1269. [https://doi.org/10.1016/S0140-6736\(06\)69523-8](https://doi.org/10.1016/S0140-6736(06)69523-8)

- Gulati, G., & Kelly, B. D. (2020). Domestic violence against women and the COVID-19 pandemic: What is the role of psychiatry? *International Journal of Law and Psychiatry*, 71(101594), <https://doi.org/10.1016/j.ijlp.2020.101594>
- Han, S. D., & Mosqueda, L. (2020). Elder Abuse in the COVID-19 Era. *Journal of the American Geriatrics Society*, 68(7), 1386–1387. <https://doi.org/10.1111/jgs.16496>
- Huecker, M. R., & Smock, W. (2020). *Domestic violence*. StatPearls Publishing.
- Instituto Nacional de Estatística. (2021, March). *Lesadas/os/ ofendidas/os identificadas/os em crimes de violência doméstica contra o cônjuge ou análogo registados pela PSP e GNR*. https://www.ine.pt/xportal/xmain?xpid=INE&xpgid=ine_indicadores&indOcorrCod=0008156&contexto=bd&selTab=tab2
- Jarnecke, A. M., & Flanagan, J. C. (2020). Staying safe during COVID-19: How a pandemic can escalate risk for intimate partner violence and what can be done to provide individuals with resources and support. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1), S202–S204. <https://doi.org/10.1037/tra0000688>
- Javed, S., & Mehmood, Y. (2020). No lockdown for domestic violence during COVID-19: A systematic review for the implication of mental-well being. *Life and Science*, 1(supplement), 6-6. <https://doi.org/10.37185/LnS.1.1.169>
- Joseph, S. J., Mishra, A., Bhandari, S. S., & Dutta, S. (2020). Intimate partner violence during the COVID-19 pandemic in India: From psychiatric and forensic vantage points. *Asian Journal of Psychiatry*, 54(102279), <https://doi.org/10.1016/j.ajp.2020.102279>
- Kaukinen, C. (2020). When stay-at-home orders leave victims unsafe at home: Exploring the risk and consequences of intimate partner violence during the COVID-19 pandemic. *American Journal of Criminal Justice*, 45(4), 668–679. <https://doi.org/10.1007/s12103-020-09533-5>
- Kelly, J., & Morgan, T. (2020, April). *Coronavirus: Domestic Abuse Calls up 25% Since Lockdown, Charity Says*. BBC News. <https://www.bbc.co.uk/news/uk-52157620>
- National Research Council (NRC). (2003). *Elder Mistreatment: Abuse, Neglect, and Exploitation in an Aging America*. Panel to Review Risk and Prevalence of Elder Abuse and Neglect. In R. J. Bonnie & R. B. Wallace (Eds.), *Committee on National Statistics and Committee on Law and Justice, Division of Behavioral and Social Sciences and Education*. The National Academies Press. 88–103.
- Pak, A., Adegboye, O. A., Adekunle, A. I., Rahman, K. M., McBryde, E. S., & Eisen, D. P. (2020). Economic consequences of the COVID-19 outbreak: The need for epidemic preparedness. *Frontiers in Public Health*, 8, 241. <https://doi.org/10.3389/fpubh.2020.00241>
- Parrott, D. J., & Zeichner, A. (2003). Effects of hypermasculinity on physical aggression against women. *Psychology of Men & Masculinity*, 4(1), 70. <https://doi.org/10.1037/1524-9220.4.1.70>
- Phelps, C., & Sperry, L. L. (2020). Children and the COVID-19 pandemic. *Psychological Trauma: Theory, Research, Practice, and Policy*, 12(S1), S73. <https://doi.org/10.1037/tra0000861>
- Piquero, A. R., Jennings, W. G., Jemison, E., Kaukinen, C., & Knaul, F. M. (2021). Domestic violence during the COVID-19 pandemic-Evidence from a systematic review and meta-analysis. *Journal of Criminal Justice*, 74(101806), 1–10. <https://doi.org/10.1016/j.jcrimjus.2021.101806>
- Piquero, A. R., Riddell, J. R., Bishopp, S. A., Narvey, C., Reid, J. A., & Piquero, N. L. (2020). Staying home, staying safe? A short-term analysis of COVID-19 on Dallas domestic violence. *American Journal of Criminal Justice*, 45(4), 601–635. <https://doi.org/10.1007/s12103-020-09531-7>
- Poole, C., & Rietschlin, J. (2012). Intimate partner victimization among adults aged 60 and older: An analysis of the 1999 and 2004 General Social Survey. *Journal of Elder Abuse Neglect*, 24(2), 120–137. <https://doi.org/10.1080/08946566.2011.646503>
- Portland Police Bureau. (2020). *Trends analysis: Pre and post school closures*. <https://www.portlandoregon.gov/police/article/760238>
- Sacco, M. A., Caputo, F., Ricci, P., Sicilia, F., De Aloe, L., Bonetta, C. F., Cordasco, F., Scalise, C., Cacciatore, G., Zibetti, A., Gratteri, S., & Aquila, I. (2020). The impact of the Covid-19 pandemic on domestic violence: The dark side of home isolation during quarantine. *Medico-Legal Journal*, 88(2), 71–73. <https://doi.org/10.1177/0025817220930553>
- Safe Lives. (2020). *Domestic abuse frontline service COVID-19 survey results*. https://safelives.org.uk/sites/default/files/resources/SafeLives%20survey%20of%20frontline%20domestic%20abuse%20organisations%20for%20COVID19%2030.03.20_0.pdf

- Sharma, A., & Borah, S. B. (2020). Covid-19 and domestic violence: An indirect path to social and economic crisis. *Journal of Family Violence*, 1–7. <https://doi.org/10.1007/s10896-020-00188-8>
- Sirur, S., & Krishnan, R. (2020). *Indian women are locked in with their abusers, but are finding new ways to seek help*. <https://theprint.in/india/indian-women-are-locked-in-with-their-abusers-but-are-finding-new-ways-to-seek-help/393949/>
- Stavseth, M. R., Clausen, T., & Røislien, J. (2019). How handling missing data may impact conclusions: A comparison of six different imputation methods for categorical questionnaire data. *SAGE Open Medicine*, 7, 1–12. <https://doi.org/10.1177/2050312118822912>
- UN Women. (2020, April). *COVID-19 and ending violence against women and girls*. <https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls>
- World Health Organization. (2020a, June). *Addressing violence against children, women and older people during the COVID-19 pandemic: Key actions*. https://www.who.int/publications/i/item/WHO-2019-nCoV-Violence_actions-2020.1
- World Health Organization. (2020b, June). *Child maltreatment*. <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment>
- World Health Organization. (2021, March). *Violence against women*. <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>
- Yon, Y., Wister, A., Gutman, G., & Mitchell, B. (2014). A comparison of spousal abuse in mid-and-old aged: Is elder abuse simply a case of spousal abuse grown old? *Journal of Elder Abuse and Neglect*, 26(1), 80–105. <https://doi.org/10.1080/08946566.2013.784085>