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By email: vaw@ohchr.org

Re: Call for submissions on COVID-19 and the increase of domestic violence against women

29 June, 2020

Dear SRSG Šimonović:

Thank you for the opportunity to share inputs regarding ways COVID-19 appears to be impacting women’s risk of, and degree of protection from, domestic violence. To answer your call for submissions, the newly established Center for Human Rights, Gender and Migration at the Institute for Public Health, Washington University in St. Louis (CHRGM), joins with the St. Louis Area Violence Prevention Commission (STLVPC) to offer a three-part contribution. First, we share direct responses to many of your questions regarding rates of reporting and challenges to service provision here in the St. Louis metropolitan area. Second, we widen the aperture to look at data from well beyond St. Louis that suggests various relationships between COVID-19 and domestic violence. Finally, we conclude with observations and suggestions for future research.

I. Snapshot from St. Louis, Missouri, USA

St. Louis is a city with a population of 300,576, located in the state of Missouri. It is surrounded by St. Louis County, which has a population of 994,205. The racial and socio-economic disparities between the City of St. Louis and St. Louis County are important to note here:

<table>
<thead>
<tr>
<th></th>
<th>St. Louis City</th>
<th>St. Louis County</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population identifying as white alone</td>
<td>46.2%</td>
<td>67.9%</td>
</tr>
<tr>
<td>Population identifying as Black or African American</td>
<td>46.9%</td>
<td>25%</td>
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</tbody>
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As part of its response to the COVID-19 pandemic, the City of St. Louis and County simultaneously initiated stay-at-home orders from 23 March – 18 May, 2020. Victim advocates expressed concern that the stress and confinement of stay-at-home orders might increase tension and result in a higher incidence of domestic violence. However, initial data from police, hotlines, shelters, and courts show mixed results.

**Police**

St. Louis City showed a drop across all three months of data that were available for the same months in 2019 and 2020 (March, April, and May). The largest drop was in April. St. Louis County saw an increase in domestic violence reports to police in March and April, but a smaller drop in May. These numbers are for domestic violence, which includes assaults between anyone who lives or have lived together. It is not disaggregated by gender and does not capture only intimate partner violence; it includes some violence between other family members as well. That said, it is the closest available statistic that allows us to approximate the number of calls involving intimate partner violence.

<table>
<thead>
<tr>
<th>Owner-occupied housing units</th>
<th>43.4%</th>
<th>69%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Median value of owner-occupied housing units</td>
<td>$131,900</td>
<td>$190,100</td>
</tr>
<tr>
<td>Median household income</td>
<td>$41,107</td>
<td>$65,300</td>
</tr>
<tr>
<td>Persons in poverty</td>
<td>24.2%</td>
<td>10.5%</td>
</tr>
</tbody>
</table>

### Domestic Violence Incidents Reported to Police

<table>
<thead>
<tr>
<th></th>
<th>St. Louis Metropolitan Police Department</th>
<th>St. Louis County Police Department</th>
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<tbody>
<tr>
<td></td>
<td>2019</td>
<td>2020</td>
</tr>
<tr>
<td>March</td>
<td>187</td>
<td>170</td>
</tr>
<tr>
<td>April</td>
<td>190</td>
<td>108</td>
</tr>
<tr>
<td>May</td>
<td>158</td>
<td>121</td>
</tr>
<tr>
<td>TOTAL</td>
<td>535</td>
<td>399</td>
</tr>
</tbody>
</table>

There are other indications of increased reports, as well. For example, the non-profit Crime Victim Center receives direct referrals from the City of St. Louis and St. Louis County Police through their Domestic Violence Intervention Partnership, which places a victim’s advocate in each police department’s headquarters. In St. Louis City, the advocate received 286 referrals for domestic-violence assistance from March-May 2020 – a significant increase from 170 referrals during the same months in 2019. In St. Louis County, the advocate received 285 referrals from March-May 2020, another large increase over their 2019 total of 188. So, while overall police report numbers were down in St. Louis City and slightly up in St. Louis County, victim advocates received higher numbers of referrals for domestic violence-related support and were able to reach a larger number of victims for intake than in the same time period in 2019.

**Shelters**

Shelters were forced to make significant adjustments during the COVID-19 pandemic. They were required to space out beds for social distancing. Shelters also had to quarantine all new residents for 14 days. For one shelter, that meant that they could only accept one new woman every two weeks since they only had a single quarantine room. By May, there was only one resident in the shelter. Another shelter had more residents, but a few new residents chose not to stay because of the strict quarantine restrictions. Women who were new to the shelter and under quarantine were required to spend all of their time in their room, not leaving even to smoke a cigarette outside. All shelters reported difficulty in
transitioning women out of emergency shelter because they were experiencing delays in securing identification documents. This, in turn, delayed applications for government assistance and employment.

Orders of Protection

While the stay-at-home orders in St. Louis City and County started March 23, victims of IPV were still required to apply for orders of protection in person at the courthouse. On April 23, St. Louis County announced they would begin taking online applications for Orders of Protection. St. Louis City followed suit on May 13, when they opened online applications. The application consists of a PDF document that the petitioner must download, fill out, save, and then submit online through the Courts’ websites. According to advocates, the online applications are not user friendly and do not work well on mobile devices. For many clients, a cellphone or tablet is their only technology with a connection to the internet. Many do not own laptops, desktop computers, or printers.

Crime Victim Center, which also staffs an office in the City and County Courts through their Court Order of Protection Assistance Program, completed 58 intakes with victims who wanted to file for an Order of Protection in St. Louis City from March-May 2020. This was a decrease from 76 intakes conducted during the same months in 2019. In St. Louis County, Program staff completed 114 intakes from March-May 2020, which was a decrease from 135 in 2019. This could be due to confusion over the status of the courts during the pandemic, fear of exposure to the virus, or an inability to separate from the abuser long enough to apply for an Order of Protection.

Court Hearings

From the start of the stay-at-home orders, courts and enforcement agencies around the United States reduced hours of operation and availability to the public. Many courts have cancelled “non-emergency” hearings and each jurisdiction has different standards and processes for emergency hearings. Some do not have any remote or virtual avenues to access judicial mechanisms.

In lieu of in-person hearings, courts in the St. Louis metropolitan area are currently allowing hearings through the Zoom online platform. While this was intended to spare individuals from having to appear physically in Court, it should be noted that Zoom-based proceedings of course require a stable internet connection and a phone, tablet, or laptop with a working camera. Not all victims have access to these.

Digital accommodations such as this raise equity concerns because some of the areas with the most concentrated poverty in the St. Louis area also lack infrastructure for cellphone service and internet. Further, having online hearings means that the Court cannot control the environment in which the victim is testifying. When hearings are held at the courthouse, a bailiff or sheriff is able to mediate disagreements and to protect the victim. In online hearings, however, the perpetrator could be in the same room as the victim during the hearing. This would presumably be dangerous for many victims. While this arrangement is meant to make it easier for victims to obtain Orders of Protection, it has the potential to compromise their safety.

Furthermore, evidence and record sharing have been additional issues in “virtual” domestic violence cases. Some courts are asking for evidence to be emailed or shared through the screen which has increased privacy and procedural concerns.
II. COVID-19 and domestic violence reports beyond St. Louis

In the United States, many cities saw an increase in service calls to police departments and domestic violence hotlines during the early stages of COVID-19 response. For example, in a comparative study on crime in Indianapolis and Los Angeles from January to mid-April 2020, data indicated that both cities saw a significant increase in domestic violence-related calls to the police after both cities enacted stay-at-home orders. Domestic violence was the only crime-related call to police that increased in both cities. In Texas, the San Antonio Police Department had an 18% increase in domestic violence calls, and the Jefferson County Sheriff's Office in Alabama reported a 27% increase in calls related to domestic violence as compared to March 2019. Data based on fifteen large metropolitans shows an average of a 10% increase in domestic violence service calls to the police in each city.

However, increased call numbers do not necessarily lead to an increase in police reports or arrests. For example, in Chicago, though domestic violence reports fell by 23% in the last three weeks of March, the police department saw a 13% increase in 911 domestic violence service calls in comparison to the same time last year.

Some cities have seen an increase in calls and arrests, including Oklahoma City, where domestic related arrests were up 21% in the first weeks of April 2020 as compared to the same period in 2019.

Chicago provides some additional insights. Aside from the city's domestic abuse hotline seeing an increase of 15% in calls, the Illinois Domestic Violence Hotline saw a 2000% increase in "calls" when comparing March 21 to April 22, 2020, to the same period in 2019. The Crisis Text Line has also reported an increase of 78% in texts relating to domestic violence, and the majority of texters are also reported an increase of 78% in texts relating to domestic violence.

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3 Ibid., 3-4.
5 The cities used in the study were Baltimore, Maryland; Bloomington, Indiana; Chandler, Arizona; Cincinnati, Ohio; Detroit, Michigan; Los Angeles, California; Mesa, Arizona; Montgomery County, Maryland; New Orleans, Louisiana; Phoenix, Arizona; Sacramento, California; Salt Lake City, Utah; Seattle, Washington; Tucson, Arizona; and Virginia Beach, Virginia. See Leslie, Emily and Wilson, Riley, Sheltering in Place and Domestic Violence: Evidence from Calls for Service during COVID-19 (May 14, 2020). 21 Available at SSRN: https://ssrn.com/abstract=3600646 or http://dx.doi.org/10.2139/ssrn.3600646.
within the 18-35 age group. The increase in text messages suggest that victims are unable to make a safe phone call during shelter-in-place restrictions.

There may also be reporting differences in urban versus rural areas. In New York City, where COVID-19 has hit the country the hardest and the strongest shelter-in-place restrictions were put in place, reports of domestic violence decreased in the weeks initially following the shutdown. This was in contrast with an increase in calls and reports statewide in New York, possibly suggesting that the city may have unique barriers to reporting due to its density and the intensity of the pandemic, as compared to the state’s more rural or suburban areas.

Internationally, statistics look similar. As the pandemic set in, Australia reportedly saw a 40% drop in generalized crime but a 5% increase in domestic-abuse calls; an NGO in Singapore noted a 112% increase in family violence (including domestic violence); and Argentina saw a 67% increase in emergency line calls. However, not all countries are seeing a spike in domestic violence calls. Italy’s largest domestic violence helpline saw a 55% decrease in calls during the first two weeks of their national lockdown (March), which follows a similar trend to New York City. These cases do not prove that domestic violence rates are falling. They may instead indicate that, due to individual, social or structural barriers, women are unable to seek help during the pandemic.

III. Observations

Experts are concerned that the COVID-19 pandemic will increase many women’s risk of intimate partner violence, due to heightened economic stress and public health measures that may trap survivors at home with their abusers.

Theories abound. First, there is concern that stay-at-home orders, such as those issued in St. Louis, isolate women from friends and social supports. Perpetrators at home may restrict and monitor victims’

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outside communications, and they may be present during calls between the victim and service providers, inhibiting a victim from seeking help. Second, victims’ access to healthcare is disrupted during a pandemic: routine appointments around the world have been postponed, which reduces victims’ opportunities for interaction with doctors and service providers; this, in turn, may reduce healthcare professionals’ opportunities to detect signs of abuse. On a related note, resources in many areas have been reallocated to prioritize the response to the pandemic, reducing funding available for sexual- and reproductive-health services. Many victims are also not reaching out to service providers for medical care after experiencing physical abuse for fear of contracting COVID-19. Third, the economic strain of the pandemic may increase vulnerability to domestic abuse: Job loss may increase stress in a household and, in many cases, women may have fewer economic means than usual to leave a violent partner. Fourth, during the pandemic, mental health has deteriorated while alcohol and firearms sales have increased in the United States; all three factors have been correlated with higher incidence of domestic violence. Research into these possible causes of increased violence may improve future policies responding to public health crises to ensure that women are protected.

While these theories and assumptions are logical, we currently lack sufficient, rigorously-collected evidence of these complex dynamics. Datasets held by police, shelters, and courts do not always reflect shared definitions of domestic violence; they may be misaligned in whether they are logging police “calls” versus “reports.” Further, data on domestic violence (which is not coterminous with “intimate partner violence”) is often not disaggregated by gender or nature of relationship. Generally speaking, these data can be difficult to interpret without further research, including a closer look at measurements. At some point, qualitative data from survivors and other household members might help explain what was happening in homes from which reports of domestic violence were made during these early stages of the COVID-19 pandemic. However, there are serious ethical challenges to conducting this kind of research at this time, given victims’ ongoing vulnerabilities.

Moreover, further research is needed to understand the gendered and intersectional impacts of COVID-19. For example, research conducted by the Missouri Hospital Association highlighted the disparate impact of COVID-19 on communities of color and found “the region’s 19 ZIP codes with a majority Black or African American population had a combined rate of COVID-19 cases near 400 per 100,000 residents,

while the 68 ZIP codes with fewer than 5% Black or African American residents had 127 cases per 100,000 residents on April 20, 2020.\textsuperscript{23} This is likely due to the strong link between place (zip code of residence) and access to social determinants of health - or lack thereof - like preventative healthcare, healthy foods, lead exposure, educational attainment, employment, and systemic racism. It is also understood that common public health measures adopted during COVID-19 responses – including shelter-in-place measures, isolation, and close proximity – have a different effect on women, people of color and lower-income individuals, who are more likely to experience greater hardships and losses related to the pandemic.\textsuperscript{24}

Finally, additional research is necessary to better understand vulnerability to domestic violence experienced by different communities across different contexts (e.g., refugees, LGBTQI persons, individuals living in conflict-affected areas) or how marginalization of certain groups can negatively impact their access to protection from domestic violence, or the abilities to report it in the first place. To this end, we are pleased to announce that we recently received funding to launch a pilot study examining the relationships between COVID-19 and intimate partner violence in the City of St. Louis, Missouri; Santiago, Chile; and Kampala, Uganda. We will of course share the results of this research as soon as it is available.

For now, our gratitude for your attention to this critical issue and your work, generally.

Respectfully submitted,

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