Impacts of the COVID-19 Pandemic on Violence Against Women Services

WOMEN’S EXPERIENCES WITH OUTREACH SERVICES & RELATIONSHIP FEARS

WHAT WE DID
In total, 49 self-identifying women completed an online survey about their experiences using VAW outreach services during the COVID-19 pandemic. Most (71%) had used domestic violence services.

WHAT WE FOUND
Women’s experiences with VAW services during the pandemic were mixed; some found technology-facilitated services (phone, video, text) more accessible, safe, useful, supportive and able to meet their needs, while others found them less so, or reported no change. Some hoped to return to in-person care. Many women reported increased relationship-related fears, some of which were due specifically to COVID-19 factors. Over half of women reported poorer wellbeing, access to health care, and access to informal supports. Below are some highlights.

EXPERIENCES WITH VAW SERVICES

- 29% no change in access
- 51% harder to access
- 20% easier to access

“Video conference counselling has been very helpful, especially since I am already handicapped and find getting to the office difficult.”

“I am scared to have a video appointment because if I have a panic attack then I don’t have any physical support at home other than my dog.”

RELATIONSHIP FEARS

- 51% of women were afraid in a relationship before the pandemic
- of these, 56% reported a fear had worsened since the pandemic
- 27% had a new fear specific to the pandemic, such as someone preventing them from getting COVID-19 testing/treatment
WHAT WE RECOMMEND

1. Although the impacts of the pandemic on women varied, our findings highlight how layers of difficulty, such as less accessible formal and informal support, as well as increased fear – can compound to make life for women experiencing abuse even more difficult. While this was not the experience of all women in the study, we recommend that the needs those most at-risk of further harm drive future service models.

2. Various technology-based VAW service options (text, video, phone) were supported by women. Our findings clearly support the need for flexibility in VAW service delivery, including working within public health guidelines to maintain in-person service options whenever possible, as these opportunities to connect were highly valued by women.

3. To offset feelings of isolation and potential for added risk and fear, more frequent contacts or ‘check-ins’ (e.g., calls, texts) are recommended during times of additional stress or service disruption.

For more information:
- https://gtvincubator.uwo.ca/vawservicespandemic/