

COVID-19 AND THE INCREASE OF DOMESTIC VIOLENCE AGAINST WOMEN**AUTHORS**

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- 1. TO WHAT EXTENT HAS THERE BEEN AN INCREASE OF VIOLENCE AGAINST WOMEN, ESPECIALLY DOMESTIC VIOLENCE IN THE CONTEXT OF THE COVID-19 PANDEMIC LOCKDOWNS? PLEASE PROVIDE ALL AVAILABLE DATA ON THE INCREASE OF VIOLENCE AGAINST WOMEN, INCLUDING DOMESTIC VIOLENCE AND FEMICIDES, REGISTERED DURING THE COVID-19 CRISIS.**

According to UN Women (2015) “*violence against women and girls is one of the most widespread violations of human rights*”. It is estimated that approximately 35% of women worldwide have experienced physical and/or sexual violence by an intimate partner or sexual violence by a non-partner during their lifetime (WHO, 2013). Data from the World Health Organization (2013) show that 1 in 3 women has suffered physical or sexual violence at least once in their lives. In addition, UNODC (2014) states that 1 in every 2 women killed were killed

by their partners or family and that 3 in 4 women/girls trafficked are for the purpose of sexual exploitation (UNODC, 2016).

It is worth mentioning that in Brazil, since the creation of the Maria da Penha Law (2006), the production of statistical data on the theme has become a legal recommendation, however, according to Mazotte (2016) there is still no “access to systemized and updated information to understand the context of aggressions against women across the country”. This author presents fundamental problems in the search for the reduction of gender violence in Brazil, as well as in the formulation of public policies to address this social necessity, some examples are: i) inconsistencies in the databases – with identical fields in different columns; ii) dubious classifications of the assistances; and, iii) incomplete state records.

It is also necessary to understand the main factors that directly impact the risk of violence against women. To this end, the Association of Women Against Violence - AMCV (2013) raised four risk factors based on recognized and scientifically validated international documents.

Isolation of the victim	“The victim/survivor is more vulnerable if she is isolated from family, friends and her social networks. Isolation is not just geographical, and it increases the likelihood of violence occurring”
Consumption of alcohol or illicit drugs	“The consumption of illicit drugs, alcohol or medications can affect individuals’ social consequences and increase the risk of violence in the family. This includes drugs that induce temporary psychosis”
Controlling behavior	“The abuser can completely control all the activities of the victim/survivor... men who believe that they should be in charge are more likely to use various types of violence against their partners”
Unemployment	“Unemployment is associated with an increased risk of lethal aggression. The sudden change in professional level, the termination of employment or demotion may increase the risk” (free translation)

Risk factors for violence, 2013.

These risk factors tend to converge with the increase in violence during the COVID-19 pandemic. Cultural factors are directly related to this scenario. According to research by Vieira *et al* (2008) risk factors for violence against women in the domestic context present important specificities to be raised: i) women know some risk factors for violence, but do not know how to

act in order to avoid them; ii) unfavorable housing conditions and family surroundings are perceived as a risk; iii) violence is perceived, mainly by women, as “something common” in the couple’s daily life; and, iv) alcohol, use of illicit drugs, unemployment and low education also aggravate the occurrence of violence among the families who participated in the research.

In addition, social isolation, despite being a safe, necessary, and effective measure to minimize the direct effects of COVID-19, imposes a series of consequences on the lives of thousands of women living in situations of domestic violence. Without a safe place, they are obligated to stay longer in their own homes with their aggressors, often in a condition of total vulnerability, with children and watching their family income decrease.

In this report, the data analysis begins in the second half of March, a period that includes the application of the social isolation measure in Brazil. To this end, data from this same period in previous years, will be evaluated and related to those obtained so far.

In the second survey applied by the Public Security Forum (2020) ¹, 12 of the 27 Brazilian states were analyzed (São Paulo, Rio de Janeiro, Minas Gerais, Espírito Santo, Acre, Amapá, Pará, Ceará, Rio Grande do Norte, Maranhão, Rio Grande do Sul e Mato Grosso). The data collection was carried out during the month of May and the data requested were from March and April 2019 and 2020. The study indicated that in the states surveyed there was a reduction of 25.5% in the records of domestic violence in the period mentioned, however, there was an increase of 22.2% in femicide cases and 63.3% in homicide of female victims.

An interesting fact is that although the study identified a reduction in domestic violence records (bodily injury), with the national average of 25.5%, there is a variation of 11.7% to 97.3% among the studied states. In the state of Maranhão, which had the largest reduction rate (97.3%), in the accumulated records of March and April, 331 cases were registered in 2019 and 9 in 2020. In the cases of femicides, however, the state jumped from 6 to 16 and there is no data on female homicide victims.

Femicide cases were analyzed from the same perspective. The national average was 22.2%, however in Acre there was an increase of 300% while the state of Rio Grande do Norte showed no variation. In Acre there was an increase of 57.1% in homicides against female victims and a reduction of 28.6% in the records of domestic violence.

Regarding the variation in homicides of female victims, it is pointed out that several of the studied states did not present data on these crimes. Among the states that presented the national average of 63.3%, there was Mato Grosso with the highest increase (83.3%) and Ceará with the lowest (6.6%). In the state of Mato Grosso, the increase in feminicides was of 150% and the reduction in the record of domestic violence was of 16.7%.

In terms of sexual violence, there was a 25.5% national reduction in the number of rapes and statutory rapes. The report registered that “the reduction in the rape and statutory rape records in police stations in the last two months is very worrying, as it cannot indicate a reduction in these violations, but, on the contrary, that the victims are not able to reach the police to report the crimes”. Nevertheless, in the state of Rio Grande do Norte there was an increase of 118% and in Maranhão, a reduction of 88.9%.

Furthermore, in the state of São Paulo there is also data from a Technical Note written by the Public Ministry of the State (2020) entitled “X-RAY of domestic violence during isolation: a portrait of São Paulo”. This document stated that “the home is the most dangerous place for a woman”. The Ministry emphasized that 66% of achieved or attempted feminicides were carried out at the victim’s home. The criteria adopted by the São Paulo Public Ministry for this document were: i) female victim; ii) flagrant arrests and protective measures, since they are processed regularly during the pandemic period; iii) reference to crimes of simple or aggravated murder - feminicide, threat, illegal constraint, false imprisonment, injury, rape and statutory rape, crimes against honor, disobedience to protective measures; iv) time periods: 1 year before the pandemic and 1 month after the beginning of the pandemic, to compare the evolution of the indexes before and after COVID-19; v) verification of the number of arrests for non-compliance with protective measures, with the same temporal criteria.

It is important to point out that this Technical Note was developed in two moments: initially, a first survey that collected data regarding the protective measures and flagrant arrest warrants between February 2019 and February 2020, when there was still no pandemic situation. The objective was to verify the variation of urgent procedures in situations of normality in the country. Then, a survey was applied between February and March 2020 to verify the possible increase due to the pandemic.

The research also attested that in large part the violence suffered was inflicted by someone known (76.4%). Black and brown women accounted for the highest number of occurrences when compared to white women; and, young women reported a higher number than older women.

2. ARE HELPLINES RUN BY GOVERNMENT AND/OR CIVIL SOCIETY AVAILABLE? HAS THERE BEEN AN INCREASE IN THE NUMBER OF CALLS IN THE CONTEXT OF THE COVID-19 PANDEMIC?

In Brazil, the *Ligue 180* (Call 180) – Service Center for Women in Situations of Violence is a hotline created by the federal government that receives reports of violence against women in addition to offering information about their rights and available support networks. This channel is available and remained in operation during the pandemic period.

The study carried out by the Public Security Forum (2020) indicated that between the months of March and April, comparing the data from 2019 and 2020, there was a 34.1% increase of reports through the channel, 22.7% in March and 47.8% in April. It is worth noting that the measures of social distancing and isolation began to be implemented in Brazil on the second half of March.

Another support hotline is the 190, telephone number of the Military Police, a service that is available 24 hours a day throughout the national territory. Comparatively, this number corresponds to the services provided by 911 in the United States and aids in distress calls or whenever a crime is reported. One of the most common calls is for domestic conflicts. Many of these calls are classified by the police as “unintelligence”, a name given to events that are not seen as police problems, but that they end up having to intervene. In addition to domestic fights,

disturbance of peace is also included in this category. Therefore, there is no substantial data on calls related to violence against women, given the absence of a correct classification for these services.

Additionally, the Public Security Forum in its first survey found that there was an increase of 431% on mentions on social networks (TWITTER) concerning reports of couple fights between February and March 2020. The universe studied was 52 thousand mentions between the months of February and April of this year. It is known that 67% of the reports were written by women in the early hours of the morning and mostly on Fridays.

The Ministry of Women, Family and Human Rights announced the release of the Human Rights BR application (*Direitos Humanos BR*), which is a service channel for handling reports of domestic violence, as well as other human rights violations.

According to data from the Brazilian National Ombudsman for Human Rights (2020), during the period of the COVID-19 pandemic violence against women grew approximately 28% in the country, comparing April 2019 and 2020. It was also found that there was an increase of 2.1% in the number of calls to hotlines, which jumped from 470 to 480, comparing the same period.

Following the recommendations of UN Women and WHO, the Brazilian government keeps its main channels of support for victims of gender violence open. The Ministry of Women, Family and Human Rights reported that the quarantine generated an increase of almost 9% in the number of calls to the 180 hotline, which receives reports of violence against women: between March 1 and 16, there were 3,045 calls and 829 incidents reported; between March 17 and 25, these numbers jumped to 3,303 and 978, respectively.

3. CAN WOMEN VICTIMS OF DOMESTIC VIOLENCE BE EXEMPTED FROM RESTRICTIVE MEASURES TO STAY AT HOME IN ISOLATION IF THEY FACE DOMESTIC VIOLENCE?

Since domestic violence is a crime within the jurisdiction of the States' Justice, it would be up to the Legislative and/or the Executive Powers of each state to decide on the possibility of

exempting women from complying with the isolation measures if they become victims of domestic violence. However, in the state decrees currently in force, which aim to regulate these measures, there is no specific mention of the issue of women who come to suffer violence.

The state decrees, however, kept in operation (with face-to-face service) the activities considered to be essential, such as those directly related to public security, including police stations and shelters (which, as seen, exist in small numbers in the country). In this way, a woman who is a victim of violence (as well as any other individual who may be a victim of a crime or criminal offense) can go to the nearest police station or make a call to their state's military police number, in order to report and register the crime.

Women that are in danger or who have already suffered violence are also allowed to move to friends and relatives' homes. Unlike some countries, Brazilian states did not request the presentation of justification by people who needed to go out to the streets.

4. ARE SHELTERS OPEN AND AVAILABLE? ARE THERE ANY ALTERNATIVES TO SHELTERS AVAILABLE IF THEY ARE CLOSED OR WITHOUT SUFFICIENT CAPACITY?

A study from the Brazilian Institute of Geography and Statistics (IBGE) carried out in 2018 shows that only 2.4% of Brazilian municipalities had municipally managed shelters. Of the 3,808 municipalities with up to 20 thousand inhabitants, which are almost 70% of the total municipalities in Brazil, only nine had shelters. The country that occupies fifth place in the ranking of the highest rate of femicide in the world has only 43 shelters (IBGE, 2018)

Decree nº 10,282, of March 20, 2020, stipulated in its article 3, that social assistance and assistance to the population in a state of vulnerability are essential services and their exercise must be protected.

However, research shows a decrease in the demand for women shelters. In the city of São Paulo, City Hall reported that there was a 60% reduction in the search for municipal shelters by victims

of domestic violence² during social isolation. Such data lead to some reflections: i) the reduction (in some states) of office hours of women's police stations, from a 24-hour to a 8-hour regime, imposed a smaller window of interaction with the victims; ii) even though the victims were attended to at the police station and the cases were referred to the court, the restricted services of the courts due to the on-duty regime, prevented many cases from being analyzed and deliberated in time; iii) social isolation measures in cities, with a significant reduction in the population's transport capacity, imposed limitations on access to services, already precarious due to other operating restrictions; among others.

Bills that seek to ensure greater protection for victims of domestic violence are being analyzed by the legislature. Bill 2029/2020 (PL 2029/2020) determines that the federal government, states, and municipalities must offer temporary homes to families that are victims of domestic violence during the state of public calamity caused by COVID-19. To this end, the government may rent or renovate its own properties or those of third parties to transform them into shelters³.

On the other hand, Bill 1552/2020 (PL 1552/20) institutes actions to shelter women in situations of domestic violence while social isolation measures last to avoid contamination by the new coronavirus⁴.

There is also Bill 1444/20, which determines that during the public health emergency resulting from the coronavirus pandemic, the federal government, the Federal District, the states and municipalities must ensure extraordinary emergency resources to guarantee the operation of the shelters and the Integral and Multidisciplinary Care Centers for Women⁵ (Centros de Atendimento Integral e Multidisciplinares para Mulheres).

Thus, to prevent that women's isolation in shelters be prolonged, some judges decree the offender's immediate arrest. It is known that time in shelters are an extreme measure, due to the

2 <https://www.uol.com.br/universa/noticias/redacao/2020/04/24/casa-de-r-2-mi-para-vitimas-de-violencia-domestica.htm?cmpid=copiaecola>

3 <https://www12.senado.leg.br/radio/1/noticia/vitimas-de-violencia-domestica-poderao-receber-lar-temporario-durante-pandemia>

4 Agência Câmara de Notícias

5 Agência Câmara de Notícias

forced isolation that is required. However, there is no doubt of how fundamental it is to safeguard the integrity of women and families in danger.

Finally, for the protection of women in situations of violence in general and in cases that the Maria da Penha Law does not apply, there is another institutional shelter service, the *Casa da Mulher Brasileira* (House of the Brazilian Woman). It includes services from agencies like the Women's Police Station with actions to prevent, protect and investigate crimes of domestic violence; the Public Ministry (Public Prosecutor's Office), acting in the criminal action of crimes of violence; and the Public Defender's Office, informing women of their rights and providing legal assistance.

The *Casa da Mulher Brasileira* also has on site accommodations for cases of imminent death. According to the National Secretariat of Policies for Women (2020) to date the units in operation are in the following cities: Campo Grande (MS), São Luís (MA), Boa Vista (RR), Fortaleza (CE), Curitiba (PR), São Paulo SP, Manaus / AM, Belo Horizonte / MG, Aracaju / SE, Cuiabá / MT, Macapá / AP, Brasília / DF, Vila Velha / ES, Cariacica / ES, Tefé / AM, Volta Redonda / RJ, Cruzeiro do Sul / AC and Uberlândia / MG.

5. ARE PROTECTION ORDERS AVAILABLE AND ACCESSIBLE IN THE CONTEXT OF THE COVID-19 PANDEMIC?

The protective orders provided by the Brazilian law remain in force during the pandemic. However, considering the isolation measures, it has become more difficult for women to get to state agencies to request or renew legal orders that lost their validity during the pandemic. Another difficulty is the fact that many of the women victims of violence live with their aggressors.

In order for a woman to have access to protective measures during quarantine, she needs to call at least one of the following public agencies: the police, the Public Defender Office, the Court of Justice and/or the Public Ministry (Public Prosecutor's Office). These agencies have the prerogative to issue protective measures or are articulated with the agencies that may issue these

measures. Considering this, a research was carried out in the 26 Brazilian states and the Federal District on the availability of remote access (via internet or telephone) to the agencies listed above.

In terms of access to the police authorities, at least one third of the Brazilian states (9 states) do not offer the possibility of filing physical or sexual incidents online. All states provide services through the telephone.

As for access to the Public Defender's Office, only 16 states allow some contact via internet to request protective measures. All states provide contact through the telephone.

Regarding access to the Courts of Justice, at least 6 states have no specific information for women in situations of violence, only providing general forms of contact. All Courts allow for some type of telephone contact.

Finally, concerning the reports to the Public Ministry (Public Prosecutor's Office), only 12 states provide some kind of online contact and all of them provide contacts via telephone (the website of the Public Ministry of Rio Grande do Norte was down when this response was being prepared).

Therefore, it is verified that, despite continuing to be provided by law, isolation has become an additional complicating factor for women's access to protective orders.

The difficulties of the states and regional inequalities, which can influence on how the maintenance of these services occur during isolation, must be considered. For example, states in the north region, such as Acre, have a poor broadband internet coverage.

According to information from the Brazilian Public Security Forum⁶, the number of protective measures requested and granted by the courts decreased in April of 2020, compared to last year. Figures from four states were considered: São Paulo (18.1% drop in requests and 3.7% in

⁶ Information taken from: <https://forumseguranca.org.br/wp-content/uploads/2020/06/violencia-domestica-covid-19-ed02-v5.pdf>

concessions); Rio de Janeiro (28.7% drop in concessions), Pará (27.8% drop in requests and 8.2% in concessions); Acre (23.9% drop in requests and 31.2% in concessions).

However, the number of incidents reported by telephone to the Call Center for Women in Situations of Violence (180 hotline) increased 27%, comparing the numbers from March and April 2020 and 2019. There was also a 44% growth in the number of incidents reported to the Military Police general hotline (190) in the same period.

In April 2020, the Public Ministry of the State of São Paulo issued a Technical Note on domestic violence during the state's pandemic. The data showed a 51.4% increase of arrests in flagrante delicto in March/2020 compared to the same period in 2019. The data also showed that in March/2020 there was a 29.6 % increase in the number of protective measures granted, which seems to conflict with the numbers presented by the Brazilian Public Security Forum⁷.

Therefore, it is possible to conclude that isolation has made registering incidents in police stations difficult and, consequently, impacted the number of incidents filed and protective measures granted by the states.

6. WHAT ARE THE IMPACTS ON WOMEN'S ACCESS TO JUSTICE? ARE COURTS OPEN AND PROVIDING PROTECTION AND DECISIONS IN CASES OF DOMESTIC VIOLENCE?

There is an institution in Brazil called the National Council of Justice (CNJ – *Conselho Nacional de Justiça*), which centralizes the administrative supervision of the courts. There are more than ninety courts in Brazil that operate at the state and federal levels and on specific topics. The National Council of Justice created a group to address issues related to the pandemic. The CNJ established that the courts and notaries continue operating online and monitoring the judicial decisions involving coronavirus. Concerning lawyers, female lawyers suffer worse consequences than their male counterparts, as they work more on family law issues, a branch more dependent

⁷ Information taken from: <https://www.conjur.com.br/dl/violencia-domestica-mp-sp.pdf>

on face-to-face meetings between clients and lawyers. In addition, there is the issue of domestic work.

Regarding the prison system, Brazil has alarming rates of contamination by the coronavirus in prison population. The country has the third largest prison population in the world, which live in unhealthy and overcrowded spaces. The judicial power has failed to take the necessary measures to protect this group and, consequently, the contamination and death rates are extremely high. This affects men, women, young people, and the psychiatric population.

On the access to justice for women in matters of domestic violence, see the answers above.

7. WHAT ARE THE IMPACTS OF THE CURRENT RESTRICTIVE MEASURES AND LOCKDOWNS ON WOMEN'S ACCESS TO HEALTH SERVICES? PLEASE SPECIFY WHETHER SERVICES ARE CLOSED OR SUSPENDED, PARTICULARLY THOSE FOCUSING ON REPRODUCTIVE HEALTH.

There is no Brazilian official data available about the impact of COVID-19 on women's reproductive health and the accessibility changes on health care since the beginning of the pandemic. Nevertheless, it is evident that the COVID-19 added more challenges to a health care system that was struggling before.

In the latest epidemiological bulletin published by the Ministry of Health, 54,822 cases of women with severe acute respiratory syndrome (SARS) were reportedly caused by COVID-19. Added to those they are 46,522 cases without a proven cause and 31,187 cases under investigation. (1)

A survey promoted and released by the Brazilian Society of Mastology appointed to a 75% reduction on the public health consultation for prevention and treatment of breast cancer on March and April of 2020 in comparison to last year. On the 11 main treatment centers for breast diseases in the public health system of Rio de Janeiro, there was a reduction or suspension of 20% in oncology surgeries and suspension of breast reconstructions in six units. Radiotherapy sessions are not being carried out in eight centers and one unit has suspended outpatient mastology care.

When it comes to reproductive health achieving official and reliable data is even more challenging. There are still no Brazilian studies on severe maternal morbidity and maternal mortality associated with COVID-19, however, it is necessary to draw attention to a very important aspect of the pandemic in Brazil: maternal mortality associated with the disease caused directly by the coronavirus or by reduced access to services health for women during the pandemic.

Data presented on a Ministry of Health official online panel on May 22nd reported that 15,2% of hospitalized SARS cases were in women of reproductive age (10 to 49 years of age), of those 7,3% evolved to death and 8% of the cases of SARS hospitalized in women of reproductive age were pregnant women.(2)

The Ministry of Health declared in an official note the maintenance of services in reproductive health care, but information about different regions of the country published in the Brazilian media points to a different scenario.

Although avoiding a pregnancy has become a way to protect women's health during the pandemic, they are facing the difficulty of accessing contraceptive methods and procedures during the crisis. In São Paulo, the city with the most infected and killed by coronavirus, the Municipal Health Secretariat reported that "since last March 23, procedures considered non-urgent have been temporarily suspended." Contraceptive services entered this wave with the suspension the insertion of IUDs - contrary to the World Health Organization (WHO), which recommends that the right to contraception should be respected "regardless of the epidemic of covid-19".

In Brazil, abortion is only legal in cases of pregnancy as a result of sexual violence, fetal abnormalities that are incompatible with life or when the pregnancy results in risk of death for the mother. Despite legal restrictions, 500,000 unsafe abortions occur annually, and 250,000 women are hospitalized for post-abortion complications.

During the COVID-19 pandemic the situation has aggravated. Pérola Byington Hospital is a reference in legal abortion services in the country. On March, the hospital interrupts these

services because of the pandemic. The structure hitherto used for this service was designed to set up a screening service for COVID-19. (3) Civil society organizations pressure the government and after a while the hospital return to open. A recent survey conducted by two Brazilian media journals demonstrated that just 55% of the hospitals that offer legal abortion services are open during the covid-19 pandemic besides these hospitals are concentrated in fewer regions. Fourteen federal states don't have any abortion services working during the pandemic. (4)

8. PLEASE PROVIDE EXAMPLES OF OBSTACLES ENCOUNTERED TO PREVENT AND COMBAT DOMESTIC VIOLENCE DURING THE COVID-19 LOCKDOWNS.

After more than a decade of the creation of the Maria da Penha Law, a law known worldwide for its vast protection for women, the lack of public structure to provide assistance to women, the fear of reporting, the lack of training for public agents regarding issues of gender are major obstacles to the implementation of this Law in the country. Preventing and combating violence, even before the pandemic, already carried numerous challenges, but the most noticeable ones will be highlighted below.

i) Women's Police Stations (DDMs) are not always open 24 hours or on weekends. Although DDMs are of fundamental importance for welcoming, taking-in and providing orientation and measures in defense of women, only 21 stations throughout Brazil operate uninterruptedly. These stations are concentrated in the capitals and only in Rio de Janeiro and São Paulo 24-hour service stations were found in the interior, such as the one in Sorocaba (SP).

There are 368 Women's Police Station for 5.5 thousand municipalities in Brazil. In most Brazilian cities, there are no police stations specialized in assisting women (*DEAM -Delegacia Especializada no Atendimento à Mulher*). This is the reality of 91.7% of the municipalities according to the Brazilian Institute of Geography and Statistics (IBGE). In addition, in 90.3% of the cities there is no specialized service to assist victims of sexual violence. Such data was collected by the Survey of Basic Information of States and Municipalities (Munic, 2018).

- ii) The number of municipalities that have shelters for women in situations of violence is small in view of the country's need. The number varied from 2.5% in 2013 to 2.4% in 2018 (latest data collected). Among the 3.8 thousand cities that have up to 20 thousand inhabitants, only 9 have this type of structure. On the other hand, they exist in 58.7% of municipalities with over 500 thousand inhabitants. According to IBGE, shelters provided assistance to 1,221 women and 1,103 children in 2018. A second problem with this system is that, in general, shelters can only take in victims for 90 to 120 days (municipal law). It is also worth mentioning that another obstacle is that the appointment of women at risk of death to shelters is done by the network of agencies responsible for women care (for example, a police station or a hospital), raising the problem of the training efficiency and preparation of public agents.
- iii) Having to prove the violence occurred. It is known that the burden of proof is on the person who alleges the crime; therefore, the victim must prove that she was raped, assaulted, or suffered a violence.
- iv) The aggressor is not always punished. A partial survey of the effectiveness of the Maria da Penha Law, sanctioned in August 2006 to punish domestic violence against women, reveals that only 2% of the finalized cases resulted in the conviction of the aggressor.
- v) In addition, there is the matter of the Brazilian federative pact, which divides the competences concerning the implementation of protective measures for women in situations of domestic violence throughout the three levels of the Brazilian Federation (federal, state and municipal powers). Therefore, for the Law to work, women depend on different actions from the City Hall, the state, the federal government, the Executive and Judiciary Powers and others. Making this network of assistance work and reach beyond the capitals is a major challenge in a country of continental dimensions
- vi) Another major obstacle raised by DataSenado (2017) is that more than 20% of women victims of violence do not register complaints because they feel ashamed and 30% because they do not believe that the aggressor will be punished.

vii) Finally, it is necessary to discuss articulated actions for the reintegration of these women into society. As previously mentioned, developing programs for employment, income and housing for women in conditions of extreme violence is a model that will allow conditions of vulnerability to be mitigated and, thus, providing true freedom for women who find themselves trapped by their aggressors .

It is important to emphasize that in times of restrictive measures and isolation due to the pandemic, the problems mentioned above are highlighted and strengthened due to the fact that the victims are away from their social cycles and often in the constant presence of their aggressors. Women who are at home, enduring relationships that were already violent and facing even more difficulties because of the isolation measures, reflect the current reality of Brazil.

9. PLEASE PROVIDE EXAMPLES OF GOOD PRACTICES TO PREVENT AND COMBAT VIOLENCE AGAINST WOMEN AND DOMESTIC VIOLENCE AND TO COMBAT OTHER GENDERED IMPACTS OF THE COVID-19 PANDEMIC BY GOVERNMENTS.

Technical Note n. 78 (Public Policies and Violence based on gender during the COVID-19 pandemic: present, absent, and recommended actions) presented the following actions by the National Secretariat of Policies for Women: (i) strengthening the technology network; (ii) sending security items to the *Casa da Mulher Brasileira* (House of the Brazilian Woman) and other shelters; (iii) creation of a working group with magistrates, prosecutors and representatives of the Ministry of Justice and of the National Council of Chiefs of Police, to guarantee the possibility of electronic registration of police reports of violence against women and the concessions of protective measures by electronic means; (iv) sharing protective measures with plaintiffs via WhatsApp; (v) postponement of existing measures until the end of the pandemic or for a longer period; (vi) dissemination of the 190 hotline and all other applications used by the military police; (vii) articulation with the Ministry of Economy and the Ministry of Culture to solve problems regarding the concession of the emergency financial aid to women that are heads of families; (viii) dissemination of recommendations to policy formulation entities for women about service provisions in times of COVID-19; (ix) articulation with the National Secretariat of Racial Equality to send food baskets to traditional and indigenous communities with focus on the

female gender; (x) articulation with the agencies that compose the women's support network to expand online services for women in situations of violence; (xi) dissemination of recommendations and technical notes about the operation of women's health services in order to guarantee the physical, emotional and health security of women and their children (xii) articulation with *Ligue 180* hotline to make local statistical data available to policy formulation agencies for women; (xiii) dissemination of information through the network for women; (xiv) release of a booklet on the different types of domestic violence against women and services to combat violence; (xv) communication initiatives on the internet about violence, focused on young women and girls; (xvi) internet campaigns; (xvii) awareness actions for men in order to sensitize them to share responsibility for domestic work and child care; (xviii) communication actions focused on a solidary surveillance campaign entitled *Alô, Vizinho* (Hello, Neighbor) to encourage neighbors, family members and society in general to report cases of domestic violence; (xix) online courses on self-care and self-preservation in partnership with the Federal District and Territories Court of Justice; (xx) advertising campaign to prevent and combat violence against vulnerable groups; (xxi) dissemination of the *Ligue 180* hotline and the public ministries' and public defenders' virtual assistance services; (xxii) promotion of a campaign to donate food, supplies and personal protective equipment (PPE) to women in situations of violence and vulnerability; (xxiii) provision of online educational material about assistance to women in situations of domestic violence for professionals that compose this support network; (xxiv) organization of a webinar in partnership with the World Bank in May focused on professionals that compose the support network for women; (xxv) communication initiative on social networks about specific care for pregnant women and nursing mothers regarding physical and mental health, as well as their rights; (xxvi) dissemination of guidelines about prevention and treatment of pregnant women, mothers and babies; (xxvii) promotion of a booklet with recommendations for prevention and first aid for domestic accidents; (xxviii) cooperation with *Caixa Econômica Federal* (Brazilian public bank) to promote workshops on financial education and entrepreneurship; (xxix) promotion of a booklet with guidelines for micro and small companies.

10. PLEASE PROVIDE EXAMPLES OF GOOD PRACTICES TO PREVENT AND COMBAT VIOLENCE AGAINST WOMEN AND DOMESTIC VIOLENCE AND TO COMBAT OTHER GENDERED IMPACTS OF THE COVID-19 PANDEMIC BY NGOS AND NHRIS OR EQUALITY BODIES.

(i) *Instituto Glória* (The Gloria Institute) aims to combat violence against women and girls through a social transformation platform. Founded in 2019, its first challenge was to create an effective and reliable digital communication channel for the collection of data on violence against women and girls in Brazil and, with a well-founded database, assist in the planning of public policies with greater assertiveness. Therefore, Gloria is a robot based on artificial intelligence, data analytics and blockchain, projected to collect, analyze, and make available data related to the problem. The project is under development and aims to impact more than 20 million people in Brazil, in addition to generating data to assist the public in the formulation of public policies, projects and actions to combat violence. The Institute, which is a non-profit, has large global partners such as: IBM, Brasscom, Microsoft, Damarest, in addition to renowned Brazilian companies in the technology sector and technology specialists, such as Blockforce and Qubo technology. Its creator - Cristina Castro, is an activist and a reference in the market. She is also an Ambassador in Brazil of the WEAmericas Program (Women's Entrepreneurship in the Americas) and of WEDO Brazil (Women Entrepreneurship Day Organization), a professor at the University of Brasília and curator of the Journal MIT Brasil.

(ii) *Instituto Maria da Penha - Central de Atendimento à Mulher* (Maria da Penha Institute - Women's Service Center) is a service created to combat violence against women and it offers three types of assistance: filing of complaints, orientation for victims of violence and information on laws and campaigns.

(iii) *Mete a Colher* ("Stick the Spoon"), is a collaborative network, created by female entrepreneurs from Recife/PE, that seeks to help women out of abusive relationships and to create together an increasingly secure and egalitarian reality. Created in 2016, this startup uses technology as an ally in combating violence against women and has the mission of demystifying the Brazilian popular saying "in a fight between husband and wife, no one should stick their spoon" (people shouldn't interfere in fights between couples).

(iv) Think Eva and Think Olga are two sister organizations that share the same mission: to sensitize society to issues of gender and intersections, in addition to educating and equipping people who identify themselves as agents of change in women's lives. Both social innovation organizations use communication as the main tool, combined with technology and education strategies to create a positive impact on the lives of women in Brazil and the world. Think Olga is an NGO that works with civil society while Think Eva is a social innovation consultancy that works with the private sector. The result of this work brings creative solutions to old and new problems and collaborates in the construction of a more equal and just world.

(v) *AzMina* is a non-profit institute that combats the different types of violence that affect Brazilian women. They created a digital magazine, an app to tackle domestic violence, and they promote campaigns, lectures, events, and consultancies.

(vi) *Mapa do Acolhimento*: platform that connects women who suffer or have suffered gender violence to a network of therapists and lawyers willing to help voluntarily.

(vii) The *Instituto Patrícia Galvão* (Patricia Galvão Institute) is a feminist organization founded in 2001 that works in the fields of women's rights and communication. For the Institute, the media is a strategic space of social and political influence to qualify debates on public policies aimed at promoting gender equality and equity.

11. PLEASE SEND ANY ADDITIONAL INFORMATION ON THE IMPACTS OF THE COVID-19 CRISIS ON DOMESTIC VIOLENCE AGAINST WOMEN NOT COVERED BY THE QUESTIONS ABOVE.

Since the beginning of the pandemic, gender issues, in a transversal way, have been little used to direct social action. With the quarantine and the necessary measures of forced isolation to contain contamination and deaths due to COVID-19, there was an increase in the number of cases of domestic violence against women in the world. The social distancing and isolation measures also reinforced the risk situation of children and adolescents, victims of abuse and rape by family members or people with whom they have an affective bond.

According to several researches, in general, cases of domestic violence grow in periods of prolonged stress and disturbance, such as financial crises and unemployment – all increased indexes during the COVID-19 pandemic – further strengthened by excessive alcohol consumption, worsening the severity and frequency of domestic violence.

As a form of support, the Brazilian government started an emergency financial aid program during the pandemic for families in need. The requirements for receiving this financial aid is to belong to a family whose monthly income per person does not exceed half a minimum wage (R\$ 522.50), or whose total family income is up to three minimum wages (R\$ 3135.00). In case the woman is a single mother, the R\$ 600.00 assistance increases to R\$ 1200.00 per month.

In this emergency scenario, due to the increased risk of violence against women and girls – especially domestic violence – intensified exposure and contact with abusers, this government program understands the condition of greater vulnerability of women and the need to minimally maintain the support for children and adolescents in these families.

It should be noted that, very soon, it will be extremely important to implement a direct emergency assistance to women who suffer violence. Because, as presented above, the most common obstacles experienced by these women are: i) leaving their homes after violence; ii) finding shelters that are public and qualified; iii) seeking residence in the homes of neighbors, friends and family; iv) accessing protective orders that save and/or essential services, due to factors such as restrictions of movement in quarantine; and, v) the reduction of services provided by the support network (police stations, hospitals, prosecutors, CRAS/CREAS), among others.

REFERENCES

- ¹AMCV – Associação de Mulheres contra a Violência. Manual para Profissionais: avaliação e gestão de risco em rede. Lisboa: 2013, p. 154 a 158.
- ²O quadro menciona, no total, 5 fatores de risco relacionados às vítimas (gravidez, depressão/saúde mental, consumo de álcool, ideação suicida, isolamento) e 17 para o autor (uso de armas, acesso a armas, uso de violência psicológica e emocional, tentativa de estrangulamento, ameaça, agressão/ameaça a crianças; agressão ou ameaça a outros familiares, agressão a animais, ideação suicida, stalking, violência sexual, descumprimento de medida de proteção, consumo de álcool, comportamento de controle, desemprego, depressão/doença mental, história anterior de violência), op cit, p. 161/162.

- ³ <https://agenciabrasil.ebc.com.br/direitos-humanos/noticia/2020-04/sp-violencia-contramulher-aumenta-449-durante-pandemia> (Letycia Bond, 20/04/2020)
- ⁴ http://www.mpsp.mp.br/portal/pls/portal/!PORTAL.wwpob_page.show?docname=2659985.PDF
- <https://forumseguranca.org.br/wp-content/uploads/2020/06/violencia-domestica-covid-19-ed02-v5.pdf>
- <http://www.generonumero.media/so-55-dos-hospitais-que-ofereciam-servico-de-aborto-legal-no-brasil-seguem-atendendo-na-pandemia/>
- <https://www.brasildefato.com.br/2020/06/03/o-aborto-tambem-e-uma-emergencia-social-reivindicam-feministas-na-america-latina>
- https://www.scielo.br/scielo.php?script=sci_arttext&pid=S1413-81232009000800035
- https://www.scielo.br/scielo.php?pid=S1413-81232017000200653&script=sci_abstract&tlng=pt
- <http://www.cienciaesaudecoletiva.com.br/artigos/servicos-de-aborto-legal-no-brasil-um-estudo-nacional/15229?id=15229>
- VIEIRA, Luiza Jane Eyre de Souza et al. Fatores de risco para violência contra a mulher no contexto doméstico e coletivo. Saude soc. [online]. 2008, vol.17, n.3, pp.113-125. ISSN 1984-0470. <https://doi.org/10.1590/S0104-12902008000300012>.
- <http://www.generonumero.media/precariedade-dos-dados-desafio-para-enfrentar-violencia-domestica/>
- <https://www.uol.com.br/universa/noticias/redacao/2020/04/24/casa-de-r-2-mi-para-vitimas-de-violencia-domestica.htm?cmpid>