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**HelpAge International submission on COVID-19 and the increase of domestic violence against women**

**Domestic violence against older women**

**Introduction**

General population lockdown measures to contain the spread of the coronavirus have put women and girls at increased risk of domestic violence as families have been forced to spend more time together due to quarantine measures. In many places older women have been subjected to more severe or longer restrictions on their movement than women of younger ages. Discriminatory age-based measures restricting older people’s movement have been considered or implemented in over fifty countries around the world in both the early stages of lockdown and as countries ease out of it.[[1]](#footnote-1)

**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.**

Violence against older people has risen sharply since the beginning of the pandemic and the introduction of these lockdown measures.[[2]](#footnote-2) The pandemic has exposed and exacerbated ageism, a risk factor for violence against older people.[[3]](#footnote-3) Older women are at particular risk where ageism intersects with gender inequalities. Examples include hate speech, where the pandemic has been called an opportunity to remove[[4]](#footnote-4) or cull older people[[5]](#footnote-5). The rhetoric of influential decision-makers has been ageist[[6]](#footnote-6) and we have seen the pitting of one generation against another in claims that responses to the pandemic are harming the young in order to save the old and older people should be taxed to pay for sacrifices younger generations have made[[7]](#footnote-7). Elsewhere the lives and deaths of older people have not been afforded the same value as younger people[[8]](#footnote-8), and older people have been stigmatised and assaulted[[9]](#footnote-9).

Much of the violence against older women, though not all, has been committed by family members.

“During quarantine, my son and daughter-in-law began to neglect my needs. Previously, I did not notice their behaviour, but since all family members must stay home, I started feeling their bad attitude to me. They don’t give me food and medicine on time and even don’t talk to me. Sometimes my daughter-in-law yells at me. I feel like a burden to my family.”

Older woman, 62, Osh province, Kyrgyzstan[[10]](#footnote-10)

**Economic abuse**

Anecdotal evidence suggests that economic stresses caused by the COVID-19 crisis are increasing the incidence of economic abuse of older people. In Mauritius, for example, HelpAge network member Dis-Moi[[11]](#footnote-11) reported to us that two women aged 85 and 87 had been assaulted for their pensions. The 85-year-old was assaulted by three men and the 87-year-old by her own son.

**Violence, abuse and neglect in care homes**

Older women have also been subjected to abuse and neglect in care homes. Poor standards have been exposed[[12]](#footnote-12) and restrictive visitor policies have increased the isolation of residents, the majority of whom are older women[[13]](#footnote-13). Older residents have been neglected and in some cases abandoned and left to die.[[14]](#footnote-14) Care and support services have not been given sufficient PPE for use in in care homes in order to protect the lives of residents and staff.[[15]](#footnote-15) There has been a failure to prevent deaths in care homes[[16]](#footnote-16), and a failure to count the deaths in care homes[[17]](#footnote-17) or include them in official statistics. Elsewhere emergency measures have been introduced which reduce access to care and support services[[18]](#footnote-18) and social services are not getting funding[[19]](#footnote-19). In some jurisdictions, care homes are immune from liability.[[20]](#footnote-20)

**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?**

Violence helplines run by HelpAge staff or network members and partners in Kyrgyzstan, Jordan and the Democratic Republic of Congo reported an increase in the number of calls from older people, predominantly women.[[21]](#footnote-21)

HelpAge Kyrgyzstan reported that nine crisis centres received 29 calls on domestic violence from older people (27 women and 2 men) in just over one month, between 25 March and 30 April this year. Many of those who phoned in complained that their family members were taking their pensions, especially in those families where alcohol is consumed. In January and February, they received approximately 14 calls each month.

In Jordan, in the first two months of lockdown, HelpAge network member Solidarity is Global Institute (SIGI) received 812 requests for urgent help (20% of which were for domestic violence). This is more than they usually get for a whole year (about 650). Several of these requests came from older people but Asma Khader, CEO of SIGI said:

“The reported numbers of older people affected by abuse during the COVID-19 pandemic do not reflect the reality as many don’t know how to report incidents or even if they do, they may not have a telephone and they are scared. Often abuse is perpetrated by family members that they are dependent on; they have no means to support themselves and they fear they would be threatened or worse if they asked for help.”

In the Democratic Republic of Congo (DRC), HelpAge DRC has received 33 calls related to abuse of older people since the outbreak of COVID-19 (neglect 55%, physical 20% and financial 25%). This compares to 41 calls for the whole of 2019. The HelpAge DRC Country Representative expects this to increase to well over 100 cases by the end of the year.

“I have been married to my husband George (70) for 45 years. He is a businessman with a shop in Kinshasa. He normally spends most of his time at work but for the last month and a half, we have spent a lot of time together in the home. And I have seen a completely different side to him. I found out that he was having affairs with other women and we started to quarrel. And things got very heated. On 28 May 2020 he accused me of trying to poison him. He told the neighbours that I had killed a woman who died two weeks ago and that I was a witch doctor. The neighbours then started to throw stones at me.”

Mary, 65, the Democratic Republic of Congo

Media reports also cite an increase in calls about violence, abuse and neglect of older people to other civil society run helplines. Unfortunately, the data is often not disaggregated by sex. In Australia UnitingCare said calls to its elder abuse prevention unit helpline in Queensland had risen by 15 per cent between February and the end of March 2020[[22]](#footnote-22) and there have been reports of a tenfold increase of violence, abuse and neglect of older people in Canada[[23]](#footnote-23). A rise has also been reported by civil society run helplines in India[[24]](#footnote-24), the UK[[25]](#footnote-25) and Northern Ireland[[26]](#footnote-26).

In Brazil complaints to the National Secretary for the promotion and defense of older people’s rights rose from 3,000 in March, 8000 in April and just under 17,000 in May.[[27]](#footnote-27)

In Nepal, the police department received 18 calls in relation to the abuse of older people between December 2019 and February 2020. This increased to 52 between March and May 2020.[[28]](#footnote-28)

**4. Are shelters open and available? Are there any alternatives to shelters available if they are closed or without sufficient capacity?**

Responses from a survey conducted by HelpAge between the 27th April and the 6th May 2020 revealed that in the places where we work, shelters are generally offering reduced services or have stopped admitting people due to COVID-19 restrictions. They have all been closed in Somaliland. In Kyrgyzstan they only work online to provide psychological and legal support although NGOs, UN women, and the government are working to free up additional spaces for survivors, as they are in Lebanon where the easing of lock down measures are beginning to make access easier.

**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.**

Many older women have not been able to access the treatment they need for COVID-19.[[29]](#footnote-29) In some cases, older people presenting with COVID-19 like symptoms have been turned away from health centers without being treated.[[30]](#footnote-30) Older residents in care homes, the majority of whom are women, have not been admitted to hospital. Some have been denied their right to informed consent to their medical treatment with Do Not Resuscitate (DNR) orders being placed on the care plans of residents of care homes without their consent or with undue influence.[[31]](#footnote-31) Others have not had access to health or other information.[[32]](#footnote-32) Others have faced reduced access to health care for non-COVID-19 health needs.[[33]](#footnote-33)

“They [the government] provided us with relief goods twice, but it's still not enough. And it seems there will not be additional assistance. We really need medicines to treat our current health conditions, hygiene kits, and face masks but we can’t buy them. Aside from the restrictions due to the enhanced community quarantine, we also don’t have the money, especially now that our children can’t go to work.”

Lola (Grandma) Rosita, 76, Malabon City, The Philippines[[34]](#footnote-34)

Age has also been used to limit older women’s and men’s access to health care including through health insurance policies covering coronavirus which have limits of up to 60 or up to 65 years of age.[[35]](#footnote-35) Upper age limits have been used as criteria for participation in clinical trials.[[36]](#footnote-36) Upper age limits have also been included as a criteria for deciding who has access to scarce medical resources in COVID-19 triage protocols[[37]](#footnote-37). The use of chronological age as criteria is arbitrary. Although data confirm that older people have especially high mortality if they contract COVID-19, work has not been done to establish whether this is an effect of chronological age or due to a correlation between older age and co-morbidities.[[38]](#footnote-38)

“I recently had an open-heart surgery and I do have chronic diseases, so I am highly concerned about my health. What if I acquire the virus and there is no capacity to treat me at the hospital? What if I don't survive COVID-19? Adding to that, in high-income countries they are prioritising the hospitalisation of younger generations. What will happen here when the situation worsens? The state of uncertainty, the negative thoughts and facing an invisible enemy keeps me in a relatively unstable mindset.” Nidaa Barakat, 54, Lebanon[[39]](#footnote-39)

**8. Please provide examples of obstacles encountered to prevent and combat domestic violence during the COVID-19 lockdowns.**

**Lack of data**

The lack of data collected on violence against women over the age of 49 has long rendered violence against older women invisible. Cases of domestic violence are difficult to

document and most of the discussion of the impact of lockdown measures has been focused on younger age groups.[[40]](#footnote-40) Many National Statistics Offices (NSOs) have struggled to produce good quality age-disaggregated data on older women and men in development and humanitarian contexts[[41]](#footnote-41). The UN Secretary-General has now highlighted the paucity of good quality evidence on the spread and impact of COVID-19 on older individuals.[[42]](#footnote-42) COVID-19 has disrupted the scheduled production and release of policy-relevant data and evidence undertaken by NSOs and eighty percent of surveyed NSOs in LMICs are struggling to operate during the pandemic due to financial constraints.[[43]](#footnote-43)

**Lack of information**

Access to information about the virus and about where to access violence prevention and support services can be a major challenge for older women, particularly those who have low literacy rates, lack digital skills or access to digital or other communications technologies. In Rwanda, our network member NSINDAGIZA has reported that despite the Government’s interventions to support the most at-risk people, including older people, access to information on COVID-19 remains a challenge for older people, as some already live alone and depend on other people, who are currently confined. Most information is shared via social media, televisions, radios and magazines, to which older people don’t have access.[[44]](#footnote-44)

Since September 2019, Bangladesh has restricted access to telecommunications and the internet in the refugee camps in Cox’s Bazaar, which severely limits the Rohingya refugee population’s access to information about COVID-19. Older people can’t hear messages delivered on loudspeakers on tuk tuks.

“I don’t know anything about that virus, just people are saying something about a virus on the megaphone, but I don’t hear well, that’s why I don’t know anything… I’m always thinking, what are they saying on the microphone… No one told me to do anything, just my son told me to pray so I just pray always.”

Sayeda, a Rohingya woman in her 80s[[45]](#footnote-45)

Others are unsure of the legitimacy of the information they have access to:

“I am worried about the uncertainty: I want to understand how long it can last. Disturbing rumours, gossips, unverified information are being spread like a virus (including from my friends). The media speak of older people as a risk group. They try to warn, explain, scare us. But apparently younger people get sick too.”

Olga Amasova, Saint-Petersburg, Russia[[46]](#footnote-46)

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1. Based on media articles and other sources, though this is not expected to be a definitive list. [↑](#footnote-ref-1)
2. WHO, COVID-19 and violence against older people, 14 June 2020, <https://www.who.int/publications/m/item/covid-19-and-violence-against-older-people> [↑](#footnote-ref-2)
3. Ibid [↑](#footnote-ref-3)
4. <https://www.newsweek.com/boomer-remover-meme-trends-virus-coronavirus-social-media-covid-19-baby-boomers-1492190> [↑](#footnote-ref-4)
5. <https://twitter.com/greatermcr/status/1238501622919114753?s=20> [↑](#footnote-ref-5)
6. <https://www.hrw.org/news/2020/05/05/why-brazils-president-needs-change-his-tune-about-older-people> [↑](#footnote-ref-6)
7. <https://www.lesoir.be/300796/article/2020-05-14/un-economiste-belge-propose-une-taxe-corona-uniquement-pour-les-personnes-agees> [↑](#footnote-ref-7)
8. <https://m.tagesspiegel.de/politik/boris-palmer-provoziert-in-coronavirus-krise-wir-retten-moeglicherweise-menschen-die-in-einem-halben-jahr-sowieso-tot-waeren/25782926.html> [↑](#footnote-ref-8)
9. <https://www.theguardian.com/uk-news/2020/mar/23/three-teenagers-held-for-allegedly-coughing-at-elderly-couple-hertfordshire?CMP=share_btn_link> [↑](#footnote-ref-9)
10. HelpAge International, *Impact of COVID-19 on older people in Kyrgyzstan*, May 2020 [↑](#footnote-ref-10)
11. <https://dismoi.org/personnes_agees/> [↑](#footnote-ref-11)
12. [https://www.corona-older.com/post/letter-from-argentina-older-people-pensioners-and-care-homes-on-the-frontlines-against-covid-19](https://www.corona-older.com/post/letter-from-argentina-older-people-pensioners-and-care-homes-on-the-frontlines-against-covid-19%2015/4/20)  [↑](#footnote-ref-12)
13. <https://www.hrw.org/news/2020/03/20/us-nursing-home-visitor-ban-isolates-seniors> [↑](#footnote-ref-13)
14. <https://www.theglobeandmail.com/opinion/article-seniors-care-home-neglect-is-our-national-shame/> [↑](#footnote-ref-14)
15. <https://www.rcn.org.uk/news-and-events/news/uk-rcn-demands-personal-protective-equipment-ppe-community-nurses-covid-19-010420> [↑](#footnote-ref-15)
16. <https://news.sky.com/story/coronavirus-around-half-of-covid-19-deaths-are-in-care-homes-11972850> [↑](#footnote-ref-16)
17. <https://www.theguardian.com/world/2020/apr/09/covid-19-hundreds-of-uk-care-home-deaths-not-added-to-official-toll> [↑](#footnote-ref-17)
18. <https://www.theguardian.com/society/2020/mar/23/uks-emergency-coronavirus-bill-will-put-vulnerable-at-risk> [↑](#footnote-ref-18)
19. <https://www.euronews.com/2020/04/21/coronavirus-lockdown-in-moscow-elderly-struggling-to-cope-with-covid-19-restrictions> [↑](#footnote-ref-19)
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21. <https://www.helpage.org/newsroom/latest-news/neglect-and-abuse-of-older-people-around-the-world-intensified-by-covid19/> [↑](#footnote-ref-21)
22. <https://www.abc.net.au/news/2020-04-29/coronavirus-queensland-elder-abuse/12188668> [↑](#footnote-ref-22)
23. <https://bc.ctvnews.ca/tenfold-increase-in-elder-abuse-during-covid-19-pandemic-advocates-say-1.4896176> [↑](#footnote-ref-23)
24. <https://news.trust.org/item/20200511102348-9pf06> [↑](#footnote-ref-24)
25. <https://eachother.org.uk/how-do-we-tackle-elder-abuse-during-lockdown/> 21/5/20 [↑](#footnote-ref-25)
26. <https://www.belfasttelegraph.co.uk/news/health/coronavirus/charity-fears-rise-in-abuse-of-the-elderly-as-coronavirus-lockdown-continues-39134532.html> [↑](#footnote-ref-26)
27. <https://jornal.digital/2020/06/aumenta-numero-de-denuncias-de-violacao-aos-direitos-de-idosos-durante-pandemia/> [↑](#footnote-ref-27)
28. <https://www.helpage.org/newsroom/latest-news/neglect-and-abuse-of-older-people-around-the-world-intensified-by-covid19/> [↑](#footnote-ref-28)
29. [https://www](https://www.theguardian.com/global-development/2020/may/18/drc-has-seen-epidemics-before-but-covid-19s-toll-on-older-people-leaves-me-sleepless?CMP=share_btn_tw)

[.theguardian.com/global-development/2020/may/18/drc-has-seen-epidemics-before-but-covid-19s-toll-on-older-people-leaves-me-sleepless?CMP=share\_btn\_tw](https://www.theguardian.com/global-development/2020/may/18/drc-has-seen-epidemics-before-but-covid-19s-toll-on-older-people-leaves-me-sleepless?CMP=share_btn_tw) [↑](#footnote-ref-29)
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31. <https://www.bihr.org.uk/Blog/the-fight-against-covid-19-whose-life-counts>;

<https://www.theguardian.com/world/2020/apr/01/uk-healthcare-regulator-brands-resuscitation-strategy-unacceptable> [↑](#footnote-ref-31)
32. Amnesty International, *Humanitarian crises monitoring: The impact of coronavirus. Submission to the International Development Committee*, April 2020 [↑](#footnote-ref-32)
33. https://www.corona-older.com/post/letter-from-argentina-older-people-pensioners-and-care-homes-on-the-frontlines-against-covid-19 [↑](#footnote-ref-33)
34. https://www.helpage.org/newsroom/covid19-older-peoples-stories/lola-grandma-rosita-76-malabon-city-the-philippines/ [↑](#footnote-ref-34)
35. <https://newsmir.info/2053364> [↑](#footnote-ref-35)
36. Lithander et. al. ‘COVID-19 in older people: a rapid clinical review’, Age and Ageing 2020; 1–15, doi: 10.1093/ageing/afaa093, 16 April 2020 [↑](#footnote-ref-36)
37. See for example [Maryland](https://int.nyt.com/data/documenthelper/6848-maryland-triage-guidelines/02cb4c58460e57ea9f05/optimized/full.pdf#page=1) (USA), [NICE](https://www.nice.org.uk/guidance/ng159/resources/covid19-rapid-guideline-critical-care-in-adults-pdf-66141848681413) (UK), [SIAARTI (Italy)](http://www.siaarti.it/SiteAssets/News/COVID19%20-%20documenti%20SIAARTI/SIAARTI%20-%20Covid-19%20-%20Clinical%20Ethics%20Reccomendations.pdf) [↑](#footnote-ref-37)
38. British Medical Association, [COVID-19 – ethical issues. A guidance note](https://www.bma.org.uk/media/2360/bma-covid-19-ethics-guidance-april-2020.pdf), April 2020 [↑](#footnote-ref-38)
39. https://www.helpage.org/newsroom/covid19-older-peoples-stories/nidaa-barakat-54-lebanon/ [↑](#footnote-ref-39)
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