SUBMISSION ON COVID-19 AND THE INCREASE OF DOMESTIC VIOLENCE AGAINST WOMEN: PERSPECTIVE FROM ITALY

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# **Introduction**

1. Further to the call for submissions by the Special Rapporteur on violence against women, its causes and consequences,[[3]](#footnote-3) this report aims to provide a brief overview of the measures that have been put in place in Italy to address violence against girls and women during the lockdown related to the COVID-19 pandemic, as well as their impact on women’s and girls’ rights to access justice and healthcare. It seeks to provide information relevant to issues number 1 to 7 identified in the Special Rapporteur’s call.
2. The challenges of obtaining comprehensive data and statistics for each Italian region, against the background of COVID-19 related restrictions, must be acknowledged at the very outset. As such, this report is does not provide for an extensive analysis of the impact of COVID-19 pandemic lockdown in the whole Italian territory. This is due to the fact that each Italian region (intended as an administrative entity) has put in place (or not) additional measure to the ones ordered by the central Italian government.
3. The statistics contained herein that refer to the Italian territory as a whole have been collected by the National Institute of Statistics (“*Istituto Nazionale di Statistica*” - ISTAT), whereas the statistics concerning anti-violence centres have been provided to the authors of this report through responses to questionnaires by 10 anti-violence centres in Sicily only.[[4]](#footnote-4)
4. This report covers the period from 1 March 2020 to 16 April 2020, for the data collected by the National Institute of Statistics, and from 1 March 2020 to 27 May 2020 in relation to data received from anti-violence centres.

# **Pandemic lockdown and the increase of calls to helplines: some statistics.[[5]](#footnote-5)**

1. Between the 1 March 2020 and 16April 2020, the helpline run by the Italian Government (1522) received 5.031 telephone calls, 73% more than in the same period of 2019. A total 1.543 women called because they were in immediate need of help against an abuser or stalker, 28,3 % of women called to ask for more information about the helpline and the remaining 17,3% called to denounce other hardship situations that did not constitute violence against women. 45,3% of women that called the government-run helpline feared for their lives or their physical integrity. In 93,4% of cases they were victims of domestic violence and 64,1 % of women reported cases of domestic violence witnesses by their children. However, 72,8% of victims did not file an official complaint to any law enforcement agency.
2. Additional helplines, apps and platforms have also been promoted locally in each region by regional governments and civil society but statistics are presently unavailable.
3. From these statistics it is not possible to determine whether the increase of calls corresponds to an increase of cases of violence against women, or whether it results from sustained campaigns against violence against women that have had a positive impact in encouraging women to take steps against their abusers. It may be premature to conclude so at present and an analysis of the data over a longer period of time may give a clearer picture of the cause of the increase.
4. On the other hand, a decrease in complaints has been registered: complaints for ill –treatment or abuse have decreased by 43,6% and feminicides have decreased by 83,3%. The report of the Parliamentary Commission of Inquiry on femicide, dated 26 March 2020, identified the decrease in complaints for crimes of ill-treatment against family members and cohabitants as being emblematic of a situation in which women victims of violence are more exposed to the control of the abusive partner, who prevent them from escaping and denouncing the abuses. A decrease in complaints, in the authors’ view, could also signal a lack of trust by women and girls victims of violence of the system put in place by the Italian government to tackle gender based violence or fear of the consequences that such complaints may entail.

# **The emergency legislation**

1. The emergency legislation taken in consideration in this report comprises of: (i) Presidential Decree ( *Decreto del Presidente del Consiglio dei Ministri*) of 9 March 2020 which limited the freedom of movement of each person on the Italian territory to exceptional circumstances, namely: compelling working needs, necessity or urgent health reasons ( article 1(1)(a));[[6]](#footnote-6) Law Decree No.11 of 8 March 2020 (d.l. 8/2020) which aims at containing the effects of the COVID19 pandemic on regular judicial activities;[[7]](#footnote-7) and (iii) Law Decree No. 18 of 17 March 2020 (d.l. 18/2020) which contains provisions for the strengthening of the National Health Service and for the economic support of the activities connected to the COVID19 emergency.[[8]](#footnote-8) Law Decree No. 18 of 17 March 2020 provides for the requisitioning of hotels or other properties with similar characteristics of suitability to house people in need of shelter for health reasons (e.g. social confinement) or for reasons relating to the COVID19 emergency.[[9]](#footnote-9) As such, it has provided a legal foundation for the possibility to requisite such structures for the creation of additional accommodation for women victim of violence during the COVID19 emergency in need of a shelter.

# **The prohibition of movement and the necessity to seek help for women and girls victims of violence.**

1. The COVID-19 confinement measures contained in the emergency legislation mentioned above did not prevent women victims of violence to leave their homes in order to escape such violence. In fact, women that would have left their homes in search of help could not be found to have breached the prohibition to leave their homes as such movement would have constituted a “ necessary” movement within the meaning of the Presidential Decree of 9 March 2020. This was made clear during the campaigns against gender-based violence launched during the COVID19 emergency.[[10]](#footnote-10)
2. During the lockdown, the anti-violence centres and shelters continued to provide their services. In accordance with the provisions of Law Decree No.18/2020 and the Minister of the Interior's circular dated 21/03/2020[[11]](#footnote-11), each Italian region issued notices for the financing of urgent interventions to support the measures adopted by the shelters and anti-violence centres in relation to the health emergency from COVID- 19.
3. A statistical survey involving the anti-violence centers operating on Sicilian territory revealed a heterogeneous figure regarding an effective increase in access to these centres by women victims of domestic violence. In the provinces in which this occurred, the causes would be attributable not only to forced coexistence with the abuser, but also from the worsening of his personal problems, related to the loss of work or to the worsening of drug or alcohol addiction problems during the confinement.
4. It is necessary to account for provinces in which the number of cases in relation to the same period of the previous year, has decreased. This circumstance would mostly depend on the objective difficulty, for the woman subjected to violence, to contact an anti-violence centre due to the constant presence of her abuser as well as the fear, on her part, that he may retaliate against her were he to become aware of her request for help.
5. Women’s shelters remained operational during the COVID-19 emergency and, as already stated above, the emergency legislation provided for the creation of additional accommodation. In addition, a Circular of the Minister of the Interior was addressed to the President of each region and to the Prefects in order to entrust them with the responsibility of facilitating the creation of additional accommodation through requisitioning suitable structures.
6. Regarding Sicily, the anti-violence centres involved in the aforementioned statistical survey declared that they make use of the shelter houses present in the area even during the period of confinement. These structures are managed by private entities, such as associations and cooperatives. However, despite the measures adopted at a national level and implemented by the Region, no new reception facilities were created in this period, except in a few cases (in the province of Syracuse). On the other hand, additional beds were added in alternative structures.

# **Access to justice and protection orders at the time of COVID-19**

1. As previously mentioned, the Law Decree No.11/2020 aims at containing the effects of the COVID19 pandemic on regular judicial activities. It establishes that trials concerning protection orders and any other decision concerning cases of domestic violence, as well as trials which concern matters relating to women’s reproductive health and other family law matters like alimony, are not suspended. Trials that concern protection measures of fundamental rights and children’s rights are as well not suspended.[[12]](#footnote-12)
2. Among the instruments for addressing domestic violence within the Italian judicial system - in addition to other criminal law instruments - it is possible to apply for a protection order. Protections orders are issued by the civil law judge, *inaudita altera parte*, at the request of the victim if the conduct of the spouse or cohabiting partner cause physical or moral harm to or constrain the liberty of the other, by providing for their removal from the home and other measures, for example of an economic nature.[[13]](#footnote-13) These procedures were included in the emergency legislation,[[14]](#footnote-14) given the need to protect victims of domestic violence in the period of health emergency.[[15]](#footnote-15)
3. Additionally, women that were experiencing domestic violence during home confinement could contact the police through a phone application ( ‘app’) called “Youpol”, an application that was initially created to combat bullying and drug dealing, whose use was extended, as of 27 march 2020, to domestic violence. Through this app, it is possible to report, in real time, episodes of domestic violence. Geolocated photos and messages can be sent through the app directly to the police, even anonymously. If the user is registered with the app, it is possible to follow the action taken by the police and supplement and modify the information provided at any time. All the information is received by the police office that is competent per territory. The app can be downloaded for free.[[16]](#footnote-16) Italian police have reported that between the 27 March 2020 and 5 May 2020, 117 cases of domestic violence have been reported through the app.[[17]](#footnote-17)

# **Access to health and reproductive rights during the COVID-19 pandemic**

1. Essential health services continue to operate during the COVID-19 pandemic. Women that have suffered physical domestic violence can access public hospitals through the emergency service. Access to gynaecological emergency services is ensured as well as visits for pregnant and post-partum women.
2. A circular of the Ministry of health of March 2020[[18]](#footnote-18) has reiterated that voluntary interruption of pregnancy together with birth services are not deferrable and therefore need to be guaranteed and protected during the COVID-19 pandemic. However, even during normal times in Italy, many gynaecologists and hospitals refuse to perform voluntary interruption of pregnancy. The COVID-19 emergency exacerbated this situation and despite the ministerial decree, many hospitals have suspended voluntary interruption of pregnancy services during the pandemic.
3. Access to hospitals or health facilities to interrupt a pregnancy has become more difficult because of congestion in hospitals and difficulties to find anaesthesiologists – most of them busy with COVID-19 patients – and the reluctance by gynaecologists to resort to the RU-486, namely medication abortion, whose use can ensure that a pregnancy is safely terminated at home thereby avoiding the need for the affected women to be hospitalized[[19]](#footnote-19).
4. In Italy, the voluntary termination of pregnancy normally requires an extensive number of ambulatory and pre-surgery visits. Due to the COVID-19 pandemic, these visits may take longer than usual to schedule and consequently the legal deadline for a voluntary interruption of pregnancy (7 weeks as stipulated by law n. 194/1978 regulating Voluntary Interruption of Pregnancy) risks being exceeded. Even before the pandemic, medication abortion was not performed (only 17,8% of use) and the Italian Agency for Medication (AIFA) provides for three days compulsory hospitalization.[[20]](#footnote-20)
5. All these issues disproportionately affect marginalised and vulnerable women, women that suffer domestic violence and women who tested positive for COVID-19.Women’s rights activists have launched campaigns to request the government to provide women with online remote procedures as is already happening in France and UK.[[21]](#footnote-21) Urgent procedures to authorize medication abortion should be taken by the government. Additionally, pain-free delivery services in gynaecological wards have been suspended in certain hospitals due to a shortage of anaesthesiologists.[[22]](#footnote-22)

# **Conclusion**

1. The COVID19 emergency has exacerbated and highlighted issues that were already affecting the fight against violence against women and girls. The fact that the number of calls to the 1522 helpline has increased while the number of complaints decrease suggests that there may still be some distrust by some women and girls of the system that has been put in place and may fear to submit a complaint because of the potential negative effects it could have on their lives (e.g. retaliation form the abusive partner; lack of protection from the law enforcement authorities), despite all the initiatives taken by the national government.
2. Additionally, the COVD19 emergency has also put on the spot the voluntary interruption of pregnancy practices put in place in Italian hospitals which are detrimental to women and girls’ physical and psychological wellbeing and has renewed the need for a government intervention on this matter.
3. Lastly, it is of the utmost importance to highlight that the long-term effects of the pandemic (e.g. the loss of jobs that has impacted more women than men) are likely to impact the root cause of gender disparity and increment hence the risk violence against women and girls.
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2. Ms. Sicari is a lawyer at the Bar of Catania, in Sicily and a women’s right activists. She is based in Catania, where she collaborates with the *Centro Anti-Violenza Galatea* and assists and represents victims of gender-based violence. [↑](#footnote-ref-2)
3. <https://www.ohchr.org/EN/Issues/Women/SRWomen/Pages/call_covid19.aspx> [↑](#footnote-ref-3)
4. As the anti-violence centres provided the data confidentially, the information they provided has been anonymized. [↑](#footnote-ref-4)
5. https://www.istat.it/it/archivio/242841 [↑](#footnote-ref-5)
6. https://www.gazzettaufficiale.it/eli/id/2020/03/08/20A01522/sg [↑](#footnote-ref-6)
7. https://www.gazzettaufficiale.it/eli/id/2020/03/08/20G00029/sg [↑](#footnote-ref-7)
8. https://www.gazzettaufficiale.it/eli/id/2020/03/17/20G00034/sg [↑](#footnote-ref-8)
9. At art. 6 para. 7. [↑](#footnote-ref-9)
10. https://www.quotidianosanita.it/allegati/allegato5302948.pdf [↑](#footnote-ref-10)
11. https://www.interno.gov.it/sites/default/files/modulistica/covid\_circolare\_vittime\_violenza.pdf [↑](#footnote-ref-11)
12. Article 2 (g)(1) of Law Decree No.11/2020. [↑](#footnote-ref-12)
13. Art. 342 bis of the Italian Civil Code. [↑](#footnote-ref-13)
14. Art. 2, lett. g, no. 1, of Legislative Decree n. 11/2020 and then by art. 83, paragraph 3, lett. a, of Legislative Decree n. 18/2020. [↑](#footnote-ref-14)
15. https://www.gazzettaufficiale.it/eli/id/2020/03/17/20G00034/sg [↑](#footnote-ref-15)
16. https://www.poliziadistato.it/articolo/135e74a0112e9af858848025 [↑](#footnote-ref-16)
17. https://www.interno.gov.it/it/notizie/youpol-117-segnalazioni-violenza-domestica [↑](#footnote-ref-17)
18. http://www.quotidianosanita.it/allegati/allegato1991520.pdf [↑](#footnote-ref-18)
19. https://www.aogoi.it/notiziario/coronavirus-ivg/?utm\_source=NewsletterE&utm\_medium=Email&utm\_campaign=NLA20200419075205 [↑](#footnote-ref-19)
20. https://www.aogoi.it/notiziario/coronavirus-ivg/?utm\_source=NewsletterE&utm\_medium=Email&utm\_campaign=NLA20200419075205 [↑](#footnote-ref-20)
21. Ibidem [↑](#footnote-ref-21)
22. Ibidem [↑](#footnote-ref-22)