

COVID-19, Intimate Partner Violence and Substance Use

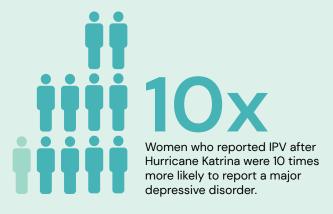
CONNECTIONS AND IMPLICATIONS

During COVID-19 and its aftermath it is important to consider the impacts of the pandemic and social isolation on women's health. This sheet explores the linkages between COVID-19, intimate partner violence (IPV) and substance use to inform training, practice and policy for service organizations and frontline workers. Another information sheet and infographic offer strategies for action for providers, policy makers and women.

COVID-19 and IPV

IPV is a 'shadow pandemic' during COVID-19. Social isolation, economic insecurity, unemployment, 'stay-athome' orders, and reduced access to health and social services or support networks make it challenging for women to escape abusive partners or access services that keep them safe.

Even when women are able to access services or reduce social isolation, concerns for women's health persist. Women who experience IPV after a disaster are more likely to report mental health issues such as sleep problems, low self-esteem, suicidal ideation and PTSD.



IPV and Substance Use

Increases in substance use are linked to periods with social stress and isolation. The relationship between substance use and IPV is bidirectional and complex. Perpetrators' substance use may enhance aggression



and coercive behaviours, while survivors of IPV may use substances to cope. Patterns of use vary by perpetrators, survivors, and substance but are often linked to other psychosocial factors, including current and historical trauma.

Implications for Service Providers

For first responders, anti-violence, and substance use service providers there are ways to increase women's health and safety during COVID-19 and beyond:

- IPV detection and awareness is essential in disasters and pandemics.
- Training must be enhanced to understand the additional burdens of IPV and increased help seeking in the context of COVID-19 and other disasters.
- While providing services for either IPV or SU, investigation into both issues is a must.
- ► It is crucial to include robust responses to many related health issues into service provision during and after COVID-19, in order to fully respond to women's health needs.
- Reductions in gender and racial inequities linked to power, control, and economic supports will assist with reducing IPV and responding more fully to both SU and IPV in future pandemics







