

Afak For Sciences Journal

Issn: 2507-7228 – Eissn: 2602-5345 https://www.asjp.cerist.dz/en/PresentationRevue/351



Volume: 06/ N°: 04 (2021),

P 618-628

The Epidemic of Domestic Violence during COVID-19 Pandemic:

Examples from Algeria

Faiza DEKHIR Laboratory of Scientific and Cultural Heritage of the Tamanghasset Region University of Tamanghasset,

Algeria

f.dekhir@cu-tamanrasset.dz

Abstract;	Article info
Though the problem of intimate partner violence or domestic violence had been tackled in different disciplines, it is still an unsolved problem all over the world. In this study, IPV is addressed in the context of COVID-19. Some of the restrictions that governments put in place to stop the spread of the pandemic have already had negative effects on people particularly women; in the sense that confinement, isolation and job losses that affect the livelihoods and access to health services and family helps are likely to increase the risks of IPV on women. this study aims then to demonstrate whether COVID-19 pandemic results in IPV. For that purpose, a summary of testimonies reported by women victims in Algeria has been provided, where it is found that COVID-19 pandemic has exacerbated IPV.	Received 22 Mai 2021 Accepted 09 June 2021 ✓ domestic violence ✓ IPV ✓ COVID-19 ✓ Pandemic ✓ Algeria.



1. Introduction

It is widely acknowledged that gender is based on the premise of stereotypes and ideologies. It is society which expects that male or female character can behave according to certain unequal stereotypes that have been –in fact- socially allocated to them. According to the literature, it is the hierarchical structure between man and woman which creates the concept of gender. In this view, gender relations are actually socially constructed as opposed to sex relations which are biologically constructed. By this token then, gender is based on stereotypes, in that gender is perceived as performative; people are not who they are according to their sex (biological construction), but rather gender is created by people's actions (performances). This means, males are expected to behave and act violently while females are said to be sensitive, shy, and obedient (Nikolajeva 2004 cited in Ahlung 2017). Besides, female is always perceived as unquestionably fated to approve man, to work for him, to nurture children, and so on. In this respect, women feel unsatisfied by their societies which assign gender inequality, which is in fact the most fascinating novel explanation for Intimate Partner Violence (IPV) against women given that society still holds it that man is more powerful than woman.

However, not only do some cultural and religious factors play a significant role in decreasing or increasing the incidence of violence against women, but also -as of this writing- the negative impacts of the procedures adopted by the world to halt the spread of COVID-19 on society are driving to an impending crisis of domestic violence.

Despite the pervasiveness of violence against women worldwide, this problem has received relatively little attention from scholars in the Arab world, particularly in Algeria. With the exception of a few studies on Lebanese and African women, hardly any other studies have investigated the problem of male violence under the pandemic of COVID-19. While previous studies have identified links between domestic violence and epidemics like Ebola and Zika virus, the current study uses a holistic and inductive interview to find out whether or not COVID-19 is triggering domestic violence.

2. Domestic Violence Defined

As previously mentioned, gender stereotypes stimulate gender inequality, male chauvinism, and domestic violence (or Intimate Partner Violence IPV). It is widely approved that no society is immune to violence against women in the same way there is no commonly accepted definition of violence against women, yet a definition stated by the United Nations (1993) can be stated as follows:

FAK for Sciences Lournal EISSN: 2002-5345 ISSN: 2307-7

Domestic violence is an act of gender-based violence that results in or is likely to result in physical, sexual, or psychological harm or suffering for women, including threats of such acts, coercion, or arbitrary deprivation of liberty, whether occurring in public or private life.

IPV or wife abuse is perpetrated by males who are, or who have been, in positions of intimacy and power – husbands, fathers, fathers-in-law, stepfathers, brothers, uncles, sons, or other relatives (Khan 2000).

In the society of patriarchy, woman's position is determined by that of the man with whom she lives, either husband or father. In the case of husband-wife relationship, it is the man who's conceived as more powerful and patriarchal. It is because of this discrimination, among many other causes, that woman is put in a subservient status that gives a chance for violence actions. Husbands have implied power that is supported and justified indeed by society as too natural in marriage as a patriarchal institution, where man uses violence to maintain this offered power.

3. Types of violence

Types of violence as stated in the Women's Law Organisation (2019) are listed as follows:

- Physical Violence: and it embodies battering, treating women as properties, deprivation of sources necessary for physical and psychological well-being like: education, healthcare, nutrition...etc. Physically abusive behaviors include assault of any kind, ranging from pinching, pushing, hitting, or slapping to choking, shooting, stabbing, and murder.
- Spiritual violence is described when the abuser either forces the victim to participate in the batterer's religious practices instead of their own or to raise mutual children in a religion that the victim does not favour.
- Sexual Violence includes rape, sexual slavery, forced marriage, forced pregnancy, sexual exploitation and prostitution. In essence, it is described as any behavior that uses sex to control or humiliate the victim, like threatening the victim into engaging in unsafe sex or sexual practices in which he or she does not want to participate.
- Psychological Violence: involves coercion, neglect and control of women; or otherwise it is described as using words to decrease the confidence of the wife, or any other intimate partner victim.

4. Causes of Domestic Violence

It is worth mentioning that Domestic Violence is not primarily the result of "single factor" cause or solely attributable to individual-level risk factors such as alcohol use, drugs or mental illness (Crowell and Burgess 1996; Heise 1994; Heise et al. 1999; World Health Organization 2010). Different inquiries try to prove that women with fewer resources or greater perceived vulnerability are more likely to experience higher tensions of domestic violence. Women who suffer more psychological entrapment, lack of social support, fear of social judgment, are more exposed to the risk of domestic violence. Lack of feasible alternatives also stands as an obstacle rendering domestic violence more intense and more widespread (UNICEF 2020). Violence against women takes many forms and is manifested due to many reasons. According to Kanter (1977), the powerless positions women hold in society stand as the most important factor to create gender differences in power use. Women do not use violence in gender relationships because they fully grasp their powerless status in society.

Not only does patriarchal culture foster gender discrimination but also books as they serve as a medium to teach social and civic values. Through illustrations and use of language, books instructed children (readers in general) on gender roles behaviours. Women are stereotypically represented as submissive, dependent, and housekeepers; whereas, men are stereotypically represented as leaders, independent, active and breadwinners. According to Narahara (1998), these stereotypes are consistent across many reading materials, including, narratives for older readers, and textbooks.

Be they cultural or literature stereotypes, they mold people's perceptions of gender roles characterized by an existing asymmetry in the power relations between men and women and that preserves the devaluation of the female as opposed to the male.

Screening works on violence when completed in conjunction with research on COVID-19 crisis, it is found that the crisis has only magnified the aforementioned and many other gaps in societies. When this pandemic arrives, many of the previous stereotypes have been reinforced to bring about violence or gender-based violence. Confinement at home under heightened levels of stress, uncertainty and fear, produce stressful environments that precipitate violence. Scholars like Bettinger-Lopez and Bro (2020) have characterized an invisible pandemic of domestic violence during the COVID-19 crisis as a ticking time bomb or a perfect storm.

Even though there is no precise cause for domestic violence, women at the risk for being the victim of domestic violence include those whose couples are addicted to drugs, are jobless, with lower grades, are not educated or badly educated, and are or have been in a romantic relationship with the victim.





5. COVID-19 Pandemic and Domestic Violence

Nowadays and due to COVID-19 pandemic that has led to movement restrictions, physical distancing, loss of income, isolation, stress and anxiety, women tend to be more at risk for becoming victims of male violence and Corona virus. This increased risk is not startling; as previous epidemics, such as the Ebola and Zika virus disease outbreaks, led to more prevalent domestic violence, COVID-19 is a likely motivating similar trend at present:

During the 2014–16 west African outbreak of Ebola virus disease, gendered norms meant that women were more likely to be infected by the virus, given their predominant roles as caregivers within families and as front-line health-care workers. (Clare et al.; 2020)

Available data on UN Women (2020) show that the results are already devastating and will only get worse:

In France, for example, cases of domestic violence have increased by 30 percent since the lockdown on March 17. Helplines in Cyprus and Singapore have registered an increase in calls by 30 percent and 33 percent... In Argentina, emergency calls for domestic violence cases have increased by 25 percent since the lockdown started. In Canada, Germany, Spain, the United Kingdom, and the United States, government authorities, women's rights activists and civil society partners have indicated increasing reports of domestic violence during the crisis, and/or increased demand for emergency shelter.

Likewise, most governments in the Arab world have severely reduced civil liberty to prevent the virus from spreading. For that reason, almost all countries underwent a number of measures that included a curfew imposed by the presence of police units, and a ban of movement in and between cities. Moreover, they suspended all international and domestic flights, voyages, and passenger ships. These measures turn to be harmful on women and girls as they experience domestic violence, and find themselves unable to leave the house looking for helpline services.

Examples include health and financial stresses in the home, including a woman's loss of livelihood or earnings, restricted access to basic services and ability to leave an abusive situation; stress related to social isolation and/ or quarantines; and confinement of women within the home with violent partners who may use the COVID-19 restrictions to further exercise power and control over their partners. (WHO 2020)



It is important to note that even before COVID-19 occurrence; domestic violence rates in Algeria for instance, were high. In 2013, statistics confirmed that there were 29,532 cases of violence against women. However, there are no comprehensive statistics available on how widespread gender-based violence is in Algeria. Yet, the director of the judicial police responsible for the protection of women victims of violence reportedly said that the real figure is thought to be much higher; given that rape and other sexual assaults are always attached to stigma and shame for the family if women leave or report abuse (Welchman et al; 2005). For all these women, life was threatening before the spread of COVID 19; the pre-existing gender gaps have only increased the adverse effects of COVID-19.

During this type of emergency, though data in Algeria is limited, reports from (Morocco, Tunisia and other countries like China, the United Kingdom, and the United States) report that the number of domestic violence cases testified to the police tripled in February/March 2020, compared to the same months the previous year. According to a report by Boussel (2020), since the onset of the crisis, Algeria has been already at a standstill. Falling oil prices, erosion of the foreign exchange reserve and Hirak demonstrations over the last twelve months: Algiers has been experiencing a recurring crisis. Therefore, Algeria is not yet ready to afford reforms, and prepare programmes to raise awareness and train professionals to provide social, lifesaving medical treatment, and psychological help to domestic violence victims.

Community factors caused by the confinement, Jati (2019) says, such as poverty, high crime rates, unemployment, drug trafficking, weak institutional policies, lack of facilities for victim services, weak law application on the part of the ministry of solidarity and woman and family affairs) inevitably accelerate the perpetuation of the epidemic of violence in Algeria.

It is true that being distant from public spaces and working may decrease the widespread of COVID-19, but for many members of the community, staying home, which led families spending a lot more time together, is not the safest decision. This idea has been stressed by Godbole (2020) when she reports:

People ... are staying indoors during national lockdowns to stop the spread of the coronavirus. Though the measures are yielding positive results, it is a dangerous scenario for women who face domestic violence.

With the country shut down, Algerians are increasingly pondering about the economic consequences of COVID-19. Such factor adds stress and financial pressure that can harmfully affect the most vulnerable sectors in society and generate circumstances where their safety is further conceded. Workers of the informal sector, particularly women, shoulder so much responsibility (caring for those with special needs, those who provide financial support to the

A FAK for Sciences Journal

household, or those working in the health sector). These women are on one hand overexposed to the risk of the pandemic and on the other hand, when trapped at home, they are too often with their abusive partners. According to Yaker (2020), closure of schools, kindergarten, universities, and all educational institutions, in response to COVID-19 has disrupted the jobs of many women (being teachers, baby sitters, secretaries) and school girls in the country. This creates a severe challenge for women frontline healthcare workers who also are responsible for caretaking in the home. Lack of childcare and/or elderly care adds stress and financial burden to women frontline workers.

Grown and Sanchez-Paramo (2020) make it clear that while COVID-19 crisis has excessively impacted women, not only are men at greater risk of dying from the virus, but they are also threatened by its social and economic impacts. They are very occasionally suffering from economic uncertainties and stress combined with confinement measures and disruptions in services. Bogat et al. (2002) find that this can be overtly noticed at homes with the presence of children (especially the turbulent ones); fathers –as they are not patient enough- would show more nerves, anxiety and perhaps more violent acts against their children and wives. Worse than that, children are there to witness their fathers' or brothers' abusive acts, the thing that renders them abusers in the future. Therefore, household serves as an important setting from which one –a male child—socially and directly learns violence on women. Children who grow up in violent families perceive that domestic violence is a welcomed male act and an approach to form control of women.

6. Victims' testimonies

Some of the testimonies during the 'coronavirus-induced' lockdown are reported. In order to preserve the anonymity of all interviewees, pseudonyms have been used and some other redundant information removed.

Aljiyya, a 42 years old victim of domestic violence and a mother of three children, lived with her husband in Oran. She stopped working as a teacher at a primary school as the lockdown started. She said that her husband repeatedly snatched and shoved her to the ground and beat her on her back, "I have always suffered from violence during my lifetime; … but since the lockdown; he has not ceased harassing me…" she reported: "No one cares about me. Our home, each time I complained to them, they said *it doesn't matter, this is your husband, you share (3eshra) with him. Return to your house for the sake of your children, it is not safe to come to us during the confinement*".

The family is usually the first contact that the victims of domestic violence have to consult. However, many domestic violence survivors (like *Aljiyya*) when complaining to their families;



they usually receive no support or help. Instead, they are denounced and blamed for their fate, or they are told by their parents to return to their abusers and reconcile for their children. Their families are afraid from catching the virus, that's why they refused to receive their daughters especially at this time of the pandemic. According to Abraham (2000), the family (relatives) plays a critical role in intervening or preventing wife abuse, in the sense that moral support can decrease women's exposure to wife abuse; and vice versa. A lack of this type of support intensifies a woman's isolation, which increases -in turn-her feelings of weakness and insecurity.

Ahlem, 33 years old, is a mother of two little girls and a primary school teacher. Because of the confinement, Ahlem was obliged to stop working and stayed home. She was beaten by her husband twice during this Ramadan. Her husband is a security agent in a town Hall. She said: "My husband blames me for not baking bread for him and he always calls me in the early morning when he's at work, just to check whether I am still sleeping or not ..." She added: "He says to me that I'm always sleeping to a late time while he's always getting up earlier for work exposed to the risks of the pandemic and the tiring Ramadan...". "He becomes so violent especially during the confinement; he strokes me and curses me". "My neighbour comes to me to pay me a visit secretly, and tries to take me to her house but her husband has refused saying that they should-as much as they can-keep away from any external contact because of the virus..."

In fact, a deeply rooted patriarchal culture is known in communities whose male who belongs to working or lower classes (with lower incomes) show more stiffness and anger at home since they lack power and authority at work. This violent model of masculinity is assumed to compensate for the lack of authority and power. A husband is defined as a family breadwinner and this, in turn, further legitimizes his power and authority -expressed by means of violent actsover his wife or female partner (Messerschmidt 1993). Indeed, in a patriarchal culture like the Algerian one, a woman is often described as being responsible for cooking, cleaning the house, and the clothes, caring for and supplying the children with love and warmth, gardening, and responding to male's sexual desire.

According to many studies conducted on the same topic, it is found that there are other factors that escalate wife abuse during the pandemic, including economic precariousness and financial dependence on perpetrators, and being coerced by family members, police and friends to drop criminal charges due to the social stigma attached to reporting abuse (Amnesty 2004).

During the same period of time, another woman named *Amel* (a housewife) aged 36 years old; recited her story saying: "my husband becomes so violent during the confinement, especially during Ramadan, I usually think to leave the house forever...I contacted the solidarity services 625
625

for help several times but in vain....my family has accused me for provoking him. They still insist on me to be patient with him, with their intention that he would change after the confinement ...in fact he's the only breadwinner; during this crisis, I have nowhere to go to earn money" It is typical that -in all Arab worlds – it is a shame for a woman to leave the house. A woman avoids reporting her husband's assault, and prefers to remain silent; whatever the man does, it is the woman who is to be submissive and subordinate to their men (Pushpanathan 2013).

What is rather odd in this context, however, is that the ministry of national solidarity, family affairs and the status of woman seemed to make no interventions to help the victims. On the contrary, there was much assistance on the part of the ministry with regard to the homeless people in order to maintain preventions against the pandemic spread (Algeria Press Service 2020). This is an enough indication to refer to the inability of the Ministry to take care of all social groups especially at the time of the pandemic.

Kawther a 30 years-old woman, states that she has frequently been harassed by her husband in these days of the Corona crisis. "I could not go to the police to complain, my husband swears if I go out- even for money withdrawal -he would lock me out... by doing so, he would pretend protecting the whole family from any outside contamination", in a time where different sectors are emphasizing that their employees work remotely, and the administrations are encouraging social distancing, an abuser (like *Kawther's* husband) takes advantage of an already stressful situation to gain more control (WHO 2020). *Kawther* could not escape the oppression and tyranny of her husband that brings about her weakness and self-effacement. Certainly, her decision to leave him will threaten his masculinity. For *Kawther* and many other women, even the fear of narrowing the pandemic spread is preventing them from seeking out physical and moral help after undergoing physical violence.

7. Conclusion

The impact of Covid-19 on the well-being of female goes beyond the risk of catching the virus. The crisis had a huge impact on the mind-sets and economies of the most disadvantaged members of society. Statistically, more than 50 % of the healthcare is a woman which means women may be heavily exposed to the virus through work in addition to the harassment of their partners at home. On one side, those women cannot quit their jobs as they do not want to be economically dependent on their violent partners; and on the other side they cannot stay at home exposed to their husbands' humiliation.

According to Kapur (2020), the economic impact of COVID-19 resulting from the widespread closure of trades puts higher financial tension on communities, chiefly on women as they excessively work in insecure, lower-paid, and informal employment (like shop sellers, goods



merchants, hairdressers, baby sitters and seasonal workers), with little or no income safety and social protection, and are thus more likely to be deprived from their earnings. Experience from the Ebola and other complex emergencies shows that epidemics aggravate existing inequalities, including those based on financial status, age and gender.

This paper then demonstrates that the majority of abusive relationships take place among couples where males -with lower income, educational or social status- are the most likely to resort to violence in order to derive power within their relationships. Regrettably, Corona crisis has only generated male violence through confinement, isolation, and economic stagnation, the disruption of social and protective networks, together with lack of social support. Unfortunately, cultural stereotypes that women are responsible for performing domestic tasks such as caregiving can expose women to greater health risks and domestic violence which in turn cause serious emotional and physical health harms for those victims.

The paper has also shown how plainly the Ministry of National Solidarity, Family Affairs and the Status of Woman all along with the reproductive health providers, during this pandemic, have provided abused women little support. Corona crisis was particularly upsetting because the health systems in Algeria as well as some other affected countries were already delicate, and weakened by a sick legislation. For this reason and many others, the Algerian authorities must act quickly to guarantee everyone individual get accurate coverage and treatment, and every female is secured. The role of reproductive health providers can help their abused women in many ways. For instance, they can offer their victims empathy, support, and counselling. They can also connect their victims with support and shelter services. However, in case of impossible mobility, all of those services can be accomplished via hotline.

References

1. Abraham M (2000) Isolation as a Form of Marital Violence: The South Asian Immigrant Experience. *J Soc Distress Homel* 9(3):221-236. <u>https://doi.org/10.1023/A:1009460002177</u>

2. Ahlung S (2017) Deconstructing Gender-How to Teach Gender and Feminist Pedagogy using Stephenie Meyer's Life and Death in the EFL classroom. <u>http://hdl.handle.net/2077/53587</u>. Accessed 02 Jul 2020

3. Algeria Press Service (2020) Coronavirus: National Police contributes to assisting homeless. <u>http://www.aps.dz/en/algeria/33767-coronavirus-national-police-contributes-to-assisting-homeless</u>. Accessed 08 Jul 2020

4. Bettinger-Lopez C (2020) A Double Pandemic: Domestic Violence in the Age of COVID-19. Retrieved from <u>https://www.cfr.org/in-brief/double-pandemic-domestic-violence-age-covid-19</u>. Accessed 01 Jul 2020

5. Bogat A, Levendosky A. Davidson W (2002) Understanding the Intergenerational Transmission of Violence From Pregnancy Through the First Year of Life. Final Project Report. Retrieved from: https://www.ncjrs.gov/pdffiles1/nij/grants/196681.pdf. Accessed 01 Jul 2020

6. Boussel P (2020) The Maghreb facing Covid-19. Fondation pour la Recherche stratégique, Note n° 27/20.

8. Godbole T (2020) Domestic violence rises amid coronavirus lockdowns in Asia. Deutsche Welle (DW). https://www.dw.com/en/domestic-violence-rises-amid-coronavirus-lockdowns-in-asia/a-53077378 .Accessed 15 Jun 2020.



^{7.} Crowell N A, Burgess A W (1996) Understanding violence against women. Washington, DC, US: American Psychological Association.

9. Grown C, Sanchez-Paramo C (2020) The coronavirus is not gender-blind, nor should we be. Retrieved from: https://blogs.worldbank.org/voices/coronavirus-not-gender-blind-nor-should-we-be. Accessed 01 Oct 2020 Heise L (1994) Gender-based abuse: the global epidemic. Cadernos de Saúde Pública 10:S135-S145. 10. http://dx.doi.org/10.1590/S0102-311X1994000500009.

11. Heise L, Ellsberg M, Gottemoeller M (1999) Ending violence against women. Population reports 27(4):1-44.

12. Jati L P et al. (2019) Social Cognitive Theory on the Domestic. Matern Child Healt J 4(5): 326-334. https://doi.org/10.26911/thejmch.2019.04.05.04

13. Kanter R M (1977) Men and women of the corporation. Basic Books. ISBN-13:9780786723843

14. Khan M, Kapoor S, Cooraswamy R (2000) Domestic violence against women and girls. Innocenti digest 6:1-30.

15. Laaroussi M (2020) How Arab States Take on Coronavirus: Morocco as a Case Study. Aljazeera Centre for Studies. https://www.unicef-irc.org/publications/pdf/digest6e.pdf.

Messerschmidt J (1993) Masculinities and Crime : Critique and Reconceptualization of Theory. Rowman 16. & Littlefield Publishers. ISBN-13: 978-0847678693

Narahara M M (1998) Gender Stereotypes in Children's Picture Books. Educational Resources Information 17. Center (ERIC). https://files.eric.ed.gov/fulltext/ED419248.pdf

National Domestic Violence Hotline (2020), Staving Safe During COVID-19, Report Retrieved from: 18. https://www.thehotline.org/2020/03/13/staying-safe-during-covid-19. Accessed 02 Jul 2020

Pushpanathan T (2013) Women-the Victims of Male-Chauvinism. Scholarly Research Journal for 19. Interdisciplinary Studies (SEPT) 2(5):63-66.

20. UN Women (2020)COVID-19 ending violence and against women and girls. https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violenceagainst-women-and-girls Accessed 02 Jul 2020

21. United Nations (1993) UN Declaration on the Elimination of Violence against Women. Proclaimed by General Assembly 48/104 resolution of 20 December 1993. https://www.ohchr.org/EN/ProfessionalInterest/Pages/ViolenceAgainstWomen.aspx Accessed 02 Jul 2020

22. Welchman L, Hossain S (2005) Honour: Crimes, Paradigms and Violence against Women. Zed Books. ISBN-13:978-1842776278

23. Wenham C, Smith J, Morgan R (2020) COVID-19: the gendered impacts of the outbreak. The Lancet 395(10227):846-848. https://doi.org/10.1016/S0140-6736(20)30526-2

24. Womens'law Organization (2020) Domestic Violence/Dating Violence. NNEDV. Retrieved from https://www.womenslaw.org/about-abuse/forms-abuse/domestic-violencedating-violence.

25. World Health Organization (2012) Understanding and addressing violence against women: Intimate partner violence (No. WHO/RHR/12.36). World Health Organization. https://apps.who.int/iris/handle/10665/77432

26. World Health Organization (2020). Violence against women and girls data collection during COVID-19, UN Women, www.unwomen.org

27. World Health Organization and Program for Appropriate Technology in Health (PATH) (2005). Researching violence against women: Practical guidelines for researchers and activists. ISBN:9241546476

28. World Health Organization (2020) Addressing Violence Against Children, Women, and Older People During COVID-19 Pandemic: the Key Actions. available at: https://apps.who.int/iris/bitstream/handle/10665/332458/WHO-2019-nCoV-Violence actions-2020.1-eng.pdf.

29. Yaker R (2020) Securing the Safety and Wellbeing of Women Frontline Healthcare Workers in the COVID-19 Response. GBV AoR Help Desk. Available at: https://gbvguidelines.org/

 $\Theta \oplus \Theta =$

FAK for

Iournal

محلة أفاق للعلوم