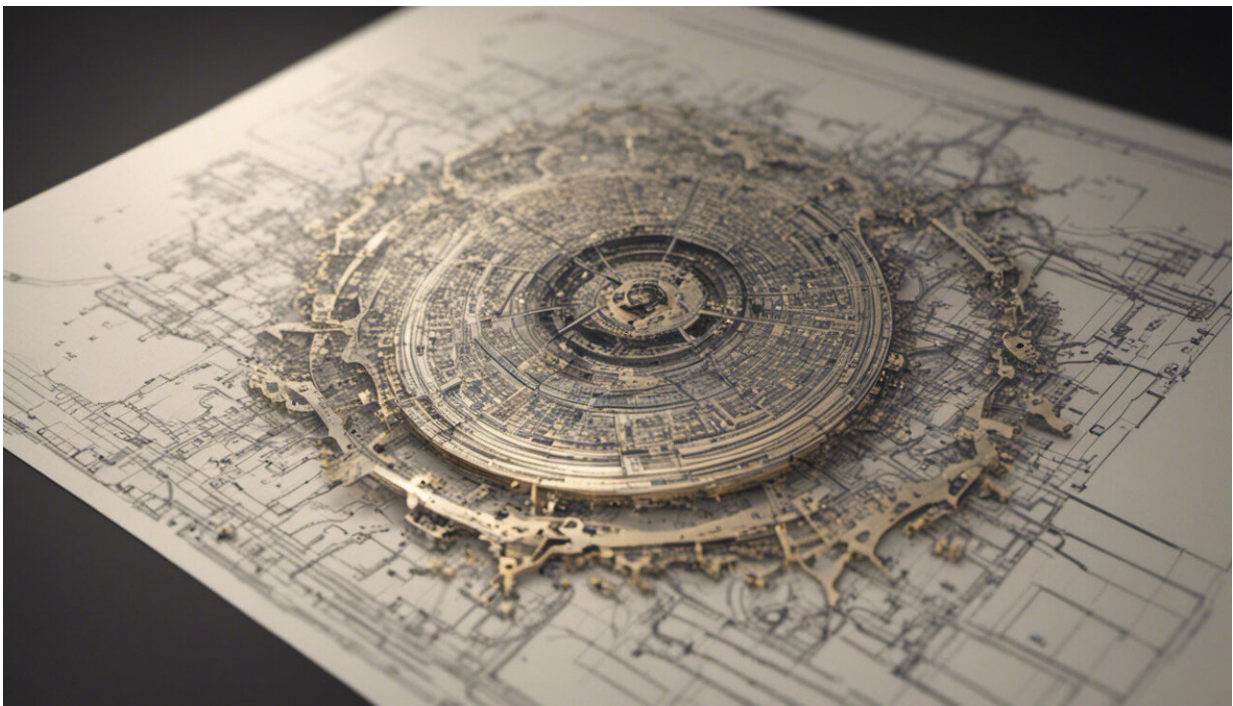


Lockdown: crimes in the home are on the up – new measures are needed to alert the authorities

June 10 2020, by Siddhartha Bandyopadhyay, Eddie Kane and Joht Singh Chandan



Credit: AI-generated image ([disclaimer](#))

Crimes in the home are hard to detect unless victims or family members report them. Both [domestic violence](#) and [child maltreatment](#) are widely under-reported. This means they tend not to be investigated by the

authorities, and many victims don't get the support they need.

The costs of such [violence](#) are considerable. Our research shows that victims of domestic violence are nearly three times more likely to suffer from [mental ill health](#) during their lifetime, and have above-average rates of [diabetes, heart disease and death](#). Victims are also twice as likely to [develop chronic conditions](#), including fatigue. Similarly, victims of [child maltreatment](#) have a more than [twofold risk of mental ill health](#) in later life, compared to those who have not been maltreated as a child.

These findings suggest that these hidden crimes put a large burden on the public health system. And there are signs that the lockdown imposed in most parts of the world may be exacerbating them, with [potentially devastating consequences](#).

Family crimes in lockdown

Although no published studies have tracked the national trends in domestic violence related to COVID-19, several indicators point to a marked increase during this period. The UK's largest [domestic abuse](#) charity, Refuge, reported a [700% increase](#) in calls to its helpline in a single day in April, while a separate helpline for perpetrators of domestic abuse seeking help to change their behaviour received [25% more calls](#) after the start of the COVID-19 lockdown.

The number of women killed by men [was 14](#) in the period between March 23 and April 12, which is nearly three times the historical average of five in other years in the same period. Initial reports also suggest a [30% increase in domestic abuse](#) in the UK, though there appear to be wide variations across [police forces](#). The victim's commissioner [warned](#) there was a danger of an "epidemic" of the crime.

There is also emerging evidence from services such as Childline and the

National Society for the Prevention of Cruelty against Children (NSPCC) that child abuse [has risen since lockdown](#). They report an increase in online contacts through live chat channels and websites and telephone calls and texts. The increased rise in reports may also only be the tip of the iceberg, given the difficulties of reporting these crimes at a time when the perpetrator is consistently at home.

Supporting victims

There is clearly an urgent need to improve [health surveillance](#) – the systematic collection, analysis and interpretation of health data. In the context of violence in the home it means measuring the trends of domestic violence and child maltreatment across different sectors of the population in a systematic way using data that is routine collected. This [might include](#):

- Routine enquiry of domestic violence or child maltreatment exposure, making every contact count. This could, for example, be integrated into remote GP consultations by asking a series of structured questions about things like stress and anxiety. This would help GPs to assess the risk of domestic violence or child maltreatment, and whether more questions are needed. Such an approach is already taken by GPs who are part of a [programme](#) identifying patients affected by domestic violence.
- Active surveillance methods could be repurposed. For example, existing [NHS tools for monitoring COVID-19](#), such as scheduled emails and text messages for things like health surveys, could be adapted to include questions to see if people at risk of domestic violence or child maltreatment are being victimised.
- Linking data between police, health and social care to identify and effectively monitor and support individuals at risk.

Of course, many have legitimate concerns around any kind of

surveillance, but it should be kept in mind that it is carried out routinely for containing diseases such as influenza, and has provided early warnings that have saved lives.

Additionally, not all such surveillance uses personal data. Given the constraints in victims being able to report domestic violence or [child maltreatment](#) during the pandemic, the likes of Twitter feeds combined with [tools for analysing human language](#) may give us new insights into the scale of the problem. Tweets may indicate anxieties during the pandemic that might alert police to the scale and nature of abuse that is occurring.

And while linking data from different authorities may raise privacy concerns, secure access to anonymised hospital and police datasets has been found to be an [effective tool](#) in violence reduction without compromising individual privacy.

These complement the active steps by national charities such as (but not limited to) Women's Aid, Safelives and the NSPCC, who have all produced guidance for how survivors can both report [domestic violence](#) and [keep themselves safe](#). Charities also help people to report crimes to the police and to access support through hidden mobile apps and telephone lines.

We must ensure that the indirect costs of the pandemic in increasing crimes within the family are proactively monitored, providing appropriate support to victims.

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