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"STAY HOME, SAVE LIVES": A STUDY ON COVID-19 AND INTIMATE PARTNER VIOLENCE

by

GRACE MESSINA

A thesis submitted in partial fulfillment of the requirements for the Honors in the Major Program in Criminal Justice in the College of Community Innovation and Education and in the Burnett Honors College at the University of Central Florida

Orlando, Florida

Spring Term, 2022

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Abstract

With the introduction of COVID-19, preliminary data suggests that the forms and frequency of abuse relating to intimate partner violence (IPV) have changed. Most of society was unaware of the arising silent pandemic which was happening to the individuals in abusive relationships who were being quarantined with their abuser. The IPV resources were extremely aware of this silent pandemic due to large numbers of individuals seeking emergency shelter. However, there was only a priority for public safety due to COVID-19 when in hindsight, there needed to be a balance of public safety as well as increased aid for the individuals suffering in their own homes. In this study, I collected qualitative and quantitative data surrounding the frequency and mode of intimate partner violence throughout the duration of the quarantine and lockdowns from COVID-19. An online survey was distributed to 418 respondents living in the United States who were in the same intimate partner relationship across all three timeframes (pre-COVID-19 lockdowns, during COVID-19 lockdowns and after COVID-19 lockdowns). Respondents answered questions regarding demographics, abuse that occurred along with their perceived intensity and severity of the abuse and their resource usage. Findings revealed that verbal and sexual abuse increased during the COVID-19 lockdowns, the perceived intensity and severity of the abuse trended upward during the lockdowns, and resource usage decreased across all three timeframes. This study contributed a deeper understanding and provoked discussion of the abuse that took place during the COVID-19 lockdowns.

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I would like to thank Dr. Erica Fissel and Dr. Bethany Backes for guiding me through this thesis. Their wealth of knowledge about IPV and research itself was instrumental to the success of this project. Thank you to my family and friends who have encouraged me to keep persevering.

TABLE OF CONTENTS

Introduction	
Literature Review	5
Intimate Partner Violence	5
Physical Abuse	5
Sexual Violence	6
Psychological Abuse	7
Cyber Abuse	8
Reporting and Resources	10
COVID-19 Effects on IPV	
Natural Disasters effects on IPV	13
COVID-19 and effects on resources and reporting	14
COVID-19 and effects on risk factors	15
Current Study	
Methodology	
Measures	19
Analytic Strategy	21
Results	22
Demographics	22
Income	23
Relationship Findings	23
Children	24
Intimate Partner Abuse Findings	25
Qualitative Data	31
Reported Changes in Communication	31
Reported Changes in Intensity	31
Reported Changes in Severity	32
Reported Resource Usage	32
Reported Resource Adequacy	32
Discussion	
Research Question 1	33
Research Question 2	35
Research Question 3	37
Strengths and Limitations.	39

Conclusion	41
References	42

LIST OF TABLES

Table 1. Respondent Employment Status (%)	23
Table 2. Relationship Status (%)	24
Table 3. Cohabitation with Partner (%)	24
Table 4. Communication Changes (%)	25
Table 5. Cyber Abuse Victimization (%)Error! Bookma	rk not defined.25
Table 6. Physical Abuse Victimization (%)Error! Bookma	rk not defined.26
Table 7. Verbal Abuse Victimization (%)	26
Table 8. Sexual Abuse Victimization (%)	27
Table 9. Behaviorally Specific Trends (%)	28
Table 10. Cyber Specific Behaviors (%)	29
Table 11. Intimate Partner Abuse Findings (Mean)	29
Table 12. Perceived Intensity and Severity (Mean)	30
Table 13. Resource Use (%)	31

Introduction

"Stay Home, Save Lives." These were the words that circulated and were spoken aloud for months when the world shut down due to the spread of COVID-19. COVID-19 emerged early in the United States as an infectious, respiratory disease that affected all corners of the world (Boserup et al., 2020). According to a compiled timeline by the American Journal of Managed Care (AJMC), the World Health Organization (WHO) declared COVID-19 a pandemic on March 11, 2020 (AJMC Staff, 2021). Reports from Florida called for lockdowns¹ to begin in the state at midnight on April 3, 2020. With viruses previously running rampant throughout our country, the rapidly spreading and negative effects seen by many patients was alarming to governments worldwide which is why lockdowns were issued. It started out as a 2-week quarantine² period but gradually kept extending leading to a grand total of 25 weeks in quarantine in the state of Florida (Cutway, 2020). For the purposes of this study, it is important to note that COVID-19 is still present, however, the lockdowns have ceased. Most states had lockdown mandates that took effect in April 2020 and ended in September 2020. As such, April 2020 and September 2020 are the general dates used in the survey of this study. The statement "Stay Home, Save Lives" would come to haunt us after the reports started to be released related to the increase in domestic and intimate partner violence (IPV) cases. With about 35% of jobs

¹ Lockdowns: a temporary condition imposed by governmental authorities (as during the outbreak of an epidemic disease) in which people are required to stay in their homes and refrain from or limit activities outside the home involving public contact (such as dining out or attending large gatherings)

² Quarantine: the situation of being kept away from others to prevent a disease from spreading

shifting to online and remote positions, and the stay-at-home³ orders that were mandated⁴ across the nation, abusers were now more likely to be at home for months on end with their partner (Leslie & Wilson, 2020). Victims were essentially trapped with their abuser and could not escape because they were unintentionally being held captive by the stay-at-home mandates. With the stay-at-home mandates being introduced, many individuals were also introduced to IPV due to the increased stressors associated with COVID-19 that led to abuse. Being isolated with an abuser may not give the victims the privacy to search for resources on a computer or make a phone call seeking help since they have nowhere to search privately and have fears of being caught. Moreover, if the survivor decides to leave their partner, due to the presence of COVID-19, they might run the risk of being turned away from a resource like women's shelters since they had to decrease their capacity to maintain social distancing guidelines (Viero & Barbra, 2021). If the shelters are at a limited capacity, and a victim escapes and has nowhere to turn, what is their next option? Overall, the number of options to aid individuals seeking help in abusive relationships were much scarcer compared to pre-COVID-19 times.

As the mandates were important to keeping the masses safe and healthy from exposure to the virus, the resources or adapted strategies for victims of IPV were left stressed and depleted by the new protocols that were enforced as a result of the pandemic. An editorial written by Caroline Bradbury-Jones and Louise Isham summed up the critical issues with COVID-19 and IPV that are at hand "Governments across the globe have called upon us all to play our individual part in tackling COVID-19 by staying home, but a critical mindfulness of what this means for many women and children is also important" (2020, p. 2). We were so concerned with

³ Stay-at-home: remaining in one's residence, locality, or country

⁴ Mandates: an official order to do something

"flattening the curve" of the virus that government officials and medical personnel overlooked and forgot the fact that home is not always the safest place.

The statistics of IPV before COVID-19 are staggering: 1 in 4 women and 1 in 6 men experience violence by a partner in their lifetime (CDC, 2020). The initial reports from the first 5 weeks of lockdown estimated that there was an increase of 9.7% in calls to IPV and DV hotlines (Leslie & Wilson, 2020). Although this study is based on the effects of COVID-19 on IPV in the U.S., it is important to note the upsurge of IPV cases was global. In Brazil, there was a reported 40-50% increase in calls, Cyprus had an increase of 30% for calls to their hotline, Spain had calls increase by 20% a few days after the lockdown and a Refuge website had an increase in visits by over 150% (Bradbury-Jones & Isham, 2020). Within the U.S., Portland, Oregon recorded a 22% increase in arrests relating to IPV, San Antonio, Texas reported an increase of 18% for calls relating to IPV in March 2020 compared to March 2019, and in Jefferson County Alabama, there was a 27% increase in IPV calls for March 2020 compared to March 2019 (Boserup et al., 2020).

This increase in IPV cases is important to note because although the lockdowns were "saving lives" from COVID-19, the lives of the abused were overlooked. Lockdowns were necessary and may continue to be necessary, but much can be learned about survivor/victim safety in these situations and how to do better should we be met with other disasters that require such isolation. In my study, I hypothesize I will find increased abuse through the form of technology (e.g., GPS tracking, cyberstalking) and an increase in frequency of the abuse from responses gathered in the survey. With my survey, the questions have strategically been asked in a way where we can observe the changes in the forms of abuse, the frequency of the abuse and the severity and intensity over three time periods: pre-COVID-19 lockdowns, during COVID-19 lockdowns and after COVID-19 lockdowns. This will allow the data to reflect how the

lockdowns changed the experienced abuse and how previous data possibly coincides or contradicts with a major event within society. The silent suffering endured by victims and the lack of response by our countries is why it is important to study the effects from the global pandemic (relating to IPV) which plagued our nation and more importantly, abusive homes, for months on end.

Literature Review

Intimate Partner Violence

Intimate partner violence (IPV) is a concept that falls under the umbrella of domestic violence. Domestic violence is a type of abuse that occurs within a domestic space (e.g., a home), while IPV is a more specific term that encompasses abuse from a current or ex-partner (Bradbury-Jones & Isham, 2020). IPV is "perpetuated in many forms including physical violence, sexual violence, psychological violence, economic violence, and stalking" (Sacco et al., 2020, p. 71). These forms of violence, specifically stalking and economic violence, can also include perpetration through a technology-facilitated element. When the abuse takes this form, it can be categorized as cyber abuse.

One victim advocacy organization reports that a victim will try and escape or leave the relationship 7 times before they leave for the last time (National Domestic Violence Hotline, 2021). The time that is most lethal for the victims of IPV is when they try to leave their abuser. Intimate partner homicide is potentially a result of an IPV relationship gone bad where the victim was trying to leave, and the perpetrators increasing abuse led to the killing of the victim (Campbell et al., 2017). In the UK, two women are killed each week due to IPV and throughout COVID-19, reports have surfaced claiming an increase in domestic homicide in multiple affected countries (Bradbury-Jones & Isham, 2020).

Physical Abuse

One form of intimate partner violence is physical abuse, which "is when a person hurts or tries to hurt a partner by hitting, kicking, or using another type of physical force" (Preventing Intimate Partner Violence, 2021, para. 2). This can include forces such as: slapping, shaking, pushing, pulling, punching, choking, beating, scratching, pinching, pulling hair, stabbing, shooting, drowning, burning, hitting with an object, restraining, withholding basic needs, holding

hostage, threatening with a weapon, or threatening to physically assault (ACESDV, 2020). The prevalence of physical abuse in intimate partner relationships is staggering. According to National Intimate Partner and Sexual Violence Survey (NISVS) it was reported that, "1 in 4 women (24.3%) and 1 in 7 men (13.8%) aged 18 and older in the U.S. have been the victim of severe physical violence by an intimate partner in their lifetime" (Black et al, 2011, p. 2). A domestic violence report noted that about 24 people per minute are victims of physical violence or stalking by an intimate partner in the U.S. (National Domestic Violence Hotline, 2020). This statistic was calculated and found that there were 12 million women and men in one year who would be victimized. According to the CDC, risk factors are "linked to a greater likelihood of IPV perpetration and can be contributing factors but might not be direct causes" (Risk and Protective Factors for Perpetration of IPV, 2021, para. 1). There are individual, relational, community and societal factors that can contribute to both being a victim and a perpetrator of IPV (CDC, 2020). Risk factors for physical violence would be education, history of child sexual victimization, exposure to parental physical and/or verbal aggression, violent adult models in childhood, non-family aggression by parent, traits of anger and hostility, personality disorders, depression, alcohol and drug abuse (Schumacher et al., 2001).

Sexual Violence

Sexual violence can be defined as "using sex in an exploitative fashion or forcing sex on another person (in a case of IPV this would be the partner), having consented to sexual activity in the past does not indicate current consent and sexual abuse may involve both verbal and physical behavior" (ACESDV, 2020, para. 1). Although a completely different form of violence, you could also classify sexual violence under the physical violence umbrella due to the nature of physicality. The abuser will use force, guilt, manipulation, deception, exploitation, insults, unwanted penetration or touching and withholding sex as ways to engage in this kind of violence

(ACESDV, 2020). One in 10 women report they have experienced sexual assault by an intimate partner (Black et al., 2010). Intimate partners commit approximately one quarter (26%) of sexual assaults (Bachman & Saltzman, 1995), and lifetime rates of sexual assault by an intimate partner in national random samples have ranged from 7.7% to 13% (Basile, 2002; Tjaden & Thoennes, 2000). Sexual violence and victimization also occur in same-sex relationships where the victim could be female, and the perpetrator is also female and vice versa.

Psychological Abuse

Another form of IPV can evolve through the abuse of emotions and psychological tactics. One study found that psychological abuse is discussed in the following light "although a unanimous definition has not been reached, psychological IPV can be categorized into two domains: emotional/verbal (e.g., name-calling, swearing, yelling and screaming) and domination/isolation (e.g., monitoring time and activities, jealousy or suspiciousness)" (Começanha et al., 2017, p. 120). Psychological abuse is often hard to define and understand because the victim might not identify the actions of the perpetrator as abuse. Perpetration involving psychological abuse was studied thoroughly by Começanha and others and they found this kind of abuse has the highest rates of both perpetration and victimization (2017). Although their study was significantly more focused on youth in dating relationships, the information can still be prevalent in showing the frequency of this kind of abuse. If it is highly reported in young relationships, most can infer that those rates translate into adult relationships as well.

Risk factors for this type of abuse can be lack of trust from the perpetrator which means if the abuser does not trust the victim, they will most likely isolate and control them to the extreme. The presence of social learning theory where the abuser imitates what they have observed is a risk factor because if the abuser learned to express their anger through violence, the victim has an increased chance of being abused since the perpetrator does not understand any

other coping skills (Social Learning Theory and Family Violence, 2015). The presence of gender roles within the relationship is a risk factor for victims because if the perpetrator holds on to gender stereotypes and the victim does not fulfill them, there could be an increased chance for abuse (Social Learning Theory and Family Violence, 2015). Alcohol and drug use are a common risk factor because when there is any substance that alters the functions of the body, aggression comes out in ways that are heightened by the use of the drugs or alcohol (Juergens & Parisi, 2022). Financial stress or other life stressors without the ability to cope is another common risk factor because the victim might have to depend on the perpetrator for finances and if finances are tight, the abuser might take their frustration out on their partner (Curry & Zavala, 2020).

Cyber Abuse

With times and a society that is constantly changing and evolving, technology has had to do the same. Specifically, computers and phones have been leading the way in innovation and constant upgrades. Social media has taken off recently and is the way people have decided to communicate and connect with others. With this surge in use of technology, one can infer that there has also been a surge in cyber abuse. Cyber abuse can be defined as the "use of communication technologies to attempt, threaten, or complete physical, sexual, or psychological harm against an intimate partner or to monitor, coerce, or control an intimate partner's behavior" (Fissel et al., 2021, p. 6). The abuse can take form in arguing over messaging, monitoring locations and controlling their activities, keeping track of finances, emotional aggression, posting without permission, embarrassing posts about the victim, hacking into accounts, hate websites and general bullying tactics- just on an online forum (Zweig, Dank, Yahner & Lachman, 2013). Abusers were able to control the usage of all technology devices and accounts in the house, compromise (or change/guess passwords) accounts and devices, use spyware or hack their

devices to invade the victim's privacy, harassing and threatening messages or posts, expose private information, and use tracking software to access the victim's location (Freed et al., 2018).

A study conducted by Leisring and Giumetti (2014) found that 93% of college students both perpetrated and experienced minor cyber abuse (e.g., swearing at or insulting partner) and 12-13% perpetrated and experienced severe cyber abuse (e.g., threats, public humiliation) (Wolford-Clevenger et al., 2015). The stalking through social media, monitoring whereabouts and harassment online is a very real form of abuse and can make the victim feel isolated and abused just as much as an experience of physical abuse. A study conducted in 2006 of individuals between 13 and 18 reported that 25% of youth reported having been harassed via cell phone and texting (Zweig et al., 2012). Although this study was adolescents, it is important to note since these young generations are just beginning to use technology. In contrast, adults normally have more access and time using the technology that is available to them.

Just as it is difficult to report and record instances of IPV, the same goes for Cyber Abuse because there is not one specific definition that includes parameters of what is appropriate and inappropriate when it comes to online behaviors and etiquette. In other words, "Without a conceptual consensus, it is impossible to develop a valid and reliable standard measure, impeding the ability to collect comparable estimates of the prevalence and incidence of victimization and perpetration" (Fissel et al., 2021, p. 6). This is important to note because this study collects data on the intensity and severity of abuse and sometimes the victims will not recognize what they are experiencing is abuse. This can affect data collection since the definition of the abuse needs to be clearly stated so the answers received are not skewed by any bias or misunderstanding.

Just like other forms of abuse, cyber abuse has risk factors that increases the possibility of victims experiencing this type of abuse. Possible factors that might influence the abuser can be they are having stress or financial troubles so they take their frustrations out via cyberspaces, they are being physically abused themselves so the abuser takes out their anger on others via cyberspaces, low self-control to deal with strains in life, the victim is the "cause" of the stress and the abuser wants to instill fear (Curry & Zavala, 2020). Risk factors could be gender of the victim-cyber abuse usually occurs in females (Merrill & Hanson, 2016)- victims seeing the abuse as normal, an increased online presence and lack of social support (Curry & Zavala, 2020). Technology and social media can be used for great causes; however, one should keep in mind that the abusers could be exploiting and controlling the victims every move on their accounts. So, these platforms and resources individuals have created, might not even be able to be utilized by the victim due to their isolation and compromised devices and accounts.

Reporting and Resources

Intimate partner violence or domestic violence organizations have used hotlines where victims can call in and report their abuse and get the resources they need. Their websites offer places to go and seek help while maintaining the victim's confidentiality. On websites, "quick exit" buttons exist so if someone walks near the computer the victim is searching on, they can quickly revert their screen to normal before the abuser sees. Hotlines have reverted to text messaging or chat functions to remain discrete when speaking with a victim who might not have the privacy to talk on the phone. Between 1994 and 2010, law enforcement agencies and survey-based victimization data have reported a decline of 64% for IPV in the United States (Kaukinen, 2020). This could be due to the decrease in risk factors such as changes in economic status, decreased dependence on marriage due to increased employment, awareness of IPV and increase of IPV interventions and services (Kaukinen, 2020). According to the National Domestic

Violence Hotline, the organization reports it received 636,968 contacts in 2020 from people affected by domestic violence. In a special COVID-19 report that was published last year, the hotline recorded a 9% increase in contacts received between March 16, 2019, and May 16, 2020 (COVID-19 Special Report, n.d). It is realized by these organizations that the adaptations they make now, despite the time efforts and costs of the implementations, they will pay off in the long run because they are making access to resources and aid more accessible to even the most isolated of victims.

Aside from online resources, many offline resources are offered in most communities across the U.S. Examples of these could be family and friends, support groups, spiritual/religious leaders, the police, emergency shelters, legal assistance (such as a protective order), Child Protective Services and Adult Protective Services (Fraga, 2020). A quick search can find comprehensive lists of resources and agencies for those individuals who are experiencing abuse. Although the online resources victims might contact will usually provide other resources for the individual to seek out and get help. However, the local agencies near the individual will be readily available to assist the individual in any way they can once the contact is initiated. In a study about COVID-19 and violence against women, Viero and Barbra (2021) state that "the social restrictions (of the pandemic) have also limited women's access to different sources of housing: shelters and hotels have reduced their capacity to host and travel restrictions have prevented women's access to safer places" (p. 4).

Reports show that a victim will try and escape or leave the relationship 7 times before they leave for the last time (National Domestic Violence Hotline, 2021). The time that is most lethal for the victims of IPV is when they try to leave their abuser. Many people who are not involved in an abusive relationship, wrestle with the question of "Well, why don't they (the

victim) just leave or report the abuse?" Many victims do not choose to report their abuse because they depend on the perpetrator for financial stability, cultural norms, fear of losing custody if children are involved, they do not recognize the abuse as a crime, they do not want to get their partner in trouble or ruin their reputation or they feel the police will not or cannot do anything (National Domestic Violence Hotline, n.d.).

COVID-19 Effects on IPV

With preliminary reports already being released, we can begin to observe how COVID-19 impacted and changed IPV. The lockdowns were sequestering the victims and the abusers for days on end with nowhere to go. With the isolation and lack of privacy victims were facing, they did not have many ways to locate resources or help. The pandemic brought on loss of employment which could bring financial strains on couples, the isolation and lack of social supports, limited access to resources or being turned away at safe houses, increased care or schooling of children and increased consumption of alcohol or drugs all brought unique stressors and circumstances into the lives of the couples (Kaukinen, 2020). We cannot deny that the virus and the lockdowns increased and added tensions at home and within relationships which led to the possible increase of violent outbursts and suffering victims of IPV.

Natural Disasters effects on IPV

Natural disasters already have a major impact on IPV with reports from the U.S. and New Zealand that after earthquakes, hurricanes and floods. Specifically, the Missouri Flood and Hurricane Katrina, there was a 400% increase in demand for women's shelters, a four-fold increase in IPV and a 98% increase in victimizations against women (Parkinson, 2017). After Hurricane Katrine, the New Orleans Police Department compared their pre- and post-Katrina data and found an increase in calls for service, arrest for IPV offenses and severity, post-Katrina (Kaukinen, 2020). Natural disasters wreak havoc in many different areas of life for people all around the world. "The natural disaster context may compound preexisting risk factors for domestic violence (IPV) by increasing feelings of helplessness and giving prominence to feelings of loss of control over the well-being and protection of one's family" (Gearhart et al., 2018, p. 88). If we begin to compare the effects of previous natural disasters, we can only begin to see the similarities of the pandemic and IPV- and the pandemic has not even ended yet.

COVID-19 and effects on resources and reporting

With the pandemic, organizations previously committed to efforts of fighting violence have been forced to re-imagine and re-invent their strategies for helping victims. Their adaptations to the current times are crucial regarding the lives that are potentially impacted by their actions, or lack of action. Digital interventions such as smartphone apps like, myPlan, which is a "program that helps victims make informed decisions about their safety and well-being" (Emezue, 2020, para. 7) were still used as a tool throughout the pandemic. The goal of the app is to connect survivors, helps victims create a safety-plan, educate and estimate priorities for safety based solely on the survivor's choices. This app is a great example of a way to help victims of IPV gain access to helpful resources at the click of a button and the convenience of opening up their smartphone. Other apps that are similar to the myPlan app are I-DECIDE and iSafe. Electronic means of protection orders, silent and short phone calls by victims trapped in their homes with their abuser and skyrocketing percentages of increased traffic to IPV/DV websites were "normal" events that organizations were seeing throughout the pandemic.

With the spread of COVID-19 and the lockdowns, resources including the safe houses had to adjust to meet the needs of victims. In a story reported by NBC and written by Adiel Kaplan and Wilson Wong (2020), the reports stated that organizations that were safe houses and were limited in capacity, teamed up with hotels to give victims a place to stay for extended periods of time to escape their abuser without being found. From the same article, the following quote is presented: "Abusers thrive off isolation. With the pandemic, it is a perfect storm for domestic violence," said Kristin Shrimplin, president of Women Helping Women, which provides domestic violence services in greater Cincinnati. "Survivors are telling us that it is not safe for them to talk" (2020, para. 15). With the pandemic, the functions available through the

hotlines and IPV/DV services have evolved to support increased traffic to websites and use of the chat functions.

COVID-19 and effects on risk factors

A risk factor that is specific and related to the COVID-19 pandemic is the factor that no one could leave the house. The close proximity of abuser and victim created an added stressor and increased the likelihood for the abuse since the victim was not able to leave (Kaukinen, 2020). With COVID-19, loss of employment was a major stressor for many families. However, this was an increased stressor for those in an abusive relationship because not only does this bring stress but also financial struggles. With the introduction of stay-at-home mandates, the abuse could have taken the form of cyber if the abuser and victim were not under the same roof. It is important to understand the role of cyber abuse because this is a form that victims could have been introduced to and been victimized by during the lockdowns. If the victim was not in the same home as the abuser, the abuser could threaten, isolate and abuse using technology.

Pre-COVID-19, it was a known fact that there was a dark figure of crime (non-reporting and underrepresentation of crimes in statistics/reports) surrounding IPV and DV. With the pandemic present, it will be difficult to fully collect the data on the effects of COVID-19 and IPV since some victims are not able to escape and report. However, preliminary reports have suggested that "after the first month of stay-at-home orders, nine major metropolitan cities reported approximately between 20% and 30% increases in DV service calls" (Kofman & Garfin, 2020, p. 199). With COVID-19 present, there is a potential to an even wider gap between the reported numbers and the actual incidences of abuse.

Unfortunately, knowing the prevalence rates of IPV will never be 100% accurate because not everyone chooses to report their abuse. This is especially true when the pandemic arose because people were stuck with their abusers, often without privacy and lacked the access to

resources. So, how many incidents of IPV went unreported, undetected and unnoticed by police and agencies working towards eliminating violence in our society? Truth be told, we may never know. With COVID-19, the form of Cyber Abuse contributed to the exploitation and the suffering of victims of IPV. If the couple was not under the same roof quarantining together, you might believe that the victims would be safe. Unfortunately, the presence of technology has aided in the tactics of abuse through phone or social media sites or by tracking/stalking (Campbell et al., 2017). None of these forms of abuse are new to law enforcement or people studying IPV. The concept that needs to be studied now is how COVID-19 changed and impacted the abuse faced by the victims.

Current Study

This study builds upon what is already known about COVID-19's impact on IPV in three important ways. First, the study adds data to the already on-going discussion about how the lockdowns impacted rates of IPV. The quantitative data provides more insight on how frequently the victim experienced abuse, what types, as well as differentiating periods of abuse between pre-COVID-19 lockdowns, during COVID-19 lockdowns and after COVID-19 lockdowns. It is important to examine abuse during these time frames because it provides the opportunity to observe any changes in the frequency and the mode of abuse.

Second, the qualitative data gathered from the survey provides insight to the perceived severity and intensity of the abuse experienced pre-COVID-19 lockdowns, during-COVID-19 lockdowns and after COVID-19 lockdowns. This data helped compare how the abuse was impacted by the lockdowns due to COVID-19 in a more experiential sense rather than numerical. Qualitative data is important to include since an individual's perception of an experience can be different when compared to someone else's experience.

Third, this study provides more insight through the data collected as to what resources people used during lockdowns and how the presence of COVID-19 changed how they sought those resources. This is important because while people were locked down with their abuser, they might have had limited time and ways to access the resources they desperately needed. While we could not see everything that was going on within other people's homes, their self-reported data on obtaining resources can help amend certain programs and resource agencies moving forward.

As such, the research questions and associated hypotheses guiding this study are:

Research question 1: How did lockdowns and stay-at-home mandates for COVID-19 affect the mode and frequency of abuse individuals experienced (i.e., emotional abuse, physical abuse, cyber-abuse)?

Hypothesis 1: I hypothesized that the lockdowns and stay-at-home mandates would result in an increase in physical and verbal abuse. The close proximity would increase tension between the partners and this diminished privacy would case the mode and frequency of abuse to change. I hypothesized that rates of abuse, overall, would drastically increase.

Research question 2: How did the perceived severity and intensity of the abuse change throughout the three timeframes?

Hypothesis 2: I hypothesized that the perceived intensity and severity of the experienced abuse would increase because of higher stress and tension associated with being quarantined with someone 24/7.

Research Question 3: What kind of resources or services did the victims of abuse seek out, if any?

Hypothesis 3: I hypothesized that I would find challenges with reporting the abuse due to the extreme focus on slowing the curve and factors relating to new challenges from the infiltration of COVID-19. I believed there would be an increased resource use during the three-time frames as hotlines and websites were accessible to individuals if they had a phone or computer within their home.

Methodology

To answer the research questions posed above, I designed an online survey with a combination of close-ended and open-ended questions resulting in a combination of quantitative and qualitative data. Eligibility for participating in the survey was restricted to any adult 18 years of age or older residing in the U.S. and being in the same intimate partner relationship through all three timeframes (pre-COVID-19 lockdowns, during COVID-19 lockdowns and after COVID-19 lockdowns). Data were collected via Amazon's Mechanical Turk. Respondents were paid \$2.50 for successful completion of the survey. The final sample size included 418 participants.

Measures

To capture cyber abuse, respondents were asked to indicate if they experienced any of 33 cyber-based behaviors (e.g., kept track of your finances; tracked your internet activity; etc.) within the context of their intimate partner relationship without their permission. Respondents were able to indicate if they experienced any of the behaviors during the three timeframes of interest. If they experienced one or more of the cyber-based behaviors within a timeframe, they were coded 1 (represents experiencing this type of victimization) and if they had not experienced any of the behaviors throughout the timeframes listed, they were coded 0 (represents did not experience this type of victimization).

To capture physical abuse, respondents were asked to indicate if they had experienced any of 5 physical-based behaviors (e.g., My partner punched or kicked or beat-me-up, I had a sprain, bruise, or small cut, or felt pain the next day because of a fight with my partner etc.) within the context of their intimate partner relationship. Respondents were able to indicate if they had experienced any of the behaviors in any of the three timeframes listed. If they experienced one or more of the physical-based behaviors, within a time frame, they were coded 1 (represents

experiencing this type of victimization) and if they had not experienced any of the physical-based behaviors in any of the time frames, they were coded 0 (represents did not experience this type of victimization).

To capture verbal abuse, respondents were asked to indicate if they had experienced any of 3 verbal-based behaviors (e.g., My partner insulted or swore or shouted or yelled at me, my partner showed respect or showed that he or she cared about my feeling about an issue we disagreed on etc.) within the context of their intimate partner relationship. Respondents were able to indicate if they had experienced any of the behaviors in any of the three timeframes listed. If they experienced one or more of the verbal-based behaviors, within a time frame, they were coded 1 (represents experiencing this type of victimization) and if they had not experienced any of the verbal-based behaviors in any of the time frames, they were coded 0 (represents did not experience this type of victimization).

Finally, to capture sexual abuse, respondents were asked to indicate if they had experienced any of 2 sexual-based behaviors (e.g., My partner used force, like hitting, holding down, or using a weapon to make me have sex, within the context of their intimate partner relationship. Respondents were able to indicate if they had experienced any of the behaviors in any of the three timeframes listed. If they experienced one or more of the sexual-based behaviors, within a timeframe, they were coded 1 (represents experiencing this type of victimization) and if they had not experienced any of the sexual-based behaviors in any of the time frames, they were coded 0 (represents did not experience this type of victimization).

To capture the severity and intensity of the abuse experienced within the respondent's intimate partner relationship, a Likert scale was used so the respondent could self-report how intense and severe their partner's behaviors were. The respondent was able to drag a slider to a

number 1 through 4 ranging from not at all intense/severe to extremely intense/severe in order to report the perceived intensity and severity. These numbers were used in the statistical analysis to generate a mean for the severity and intensity across the timeframes.

To capture the resource usage across the three timeframes, respondents were asked to indicate if they had used any of the 12 listed resources (e.g., Police, Hotlines, Emergency Housing etc.). Respondents were able to indicate if they had used any or none of the resources in the three timeframes listed. These numbers were used in the statistical analysis to generate percentages in which resources were used across the three timeframes.

Analytic Strategy

After gathering the responses from my survey, I was able to analyze them. I analyzed my data set through SPSS where I ran analytics through frequencies and descriptive statistics. I ran frequencies to get percentages on the four types of abuse that were asked about in the survey. With the same four categories of abuse, I ran descriptive statistics on the data set to obtain means for each of the types of abuse in their respective time frame. I used the same descriptive statistical analysis to analyze the perceived intensity and severity responses in averages. The resources self-reported data was analyzed though a frequency table to get percentages on how respondents used the resources across the respective time frames.

Results

Demographics

The youngest respondents age was 19 and the oldest was 78 with a mode of 37. The average age of the respondents was 22.18 years old. Out of the 418 respondents, 64.1% (n=268) identified as women and 34.9% (n=146) identified as men. The breakdown of the respondent's race is as follows: 81.8% (n=342) White, 8.9% (n=37) Black, 7.9% (n=33) Asian, 5.7% (n=24) Hispanic/Latino/a, 0.7% (n=3) American Indian, 0.2% (n=1) Native Hawaiian or Other Pacific Islander and 0.2% (n=1) another race. From the responses in the survey, 85.4% (n=357) of the respondent population identified as heterosexual, 9.8% (n=41) identified as bisexual and 3.1% (n=13) identified as gay/lesbian.

Regarding the respondents intimate partner they were basing their survey responses on, the following demographics were recorded. The average age of their partners was 24.21 years old however, the mode was 40. Of the responses about the intimate partners, 37.3% (n=156) were reported to identify as women and 61.2% (n=256) were reported to identify as men. Their race breakdown is as follows: 79.9% (n=334) White, 8.9% (n=37) Black, 6.7% (n=28) Asian, 6.7% (n=28) Hispanic/Latino/a, 1.9% (n=8) Native American, 0.7% (n=3) Native Hawaiian or Other Pacific Islander and 1.2% (n=5) another race.

While not directly related to my research questions, I was also interested in examining my sample's employment status, income, their relationship status, and cohabitation status. Table 1 compares respondents reported employment status in the three timeframes. Approximately three quarters (n=309) of my sample was employed before the lockdowns began and that number decreased to a little over half once the lockdowns were enacted. After lockdowns, 58.4% (n=244) of respondents reported they worked full time again. About a quarter of the

representative sample was retired before lockdowns but, once lockdowns began, 12.9% (n=54) of the sample reported to be retired.

Table 1. Respondent Employment Status (%)

	Before Lockdown	During Lockdown	After Lockdown
Full Time	73.9	52.4	58.4
Part Time	32.8	24.2	22.5
Unemployed-	29.2	20.6	20.1
looking for work			
Unemployed- not	35.2	22.5	22.0
looking for work			
Retired	23.9	12.9	20.1
Furloughed	24.4	18.4	15.1

Income

Respondents were asked about how their income changed in comparison to the lockdown dates. From a comparison of during the lockdowns to before the lockdowns, 46.7% (n=195) of respondents said their income stayed the same and 42.3% (n=177) of respondents reported their income stayed the same when compared to during lockdowns to after lockdowns. On the other hand, 22.7% (n=95) of respondents reported in this section that their income across these time frames increased only a little.

Relationship Findings

Table 2 displays how the respondents categorized their relationship throughout the three timeframes. Respondents who categorized their relationship as casual before the lockdowns was at 31.6% (n=132) but once lockdowns began, that number dramatically decreased to 6.9% (n=29). Of those respondents who reported their relationship was exclusive before lockdowns (48.8%, n=204), they reported at 38.5% (n=161) for during lockdowns and 34.4.% (n=144) after lockdowns. The respondents who categorized their relationship into the status of "married" sat at

59.3% (n=248) before lockdowns, dipped to 50.7% (n=212) during lockdowns and climbed back up to 55.0% (n=230) after lockdowns.

Table 2. Relationship Status (%)

	Before Lockdowns	During Lockdowns	After Lockdowns
Casual/Hook Up	31.6	6.9	6.5
Exclusively Dating	48.8	38.5	34.4
Married	59.3	50.7	55.0

Children

When responding to questions regarding children, 45% (n=188) of respondents have children with their partner, whereas 44% (n=184) do not have children with their partner. Out of the 45% who reported having children, 42.3% (n=177) of them lived with the respondent prior to the COVID-19 lockdowns. Only 37.1% (n=155) of the children lived with the respondent during the lockdowns and 39.5% (n=165) lived with the respondent after the lockdowns ceased.

Table 3 shows respondents reported cohabitation status with their partner throughout the three timeframes. Approximately three-quarters of respondents indicated that they were cohabitating with their partner during each of the timeframes.

Table 3. Cohabitation with Partner (%)

	Before Lockdowns	During Lockdowns	After Lockdowns
Yes	76.1	74.6	75.1
No	25.8	13.9	14.4

Table 4 reports the communication changes observed by the respondent. Regarding communication with their partner, 81.6% (n=341) of respondents reported that they did not consider their relationship to be "long distance" before lockdowns and 67.9% (n=284) said their communication with their partner did not change during the COVID-19 lockdowns. Of the

respondents who reported a change in their communication style with their partner, the following was observed: Before lockdowns, nearly 75% of respondents indicated that they primarily used face to face communication with their intimate partner. During lockdowns, this increased to nearly 81% and dipped to 79% after lockdowns ended. Roughly, one-quarter of respondents communicated through technology before lockdowns, and this decreased to approximately 20% during lockdowns. After lockdowns, respondents reported a slight increase to 21%.

Table 4. Communication Changes (%)

	Before Lockdowns	During Lockdowns	After Lockdowns
Face to Face	74.8	80.6	78.9
communication			
Communication	24.8	19.2	21.0
through technology			
Other	0.45	0.21	0.11

Intimate Partner Abuse Findings

Table 5 compares reported possible experiences with cyber abuse within the three timeframes. Approximately 40% (n=161) of respondents experienced one type of the cyber-based behaviors before the lockdowns and about 35% reported experiencing the behavior during and after lockdowns.

Table 5. Cyber Abuse Victimization (%)

Before Lockdowns	Did not experience	61.5 (n=257)
	Experienced at least one type	38.5 (n=161)
During Lockdowns	Did not experience	65.1 (n=272)
	Experienced at least one type	34.9 (n=146)
After Lockdowns	Did not experience	65.3 (n=273)
	Experienced at least one type	34.7 (n=145)

Table 6 compares reported possible experiences with physical abuse within the three timeframes. Approximately one-tenth of respondents experienced one type of the physical-based behaviors before the lockdowns and about 8% reported experiencing the behavior during and after lockdowns.

Table 6. Physical Abuse Victimization (%)

Before Lockdowns	Did not experience	89 (n=372)
	Experienced at least one type	11 (n=46)
During Lockdowns	Did not experience	91.6 (n=383)
	Experienced at least one type	8.4 (n=35)
After Lockdowns	Did not experience	91.9 (n=384)
	Experienced at least one type	8.1 (n=34)

Table 7 compares reported possible experiences with verbal abuse within the three timeframes. Approximately a third of respondents experienced one type of the verbal-based behaviors before the lockdowns and about 35% (n=148) reported experiencing the behavior during and 30% (n=126) after lockdowns.

Table 7. Verbal Abuse Victimization (%)

Before Lockdowns	Did not experience	67.5 (n=282)
	Experienced at least one type	32.5 (n=136)
During Lockdowns	Did not experience	64.6 (n=270)
	Experienced at least one type	35.4 (n=148)
After Lockdowns	Did not experience	69.9 (n=292)
	Experienced at least one type	30.1 (n=126)

Table 8 compares reported possible experiences with sexual abuse within the three timeframes. Approximately 6% (n=24) of respondents experienced on type of the sexual-based behaviors before the lockdowns and about 7% (n=27) reported experiencing the behavior during and 5% (n=24) after lockdowns.

Table 8. Sexual Abuse Victimization (%)

Before Lockdowns	Did not experience	94.3 (n=394)
	Experienced at least one type	5.7 (n=24)
During Lockdowns	Did not experience	93.5 (n=391)
	Experienced at least one type	6.5 (n=27)
After Lockdowns	Did not experience	94.3 (n=394)
	Experienced at least one type	5.4 (n=24)

Table 9 able depicts trends about specific abusive behaviors that could have been experienced by respondents across the three timeframes. Of the three physical-based behaviors that are measured in this table, we can see a decrease from before lockdowns to during lockdowns. However, the physical behaviors of push, slap, shove, punch, kick and beat, increased from during lockdowns and after lockdowns by approximately 0.5%. The verbal abuse of swearing, shouting and yelling saw an increase of almost 3.0% from before to during lockdowns. The specific sexual-abuse behavior question about forcing sex saw an increase of 1.0% across the timeframe of before lockdowns to during lockdowns and decreased after lockdowns by half a percent.

Table 9. Behaviorally Specific Trends (%)

	Before Lockdowns	During Lockdowns	After Lockdowns
Partner	32.5	35.4	30.1
swore/shouted/yelled at			
me			
I had pain after a fight	5.3	3.8	3.8
with my partner			
My partner	5.7	5.0	5.5
pushed/slapped/shoved			
me			
My partner	2.2	1.9	2.4
punched/kicked/beat me			
My partner insisted on	5.0	6.0	5.5
sex without a condom or			
forced me to have sex			

Table 10 compiles five of the highest scoring percentages of specific cyber abuse behaviors that could have been experienced by respondents across the three timeframes. The cyber-based behavior increased through all three timeframes by starting at 15.8% (n=66) of respondents experiencing finance tracking and ending at 17.0% (n=71) of respondents experiencing this behavior after lockdowns. Checking private messages and logging into accounts decreased across all three timeframes. Having their partner intentionally ignore them was reported by 15.8% (n=66) of respondents before lockdown, decreased to 9.8% (n=41) during lockdowns and climbed back to 10.8% (n=45) after lockdowns. Respondents who had their partner make them feel stupid or incapable of understanding technology began before lockdowns with only 5.3% (n=22) of respondents experiencing this behavior but then increased by about a percent during lockdowns. However, this behavior trended back down to 4.8% (n=20) after lockdowns.

Table 10. Cyber Specific Behaviors (%)

	Before Lockdowns	During Lockdowns	After Lockdowns
My partner tracked	15.8	16.7	17.0
my finances			
My partner checked	13.2	11.2	9.6
my private or direct			
messages			
My partner logged	8.4	7.4	5.3
into my online			
accounts			
My partner	15.8	9.8	10.8
intentionally ignored			
me through			
technology			
My partner made me	5.3	6.2	4.8
feel stupid and			
incapable of			
understanding or			
learning to use			
technology.			

Table 11 shows the means or averages of each abuse type throughout the three timeframes. Cyber and physical abuse decreased across the three timeframes. However, 0.33 types of verbal abuse behaviors were experienced and reported before lockdowns which then increase to 0.35 during lockdowns and back down to 0.30 after lockdowns. Sexual abuse also increased from before to during lockdowns with 0.06 types of sexual abuse behaviors being reported experienced before the lockdowns by respondents. Then during and after lockdowns, respondents reported an average of 0.07 types of behaviors experienced.

Table 11. Intimate Partner Abuse Findings (Mean)

	Before Lockdown	During lockdown	After Lockdown
Cyber abuse	1.25	1.13	1.02
Physical abuse	0.22	0.17	0.17
Verbal abuse	0.33	0.35	0.30
Sexual abuse	0.06	0.07	0.07

Table 12 shows the averages or means of the respondents self-reported perceived intensity and severity of the abuse that was experienced throughout the three timeframes. The mean perceived intensity of the abuse experienced by respondents was reported at 1.54 before lockdowns, increased to 1.59 during lockdowns and back down to 1.52 after lockdowns. This tells us that respondents felt the abuse they experienced increased slightly in intensity across the timeframe of before lockdowns to during lockdowns. Although slighter for the perceived severity, before lockdown severity generated a mean of 1.27 which slightly increased during lockdowns to 1.32 and stayed the same after lockdowns. This tells us that respondents felt the abuse they experienced increased slightly in severity across the timeframe of before lockdowns to during lockdowns.

Table 12. Perceived Intensity and Severity (Mean)

	Before Lockdown	During Lockdown	After Lockdown
Mean Intensity	1.54	1.59	1.52
Mean Severity	1.27	1.32	1.32

Table 13 compiles all the resources asked about within the survey and how much the respondents used each across the three timeframes. Across the table, there is a consistent decrease in resource usage across the three timeframes. Emergency housing and legal assistance were the only resources where their percentage of usage increased slightly from during lockdowns to after lockdowns. Emergency housing increased from 0.7% (n=3) during lockdowns to 1.2% (n=5) after lockdowns. Legal assistance increased from 0.7% (n=3) during lockdowns to 1.4% (n=6) after lockdowns. This increase could be explained by the lessening of COVID-19 restrictions after lockdowns which allowed capacity restrictions in emergency shelters to be lifted as well as legal offices being re-opened to the public again.

Table 13. Resource Use (%)

	Before Lockdowns	During Lockdowns	After Lockdowns
Friends/Family	18.7	14.4	12.4
Religious/Spiritual	4.5	2.2	1.9
Leaders			
Emergency Housing	2.9	0.7	1.2
Hotlines	3.6	1.2	0.7
Websites/Online	10.3	6.9	6.9
Police	4.3	1.4	1.4
Domestic Violence	3.8	1.0	1.0
Services			
Protective Order	3.1	0.7	0.7
Legal Assistance	2.6	0.7	1.4
Child Protective	2.4	0.7	0.5
Services			
Adult Protective	2.4	0.7	0.5
Services			
Other	3.3	1.4	1.7
N/A	68.7	69.4	70.6

Qualitative Data

Below are the results from the open-ended, qualitative response questions from the survey that was disseminated. In each of the five questions, overall themes were identified in order to analyze the data.

Reported Changes in Communication

Many respondents reported that their communication style changed from a mix of in person conversations and texting to mostly in person conversations. The respondents whose relationships turned into long distance (due to not quarantining together) noted an opposite change from more technology use through zoom or facetime calls.

Reported Changes in Intensity

Many respondents noted there was an increased irritation and more arguments between them and their partners. Others listed no change in perceived intensity stating that their partner was not intense other than the occasional stressful situation that made them irritated.

Reported Changes in Severity

Respondents reported that there were more arguments that brought higher tensions within their relationship during the lockdowns. So, their perceived severity of the nature of the relationship increased. A common response was their partner was meaner than usual or the respondent felt like their partner's stress was being projected onto them, so it caused the increase in severity.

Reported Resource Usage

Many respondents noted they did not need resources, or they used "informal" methods such as friends, family or religious/spiritual leaders. A major theme of this question was that the arguments and stress within the relationship was "normal couple fights."

Reported Resource Adequacy

Respondents who used resources reported that law enforcement was not helpful, and their family and friends assisted them the best because it was a safe space, and they were provided unbiased advice. Emergency shelters were used as well as online resources, but many respondents only used the online resources for information or insight.

Discussion

The COVID-19 pandemic brought unprecedented times of lockdowns for months. IPV was affected by these lockdowns due to the forms of abuse adapting, the severity and intensity changing due to the nature of close proximity between the couple and seeking resources was met with challenges resulting from the pandemic as well as isolation with the abuser.

Research Question 1

Through the data that were collected via the survey, I was able to observe how the mode or form of abuse changed due to the lockdowns. My original hypothesis included that that the lockdowns and stay-at-home mandates would result in an increase in physical and verbal abuse. The close proximity would increase tension between the partners and this diminished privacy would case the mode and frequency of abuse to change. I hypothesized that rates of abuse would drastically increase. According to the data presented in Table 4, verbal and sexual abuse were the only forms of abuse that increased during lockdowns. There was an observed decrease in cyber and physical abuse during the lockdowns.

According to the data presented in Table 4, the mode of communication had an increase in face-to-face communication with before the lockdowns 74.8% of respondents using this as their main communication style whereas, during the lockdowns, this percentage increased to 80.6% using face to face as their primary mode of communication. In the technology method of communication, we saw a decrease: 24.8% of respondents used this as their primary mode of communication before the lockdowns and then it shrunk to 19.2%.

In the qualitative responses, I saw many respondents citing this change in communication to the fact that they were at home with their partner or moved in with their partner during quarantine. "I had to shut the door of my home office just to get some privacy" wrote a respondent of the survey. The nature of relationships shifted as couples were now

spending 24/7 together. As a result, their mode of communication changed due to their proximity. Many respondents still mentioned facetime or zoom for communication if their partner was in a different place or on a different shift schedule than them since essential workers still were employed during the pandemic. While the existing literature does not explore specific changes in communication between couples, my current findings align with what has been found. For example, in a study about calls for service during COVID-19, Leslie and Wilson (2020) reported that 35% of jobs shifted to online and remote positions so the changing life circumstances resulting from the infiltration of COVID-19 is consistent with my findings explaining the change in communication.

The frequency and mode of abuse can be observed in Tables 5 through 8. The increase in mode of abuse was observed in the form of verbal abuse which was reported by 32.5% (n=136) of respondents before the lockdowns but increased to 35.4% (n=148) during the lockdowns. Also, sexual abuse was reported by 5.7% (n=24) of respondents before the lockdowns and then increased to 6.5% (n=27) during lockdowns.

The qualitative responses give support to the increases seen in verbal and sexual abuse during the lockdowns. Many people cited increased stress as the reason why their intimate partner and the respondent would get into heated and tense arguments. The increase in arguing was attributed, by many respondents, to their close proximity, their lives merging and having to be with their partner 24/7. Although existing literature does not explore individual types of IPV, my current findings are supportive of existing literature that similarly noted close proximity would create an added stressor in relationships, especially abusive ones (Kaukinen, 2020).

Although many respondents did not believe their yelling and screaming partner was abusive, they still noted in the latter part of the survey an increase in verbal abuse. Some

respondents even mentioned it was an isolated incident or claimed it only happened on occasion and their partner is generally very calm and respectful. The major theme seen within these responses was that people attributed their partners behavior to the added stress that was being caused by the pandemic and lockdowns.

An interesting finding can be observed through Table 9. Through some behavior specific questions, we got an inside view as to what types of behaviors the respondents endured throughout the lockdowns. An interesting thing to note is that the physical behaviors seem to decrease from the before to during lockdown time frame but then they spike again during the after-lockdown period. "My partner pushed/slapped/shoved me" had a 5.7% (n=24) response before lockdowns, decreased during lockdowns to 5.0% (n=21) then increased after lockdowns to 5.5% (n=23). Although a small increase, why did the abusive partner decide to stop physical abuse during lockdowns and pick it back up after the lockdowns? "My partner punched/kicked/beat me" starts with 2.2% (n=9) before lockdowns, decreased during lockdowns to 1.9% (n=8) and increased in the after lockdown to 2.4% (n=10). Could the presence of children in the home during lockdowns deter the abuser to stop physically abusing their partner? Or did the respondent not feel comfortable with self-reporting on the survey?

Research Question 2

Someone in an intimate partner violence relationship might not always register their experiences as abuse. The survey that was created was strategically crafted to ensure the question's wording would allow the respondent to answer honestly about their experiences within their relationship. An important topic that was covered within the survey was the respondents perceived change in intensity and severity of the abuse throughout the lockdowns. In the qualitative responses, many individuals wrote that the intensity and severity did not change throughout the three-time frames listed. Whereas others noted that the increase in intensity and

severity was only observed in how often and intense they were fighting with each other. "Compared to before lockdowns, the intensity felt different because I was exposed to it more often due to being with them 24/7" a respondent wrote. Only a select few responses included an escalation to physical abuse. "They destroyed my phone by throwing it" and "he was meaner than usual" were noted by other respondents who saw the intensity of the behavior change during lockdowns.

As noted above as well, the intensity was attributed to increased irritation and fighting with their partner due to close proximity. Although current literature does not explore perceived intensity and severity of abuse, my findings are concurrent with previous literature that discuss risk factors of abuse being heightened through the lockdowns. A quote from an article by Kaplan and Wong, says: "Abusers thrive off isolation. With the pandemic, it is a perfect storm for domestic violence," (2020). My findings support this by showing how the abuse experienced in lockdown were higher in intensity and severity because of a factor like isolation. The 24/7 quarantine with an abuser allowed for limited privacy and limited access to escape routes because of the hidden lives we had to lead while quarantining from the virus.

Table 12 depicts the perceived change in intensity through averages from the data. Before lockdowns, respondents perceived the intensity (on a scale of 1-4 ranging from not at all intense to extremely intense) of their partner as 1.54 (overall mean) and during the lockdowns, this intensity increased to 1.59 (overall mean). Although this is a slight increase, it is to be noted that perception of the abuse was being justified due to the added stress of the pandemic. This finding would be consistent with existing literature because with the pandemic, there were more risk factors, such as depression, alcohol and drug abuse, which could escalate the intensity and severity (Schumacher et al., 2001).

The perceived change in severity was similar to perceived intensity as Table 12 notes. Before lockdowns, severity was placed (on the same scale) at 1.27 and during lockdowns this number increased to 1.32. The qualitative responses about severity mirrored the intensity responses but gave more insight on why the severity was being justified. Many respondents noted their partner was more moody and meaner than usual during the lockdowns and they felt like their partner was projecting their stress onto them (the respondent) during their fights.

Research Question 3

Perhaps the most intriguing observation occurred with the data relating to resource usage during the lockdowns. As Table 13 depicts, through all the listed resources that were available to the respondents, their usage of them decreased from before lockdowns to during lockdowns and even further- after lockdowns.

Reflecting on prior research from Viero and Barbra (2021) as well as my initial hypothesis, my finding is not that surprising since it has been reported that emergency shelters had to send people away due to the limited capacity they had to enforce due to the virus. The hotlines that are available 24/7-over the phone and online- had a decrease in usage most likely because the close proximity to their partner reduced any privacy for the other partner. According to the existing literature, the Domestic Violence hotline recorded a 9% increase in contacts received between March 16, 2019, and May 16, 2020 (COVID-19 Special Report, n.d). Although this does not support my findings, it can be easily explained because although the hotline had an increase, I was just looking at raw numbers in the collected data rather than total percentages relating to resources sought. This means that reported percentages and whole numbers can differ based on how many individuals were seeking the resources. An example would be if 10 people were victims pre-COVID-19 and 4 people reached out to DV agencies, that is 40% of victims seeking services. If during-COVID-19 lockdowns, 100 people were victims and 30 people

reached out to DV agencies, that is an increase in calls, but only reflects 30% of victims seeking services. My raw numbers that were collected during this study tell a different story when compared to the hotline reports that were published after the lockdowns were lifted.

In the qualitative responses, people noted that they used their friends and family as their main resource because they provided a safe space to vent and gave unbiased advice. Although this resource was reported as used most often, a decrease was still observed during the lockdowns. I hypothesize that this could have been because their partner was isolating them from talking with people outside their home or because they felt like they were not experiencing any abuse. One respondent wrote "I didn't want anyone else to get involved" and "I just looked on reddit or YouTube for advice." Other qualitative responses who chose not to use resources stated, "they did not feel like it was serious enough to report", "felt like they could handle it on their own" and claimed, "they were just normal couple fights". As hard as it is to read and observe numerically, this is the reality of many intimate partner abuse victims. They do not believe their experiences warrant a call for help or that what they are going through is abuse because their partner has not physically abused them.

Strengths and Limitations

The strengths of this study help to expand the publics knowledge of what occurred behind some of their neighbors' doors when everyone was stuck at home due to COVID-19. This study also offers a new dimension found within the qualitative responses from the survey respondents. A first-hand account and perception of the behaviors experienced in their homes during lockdown brings new insight as to what people endured. My study contributes self-reported data which is unique when compared to other studies since they tend to use police data.

My study explores resource usage and whether individuals chose to seek help or not.

Along with the quantitative data collected on this, the qualitative data provided more insight as to why the individual chose to seek help or not. The reasonings behind these decisions were able to be elaborated on by the respondents based on their experiences with resources.

Finally, the survey created for this study was beneficial in getting accurate data due to the wording used for the questions. The strategic wording that was used in the questions aided in respondents being able to accurately identify what kinds of abusive behavior they experienced throughout the three timeframes. For example, "did your partner ever control your finances" is more specific than "did you experience cyber abuse."

The limitations of this study are similar to other studies about IPV with the prevalence of IPV not being known to its full extent. The IPV that goes unreported affects the rates of IPV since it is not accounted for, and we will never know if the event occurred or not unless it is documented formally and is accounted for. Another limitation is that this study is cross-sectional. I recommend that additional research be conducted longitudinally and across a longer period since COVID-19 is still present in the world today. A longitudinal study would have allowed us to gather more data from a larger sample which could have provided more drastic results in the abuse experienced.

Another limitation pertaining to my survey is that some of the respondents might not categorize their experiences as abuse, which can impact the results associated with perceived intensity and severity. Finally, as I noted above, the timeline I used for the survey was based on Florida's lockdown parameters. Using a news article from Wall Street Journal related to states' reopening plans as well as lockdown dates (Gershman, 2020) and an article from AARP showing a comprehensive history of all the states "Coronavirus-related restrictions" (Bunis & Rough, 2022), it was revealed that most states went into lockdown at a similar time as well as reopened around the same time. While not all states have the exact same dates for closing and reopening, they closed and reopened roughly around the same time frames. Although it should not make a significant difference in the overarching goals of this study, it can be seen as a limitation because I could not use the exact lockdown dates for all 50 states.

Conclusion

With the lockdowns behind us, it is important to start generating conversations around how we can do better as individuals, societies, and globally to support people experiencing abuse. Although the data I collected represents a small number of individuals who may be experiencing abuse in the United States, we can use the findings to move forward as a society to make the needed changes to better support our neighbors, loved ones and strangers who need support. During lockdowns the frequency of verbal and sexual abuse increased, and although only slight, the perceived intensity and severity of the abuse increased as well. Resources were available, but their usage among individuals experiencing abuse declined throughout the pandemic. This research study is only a small addition among the other studies that are already published. However, a commonality shared with all the work in this field is that they serve an important purpose- to generate conversation and promote change, so no one must suffer alone.

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If you have experienced or are currently experiencing violence or are feeling distressed, you may feel a need or desire to process some of your own personal experiences. Support resources you may wish to utilize or share with others are listed below.

General Crisis

Crisis Text Line: Text SUPPORT or HELLO to 741-741

https://www.crisistextline.org

The Crisis Text Line extends to everyone. Their goal "...is helping people move from a hot moment to a cool calm, guiding you to create a plan to stay safe and healthy. YOU = our priority." 24/7 help is available.

Violence in the home

If you or a loved one need assistance call the National Domestic Violence Hotline at 1–800–799–7233 (TTY 1–800–787–3224), use the chat function on their website, or text LOVEIS to 22522.

LGBT and Queer Resources

GLBT National Hotline 1-888-843-4564 http://www.glbthotline.org/ GLBT National Health Center Online Peer-Support Chat GLBT National Resource Database www.glbtnearme.org

Counseling/therapy

1-800-THERAPIST (to find a local therapist) 800-843-7274

Mental Health America

1-800-273-8255 Text 741741 at the Crisis text line

Other Help

National Suicide Prevention Lifeline 1-800-273-8255

Web: http://suicidepreventionlifeline.org/

Chat line: http://chat.suicidepreventionlifeline.org/GetHelp/LifelineChat.aspx