
Marie Stopes International's Submission to the UN Special Rapporteur on Violence Against Women – June 2020

Marie Stopes International (MSI) is one of the world's largest providers of sexual and reproductive health (SRH) services, providing women-centred contraception, safe abortion, and post-abortion care in 37 countries and advocating for an enabling environment for universal access to sexual and reproductive health and rights. Globally, the services that we provided in 2019 resulted in an estimated:

- 14 million unintended pregnancies prevented
- 6.5 million unsafe abortions averted
- 34,600 maternal deaths averted.

By the end of 2019, there were 32 million people worldwide using contraception provided by MSI.

We would like to thank the UN Special Rapporteur on 'violence against women, its causes and consequences' for this opportunity to highlight the impact of Covid-19 prevention measures on violence against women and girls. This submission focuses on the specific impact we have seen on our abortion clients in our UK programme and aims to provide information related to these two questions:

- To what extent has there been an increase of violence against women, especially domestic violence in the context of the Covid-19 pandemic lockdowns?
- Please provide examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the Covid-19 pandemic by NGOs and NHRIs or equality bodies.

Impact of Covid-19 on the number of clients with safeguarding concerns

Given our frontline role in supporting women from communities across the UK, we care for many clients who are facing domestic violence. Domestic violence is one of the issues most commonly disclosed to teams in our clinics, and last year we identified hundreds of cases of domestic abuse, both current and historic, resulting in referrals to social care. When we identify protection issues, we work collaboratively with women and girls to support them in taking whatever next steps they are comfortable with. Our priority is their safety and security.

Women's Aid have suggested that Covid-19 is being used by abusers to further control victims.¹ Controlling pregnancy and/or contraception is a method of control widely used by perpetrators of domestic abuse, and over a third of domestic abuse begins or worsens in pregnancy. We know that some of our most vulnerable clients have been impacted by lockdown and social-isolation and an inability to leave their homes to visit our clinics, increasing their risk of domestic violence.

Our 'Safeguarding Lead Nurse' has had many cases brought to her attention of women and girls having difficulty leaving home to attend their appointments during the Covid-19 crisis, including instances of young people struggling to leave their homes. Before lockdown measures were in place, women and girls who felt they needed to conceal their pregnancy and abortion from those they live with used excuses such as school, visiting friends, going to work, etc in order to attend an appointment at one of our centres discreetly. With strict lockdown measures in place, preventing all non-essential trips outside of the home, these excuses can no longer be used. This puts women and girls who wish to end a pregnancy discreetly at a higher safeguarding risk.

One of our clients who was keeping her pregnancy a secret from her husband, who she explained would not want her to have an abortion, missed her appointment for a medical abortion due to her inability to leave her home without her husband becoming aware of the situation. In another case, we were contacted by a 19-year-old client who became pregnant outside of marriage and is at risk of honour-based violence should her parents find out that she is pregnant. She had symptoms of Covid-19 and so could not come into a clinic for 2 weeks – bringing her to a gestation which would require surgical abortion and would require her needing to

¹ Womens Aid, (2020), "Survivors say domestic abuse is escalating under lockdown". [Press Release] 28th April 2020. Available at: <https://www.womensaid.org.uk/survivors-say-domestic-abuse-is-escalating-under-lockdown/>

leave the home during lockdown. We had to work closely with protective agencies in order to get her the support she needed.

Cases such as these can often be supported with availability of at-home medical abortion – in line with best practice – but the UK Government had not yet permitted this crucial service. On 30 March 2020 – one week after strict lockdown measures were put in place – the UK Government temporarily approved at-home medical abortion to a gestation limit of 10 weeks, and MSI UK began implementing this service on 6 April 2020. At-home medical abortion provides a more discreet option for women in vulnerable situations or women living with a coercive or abusive partner.

However, even after the approval of an at-home early medical abortion service, women who are over 10 weeks gestation have no option but to attend a clinic for a surgical abortion. Women living with domestic violence or with other safeguarding concerns which mean they must conceal their pregnancy or abortion from those they live with, are forced to either put themselves at risk by attending a physical appointment or to continue a pregnancy against their wishes. Both scenarios put women at risk of further violence. An inability to leave the house due to lockdown measures also puts women at risk of passing the legal abortion limit in the UK, which is 24 weeks gestation.

Since lockdown measures were put in place on 23 March 2020, we have noted an increase in flagged safeguarding concerns from our call centre - the first point of contact for women and girls seeking our services in the UK. **Comparing the two months prior to lockdown and the first two months after lockdown measures were put in place, we saw a 33% increase in reports of domestic violence,² and a 20% increase in all safeguarding concerns.³** Safeguarding concerns can include domestic violence, honour based violence, homelessness, child sexual exploitation, mental health issues, rape or sexual assault, modern slavery and reproductive coercion.

These statistics show a trend in increased instances of domestic violence and other safeguarding concerns among our clients since lockdown measures were put in place in the UK. While the availability of at-home early medical abortion up to 10 weeks gestation can mitigate some of the additional risks these women and girls are facing as a result of Covid-19 prevention measures, it is not enough. Safeguarding these clients has become more complex during the crisis, with public services stretched to the limit and normal safeguarding procedures, such as social workers accompanying clients, disrupted. There is a clear need for increased safeguarding and social care support, and in particular, for increased spaces within emergency refuges for those living with domestic violence.

² Marie Stopes International internal data for calls to their helpline, One Call, which contained a domestic violence concern. Received between January 23rd, 2020 and March 22nd, 2020 (total: 236 calls), compared with calls received between March 23rd, 2020 and May 22nd, 2020 (total: 314 calls).

³ Marie Stopes International internal data for calls to their helpline, One Call, which contained a safeguarding concern. Received between January 23rd, 2020 and March 22nd, 2020 (total: 1,523 calls), compared with calls received between March 23rd, 2020 and May 22nd, 2020 (total: 1,830 calls).