

Support and Safety Planning During COVID-19

A Community Resource

Even though the COVID-19 public health crisis means that we are now spending less time with each other, how do we still support our friends, family and community members who are experiencing family and intimate partner violence at this time?

We know that intimate partner/family violence increases during times of widespread social crisis. Existing violence might increase in severity, or it might be the first time that someone experiences harm. During the COVID-19 public health crisis, we are all being encouraged to socially distance and isolate ourselves at home. For many people experiencing harm, home may not be the safest place.

Some ways that COVID-19 may uniquely impact people experiencing harm

- Risk of serious bodily injury and death from family violence increases with financial stress (including unemployment of the person causing harm), increased contact with the person causing harm, risk of houselessness and isolation. All of these risk factors are amplified by the COVID-19 crisis.
- School/childcare closes, social isolation and sickness may result in increased caring responsibilities with usual supports not available, resulting in an increased reliance on the person causing harm.
- Closure of libraries, workplaces and other public spaces, and increased time at home with the person causing harm, all mean that it is harder to get privacy to safely make or take calls or get information about support.
- Travel restrictions may severely limit options for leaving the house, leaving the relationship or accessing supports.
- Many support services and refuges are only offering remote or restricted services, such as only doing over the phone support, which might be less effective or accessible for some people. People may also fear entering a refuge or short-term accommodation due to concerns about exposure to COVID-19.

Some ways that people causing harm may use COVID-19 to further control or abuse

- Using COVID-19 as a scare tactic to keep someone away from their children, family or friends.
- Withholding necessary items or supplies, such as hand sanitiser, or preventing someone from seeking medical attention when needed.
- Using social distancing and isolation as a means to further control and disconnect someone, for example by cutting off their social media or phone use.
- Blaming and punishing the person experiencing harm for transmitting COVID-19, whether or not this is true, or trying to convince them that it is their fault.
- Stating that support services won't respond because they are too busy with the current public health crisis.
- Stating that refuges and helplines aren't available because "everything is closed down".

Undercurrent Vic acknowledges our work takes place on the stolen land of the Wurundjeri and Bunurong Peoples of the Kulin Nation. We pay our respects to all Elders past, present and emerging.



Support and Safety Planning

This document is not a comprehensive or step-by-step guide to safety planning – there are lots of these online! Instead, we want to highlight some of the unique ways that support and safety planning might need to change during the COVID-19 public health crisis. There are also many things that remain the same, such as our ethical frameworks centring the expertise of people experiencing harm.

FRAMEWORKS FOR SAFETY PLANNING

Safety planning is a process of **exploring risk and safety** and **mapping out options** and ideas to increase safety and reduce risk and harm when family/interpersonal violence is happening.

People experiencing family/intimate partner violence have the best understanding of risk and options for safety. As support people, we need to **work in partnership** with the person experiencing harm to plan what increasing safety might look like.

If one of the fundamental impacts of family/intimate partner violence is that someone doesn't get to make choices about their own life, then our role is to support someone in **their choices, liberation, autonomy and self-determination**.

Honour that **people experiencing harm are 'doing' safety all the time**. The COVID-19 public health crisis can be overwhelming, especially in addition to experiencing violence in this rapidly changing context. Too many questions about the impacts of both can be daunting, may risk positioning people as passive recipients of violence and can miss the person's own insight, capacity and action. As part of safety planning it is important to **ask people about their responses to violence and what actions they are taking**. To identify and build on existing strategies, including when adapting existing safety plans, useful questions include:

“ How have you been/are you responding to the violence in this changing situation? What are you having to do or not do to stay safe? ”

Our support needs to **build on the strengths of what someone is already doing** to keep themselves and their children safe.

While leaving the relationship may be one strategy, it is not the only strategy. After all, there is **no 'one size fits all'** version of safety planning. Safety plans must centre the perspective and priorities of the person experiencing harm. This might **change over time**. Changed safety plans are not failed safety plans.

Some things that we think it is always good to remember: Listen to what they have to say, **believe what they tell you**, respond empathically, validate strengths, respect the person's autonomy and choices, identify existing actions, explore options together, follow up with them, and respect confidentiality.

Additional Considerations in Safety Planning: Changes to Movement & Communication During COVID-19

In addition to the unique risk factors or impacts for people experiencing violence listed above, COVID-19 is changing many things about our movement, travel and methods of communication, and presents unique considerations when it comes to safety planning. The following questions are a jumping off point to think through some of the specific challenges that might arise at this time, this is far from an exhaustive list!

If the person experiencing harm is able to leave the house, are there **places that are still open where you could meet** with them in person, or where they can get to in the event of a crisis? While cafes, houses or support services might not be an option, what about parks, outdoor areas, pharmacies, supermarkets or busy parking lots?

Has it become **a lot harder for them to get privacy** in order to safely make and receive phone calls or look up information about support? Could you **learn and share skills that could increase technological safety**, including how to clear browser history, delete text messages or facebook chats, make secure passwords or turn off location services? There are lots of resources online, such as <https://www.esafety.gov.au/ke-y-issues/domestic-family-violence/video-library>

If the person experiencing harm is in quarantine and you can only talk over the phone, could you **ask yes or no questions so that they can answer without raising suspicion?**

“Is this a good time to talk?
Please reply with
yes or no. ”

“Would you like me to call back another time?
Please reply with
yes or no. ”

“To work out a good time to talk, I am going to suggest some alternative days and times. Please reply with yes or no to these days and times. ”

If the person experiencing harm shares care of children or needs to organise contact visits with the person causing harm, how have **existing child arrangements been impacted by the widespread lockdown?** Are there other busy public places that might be suitable for handover?

If the person experiencing harm is less likely to be able to alert someone if they are in danger, is there a way they can **plan in advance with you or someone else how they will raise the alarm?** Can you set up a **code word or phrase?** For example “I’m going to do some gardening” might mean “I need urgent help now”.

Have you considered **what action or response will be triggered by any agreed message?** For instance, an agreed message like “The weather is so wintry today” might be the signal that prompts a friend to deliver groceries to the house. As always, any messages and actions activated in response should be guided by the person’s own expertise in what will keep them safe and what will increase risk.

How do we Make Sure Our Responses Don't Escalate Risk?

We know that responding often increases risk, yet family/intimate partner violence often doesn't stop without this. How can our responses be as safe as possible?

How can you maintain the **consistency or regularity** of communication or support? If there are significant or sudden increases or changes, is there a risk that the person causing harm may become suspicious or increase their surveillance?

How can we limit the ways that we might **indirectly or unintentionally increase risk** for someone? For example, knocking on your neighbour's door to intervene in family violence or directly confronting someone using violence may increase risk for the person experiencing harm, especially at a time when many people have limited options to leave the house or access support services.

Are there **creative ways of working within the restrictions** in place during the COVID-19 crisis to reach out to someone more safely? These are some ideas we came up with – but what works in your context might be different!

Could mutual aid and **sharing resources that are in short supply be an opportunity to check-in** with someone experiencing harm? For example, what about dropping over some food each week? Or offering to go to different pharmacies together to try to find necessary medical supplies?

Can you **build trust and show that you're available for chats** in other ways? Are you approachable? Do you spend time on your balcony or in your front yard? How do you respect someone's choices to not communicate with you, while demonstrating openness if that changes?



Considering Access to Services During COVID-19

Are you up to date with which services in your area are still open during the COVID-19 crisis? Do you know what type of support they are providing at this time? How accessible is that form of support for the person experiencing harm? For example, if the service is now operating remotely and over the phone, how can you support the person experiencing harm to safely access a phone?

Further resources and services

These family violence services will remain open during the COVID-19 public health crisis:

Here and around the world, many family violence support services are restricting or altering the services they provide during the COVID-19 public health crisis. This makes it more important than ever to strengthen our own skills in supporting people in our community who are experiencing harm.

While there are some things that might need to change in our approach to safety planning and support at this time, our commitment to centering the expertise of people experiencing harm is unwavering. In this time of isolation, we all need to grow our capacity to think creatively and collectively about what support looks like.