

COVID-19 and safety in the home

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A report issued by Te Hiringa Mahara - the New Zealand Mental Health and Wellbeing Commission.

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Te Hiringa Mahara - the New Zealand Mental Health and Wellbeing Commission - was set up in February 2021 and works under the Mental Health and Wellbeing Commission Act 2020. Our purpose is to contribute to better and equitable mental health and wellbeing outcomes for people in Aotearoa New Zealand.

For more information, please visit our website: <https://www.mhwc.govt.nz/>

The mission statement in our Strategy is “clearing pathways to wellbeing for all.” Te Hiringa Mahara acknowledges the inequities present in how different communities in Aotearoa experience wellbeing and that we must create the space to welcome change and transformation of the systems that support mental health and wellbeing. Transforming the ways people experience wellbeing can only be realised when the voices of those poorly served communities, including Māori and people with lived experience of distress and addiction, substance or gambling harm, are prioritised.

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Introduction

Part of wellbeing, as described by the He Ara Oranga wellbeing outcomes framework (see appendix 1), is 'Being safe and nurtured'. Achieving this requires that 'people feel safe, secure, and are free from harm and trauma'.

Being safe and nurtured is crucial to wellbeing. Relationships and environments in which people feel aroha and are cared for and respected are essential to support health, learning and development, protect from harm and promote wellbeing.

- Te Rau Tira, Mental Health and Wellbeing Commission, 2021, p.21

This report explores the pandemic's impact on this part of wellbeing, by focusing on the impact of COVID-19 on people feeling safe, secure and free from harm and trauma, in their homes.

Being safe from harm is not only crucial for wellbeing, it is a fundamental human right. The Universal Declaration of Human Rights (1948), which profoundly influenced the development of international human rights law, states that everyone has the right to life, freedom and safety from harm. However, not everyone has equal access to this right.

Research in Aotearoa and internationally shows that intimate partner violence and violence against children and young people can escalate during and after large-scale crises, and in times of economic stress (New Zealand Family Violence Clearinghouse, 2020). This has certainly been the case with the COVID-19 pandemic, with Phumzile Mlambo-Ngcuka, Executive Director of UN Women, commenting:

Even before the pandemic, violence against women was one of the most widespread violations of human rights. Since lockdown restrictions, domestic violence has multiplied, spreading across the world in a shadow pandemic.

- UN Women, 2020b

In Aotearoa, the legal obligation to remain at home during periods of lockdown and restrictions on movement during Alert Levels 2-4 increased the risks and intensified the experiences of family violence (Masselot & Hayes, 2020; Office of the Minister of Education, Office of the Minister for Social Development and Employment & Cabinet, 2021). While the message from Government and NZ Police was for people in danger of being harmed or killed by someone in their household to leave their residence, even if this meant acting against public health advice to stay at home (Office of the Minister of Education, Office of the Minister for Social Development and Employment & Cabinet, 2021), there were complexities for people navigating this. Violence exists in

multiple forms, including psychological, physical, sexual, economic and emotional abuse, and coercive control, and both the experiences and the challenges in seeking support were amplified by the lockdown conditions, as were opportunities for perpetrators of abuse to target and abuse.

This report looks at the impact of the COVID-19 pandemic on people feeling safe from violence, particularly those who are marginalised and disadvantaged by existing systems, and what can be learnt from community experiences and approaches to supporting safety. This report identifies outcomes for Māori where available, but does not have a specific Māori outcomes section, as limited relevant evidence was available.

Content warning

The analysis in this report references topics that some readers may find distressing - please note that the report references family violence and harms throughout, and on page 13 we reference harmful online communication, including sexual exploitation and attempts to drive self-harming behaviour.

Methodology

The aim of this research project was to gain insights and understanding into the impacts of COVID-19 on people feeling safe and free from harm and trauma, in the home or 'bubble'. In Aotearoa, the 'bubble', an exclusive social network with members only having physical contact with each other, was introduced as part of the Government COVID-19 response. This approach was effective for communicating the need to not mix socially in order to eliminate the virus, and compliance with bubble regulations was high (Long et al., 2020).

To understand the impacts of COVID-19 on people feeling safe and free from harm and trauma, the following questions were addressed:

- What are the key impacts, including challenges and positive outcomes, of the COVID-19 pandemic on safety in the home?
- How has the COVID-19 pandemic impacted on safety in the home for those in Te Hīringa Mahara priority populations, as outlined in the Mental Health and Wellbeing Commission Act?

The methodology involved a two-pronged approach (see Appendix 2 for details):

Literature review

A rapid review of the literature was undertaken to address the research questions. Electronic database and online searches identified research publications, reports and 'grey' literature that met the inclusion criteria. Following a screening process, 7 journal articles and 36 other items from Aotearoa were included in the review. All references

cited in the report are from Aotearoa, unless otherwise specified in the text. A thematic analysis was conducted, whereby the documents were coded and analysed to identify key themes. Details of the methods used to map, code and analyse the literature are included in Appendix 2.

While recognising that safety and security is shaped and impacted by many factors and considerations, broader notions of safety and security are excluded from the analysis in this report. Topics appearing in the literature that are specifically **excluded** are:

- Safety in relation to catching the COVID-19 virus and/or COVID-19 vaccination
- Safety in the workplace
- Safety and security in relation to loneliness and isolation, unless directly related to harm and trauma
- Material hardship and insecurity, and related issues such as food insecurity

Community engagement

Te Hiringa Mahara engages with a vast range of community advocacy groups from priority populations across Aotearoa, to ensure that our work is informed by the voices and views of communities. This formed a key component of the report. Information was sourced from notes taken during engagement activities between Te Hiringa Mahara and community advocacy groups.

The themes emerging from these sources were analysed and the final stage involved writing these up in this report.

Findings

Themes emerged from engagement with advocacy groups and analysis of the evidence-based literature around factors impacting on people feeling safe and secure, free from trauma and harm. The themes covered core issues of family violence, conflict and tensions in households, and digital harm. While not the focus of this report, evidence also suggests an increase in violence in other contexts, with essential hospital and supermarket female workers facing increased abuse and harassment at work during lockdowns (Masselot & Hayes, 2020).

Family violence

During the 2020 national lockdown, reports of family violence increased dramatically.

The number of family harm incidents reported to NZ Police dramatically increased when Aotearoa went into national lockdown in March 2020. Over the lockdown period, police figures showed a 22% increase in investigations (Masselot & Hayes, 2020), while Women's Refuge reported a 20% increase in calls related to domestic violence (Foon, 2020).

The increase is consistent with international research showing that gender-based violence, violence against women and children, sexual violence and interpersonal violence escalate and intensify during natural disasters and emergencies like a pandemic (New Zealand Family Violence Clearinghouse, 2020). In Aotearoa, an increase in reporting of domestic violence is seen to occur following Civil Defence emergencies (Houghton, 2010). Events that cause financial insecurity and stress, particularly when coupled with uncertainty, such as the Global Financial crisis in 2008 and the Christchurch earthquake, have been shown to lead to an increase in aggression at home (Papesch, 2022). The increased rate of violence against women occurring alongside COVID-19 is such that it has been called 'the shadow pandemic' by UN Women (2020b).

During Alert Levels 4 to 2, the number of family violence reports to NZ Police ranged from 345 to 645 a day, compared to between 271 and 478 in the same period in 2019 (The Children's Convention Monitoring Group, 2021). Research from the University of Otago found that 9% of respondents to an online survey had directly experienced some form of family harm over the lockdown period, including sexual assault, physical assault, or harassment and threatening behaviour (Every-Palmer et al., 2020). While there were methodological differences, Every-Palmer and colleagues note this appears elevated when compared with results from the New Zealand Crime and Victims of Crime Survey (2018/19), in which 0.7% of adult respondents experienced physical assault or harassment and threatening behaviour in a year, and 0.4% experienced sexual assault by a family member. With violence reported involving partners, siblings, young people, parents and grandparents, the pressures of lockdown likely intensified pre-existing problems and fraught relationships, and created more or different opportunities for abusers to target victims (Every-Palmer et al., 2020).

"The increase in violence can be seen as a direct result of the effects of the pandemic. The restrictions put in place to stem community transmission of the Coronavirus forced some women to be locked down with their abuser while also creating tensions within families that may not have experienced violence before." (Papesch, 2022, p.95)

Not only does family violence increase during periods of isolation, there is also the risk of more severe violence (New Zealand Family Violence Clearinghouse, n.d.). This was reflected in the experience of national domestic violence service provider, Shine, who reported a rapid increase in referrals during lockdown and an increase in the severity of the violence, with numbers continuing to rise following lockdown (Leask, 2020). The COVID-19 pandemic and lockdown created unique conditions for particular forms of abuse, whereby abusers were able to closely monitor their partners, including their internet and phone activity (Papesch, 2022), as well as exercise power and control in a myriad of ways, such as withholding soap or showers (Johnston, 2020).

However, while family violence increased during lockdowns, the perception from NZ Police (Assistant Commissioner of Police, Sandra Venables, in Johnston, 2020) and community advocacy groups was that it was under-reported. Research indicates that up to 87% of women who have experienced physical or sexual intimate partner violence do not report this to police (Webb et al., 2020). In lockdown conditions, people experiencing violence had limited opportunities to escape family violence and support workers were unable to see clients in person which made it difficult for them to determine if they needed help (Papesch, 2022).

In the first two weeks of lockdown, the counsellors at Victim Support heard stories about stress, stories about panic, and stories about aggression... But the stories that worried them most were the ones they weren't hearing at all.

- Johnston, 2020

I can't send the police around. I can't ring her mobile or text her to check in because if he sees it, it will make things worse. But I'm concerned for her, I don't know how she's coping and that's really hard. And there will be a lot of women in that situation. It's a really scary time.

- Janet Vasega, a family harm service co-ordinator at Victim Support Manukau, in Johnston, 2020

Some of the government's messaging didn't serve some of our whānau well, for example the message of 'stay home stay safe' was a message that's counter-intuitive when you're working in the area of whānau violence. Whānau, wāhine, some of our tamariki and some of our men as well needed to leave their homes to be safe.

- Messiter, 2020

The increase in family violence raises particular concerns for disabled people who, in pre-pandemic times, experienced significantly higher reported rates of intimate partner violence and non-partner violence (including by parents and relatives) than non-disabled people (Fanslow et al., 2021; Malihi et al., 2021). Research indicates that a large number of people with disabilities who experience physical and sexual violence do not seek help, with the suggestion made that those who experience abuse from their carer (particularly a family member) are less likely to report sexual violence to the police because they fear losing support from someone they are dependent on (Malihi et al., 2021).

Advocacy groups reported that the lockdowns also meant decreased visits from carers and less support for families, with consequent increased stress and tensions.

A range of initiatives were actioned in response to family violence during COVID-19

A range of initiatives and prevention campaigns were initiated at the outset of the COVID-19 pandemic, in response to (or anticipation of) increased family violence, to help people access support. Family violence organisations were deemed an essential service and thus able to continue operating during the lockdown. NZ Police Assistant Commissioner Sandra Venables also made a statement advising that people could leave their bubble if they were unsafe or in danger (Smith, 2020).

In the early stages of the March 2020 lockdown, a Pandemic Working Group forum for government and the family violence and sexual violence sector and a Tangata Whenua Rōpū were formed (The Joint Venture of the Social Wellbeing Board, 2020). This provided an opportunity for the sector to work in new collaborative partnerships with government and for government to have real-time insight into issues and opportunities.

Māori leadership during COVID-19 was evident across a broad range of organisations, including Whānau Ora providers, women's refuges and Māori Wardens (The Joint Venture of the Social Wellbeing Board, 2020).

- More than 180,000 whānau members received support through Whānau Ora commissioning agencies including care packages, financial support, kai, power and data/phone packages.
- 600 devices (tablets), along with training and WIFI connection were provided to whānau who were otherwise feeling isolated.

The Joint Venture of the Social Wellbeing Board (2020) noted that not all these service providers are funded to meet the needs of whānau with family violence issues, but they stepped up to provide support until specialist services could come in. As described by the Human Rights Commission (2020, pp24-25):

There has been some excellent examples of great family violence and sexual violence prevention work by Kaupapa Māori services, especially in rural areas, where Iwi have delivered food, medical supplies, hygiene supplies, data packages and other support to their communities. They reported less family violence and sexual violence cases than usual.

... Te Rūnanga Ō Kirikiriroa played a vital umbrella role, connecting Māori communities and whānau in need with Māori agencies and the social service community. If this had not been done, many

whānau would have been invisible and suffered greater hardship, including whānau affected by violence. Having the ground level knowledge of communities and established networks enabled this support to be provided and highlights the need to ensure grass-roots knowledge and networks are valued and adequately funded.

Building on the Family Violence Act 2018, the Government allocated substantive funding towards the support of services for family violence victims or survivors. This included \$27 million to social service providers like the Salvation Army and Women's Refuge to "help the vulnerable in a locked-down New Zealand", including housing people, feeding people, and sheltering people from domestic violence (Manch et al., 2020).

Other responses (drawn largely from The Joint Venture of the Social Wellbeing Board, 2020) included:

- The Ministry of Social Development 'Safe Bubble' campaign, ran during Alert Level 4 to provide accessible information about the organisations that can help those affected by family violence, was developed for social media allowing people to dial through directly to a helpline or local service (Office of the Minister of Education, Office of the Minister for Social Development and Employment & Cabinet, 2021). There were 11,500 visits to the Safe Bubble website in the early weeks of its launch and calls to the Family Violence Information line increased three-fold (The Joint Venture of the Social Wellbeing Board, 2020).
- ACC funded Le Va #Catchyourself healthy relationships social media prevention campaign, which reached over 123,000 people in its first week. The update to this initiative had more than 1.3 million impressions on its Facebook page.
- To ensure that men could access support if they were concerned about harming a loved one or whānau member, the 0800 HEYBRO helpline (funded by Ministry of Social Development), which originally only serviced the Canterbury area with Integrated Safety Response funding, was expanded to provide nationwide 24/7 coverage funded by MSD. The HEYBRO helpline and other services saw an increase in the number of men reaching out for non-violence support. The founder of She is Not your Rehab, a global movement helping men heal from their past trauma, Matt Brown said he was "overwhelmed by the number of men asking for help during the lockdown, including from children who are living in abusive homes" (Foon, 2020).

While family violence reports increased and young people experiencing family violence and discrimination sought more help, reports of concern about children at risk of harm decreased.

Children and young people's experience of and exposure to violence and abuse likely increased during the national lockdowns.

"Ongoing financial hardship, isolation, overcrowding and high levels of stress and anxiety increase the likelihood that some children and young people have experienced and observed physical, psychological and sexual abuse at home." (The Children's Convention Monitoring Group, 2021, p. 22).

However, while family violence reports to the police increased, there was a 24% decrease in reports of concern to Oranga Tamariki during the national lockdown in 2020 (Oranga Tamariki, 2020). This is similar to the decreased reporting of harm that occurs during school holidays, when there is a 'lack of community eyes on children' and less oversight of teachers, doctors and other organisations (The Children's Convention Monitoring Group, 2021). Advocacy groups reported that teachers were concerned about children, some of whom they had lost touch with for weeks.

The sudden and extended lack of oversight, along with lack of access to friends, teachers, social workers and the safe spaces and services that schools provide, increased the vulnerability of those children already at risk of harm. Community engagement is a recognised protective factor for mitigating the effects of family violence exposure for young people and the closure of places under various levels of lockdown exacerbated the risk of detrimental effects on young people experiencing family violence in their 'bubbles' (Webb et al., 2020)

Lockdown conditions increased challenges for children and young people seeking support. However, despite these challenges, calls to helplines, such as Lifeline and Youthline, from children and young people who were experiencing family violence and discrimination, increased (Office of the Children's Commissioner, 2020). Texts and emails to Youthline also increased, with these providing safer, more private options for some young people (The Children's Convention Monitoring Group, 2021).

Tension and conflict in bubbles

Conflict and tensions in some families and bubbles escalated under the pressures of lockdown.

Research-based literature and advocacy groups point to an escalation in tension and conflict, in some bubbles, during lockdown. This was linked in various studies to increased stress and reduced social support outside the bubble, particularly for some communities. In one study, for example, people who had previously experienced mental distress reported less satisfaction, and poorer relationships, with people in their 'bubble', with more than twice as many getting along very badly with their

household (2.3% vs 0.4%) or badly (5.6% vs 2.1%) compared to those who had not previously experienced mental distress (Bell et al., 2022). They also reported higher rates of reduced social contacts with family and friends outside of their bubble (which included contact by video link, telephone, email or letter) and greater loneliness or isolation than others who had not previously experienced mental distress (41% compared with 26%) (Bell et al., 2022).

Research suggests that employment status and financial pressures contribute to the risk of perpetrating family violence, with economic uncertainty contributing to stress and conflict, which can lead to violence (Papesch, 2022). The Government introduced financial support measures, such as rent freezes, COVID-19 relief payments and a \$25 increase to the base rate of main benefits, and a wage subsidy/leave support scheme which supported employment, even for some occupations unable to work. However, a survey by the Child Poverty Action Group found that the pandemic had a dramatic impact on personal incomes of benefit claimants in Aotearoa, with many having to access further benefits and emergency payments to afford basic household needs (Humpage and Neuwelt, 2020). Papesch (2022) suggests that **“despite the financial support schemes implemented by the government, the economic impact of the pandemic has had a disproportionate effect on those who are most at risk of experiencing family violence”** (p.42).

Children and young people talked about the stress and strain on their family, in responses to a survey conducted by the Children’s Commissioner’s Office during lockdown, with some finding the close quarters with family incredibly challenging and at times very isolating (Children’s Commissioner, 2020). Lockdown was a stressful time for some young people, leading to breakups, volatile flare ups, and feelings of no escape (Youthline, 2020). One of the top six negative effects of lockdown, identified by young people in a Youthline survey (2020) was ‘living in toxic environments and relationships’. Another of the top negative effects was ‘missing face to face contact with loved ones’.

Being stuck at home with people who hate me. Not being able to see the people I love.

- Youthline survey respondent, 2020

I’ve pretty much just stayed in my room because me and my family don’t get along. I’ve been stuck at home with a lot of mental and emotional abuse.

- Youthline survey respondent, 2020

Advocacy groups also identified tensions in particular communities and circumstances. Asian community support groups, for example, described instances of conflict and violence between young people and parents over gaming. Gaming is an

important part of many young people's lives, functioning as a protective layer – a way to connect, feel a sense of belonging, and achievement – despite often being misunderstood by adults (Curative New Zealand, 2021).

Advocacy groups also told us of conflicts and tensions and controlling and abusive behaviours between separated parents escalating during the lockdowns as they grappled with unprecedented issues for which there was no clear guidance. Examples of these include conflict between parents over vaccination of children with health issues, concerns about the safety of children being in lockdown in the home of a parent who had been abusive previously, and fears that the children would be in the care of an abusive parent if the caregiving parent contracted COVID-19 or became otherwise unwell (The Backbone Collective, 2022). In findings from an online survey with women who had separated from abusive ex-partners, women described how the abuser behaviour changed and, for many, got worse over the course of the pandemic, with the “use of isolation, fear, risk of illness and lack of clarity and inconsistency of information, to control, isolate and abuse their ex/partners and children” (The Backbone Collective, 2022, p.11)

Parents expressed concerns about having to leave children with potentially unsafe parents or adults in order to go to grocery shopping, for fear of abuse from other people if they took the children with them when only one person per household was allowed into the supermarket. Another concern raised by advocacy groups was oversight of children and adults in Managed Isolation and Quarantine when entering Aotearoa.

Life in lockdown held particular challenges for some communities

Prior to the COVID-19 pandemic, research indicates that some people were more likely than other groups to experience including physical, psychological /or sexual family or intimate partner violence. This includes some of those who experience particular marginalisation: women, particularly Māori women; Māori; rainbow communities; people with disabilities; young people; older people; ethnic communities; and Pacific peoples (The Joint Venture of the Social Wellbeing Board, 2020).

Young people

Overall, more than three quarters of young people surveyed managed ‘okay’ to ‘extremely well’ during lockdown (Ministry of Youth Development, 2020). However, some groups of young people did not fare so well, with surveys finding more than one in five young people felt that family and home life was causing them stress (23%) (Youthline, 2021) and felt unsafe in their bubble at least some of the time (22%) (Webb et al., 2020). Slightly over one in four Māori (29%) and Pacific (29%) survey respondents in the Youthline survey reported they were affected by issues with family as a result of COVID-19.

The COVID-19 lockdown exacerbated the struggles of young people living in unsafe households, evidenced by the increased rates of family violence and reports of young people breaking lockdown to escape unsafe situations (Webb et al., 2020). The exclusion of young people aged 16 and 17 years from emergency housing meant that some were forced to stay in dangerous and exploitative situations (McAllister et al., 2021). Lifewise, a community social development based in Tāmaki Makaurau, had nearly 120 requests for support from homeless people under 18 years over the 2020 winter months, but could house only four of these (McAllister et al., 2021).

Young people who had reported less positive family contexts before the COVID-19 pandemic in the Youth19 Survey, namely those identifying as having a disability and/or being rainbow young people (Roy et al., 2021),¹ were particularly at risk of feeling unsafe within their bubbles during lockdown (Ministry of Youth Development Youth Pulse Check Survey, 2020). Prior to the pandemic, young people with disabilities and their families already faced many barriers accessing health, education and support services necessary for wellbeing (Webb et al., 2020). These young people are also disproportionately affected by family violence, and many live in households experiencing material hardship (Webb et al., 2020).

Rainbow youth

The lockdowns posed specific challenges for rainbow young people who lived with families unsupportive of their identity, with them reporting being more likely to feel they were not supported or could not cope (Youthline, 2021). Around one in three rainbow young people (33%) surveyed in the Ministry of Youth Development's Youth Pulse Check survey stated that they felt unsafe in their bubble at least some of the time during lockdown (Ministry of Youth Development, 2020). Similarly, 36% of rainbow young people responding to the Youthline survey had issues with family that had started or gotten worse as a result of COVID-19. Homelessness is an issue for rainbow young people (McAllister et al., 2021) and the Youthline survey found that 32% had housing or accommodation worries. "These young people were already more likely to lack access to support to manage their emotional wellbeing and appropriate health care (particularly transgender young people), often as a result of systemic oppression, homophobia, biphobia and transphobia" (Webb et al., 2020, p28).

One survey found that one in four (26%) rainbow young people struggled to connect with LGBTQIA+ groups during the pandemic (Radford Poupard, 2021). Young people who were not out or felt unsafe in their bubble were unable to access online support

¹ Māori Rainbow, Māori with a disability or chronic condition, Pacific Rainbow, Pacific with a disability or chronic condition, or Rainbow with a disability or chronic condition face higher challenges. These young people generally face a greater total number of inequities (more inequities) than those who belong to only one of their identity groups and, on some indicators, they also face higher levels of challenge (higher inequities) than those who belong to one of their identity groups (Roy et al., 2021)

because they did not want their parents or flatmates to overhear them or see them looking at Rainbow content. One in five respondents in this study with nearly 500 young people experienced negativity towards their sexual orientation in their bubble (Radford Poupard, 2021).

Struggles for young people are compounded when sexuality intersects with other marginalised identities (Roy et al., 2021; Webb et al., 2020). Young people responding to the Youth Pulse Check Survey who identified as Rainbow, Māori, Pacific or having a disability were also more likely to report feeling unsafe within their bubbles than other groups of young people (Ministry of Youth Development, 2020).

Older people

While family members were often a source of support to older people during lockdown, a small number of older people participating in studies in Aotearoa spoke to difficulties of increased interactions with family members (Prigent et al., 2022).

Older people isolated from their usual support networks were potentially more vulnerable to abuse and neglect in their homes and/or while living with family members (Office of the Minister of Education, Office of the Minister for Social Development and Employment & Cabinet, 2021). While the rate of elder abuse reports to the national helpline service did not appear to change as a result of COVID-19 (Office for Seniors, 2021), stakeholders working with older people reported increases in elder abuse during lockdown periods (Ministry of Social Development, 2021). Advocacy groups also noted that a lot of elder abuse is financial or emotional abuse, which can go unnoticed and unreported.

Digital harm

Experiences of digital harm and violence skyrocketed during the lockdowns

Digital technology was critically important for keeping people connected during lockdowns. Young people, in particular, have been large scale adopters of digital communication. “Separated from in-person friendships and communities, many young people have relied on digital distractions to help them cope – including social media, Netflix, and gaming” (Curative New Zealand, 2021, p.44). Connection-promoting forms of social media could be useful to mitigate physical isolation and enhance social connectedness (Webb et al., 2020).

However, social media use, as a whole, cannot be seen as a protective factor (Webb et al., 2020); digital technology also allowed online violence and abuse to be brought directly into people’s homes. This came in the form of unwanted digital communications, including discrimination, cyberbullying and increased risk of sexual abuse and exploitation. For example, young rainbow people reported being online more during the lockdowns and experiencing an increase in homophobic and transphobic abuse (Radford Poupard, 2021).

Incidents of online harm skyrocketed both during and after the COVID-19 lockdowns, with a dramatically increased number of people suffering unwanted digital communication, according to data collected by Netsafe, an Aotearoa independent online safety organisation.² The number of reports to Netsafe between April and June 2020 (6,880 reports), were a 51% increase compared to the previous quarter. The types of unwanted digital communication sent in that three month period, during and immediately after lockdown, were more likely to be trying to get the person receiving it to hurt themselves or shared their intimate images or recordings without their permission, than other types of unwanted communication (Netsafe, 2020).

Pre-pandemic, Netsafe survey findings showed that some communities in Aotearoa are more likely to be targeted by online hate speech than others, with people targeted based on ethnicity, religion, disabilities, sexuality and gender (Netsafe, 2019). This was exacerbated during and immediately after lockdown, with some communities were more likely to experience unwanted digital communications than others: 61% of rainbow survey participants receiving these, compared to 38% of heterosexual participants; 58% of participants with long term disabilities, compared to 37% of those with no disability (Netsafe, 2020). Māori participants (30%) were less likely to experience unwanted digital communication than Pākehā (44%), Asian (40%) or Pacific (36%) participants.

Online discrimination, experienced through negative comments or jokes aimed at specific groups was the most frequent type of discrimination reported to the New Zealand Human Rights Commission during the early months of the pandemic. This was experienced by 16% of the total sample, with Chinese (32%), Māori (28%) and Pacific (23%) respondents reporting it most (Nielsen, 2021). Chinese respondents in particular noted that the negative comments targeting Chinese people were related to COVID-19 (71% of Chinese respondents who experienced online discrimination reported it was COVID-19 related).

While online engagement was central for children and young people's education, support and social lives through COVID-19 lockdown and isolation situations, online spaces also posed specific risks to children and young people, including exposure to cyberbullying and increased risk of sexual abuse and exploitation (The Children's Convention Monitoring Group, 2021). The risk was heightened given not being at school and the consequent increase in unsupervised time for children and young people. Online spaces can feel particularly unsafe for young people, "as they negotiate a range of perilous elements, eg, catfishing and trolling ... These negative influences are difficult to avoid, but paradoxically, many young people feel they are necessary to engage with to keep up socially." (Curative New Zealand, 2021, p.38).

² <https://netsafe.org.nz/covid19/>

Accessing support

Accessing support during lockdown was a challenge for many people

The pandemic lockdown conditions not only provided an environment known to create different and increased opportunities for people to use violence against others in their households, and reducing opportunities for people experiencing that violence to seek help or escape, it also made it challenging for people to connect with supportive people or access help in usual ways (New Zealand Family Violence Clearinghouse, n.d.; Shakti, 2020). Media publicised advice from the NZ Police that if people were in immediate danger and unable to contact emergency services by dialling 111, they were to leave their house and get out of harm's way (for example, Kirkness, 2020).

Lockdown meant immediate and extended loss of the usual sources of support for many people, including young people. Over half of the respondents (52-59%) to the Youth Pulse Check Survey, aged 12-24 years old, received no contact at all from external support networks such as social workers, or youth mentors (Ministry of Youth Development, 2020). One survey found that the most significant impact on young rainbow people's wellbeing was not seeing their friends, with online engagement not providing the types of social connections many young people needed to boost their wellbeing (Radford Poupard, 2021).

Project DMs, which sought to understand the needs of Māori and Pacific young people transitioning out of school during COVID-19, identified the loss of routine, safety and solitude as a key theme in the challenges that young people experienced (Curative New Zealand, 2021).

Lockdowns and isolation periods have meant young people have lost the routine of school, and have been impacted by the absence of the safe, and dependable experiences schools can provide. Other supportive environments like churches, friend's houses, and service providers have also been off-limits at times. This has meant young people who have challenging home environments – homes which are cold, damp, crowded, or abusive – have been particularly impacted.

- Curative New Zealand, 2021, p.32

[We have heard about the need for...] space and privacy. If you're living in a house with 10, normally your outlet would be going to friends or accessing our service providers. That's been difficult, having that support or support of church being taken away.

- Senior Advisor, Ministry Youth Development, in Curative New Zealand, 2021, p.32

Government agencies responded to increased family and sexual violence by providing messaging about the availability of services and where to seek help, funding services and making existing service funding more flexible, coordinating government agency and community services, and ensuring services were equipped to safely respond to demand. However, accessing support was challenged by the conditions of lockdown, such as a lack of privacy meaning that abusive or unsupportive partners or family members could overhear conversations. Seeking help could potentially increase safety concerns. Many of the helping methods such as social work, youth work, safety services, group stopping violence programmes are designed for face-to-face delivery not online.

Prior to the COVID-19 pandemic, studies indicated under-reporting of family violence among minority ethnic women groups in Aotearoa, particularly Asian women (Webb et al., 2020). Barriers to migrants and refugees accessing services include limited knowledge of available services, lack of translated material and/or access to interpreters, lack of cultural support and experiences of racism and discrimination (Webb et al., 2020; Zhu, 2021). Shakti Community Council, who provide specialist, culturally competent, support services, including family violence support services, for women, children and families of Asian, African and Middle Eastern origin, found that COVID-19 highlighted some extreme vulnerabilities for migrant and refugee women. This included heightened susceptibility to abuse and violence with perpetrators home more, and increased difficulty accessing help for women who do not have proficiency in English and do not drive, along with it being harder to access phones to make calls for help (Shakti, 2020). Other advocacy groups reflected the same concerns and challenges. They told us about particularly difficult experiences for members of migrant and refugee communities, and pointed to the courage and effort it took migrant and refugees to ask for help with family violence, from outside their community, only for this to be unsuccessful. They described people failing to access services (including family violence and mental health services) due to difficulties with communication and lack of cultural competency and understanding on the part of those being contacted.

Women's Refuges reported demand for safe houses in the first lockdown was consistent with pre-COVID-19 demand. However, meeting that demand under the Level 4 restrictions was challenging (Office of the Minister of Education, Office of the Minister for Social Development and Employment & Cabinet, 2021). The restrictions on the number of people gathering face to face and the need to minimise in-person contact and maintain strict bubbles, meant that the usual way of using safe houses did not work. Consequently, refuge services used alternative accommodation, such as motels and hotels, to house people experiencing family violence, which allowed safety and social distancing, but was expensive and exceeded allocated funding.

Accessing support was made more difficult by a lack of connective technology

Online connectivity was a key means for people to stay in touch and access support during the lockdowns. As discussed earlier, this opened a portal to digital violence, which had a detrimental effect on many, with some communities impacted more than others. For some people, a lack of online connectivity meant that they avoided that form of harm, but they were also potentially socially isolated and unable to access support if needed. Digital isolation is not evenly distributed, with the digital divide in the COVID-19 environment largely mirroring social and economic inequality in Aotearoa (Webb et al., 2020). This provided an additional challenge for some people in accessing support to be safe from harm.

The Department of Internal Affairs estimates that more than one in five Aotearoa New Zealanders experience digital exclusion, and the Ministry of Education estimates that between 100,000 to 150,000 students do not have internet access at home (Webb et al., 2020). Anecdotal feedback from one school in Auckland suggested only 3% of the students had access to the internet at home, pre-COVID-19 (Webb et al., 2020). While the Government supplied 2000 modems to families in need during Alert Level 4, anecdotal feedback suggests that some families do not understand how to install them, and this created further distress.

The Youth Pulse Check Survey (Ministry of Youth Development, 2020) highlighted the challenges for some young people with using technology to maintain connections or reach out for support. This included difficulties accessing a device, wifi and data, with some groups of young people more experiencing greater difficulty than others.

- Difficulty accessing a device (computer, laptop, tablet or smartphone) was experienced by 29% of young people with a disability responding to the survey, 27% of Māori and 28% of Pacific young people, and 27% of respondents who had recently arrived in Aotearoa experienced difficulty accessing a device (Ministry of Youth Development, 2020)
- Difficulties accessing wifi was experienced by 47% of rural youth, 36% of refugee young people and young people with disability, and 34% of Māori and rainbow young people.
- Difficulties accessing data was experienced by 42% of rural young people (7% had no access at all), 39% of rainbow young people, 38% of young people with disabilities, and 35% of refugee young people (14% had no access at all).

What can we learn from the experiences of lockdown to better support people to feel safe and secure at home?

The increased risk of family violence was recognised and acted upon from the start of the pandemic. The Government response to the pandemic included increased funding to support family violence organisations, as well as indirectly addressing some underlying structural conditions through increased financial support and providing housing for people in need. The NZ Police gave a clear message that it was okay for people to leave their bubbles and seek help from harm. Community organisations and initiatives supported those experiencing harm and those at risk of harming others. These responses are certainly positive and valuable, but the research shows that more could have been done to keep some of our most at-risk people safe.

Keeping people safe and secure requires a range of safe, accessible options

The ways people stay safe and secure are varied, and so a range of options need to be available to support this. Connectedness is a key pillar in almost every model of wellbeing, including connection to people, place, culture and activities (Webb et al., 2020). Traditional models of connection were significantly disrupted by COVID-19 lockdowns and the importance of ensuring equitable access to services and supports, no matter where people are in the country, was reinforced (The Joint Venture of the Social Wellbeing Board, 2020). Harnessing and enhancing existing resources can contribute to keeping people safe and secure.

One important way of keeping people safe and connected to support is through online connectivity. While young people identify social media as one of the biggest problems facing their generation, it is also a key channel to reach them on (Youthline, 2021). However, many communities across Aotearoa New Zealand struggled with access to both essential services and technology during the pandemic. For example, many young people experienced difficulties accessing internet, and particularly those identifying as Māori, rainbow, having a disability, Pacific, refugee and young people living rurally (Ministry of Youth Development, 2020).

A further enabler of connection is strong communities, and so community development work, building community networks, supporting community leadership are protective factors against family and sexual violence.

It is vital that future support be directed towards vulnerable and at risk youth populations, so as to increase their general sense of safety and acceptance at home (Ministry of Youth Development, 2020). This is especially pertinent for young people identifying as having a disability and/or members of rainbow communities – both of whom experienced particularly troubling hardships throughout lockdown.

When at risk, accessing help needs to be easier and safer, and a one-size fits all approach is not sufficient. Through the pandemic, it became clear that basic information about where to seek help, including contact details or locations of the family violence workforce were not known, or at best held in silos (The Joint Venture of the Social Wellbeing Board, 2020). The onus is placed on victims/survivors to get help, rather than there being a focus on the underlying structural inequalities that contribute to violence (Papesch, 2022). A greater focus on supporting and funding community solutions and community-based responses could help address this.

To help people know where to get help during lockdowns, specific communications were needed, including for example, the Safe Bubble campaign (Office of the Minister of Education, Office of the Minister for Social Development and Employment & Cabinet, 2021). In some other countries victims who cannot talk openly have been advised where and how they can access help. In France, for example, victims were told to go to pharmacies and use the code word "mask 19", to the pharmacist to get help (Johnston, 2020). This was inspired by a similar scheme in Spain. Early on in the pandemic, Women's Rights Commissioner, Saunoamaali'i Karanina Sumeo, said such solutions were urgently needed.

"In extraordinary times like this, we need to be creative in how support is made easily accessible and affordable. Assuming that people can dial in for assistance from the comfort of their home is not helpful" (Saunoamaali'i Karanina Sumeo, in Johnston, 2020)

Sumeo met with the Minister of Workplace Relations and Safety, to talk about how to give women who were non-essential workers a pretence to get out - such as a letter from an employer asking them to work from a certain place for a half day, so they can make a plan.

"The Government's ability to house many of the homeless during this crisis proves that solutions can be found to seemingly intractable problems. It is hoped that effective solutions can be maintained and more easily found in future without being prompted by a crisis." (Choi et al., 2021, p.63)

In Aotearoa, while there are helplines available which have functions to support accessibility, such as chat, text, phonenumber help and easyread versions of material, there is no 'system' in place for people with disabilities to report violence they experience (Malihi et al., 2021). People with disabilities and stakeholders working with them report barriers to reporting, which include the negation of disclosed abuse, discounting the person's story by considering them unable to provide testimony to support prosecution, collusion with the abuse (i.e., denying the incident to protect the institution or a family member), and silencing those with disabilities through creating fear about loss of care (Malihi, et al., 2021). This issue needs to be addressed, and we would welcome establishment of an accessible, safe system that has been co-designed by people with disabilities and stakeholders working with them.

Empowerment and involvement of communities in planning and management is key to supporting safety

Much of the life changing and life-saving work preventing and dealing with family and sexual violence is carried out by local services and communities. Empowering and involving communities in planning is key to reaching people safely and quickly.

Partnering with Māori and empowering communities to lead responses puts greater focus on prevention, early intervention and restoration

- The Joint Venture of the Social Wellbeing Board, 2020

The pandemic highlights the need to facilitate, empower and support sustainable community-led action and leadership, particularly by Māori. The best way to ensure there is not an increase in violence during the next crisis is to invest in ‘primary prevention’ of violence so that it does not happen in the first place, for example by promoting respectful, non-violent relationships, and enabling communities to take a lead in changing social attitudes, behaviours and norms that support violence.

Community-led responses are pivotal in maintaining wellbeing and safety across the country and will be essential for longer-term recovery. Community organisations are deeply embedded on the ground and, therefore, are well placed to respond to changing needs, for example, lowering anxiety and stress and reducing tensions that can lead to family violence (The Joint Venture of the Social Wellbeing Board, 2020).

The non-governmental sector took a preventative approach and provided wrap-around support. Investment in essential family violence and sexual violence services and a temporary shift to high-trust contracting meant services could meet increased demand and be available throughout any lockdown periods (The Joint Venture of the Social Wellbeing Board, 2020).

The COVID-19 pandemic demonstrated how empowering communities to lead provided a more effective response; we need to prioritise taking those learnings forward.

- The Joint Venture of the Social Wellbeing Board, 2020

Similarly, Te Hīringa Mahara has continued to call for the Government to cement gains Aotearoa has made through its COVID-19 response by permanently adopting high-trust and collaborative community approaches.

Communities who are already disadvantaged can feel overlooked in times of crisis. Young people, for example, often feel unable to participate fully in society, and this feeling is amplified when recovering from disasters (Webb et al., 2020). Similarly, rainbow communities are not often in the spotlight and have not featured in COVID-19 disaster or psychosocial and mental wellbeing recovery plans (Radford Poupard,

2021). Ensuring that equitable systems are in place to enhance the involvement of communities and enable them to be involved in planning and decision-making is key to supporting safety.

Ongoing monitoring and research on the impact of the pandemic on people feeling safe will enable the development of better systems and resources

While the COVID-19 pandemic is uncharted territory, violence in the home is a long-standing and significant issue in Aotearoa, and research shows that this is exacerbated by disasters and crises. Close monitoring of the impact that COVID-19 had on family violence will enable the sector and Government to be aware of emerging issues and how they are being addressed by agencies (The Joint Venture of the Social Wellbeing Board, 2020). It is essential that research is carried out, and consistent and reliable data generated, to provide insight into the scale and impacts of the pandemic for different communities (The Children's Convention Monitoring Group, 2021; The Joint Venture of the Social Wellbeing Board, 2020). Given the difficulties gaining accurate or meaningful statistics about family violence, with multiple reasons contributing to changes in reporting violence, engagement with service providers and community organisations is critical for understanding and staying abreast of trends and developments in safety risks for different communities.

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Appendix 1 – He Ara Oranga Wellbeing Outcomes Framework



He Ara Oranga wellbeing outcomes framework

Our Vision: “Tū tangata mauri ora, thriving together.”

This will be achieved when tāngata / people, whānau / families and hāpori / communities in Aotearoa experience...

Wellbeing from a te ao Māori perspective:

Tino rangatiratanga me te mana motuhake

Legal, human, cultural, and other rights of whānau are protected, privileged, and actioned.

Rights are in line with Te Tiriti o Waitangi and te ao Māori, which includes application of tikanga tuku iho.

Māori exercise authority and make decisions about how to flourish. Tino rangatiratanga is expressed in many self-determined ways.

Upholding whānau rights is recognised as beneficial to Aotearoa.

Whakaora, whakatipu kia manawaroa

Whānau are culturally strong and proud – whānau flourish through the practical expression of ritenga Māori, tikanga Māori, and mātauranga Māori.

Māori express connection through awhi mai, awhi atu and the use of te reo me ōna tikanga every day – starting from infancy.

The beauty of Māori culture is celebrated and shared by all people in Aotearoa and globally.

Whakapuāwaitanga me te pae ora

Thriving whānau and equitable wellbeing is the norm.

Whānau have the resources needed to thrive across the course of their lives – especially mokopuna, who are unique taonga.

Whānau needs are met, and unfair and unjust differences are eliminated.

Whānau live in a state of wai ora, mauri ora, and whānau ora, which enables pae ora.

Whanaungatanga me te arohatanga

Whānau flourish in environments of arohatanga and manaaki.

Kaupapa and whakapapa whānau collectively flourish intergenerationally.

The active expression of strengths-based whakawhanaungatanga supports positive attachment and belonging.

Kotahitanga is realised.

Wairuatanga me te manawaroa

The mauri and wairua of whānau are ever-increasing, intergenerationally.

While whānau are already resilient, whānau skills, capabilities, and strengths continue to grow.

Taonga Māori are revitalised and nurtured – the unique relationship and spiritual connection Māori have to te taiao, whenua, whakapapa, and whānau is actively protected, enhanced, and strengthened.

Tūmanako me te ngākaupai

Whānau are hopeful.

Whānau feel positive about self-defined future goals and aspirations.

Whānau have the resources and capacity needed to determine and action preferred futures.

Wellbeing from a shared perspective:

Being safe and nurtured

People have nurturing relationships that are bound by kindness, respect, and aroha (love and compassion).

People of all ages have a sense of belonging in families and / or social groups. Where people experience disconnection, reconnecting or forming new positive connections is possible.

People feel safe, secure, and are free from harm and trauma.

People live in, learn in, work in, and visit safe and inclusive places.

Having what is needed

People, families, and communities have the resources needed to flourish.

This includes (among other things) enough money, financial security, access to healthy food, healthy and stable homes, safe physical activity, lifelong learning, creative outlets and time for leisure, including play for children.

People have the support and resources needed to maintain their health across their life course, and experience equity of health.

All people live in communities and environments that enable health and wellbeing.

Having one's rights and dignity fully realised

All people have their rights fully realised and are treated with dignity.

People can fully participate in their communities and broader society, and live free from all forms of racism, stigma, and discrimination.

Rights framed by Te Tiriti o Waitangi, other New Zealand law, and international commitments are fully met.

The negative impacts of colonisation and historic breaches of rights are recognised and addressed.

Healing, growth and being resilient

People and families experience emotional wellbeing.

This includes having the skills, resources, and support needed to navigate life transitions, challenges, and distress in ways that sustain wellbeing and resilience.

People and families can experience and manage a range of emotions – celebrating each other's strengths and practising empathy and compassion – personal and collective.

Where adversity or trauma occurs, people experience support and belief in their capacity to heal and grow.

Being connected and valued

All people are valued for who they are and are free to express their unique identities.

People are connected to communities in ways that feel purposeful and respectful. People are meaningfully connected to their culture, language, beliefs, religion and / or spirituality, and can express important cultural values and norms.

People experience connection to the natural world and exercise guardianship of the environment.

Having hope and purpose

People, families, and communities have a sense of purpose and are hopeful about the future.

There is respect for people's voices, perspectives, and opinions.

People make self-determined decisions about the future and have the resources needed to pursue goals, dreams, and aspirations.

Communities of belonging make their own choices, have resources, and are trusted to develop solutions for themselves.

The 'shared perspective of wellbeing' and 'te ao Māori perspective of wellbeing' should not be read as direct translations. They represent related concepts of wellbeing from different worldviews. The 'shared perspective of wellbeing' may also apply to Māori.

Appendix 2: Methodology

The overall aim of this research project was to gain insights and understanding into the impacts of COVID-19 on safety, in Aotearoa. In particular, it aimed to gain insight into people's experiences of feeling safe and secure, free from harm and trauma, in the home or bubble'. In Aotearoa, the 'bubble', an exclusive social network with members only having physical contact with each other, was introduced as part of the Government COVID-19 response. This proved effective at conveying the necessity of exclusive containment, while foregrounding mutual care and support, and compliance with bubble regulations was high (Long et al., 2020).

To understand the impacts of COVID-19 on people feeling safe and free from harm and trauma, the following questions were addressed:

- What are the key impacts, including challenges and positive outcomes, of the COVID-19 pandemic on safety in the home?
- How has the COVID-19 pandemic impacted on safety in the home for those in Te Hīringa Mahara priority populations, as outlined in the Mental Health and Wellbeing Commission Act?

The methodology involved a two-pronged approach, collecting and analysing evidence from literature and community engagement.

Literature review

A rapid review was undertaken to identify and review research literature that was relevant to the questions being addressed in this project and could thereby contribute to the development of evidence-informed actionable insights. The rapid review was conducted over a six-week period (December 2022 to January 2023) using the following methods.

Literature searching and selection

Literature was selected using the following inclusion criteria:

- Relevant to safety and security AND
- A focus on the impact of the COVID-19 pandemic in regard to wellbeing AND
- Evidence based studies, reports, briefing papers

While recognising that safety and security is shaped and impacted by many factors and considerations, broader notions of safety and security are excluded from the analysis in this report. Topics appearing in the literature that were specifically **excluded** are:

- Safety in relation to catching the COVID-19 virus and/or COVID-19 vaccination
- Safety in the workplace

- Safety and security in relation to loneliness and isolation, unless directly related to harm and trauma
- Material hardship and insecurity, and related issues such as food insecurity

A comprehensive search was conducted of electronic databases: Ovid MEDLINE(R) and Epub Ahead of Print, In-Process, In-Data-Review & Other Non-Indexed Citations, Daily and Versions <1946 to December 16, 2022>, adapted for PsycInfo, Scopus, Index New Zealand, NZ Research. The websites Google and Google Scholar were also searched.

Search strategy: Searches were conducted December 2022 using combinations of the keywords: (2019-ncov or pandemic* or ncov19 or ncov-19 or 2019-novel CoV or sars-cov2 or sars-cov-2 or sarscov2 or sarscov-2 or Sars-coronavirus2 or Sars-coronavirus-2 or SARS-like coronavirus* or coronavirus-19 or covid19 or covid-19 or covid 2019 or ((novel or new or nouveau) adj2 (CoV on nCoV or covid or coronavirus* or corona virus or Pandemi*2)) or ((covid or covid19 or covid-19) and pandemic*2) or (coronavirus* and pneumonia)); (zealand or aotearoa or maori or tamariki or whanau or iwi or marae or kaumatua or taitamaiti or tamariki); (lockdown or bubble*); (disab* or autis* or (down* adj syndrome) or blind or visual* or hearing or deaf); (trauma*); support*; (rainbow* or takatāpui or queer or gender diverse or intersex or lgbt* or lesbian* or bisexual* or transgender*); (discriminat* or racis* or prejudice*); prison*; (migrant* or immigrant* or refugee*); violen*; abus*; (safe or secure).

The electronic searches produced 51 results. The search was inclusive of grey literature, with unpublished studies and reports also captured through the electronic search processes. In addition, references from some reference lists were identified and searched for.

Screening, mapping and coding

Following the searches, the abstracts were screened according to the selection criteria. The full text of any potentially relevant papers were then retrieved for closer examination. Following screening, 43 papers from Aotearoa were included in the review: 7 journal articles and 36 other reports, briefings etc.

The papers were collated in a comprehensive Excel database, which included mapping information such as title, author, date, type of document (journal article, briefing paper etc), methods used in the study, sample description and keywords.

Data analysis

A thematic analysis was undertaken which involved a) generating initial codes into a coding framework, by identifying recurring factors, b) recording data (text from the papers) to each code, c) collating codes into potential themes, and d) reviewing and refining themes through iterative analysis.

While the methodology involved a thorough search and analysis, there were several limitations. The searches were limited to documents available in the English language, published since 2015. While the search process followed a well-defined, structured process there may be relevant documents that have been missed or were not available in the period these were collected.

Community stakeholder engagement

A critical component of the report is engagement with advocacy groups to ensure that the views and voices of people living in rural communities are included, and to ground the report in lived experience. Information was sourced from notes taken during face-to-face engagement between Te Hiringa Mahara and community advocacy groups.

The final stage of the analysis involved writing up the themes and further considering these in relation to He Ara Oranga wellbeing outcomes. Selected quotations were provided to illustrate the themes and ensure the analysis remains grounded in the words and experiences of people, those who advocate for them and researchers who undertook the studies. The quotes provided in the report are therefore intended to be illustrative, rather than representative.