



**Universidade do Minho**  
Escola de Psicologia

Leticia Costa **Intimate Partner Violence in Covid-19**

Leticia Dias da Costa

**Intimate Partner Violence in Covid-19  
Pandemic**





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## **Intimate Partner Violence in Covid-19 Pandemic**

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Mestrado Integrado em Psicologia

Trabalho efetuado sob a orientação do(a)  
**Professora Doutora Joana Arantes**

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(Leticia Dias da Costa)

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## **Violência pelo Parceiro Íntimo na Pandemia Covid-19**

### **Resumo**

Os comportamentos agressivos dentro do casal ainda são uma realidade bastante presente atualmente, e podem ser designados de violência pelo parceiro íntimo (VPI). Com o surto da pandemia Covid-19 e a existência de confinamentos obrigatórios, a população foi obrigada ao isolamento social. Este isolamento acarretou várias consequências, incluindo mudanças ao nível das dinâmicas dos casais. Assim, o presente estudo teve como objetivo avaliar o impacto do confinamento imposto pela pandemia da Covid-19 nas relações amorosas, sobretudo na VPI. A nossa amostra consistiu em 1109 indivíduos (967 mulheres e 142 homens) com idades compreendidas entre 17 e 74 anos ( $M = 25,73$ ;  $DP = 9,51$ ). Cada participante completou um questionário sociodemográfico, seguido do Questionário de Coparentalidade, da Escala de Táticas de Conflito Revisadas, da Escala de Avaliação Relacional, do Questionário de Divisão de Tarefas Domésticas e do Questionário de Dependência Emocional. Os resultados mostraram que a violência física sem sequelas aumentava à medida que o número de dias em confinamento aumentava, quer para os homens, quer para as mulheres. Além disso, os homens também reportavam sofrer de mais coerção sexual severa pelo(a) parceiro(a) íntimo à medida que o número de dias em confinamento aumentava.

*Palavras-chave:* confinamento, coparentalidade, divisão das tarefas domésticas, satisfação no relacionamento, violência pelo parceiro íntimo

## **Intimate Partner Violence in Covid-19 Pandemic**

### **Abstract**

Aggressive behaviors within the couple are still a very present reality today and can be designated violence by the intimate partner (IPV). With the outbreak of the Covid-19 pandemic and the general lockdowns imposed by the government in different countries, a large part of the population was forced to social isolation. This isolation had several consequences, including changes in couples' dynamics. Thus, the present study aimed to assess the impact of the lockdown imposed due to the Covid-19 pandemic on intimate relationships, especially IPV. Our sample consisted of 1109 individuals (967 women and 142 men) between 17 and 74 years old ( $M = 25.73$ ;  $SD = 9.51$ ). Each participant completed a sociodemographic questionnaire, followed by Coparenting Questionnaire, Revised Conflict Tactics Scale, Relational Assessment Scale, Division of Household Tasks and Emotional Dependency Questionnaire. Results showed that physical violence without sequels increased as the number of days in lockdown increased, for both men and women. In addition, men also reported suffering from more severe sexual coercion by their intimate partner as the number of days in lockdown increased.

*Keywords:* coparenting, division of household tasks, lockdown, intimate partner violence, relationship satisfaction



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### **Intimate Partner Violence in Covid-19 Pandemic**

Domestic violence has critical repercussions, such as low self-esteem, mental problems, loss of trust, decreased confidence, and in many cases leads to severe injuries and even death (Costa & Gomes, 2018; García-Moreno, 2005; Loxton et al., 2006; Pathak et al., 2019; Stöckl & Penhale, 2015). One in seven homicides is committed by an intimate partner, and the proportion of women murdered by their partners is six times greater than men (Stöckl et al., 2013). Domestic violence can be defined as abusive behaviors committed by anyone who lives in the same household or by a partner, ex-partner, family or someone with whom an individual maintains an intimate relationship (Albuquerque et al., 2013; OPP, 2020; Rodriguez et al., 1999). When domestic violence refers to abusive behaviors committed by a partner (or ex-partner), it can be also designated as intimate partner violence, marital abuse or partner abuse (Bradbury-Jones & Nikupeteri, 2021; Hornor, 2005; Rodriguez et al., 1999). Our study will focus on partners violence, and we will henceforth use the terminology intimate partner violence (IPV).

The lifetime prevalence of IPV in women is approximately 25% in Europe and 30% in America, according to the World Health Organization (WHO, 2013). According to data from the Office of National Statistics (2019), the prevalence of IPV is higher for women than for men (28.4% vs. 13.6%, respectively), so it is also necessary to take into account the victimization rate in men, even though the percentage is lower compared to women. However, from the point of view of Warburton and Raniolo (2020), the severity of abusive behaviors is the same for both genders, but men are less likely to report abuse, highlighting those male victims should not be ignored. In addition, some studies have showed that the IPV is often perpetuated by both partners – reciprocal violence (Capaldi et al., 2009; Esquivel-Santoveña et al., 2013; Machado et al., 2019). Langhinrichsen-Rohling and collaborators (2010) argued that reciprocal violence can underlie relationship dissatisfaction and communication and have emphasized the harmful effects for those who witness this type of violence (e.g., children) (Langhinrichsen-Rohling, 2012).

### **Types of IPV**

IPV encompasses a wide range of abusive behaviors (which often coexist), comprising physical, psychological or sexual abuse (Bradbury-Jones & Nikupeteri, 2021; Peterman & Dixon, 2003). Physical violence includes behaviors such as pushing, pulling hair, hitting, burning, and using objects, strength and body size against another person (Breiding et al., 2015; Peterman & Dixon, 2003). Abusive behaviors are divided into two groups of severity, considering the physical consequences: moderate physical violence (e.g., bruises and abrasions) and severe physical violence (e.g., fractures, head injuries and abdominal injuries) (García-Moreno et al., 2005; Murphy & O' Leary, 1989; WHO, 2012). Psychological

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violence consists of verbal and nonverbal acts, such as insulting, humiliating, and threatening (Breiding et al., 2015; Fulu et al., 2013; Straus & Gelles, 1990). It affects how victims see themselves, how they see their partner and others, harming their sense of identity and mental health (Breiding et al., 2015; Marshall, 1996). In fact, some authors argue that psychological aggression has more severe repercussions than physical aggression (Follingstad et al., 1990). Sexual violence is defined as verbal or physical behavior to engage in sexual intercourse with a person who is not available (Jeffrey & Barata, 2017; Peterman & Dixon, 2003) or who cannot consent or refuse (Breiding et al., 2015). It includes forced behaviors (Fulu et al., 2013), use of toxic substances (Breiding et al., 2015; Koss et al., 2007), tactics of excitement, such as kissing and touching (Jeffrey & Barata, 2017; Raghavan et al., 2015), or unwanted penetration (Breiding et al., 2015). Reproductive coercion refers to behavior that interferes with contraception use and pregnancy, and it is another behavior of sexual violence (WHO, 2012). Sexual violence has several negative consequences, including sexually transmitted diseases and unwanted pregnancy.

### **Covid-19 Pandemic**

In 2017, the World Health Organization (WHO) reported that about 35% of women worldwide have suffered physical and/or sexual IPV (WHO, 2017). However, due to the worldwide pandemic, these numbers have further increased, with the United Nations Population Fund predicting at least 15 million new cases of IPV (Stanley, 2020). As seen in the case of the Ebola virus, epidemics tend to increase rates of violence, as outbreaks also affect social and economic life (Durevall & Lindskog, 2015; Fraser, 2020; Roesch et al., 2020). In response to reducing transmission of the covid-19 pandemic, many countries have adopted lockdowns, social distancing and isolation, travel restrictions, and orders to stay at home (Gosangi et al., 2021; Rosenberg et al., 2020). Ten of millions of workers lost their jobs or worked fewer hours (Cajner et al., 2020; Coibion et al., 2020; Cowan, 2020), and job hiring dropped by almost 30% (Campello et al., 2020; Kahn et al., 2020). About 35% of workers started teleworking (Dingel & Neiman, 2020), while children were forced to stay at home (Leslie & Wilson, 2020). Lockdown during the Covid-19 pandemic and their social and economic impact have increased the exposure to abusive partners and limited the victims' access to services (Arenas-Arroyo et al., 2021; Matoori et al., 2020).

According to the ecological model proposed by the WHO, violence can be due to several factors, including biological and personal (e.g., demographic and psychological characteristics), relational (e.g., conflict in marriage), community (e.g., absence of social networks and poverty) and societal (e.g., wage inequality) (Krug et al., 2002; WHO, 1996). Research has shown that the Covid-19 and the measures

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implemented to try to stop the pandemic had a negative impact on these different factors (Marques et al., 2020). More specifically, regarding the biological and personal factors, individuals in quarantine revealed a higher prevalence of psychological disorders symptoms, including stress, emotional disturbance, depression, irritability, insomnia, and bad mood (Brooks et al., 2020; DiGiovanni et al., 2004; Hawryluck et al., 2004; Lee et al., 2005; Mihashi et al., 2009). Relational factors are related to negative moments and conflict between the couple (Moreira & da Costa, 2020). They can be due to internal or external causes to the relationship, as for example coparenting (Floyd et al., 1998; Moreira & da Costa, 2020), and low socioeconomic level (Capaldi et al., 2012; Castro et al., 2017). Research has identified forced cohabitation as a trigger for the increase in psychological violence during Covid-19 lockdown (Arenas-Arroyo et al., 2021). The pandemic has also led to financial difficulties, which are known to increase couple conflict (Aragona et al., 2020; Buller et al., 2018; Gresham et al., 2021; Mazza et al., 2020; Pietromonaco & Overall, 2020).

The community context involves workplaces, neighbors, and social relationships (Krug et al., 2002). Due to the pandemic, orders to "stay-at-home" limited support options and increased social isolation (Bright et al., 2020), which acts as a risk factor for all types of IPV (Capaldi et al., 2012; Lanier & Maume, 2009; Morais & Lunet, 2020). This is because social isolation removes the support from extended family, friends and institutions, allowing the perpetrator greater control over the victim's life (Mitchell & Raghavan, 2019; Stylianou et al., 2018). Finally, social factors are associated with situations that provide or inhibit a climate of violence, such as wage inequality (Krug et al., 2002). The results of the study conducted by Rayhan and Akter (2021) indicated that more than 50% of women who reported being victims of IPV during the first five months of the Covid-19 pandemic were unemployed or housewives.

### **Our study**

Due to the existence of gaps in the literature regarding the effect of lockdown time on IPV, the main aim of this study is to analyze the impact of the Covid-19 general lockdown on IPV. For that, we collected data throughout the general mandatory lockdown that occurred during the State of National Emergency declared by the Portuguese Government, which occurred from March 18 to May 2, 2020. In addition, we also aim to investigate the relationship between IPV and relationship satisfaction, emotional dependency, coparenting and division of domestic tasks during the lockdown. Research have shown that traumatic events or natural disasters can reduce the relationship satisfaction because of conflicts and tensions (Cohan & Cole, 2002; Luetke et al., 2020; Marshall & Kuijer, 2017). In addition, some authors

have claimed that relationship satisfaction is related to the division of household tasks (Nourani et al., 2019) and coparenting - the way both the members of the couple relate to playing the role of parents (Margolin et al., 2001; Pedro & Ribeiro, 2015).

We have eight hypotheses: i) Individuals in lockdown for longer will report more IPV ; ii) Individuals who have spent more time with their partner during the lockdown will report more IPV; iii) Individuals whose economic situation deteriorated during the Covid-19 pandemic will report more IPV; iv) Individuals who cohabit with children or stepchildren will report more IPV; v) Individuals who experience higher levels of coparenting difficulties will report more IPV; vi) Individuals who are emotionally dependent on their partners will report more IPV; vii) Individuals who do more household tasks alone will report more IPV; viii) Individuals less satisfied with their relationship will report more IPV.

## Method

### Participants

The sample of our study was initially composed of 1292 participants. After excluding 179 participants who were not currently in an intimate relationship and four incomplete questionnaires, our final sample consisted of 1109 individuals (see Table 1), ranging from 17 to 74 years old ( $M = 25.73$ ;  $SD = 9.51$ ). Of those, 967 (86.2%) were females and 142 (13.8%) were males. In terms of nationality, the majority ( $n = 1023$ ; 92.2%) were Portuguese. Most of them were heterosexuals ( $n = 1012$ ; 91.3%) and were in a dating relationship ( $n = 781$ ; 70.5%). Regarding the duration of the relationship, the majority were in the relationship between 1 and 3 years ( $n = 358$ ; 32.3%), or for more than 5 years ( $n = 314$ ; 28.3%). In addition, most of the participants did not have children ( $n = 885$ ; 79.8%) and did not have stepchildren ( $n = 1032$ ; 93.1%). Regarding their socioeconomic status (SES), the majority identified with a medium SES ( $n = 605$ ; 60.3%). Most participants were students ( $n = 599$ ; 54.0%).

During the general lockdown imposed by the Portuguese from March 18 to May 2, 2020, the economic situation of the participants tended to be the same as before the lockdown ( $n = 527$ ; 47.5%). Most participants ( $n = 635$ ; 57.3%) lived with their parents and spent less time with their partners ( $n = 529$ ; 47.6%). Finally, most participants reported that their daily routine changed during the lockdown ( $n = 865$ ; 78.0%).

**Table 1**

*Sample Sociodemographic Characteristics*

		N	%
Gender	Female	967	86.2

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Nationality	Male	142	13.8
	Portuguese	1023	92.2
	Brazilian	79	7.1
	French	2	0.2
	Mozambican	2	0.2
Sexual Orientation	Others (Cape Verdean, Spanish and English)	3	0.3
	Heterosexual	1012	91.3
	Bisexual	66	5.9
	Homosexual	29	2.6
	Others (Asexual and Pansexual)	2	0.2
Type of relationship	Dating	781	70.5
	Marriage	185	16.7
	Facto union	98	8.8
	Casual	37	3.3
	Others (e.g., lovers)	8	0.7
Duration of the relationship	Between 1 and 3 years	358	32.3
	More than 5 years	314	28.3
	Between 3 and 12 months	200	18.0
	Between 3 and 5 years	184	16.6
	Less than 3 months	53	4.8
Children	No	885	79.8
	Yes	224	20.2
Stepchildren	No	1032	93.1
	Yes	77	6.9
Socioeconomic status (SES)	Medium	605	60.3
	Medium-low	247	24.6
	Medium-high	98	9.8
	Low	43	4.3
	High	10	1.0
Professional Situation	Student	599	54.0
	Employee	305	27.5
	Student-worker	81	7.3
	Unemployed	80	7.2
	Other (e.g., freelancer)	27	2.4
	Domestic	9	0.8
	Retired	9	0.8
Situation economic during lockdown	Same	527	47.5
	Better	377	34.0
	Worse	44	4.0
Cohabitation during lockdown	Parents	635	57.3
	Partner and children (or stepchildren)	170	15.3
	Partner	145	13.1
	Partner, parents, and others family members	59	5.3
	Children	21	1.9
Time with partner during the lockdown	Less	529	47.6
	More	323	34.0
	Same	97	8.7
Daily routine changed during lockdown	Yes	865	78.0
	No	244	22.0

### Measures

***Sociodemographic Questionnaire.*** Participants answered several sociodemographic questions, including gender, age, nationality, sexual orientation, socioeconomic status, school/professional situation and number of children and stepchildren. Participants were also asked the type and duration of the

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relationship. Other questions about the general lockdown were also asked, namely work situation, economic situation, with whom they cohabited, number of days in lockdown and if their daily routine changed due to the lockdown. Participants in a relationship were also asked about the amount of time they were spending with their partners.

***Coparenting Questionnaire*** (CQ; Margolin et al., 2001; Portuguese version by Pedro and Ribeiro, 2015). The QC intends to evaluate various dimensions of coparenting. It consists of 14 items (e.g., “My partner discusses with me because of our child”) that are evaluated on a Likert scale from 1 (“Never”) to 5 (“Always”). This questionnaire is comprised by three dimensions: the level of respect and support that exists between the couple as parents, designated as cooperation (e.g., “My partner tells me a lots of things about this child”), the interparental conflict regarding the education of the children, known as conflict (e.g., “My partner argues with me about this child”), and the attempts to coalition with the child who rejects one of the parental figures, designated by triangulation (e.g., “My partner uses this child to get back at me”). This questionnaire has acceptable internal consistency coefficients, in the original version ( $.69 < \alpha < .87$ ) and in the Portuguese version ( $.71 < \alpha < .88$ ).

***Revised Conflict Tactics Scale*** (CTS2; Straus et al., 1996; Portuguese version by Paiva and Figueiredo, 2006). The CTS2 is a self-report scale that assesses the amount of conflict between partners who are in a dating relationship, marital relationship, or cohabiting (Jones et al., 2017). It consists of five subscales that evaluate negotiation (e.g., “My partner showed respect for my feelings about an issue”), psychological aggression (e.g., “My partner threatened to hit or throw me something”), physical abuse without sequels (e.g., “My partner slapped me”), sexual coercion (e.g., “My partner made me have sex without a condom”) and physical abuse with sequels (e.g., “My partner went to the doctor because of a fight with me”). Questions were designed to be asked about both the participant and the partner which results in two questions for each item for a total of 78 questions. In the present study, we only questioned the participant about the conflict tactics adopted by the participant's partner (i.e., 39 questions), in order to assess victimization. For each item of the questionnaire, the participant specified the chronicity, that is, how many times the acts occurred in the last two months, from 1 (“Never happened”) to 8 (“Not in these two months, but it has happened before”). In the original study, the internal consistency values of the scale ranged between 0.79 and 0.95 for subscales. In the Portuguese version, Paiva and Figueiredo (2006) reported an internal consistency between 0.47 and 0.74 for subscales.

**Relational Assessment Scale** (RAS; Hendrick, 1988; Portuguese version by Lind, 2008). The RAS is a self-report scale that measures marital satisfaction. It consists of seven items (e.g., "How often do you wish you hadn't gotten into this relationship?"), answered on a scale from 1 ("very little") to 5 ("very much"). These items explore different aspects of the relationship and are generalizable, which makes the RAS suitable for couples living together, dating and in homosexual relationships (Hendrick, 1988). The scale showed high internal consistency, both in the original and Portuguese versions ( $\alpha$  [both] = .86).

**Division of Household Tasks** (DHT). This questionnaire was built for the present investigation (Costa & Arantes, Sub), based on the existing literature (Cerrato & Cifre, 2018; Cowan & Cowan, 1988; Poortman & Van Der Lippe, 2009) to analyze the division of household tasks by both members of the couple, as well as understanding the existence of equity in their realization. Our scale consists of 15 items that are subdivided into 3 subscales: indoor tasks (e.g., "Preparing meals", "Washing the dishes"), outdoor tasks (e.g., "Doing the daily shopping", "Taking the garbage / recycling"), and daily care provided to children (e.g., "Helping children with homework", "Talking to the children"). Responses of the participants ranged from 1 ("always me") to 5 ("always the partner"). This questionnaire has a good internal consistency value ( $\alpha$  = .80).

**Emotional Dependency Questionnaire** (EDQ; Hoyos & Arredondo, 2006; Portuguese version by Rodrigues and Arantes, sub). This questionnaire aims to assess the emotional dependence felt by each element in an intimate relationship. It consists of 23 items that address psychological characteristics according to the participants' own perceptions about themselves and those around them, as well as stimuli that can be threatening to the relationship and interpersonal strategies to combat them. All items are answered on a 6-point Likert scale from 1 ("It does not describe me") to 6 ("It describes me perfectly"). The EDQ has six factors, namely separation anxiety (e.g., "When my partner has to go away for some days, I feel distressed"), affective expression (e.g., "I constantly need expressions of affection from my partner"), modification of plans (e.g., "I only have fun when I'm with my partner"), fear of loneliness (e.g., "I feel a sense of emptiness when I'm alone"), limit expression (e.g., "I am a needy and fragile person") and seeking attention (e.g., "I do everything possible to be the center of attention in my partner's life"). The total scale showed high internal reliability in the original study ( $\alpha$  = .927), as well as in the Portuguese version ( $\alpha$  = .91).



## Procedure

The questionnaire was administered online, using Qualtrics software, version 2018 of the Qualtrics Research Suite ([www.qualtrics.com](http://www.qualtrics.com)). Participants did not receive monetary compensation, and were recruited through personal and institutional e-mails, online social networks (e.g., Facebook). For all participants, sociodemographic and covid-19 questions were presented first. Then, they answered to the CTS2, RAS and EDQ, in a counterbalanced order. Those participants that were currently living with their partners also answered to the DHT. In addition, those participants that had children or stepchildren were also asked to complete the CQ. Each participant took approximately 15 minutes to complete the questionnaire.

## Data analysis

All collected data were exported to Excel. Analyses were conducted using the Statistical Package for the Social Sciences (SPSS; v. 27), and included: i) Descriptive analysis; ii) Pearson's correlations to examine the relationship between the different variables under study; iii) *t*-tests for independent samples to investigate possible gender differences, individuals with or without children, and those who lived with or without the intimate partner during lockdown; iv) Univariate analyses of variance (ANOVA) to examine possible differences between participants with different sexual orientations and cohabitations during lockdown.

## Results

### Descriptive Analyses

Distributions for individual variables were examined. Table 2 shows descriptive statistics for the sample on the following variables: age, lockdown days, time with partner during the lockdown, economic situation due to the pandemic, coparenting, conflict between partners, relationship satisfaction, division of household tasks, and emotional dependency. Results are shown for both the full sample, and separately for males and females. Results showed that, compared to women, male participants tended to report lower levels of negotiation,  $t(122,025) = -2.097, p < .05$ , and physical abuse without sequels,  $t(713,674) = -3.092, p < .01$ , and higher levels of emotional dependence,  $t(782) = 2.157, p < .05$ , and collaboration from their partners in household tasks,  $t(265) = 3.393, p < .01$ .

### Table 2

*Descriptive statistics (M = Mean; SD = Standard Deviation) for the full sample, females and males*

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	Full Sample		Females		Males		<i>p</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	
Age	25.73	9.51	25.62	9.25	26.10	10.85	.577
LD	53.34	22.06	53.62	10.56	51.79	13.78	.108
TPL	3.34	2.44	3.36	2.45	3.13	2.35	.309
ESP	3.45	1.04	3.44	1.01	3.48	1.23	.692
CQ							
Cooperation	3.50	1.26	3.47	1.28	3.93	.73	.193
Conflict	2.05	.86	2.06	.87	1.87	.72	.595
Triangulation	1.30	.58	1.28	.57	1.67	.54	.144
CTS2							
Negotiation	5.01	1.49	5.06	1.46	4.69	1.66	.038*
Psychological aggression	1.45	.92	1.46	.95	1.38	.62	.267
Physical abuse without sequels	1.11	.53	1.12	.57	1.04	.11	.002**
Sexual coercion	1.17	.54	1.17	.57	1.14	.34	.539
Physical abuse with sequels	1.04	.41	1.05	.44	1.08	.09	.497
RAS	4.22	.87	4.22	.88	4.27	.78	.532
DHT	2.72	.49	2.68	.48	3.00	.43	.001**
EDQ	2.49	.91	2.46	.91	2.66	.89	.031*

Note 1. LD = Lockdown Days; TPL = Time spent with Partner during Lockdown; ESP = Economic Situation due to the Pandemic; CQ = Coparenting Questionnaire; CTS2 = Revised Conflict Tactics Scale; RAS = Relational Assessment Scale; DHT = Division of Household Tasks; EDQ = Emotional Dependency Questionnaire.

Note 2. *t*-tests are made to compare males and females.

\*\*  $p < .01$ . \*  $p < .05$ .

### Correlational Analysis

We examined correlations among age, lockdown days, time with partner during the lockdown, economic situation due to the pandemic, coparenting, conflict between partners, relationship satisfaction, division of household tasks, and emotional dependency. Results are shown in Table 3.

Age was positively correlated with time spent with partner during lockdown ( $r = .412, p < .001$ ), psychological aggression ( $r = .169, p < .001$ ), and physical abuse without sequels ( $r = .169, p < .001$ ), showing that older individuals tended to spend more time with their partners during lockdown and to experience more psychological aggression and physical abuse without sequels from their partners. However, age was negatively correlated with lockdown days ( $r = -.120, p < .001$ ), negotiation ( $r = -.128, p < .001$ ), relationship satisfaction ( $r = -.235, p < .001$ ), and emotional dependency ( $r = -.178, p < .001$ ). That is, older participants were less time in lockdown, and reported less negotiation and emotionally dependency.

Lockdown days was positively correlated with physical abuse without sequels ( $r = .079, p < .05$ ), showing that as time in lockdown passed, the level of physical abuse without sequels increased.

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Time spent with partner during lockdown was positively correlated with cooperation ( $r = .320, p < .001$ ), psychological aggression ( $r = .087, p < .05$ ), and division of household tasks ( $r = .238, p < .001$ ). That means that participants that spent more time with their partners during lockdown tended to report higher levels of coparenting cooperation, to experience more psychological aggression from their partners, and to report higher levels of collaboration from their partners in household tasks. In addition, time with partner during lockdown was negatively correlated with conflict ( $r = -.206, p < .05$ ), triangulation ( $r = -.232, p < .05$ ) and emotional dependence ( $r = -.113, p < .01$ ). That is, individuals that spent more time with their partners during lockdown tended to have less coparenting conflict and triangulation, and to be less emotionally dependent on their partners.

The economic situation due to the pandemic was positively correlated with relationship satisfaction ( $r = .088, p < .05$ ), and division of household tasks ( $r = .194, p < .01$ ), indicating that participants that reported having a better economic situation due to the pandemic reported higher levels of relationship satisfaction and to have partners that collaborate more in the household tasks. However, the economic situation due to the pandemic was negatively correlated with conflict ( $r = -.302, p < .01$ ), psychological aggression ( $r = -.103, p < .01$ ) and emotional dependence ( $r = -.076, p < .05$ ), showing that participants that reported having a better economic situation stated less coparenting conflict, experienced less psychological aggression from their partners and were less emotionally dependent on their partners.

Cooperation was positively correlated with negotiation ( $r = .323, p < .001$ ), relationship satisfaction ( $r = .506, p < .001$ ) and division of household tasks ( $r = .390, p < .001$ ). That is, participants that showed higher levels of coparenting cooperation had a tendency to show higher levels of negotiation, relationship satisfaction, and collaboration from their partners in household tasks. Conversely, cooperation was negatively correlated with conflict ( $r = -.388, p < .001$ ), triangulation ( $r = -.329, p < .001$ ), psychological aggression ( $r = -.312, p < .01$ ), physical abuse without sequels ( $r = -.288, p < .01$ ), sexual coercion ( $r = -.263, p < .01$ ), an emotional dependence ( $r = -.312, p < .01$ ). In other words, participants that showed higher levels of coparenting cooperation tended to show lower levels of coparenting conflict and triangulation, to experienced less psychological aggression, physical abuse without sequels and sexual coercion from their partners, and to be less emotionally dependent on their partners.

Conflict was positively correlated with triangulation ( $r = .639, p < .001$ ), psychological aggression ( $r = .573, p < .001$ ), physical abuse without sequels ( $r = .452, p < .001$ ), physical abuse with sequels ( $r = .273, p < .01$ ), sexual coercion ( $r = .335, p < .001$ ), and emotional dependence ( $r = .278, p < .01$ ).

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These results showed that individuals that reported higher levels of coparenting conflict tended to show higher levels of coparenting triangulation, to report more emotional dependence on their partners, and to experience more psychological and physical abuse – with and without sequels – from their partners, as well as sexual coercion. There were also significant negative correlations between conflict and negotiation ( $r = -.411, p < .001$ ), relationship satisfaction ( $r = -.637, p < .001$ ) and division of household tasks ( $r = -.526, p < .001$ ). That is, individuals who reported more coparenting conflict, revealed less negotiation, relationship satisfaction and reported lower levels of collaboration from their partners in household tasks.

Results showed that triangulation was positively correlated with psychological aggression ( $r = .690, p < .001$ ), physical abuse without sequels ( $r = .595, p < .001$ ), physical abuse with sequels ( $r = .279, p < .01$ ), and sexual coercion ( $r = .328, p < .001$ ). In other words, participants that reported more coparenting triangulation tended to report higher levels of psychological aggression, physical abuse – with and without sequels –, and sexual coercion. There were also negative correlations between triangulation and negotiation ( $r = -.362, p < .001$ ), relationship satisfaction ( $r = -.605, p < .001$ ) and division of household tasks ( $r = -.444, p < .001$ ). That is, individuals that revealed higher levels of coparenting triangulation, had a tendency to reveal lower levels of negotiation, relationship satisfaction, and collaboration from their partners in household tasks.

Our data also showed that negotiation was positively correlated with relationship satisfaction ( $r = .389, p < .001$ ) and division of household tasks ( $r = .264, p < .001$ ), showing that individuals with higher levels of negotiation tended to be more satisfied with their intimate relationship, and to have partners that collaborate more in the household tasks. However, negotiation was negatively correlated with psychological aggression ( $r = -.117, p < .01$ ) and physical abuse without sequels ( $r = -.092, p < .05$ ). That means that individuals with higher levels of negotiation had a tendency to experience less psychological aggression and physical abuse without sequels.

Psychological aggression was positively correlated with physical abuse without sequels ( $r = .695, p < .001$ ), sexual coercion ( $r = .451, p < .001$ ), physical abuse with sequels ( $r = .370, p < .001$ ), and emotional dependence ( $r = .161, p < .001$ ), whereas it was negatively correlated with relationship satisfaction ( $r = -.517, p < .001$ ) and division of household tasks ( $r = -.423, p < .001$ ). These results show that participants who reported higher levels of psychological aggression tended to report higher levels of physical abuse – with and without sequels –, sexual coercion, and emotional dependence, lower levels of relationship satisfaction and collaboration from their partners in household tasks.

Physical abuse without sequels was positively correlated with sexual coercion ( $r = .464, p < .001$ ), and physical abuse with sequels ( $r = .434, p < .001$ ). That means that participants that reported higher

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levels of physical abuse without sequels tended to report higher levels of physical abuse with sequels and sexual coercion. Conversely, physical abuse without sequels was negatively correlated with relationship satisfaction ( $r = -.406, p < .001$ ) and division of household tasks ( $r = -.309, p < .01$ ). That is, individuals who revealed higher levels of physical abuse without sequels, had a tendency to reveal lower levels of relationship satisfaction and collaboration from their partners in household tasks.

Sexual coercion was positively correlated with physical abuse with sequels ( $r = .374, p < .001$ ), and emotional dependence ( $r = .157, p < .001$ ). These results show that participants who reported higher levels of sexual coercion tended to report higher levels of physical abuse with sequels and emotional dependence. In addition, sexual coercion was negatively correlated with relationship satisfaction ( $r = -.251, p < .001$ ) and division of household tasks ( $r = -.315, p < .001$ ), showing that participants that reported higher levels of sexual coercion, revealed less relationship satisfaction and lower levels of collaboration from their partners in household tasks.

Results showed that physical abuse with sequels was negatively correlated with relationship satisfaction ( $r = -.093, p < .05$ ), showing that individuals with higher levels of physical abuse with sequels tended to be less satisfied with their intimate relationship.

Our data showed that relationship satisfaction was positively correlated with division of household tasks ( $r = .442, p < .001$ ). In other words, participants that reported more satisfaction with their intimate relationship tended to have partners that collaborate more in household tasks. There were also negatively correlated between relationship satisfaction and emotional dependence ( $r = -.138, p < .001$ ). That is, participants that revealed higher levels of relationship satisfaction tended to report more emotional dependence on their partners.

Next, we investigated whether males and females had significantly different correlations for the variables in Table 3. Results showed that for men (but for women), days in lockdown was negatively correlated with time spent with partner during lockdown ( $r = -.236, p < .05$ ) and positively correlated with severe sexual coercion ( $r = .355, p < .01$ ), showing that as time in lockdown passed, men spent more time spent with their partners and experienced more severe sexual coercion from their partners. Also in men, time spent with partner during lockdown was positively correlated with physical abuse without sequels ( $r = .215, p < .05$ ). That is, men participants that spent more time with their partners during lockdown tended to experience more physical abuse without sequels. The economic situation due to the pandemic was positively correlated with triangulation ( $r = .924, p < .01$ ), showing that men participants that reported having a better economic situation due to the pandemic stated more coparenting triangulation.

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We also consider it important to analyze the results according to people who stayed in lockdown for longer and shorter, considering the median of days in the sample (i.e., 54 days). For those participants that were in lockdown for longer (i.e., for more than 54 days), but not for those that were in lockdown for shorter (i.e., for less than 54 days), lockdown days was negatively correlated with cooperation ( $r = -.304$ ,  $p < .05$ ), that is, the greater the number of days in lockdown, less coparenting cooperation was revealed. Conversely, lockdown days was positively correlated with psychological aggression ( $r = .187$ ,  $p < .01$ ), physical abuse without sequels ( $r = .134$ ,  $p < .05$ ), and sexual coercion ( $r = .122$ ,  $p < .05$ ), showing that as time in lockdown passed, the level of psychological aggression, physical abuse without sequels and sexual coercion increased. This result was only obtained for participants that were in lockdown for longer than 54 days.

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**Table 3**

Pearson's correlations between age, lockdown days, time spent with partner during the lockdown, economic situation due to the pandemic, coparenting, conflict between partners, relationship satisfaction, division of household tasks and emotional dependency.

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1. Age	-														
2. Lockdown Days	-.120***	-													
3. Time with partner	.412**	-.066	-												
4. Economic situation	.013	.012	-.007	-											
Coparenting															
5. Cooperation	-.047	.028	.320***	.108	-										
6. Conflict	.038	.103	-.206*	-.302**	-.388***	-									
7. Triangulation	.062	.001	-.232*	-.177	-.329***	.639***	-								
Conflict between partners															
8. Negotiation	-.128***	.050	-.020	.040	.323***	-.411***	-.362***	-							
9. Psychological aggression	.169***	.063	.087*	.103**	-.312**	.573***	.690***	-.117**	-						
10. Physical abuse without sequels	.126**	.079*	.024	-.018	-.288**	.452***	.595***	-.092*	.695***	-					
11. Sexual Coercion	.036	.074	-.020	-.061	-.263**	.335***	.328***	-.030	.451***	.464***	-				
12. Physical abuse with sequels	-.007	.065	-.045	-.015	-.069	.273**	.279**	.061	.370***	.434***	.374***	-			
13. Relationship Satisfaction	-.235***	-.018	-.012	.088*	.506***	-.637***	-.605***	.389***	-.517***	-.406***	-.251***	-.093*	-		
14. Division of Household Tasks	-.070	.034	.238***	.194**	.390***	-.526***	-.444***	.264***	-.423***	-.309***	-.315***	-.017	.442***	-	
15. Emotional Dependency	-.178***	.035	-.113**	-.076*	-.312**	.278**	.125	-.042	.161***	.060	.157***	.021	-.138***	-.112	-

\*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ .

**Differences between individuals with and without children**

In order to investigate possible differences between individuals with and without children, *t*tests for independent samples. Results showed that individuals with children tended to report higher levels of coparenting cooperation,  $t(120) = 3.320, p < .01$ , psychological aggression,  $t(183,352) = 4.611, p < .001$ , physical abuse without sequels,  $t(188,889) = 2.878, p < .01$ , and sexual coercion,  $t(226,645) = 2.000, p < .05$ , than individuals without children. Individuals without children showed higher levels of negotiation,  $t(213,949) = -2.352, p < .05$ , more relationship satisfaction,  $t(213,295) = -5.136, p < .001$ , division of household tasks,  $t(265) = -3.444, p < .01$ , and emotional dependence,  $t(781) = -3.216, p < .01$ , compared to individuals with children.

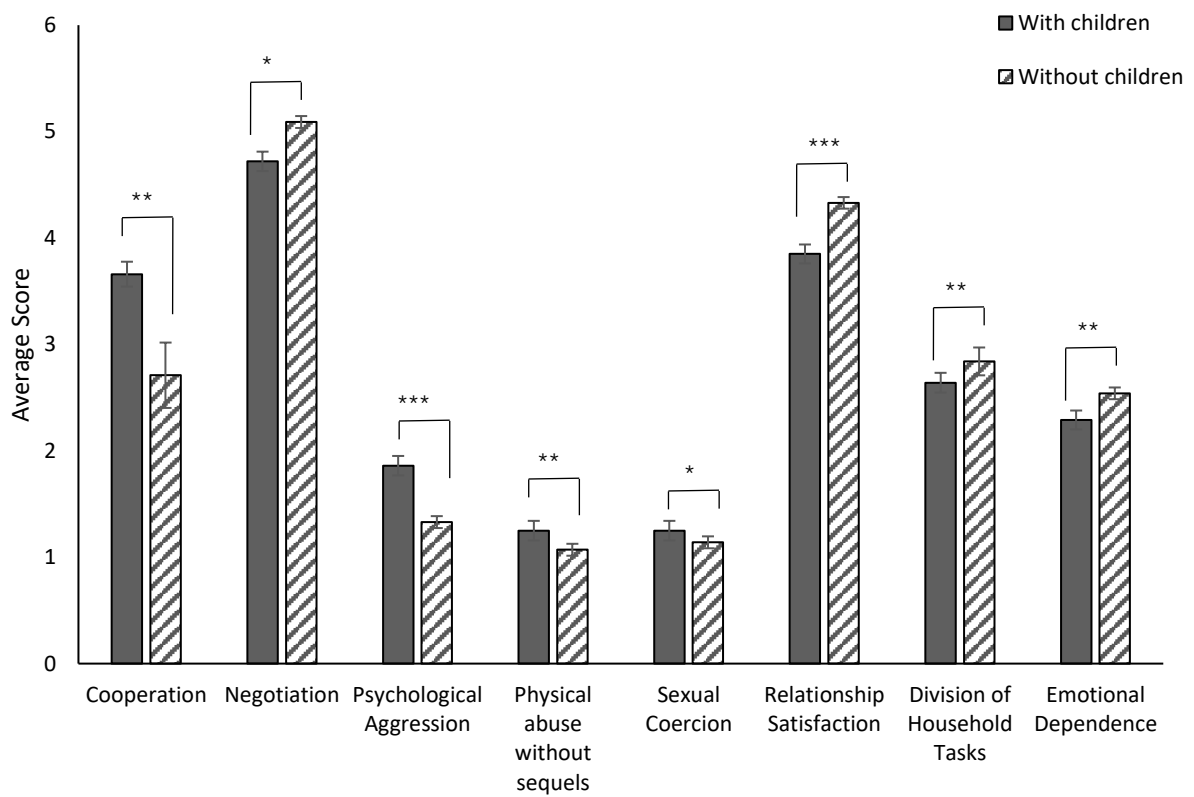


Figure 1. Average scores for differences of participants with children and without children. Errors bars represent standard error. \*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ .

**Differences between participants who lived or not with their partners during lockdown**

In order to analyze possible differences between individuals who lived or not with their partners during the lockdown, we use *t*tests for independent samples. Results showed that participants who live with their partners tended to report higher levels of coparenting cooperation,  $t(121) = 2,456, p < .05$ , psychological aggression,  $t(345,709) = 4,940, p < .001$ , physical abuse without sequels,  $t(358,608) =$



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2,439,  $p < .05$ , and sexual coercion,  $t(419,467) = 1,974$ ,  $p < .05$ , compared to participants who did not live with their partners. Individuals who did not live with their partners showed higher levels of negotiation,  $t(429,426) = -2,153$ ,  $p < .05$ , more relationship satisfaction,  $t(421,842) = -3,508$ ,  $p < .001$ , and emotional dependence,  $t(784) = -3.408$ ,  $p < .01$ , compared to individuals who lived with their partners during the lockdown.

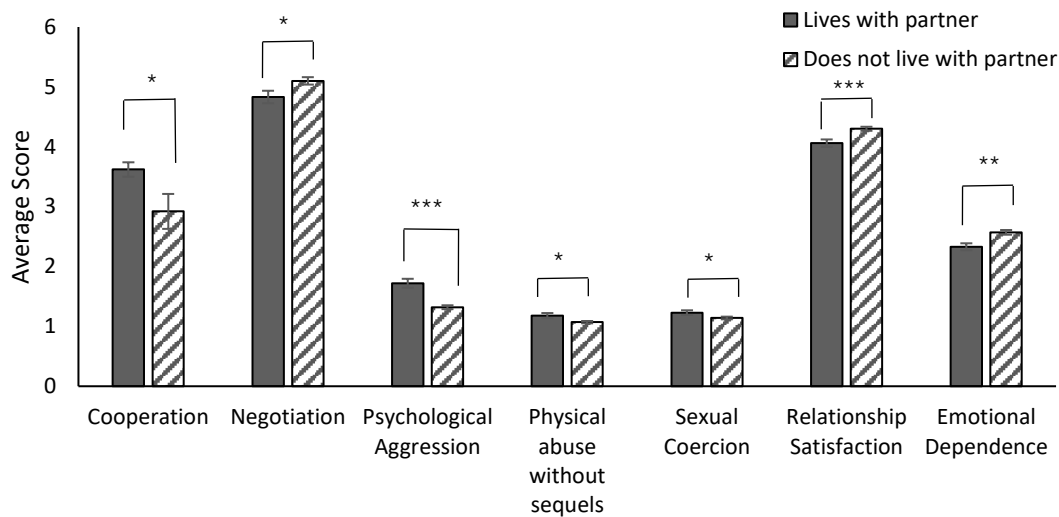


Figure 2. Average scores for differences between participants who lived or not with partners during the lockdown. Errors bars represent standard error. \*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ .

### Differences in sexual orientation

In order to analyze possible differences between participants depending on their sexual orientations, unidirectional ANOVAs were performed. Results showed a significant effect of emotional dependence,  $F(3,782) = 7.345$ ,  $p < .001$ . Post-hoc Bonferroni tests showed that homosexual ( $M = 3.04$ ;  $SD = 1.06$ ) and bisexual ( $M = 2.96$ ;  $SD = 1.18$ ) reported more emotional dependence, when compared with heterosexual individuals ( $M = 2.44$ ;  $SD = .88$ ).

### Differences in cohabitation during lockdown

Unidirectional ANOVAs were performed to examine possible differences between couples who lived together alone, with children (or stepchildren), or with other family members (e.g., parents). Results showed a significant effect of psychological aggression,  $F(4,750) = 13.581$ ,  $p < .001$ . Post-hoc Bonferroni tests showed that couples who lived with children (or stepchildren) ( $M = 1.95$ ;  $SD = 1.45$ ) reported higher levels of psychological aggression compared to couples who lived together alone ( $M = 1.51$ ;  $SD = .82$ ).

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Our data also showed a significant effect of relationship satisfaction,  $F(4,753) = 3.664, p < .01$ . Post-hoc Bonferroni tests showed that couples who lived together alone ( $M = 4.23; SD = .84$ ) revealed to be more satisfied with their intimate relationship compared to couples who lived with children (or stepchildren) ( $M = 3.85; SD = 1.15$ ).

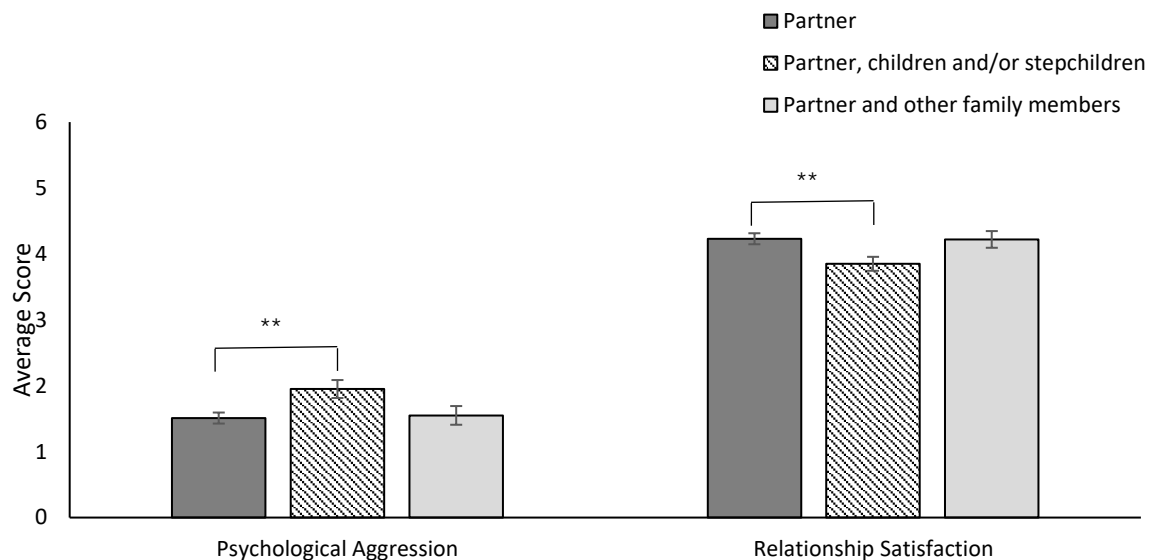


Figure 3. Average scores for differences in cohabitation during lockdown. Errors bars represent standard error. \*  $p < .05$ . \*\*  $p < .01$ . \*\*\*  $p < .001$ .

## Discussion

The Covid-19 pandemic and the measures implemented had negative impacts on several factors including on intimate relationships (Arenas-Arroyo et al., 2021; Marques et al., 2020; Rayhan & Akter, 2021). However, previous studies have not focus on the effect of lockdown time on IPV. Thus, the present study aimed to investigate the impact of the Covid-19 lockdown time on IPV. In addition, we also aim to investigate the relationship between IPV and relationship satisfaction, coparenting, emotional dependency and division of household tasks during the lockdown.

Results showed that participants in lockdown for longer reported more psychological aggression, physical abuse without sequels and sexual coercion. These results are consistent with our first hypothesis. According to the literature (Rayhan & Akter, 2021; Sediri et al., 2020), psychological aggression is the most frequent type of IPV during Covid-19 lockdown. Rayhan and Akter (2021) revealed that women also experienced physical abuse and sexual violence during lockdown, although in a smaller percentage. In addition, our results reinforce the literature on male victimization, which demonstrates the experienced of physical abuse and sexual abuse (Bates, 2020; Bates & Weare, 2020; Weare, 2017). Our findings are in line with studies with young adult populations, in which victimization rates were similar in both men

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and women (Fagan & Browne, 1994; Fergusson et al., 2005; Magdol et al., 1997), which challenges the prevailing view that IPV is a “women's problem” (Fergusson et al., 2005). However, our data add to the literature by revealing that IPV increases over time of lockdown.

Our data also confirmed the second hypothesis: individuals who have spent more time with their partner during the lockdown reported more IPV, specifically psychological aggression. After the implementation of the lockdown, Agüero (2020) found a 48% increase in calls to the helpline against violence against women, during April and June 2020, having increased over time. In addition, Arenas-Arroyo and collaborators (2021) found an increase in IPV (14% - 16%) when both members of the couple are locked and that forced cohabitation increased psychological aggression.

Our third hypothesis stated that individuals whose economic situation deteriorated during the Covid-19 pandemic would report more IPV. Our data corroborate this hypothesis. Participants who perceived their economic situation as worsening during the Covid-19 pandemic scored higher on psychological aggression. Additionally, individuals who have been in lockdown for a long time (i.e. for longer than 54 days) and have economic situation deteriorated, showed higher levels of physical abuse without sequels. These results are consistent with the literature that shows that financial difficulties or a lower socioeconomic level tends to increase the risk of IPV (Okhakhume et al., 2016; Castro et al., 2017). Arenas-Arroyo and collaborators (2021) also found an increase in IPV related to economic stress. A possible explanation for this finding is that financial problems affect psychological health (Daoud et al., 2015), that is, greater tension and stress. Thus, according to these authors, partners tend to practice more psychological aggression (Raj et al., 2018; Ranganathan et al., 2019; Treves-Kagan et al., 2020).

Results also confirmed our fourth hypothesis: individuals who cohabited with children or stepchildren reported higher levels of psychological aggression, physical abuse without sequels and sexual coercion. The presence of stepchildren also increases the risk of IPV that can be explained by the fact that those who become stepfathers have less desirable characteristics and, therefore, they also seek less valuable or more fragile partners, such as being single mothers (Miner et al., 2012). Figueredo and McCloskey (1993) suggested that these men with lesser value have a disadvantage in relationships and therefore resort to relational and parenting strategies that involve intimate partner aggression. In addition, stepfathers may have less income, be more likely to divorce and, likewise, already have children (Anderson, 2000).

Our fifth hypothesis was that individuals who experience higher levels of coparenting difficulties would report more IPV. Our results were consistent with this hypothesis, since participants that experienced lower levels of coparenting cooperation tended to score more on psychological aggression,

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physical abuse without sequels and sexual coercion. These results support that coparenting are a mediator between marital conflict and parenting (Margolin et al., 2001). In addition, prior research has found that violent couples have a tendency to be more conflicted and unstable, less positive, and critical when it comes to coparenting (Katz & Low, 2004). It should be noted that exposure to conflicts and aggressions between parents, that is, a family history of violence, also increases the likelihood of IPV in future intimate relationships (Castro et al., 2017; Margolin et al., 2001).

Our sixth hypothesis stated that individuals who were emotionally dependent on their partners would report more IPV. Our results corroborate this hypothesis, as participants that experienced higher levels of emotional dependence showed higher levels of psychological aggression and sexual coercion. Kane and collaborators (2000) assessed emotional dependence in three groups of male participants (soccer players, community service volunteers and violent men). Violent men showed greater emotional dependence, that is, these men were more aggressive and emotionally dependent (Kane et al., 2000). Moreover, emotionally dependent individuals tend to have emotionally dependent partners (Rodrigues & Arantes, 2021; Tello, 2015). Other research explains the women's emotional dependence through a strong association between levels of emotional dependence and the severity of abuse (Bornstein, 2006).

Our results are consistent with seventh hypothesis. Participants who tended to do most of the household tasks alone reported more IPV, namely more psychological aggression, physical abuse without sequels and sexual coercion. According to the literature, despite the increase in paid work for women, women are still responsible for domestic work and family management (Bianchi et al., 2006; Doucet, 2015; Lavee & Katz, 2002; Nomaguchi & Milkie, 2020). However, Nourani and collaborators (2019) found a positive relationship between the participation of men in household tasks with their relationship satisfaction and of their partners. Since relationship satisfaction is also closely related to IPV (Lewis & Fremouw, 2001), a possible reason for the relationship between IPV and division of household tasks can be explained by the existence of a mediating variable: relationship satisfaction (Lewis & Fremouw, 2001).

Finally, our data are consistent with our eighth hypothesis: individuals less satisfied with their relationship report more IPV, specifically more aggression psychological, sexual coercion and physical abuse – without and with – sequels. This finding is in line with the literature, that shows an inverse association between relationship satisfaction and IPV (Lewis & Fremouw, 2001; Razera et al., 2016; Sugarman & Hotaling, 1989). For example, Bookwala and collaborators (1992) found a lower level of relationship satisfaction in violent couples compared to non-violent couples. Lewis and Fremouw (2001) defended that the relationship between these two variables is bidirectional, so that low relationship satisfaction leads to IPV, and IPV leads to low relationship satisfaction. The fact that the pandemic was

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marked by greater tensions and conflicts between couples (Cohan & Cole, 2002; Luetke et al., 2020; Marshall & Kuijer, 2017), this may have led to less relationship satisfaction and, therefore, greater IPV (Bookwala et al., 1992; Lewis & Fremouw, 2001; Razera et al., 2016; Sugarman & Hotaling, 1989).

It is important to mention some limitations of our study. First, because we used self-report measures, participants' responses may have been influenced by social desirability or fear (specially the victims of IPV), they may have difficulty understanding the instructions and questions, and may have experience deficits in their introspective capacity. Second, the average age of the participants was 26 years old. It would be interesting to conduct a similar study with an older sample in order to examine whether the same pattern of results would be obtained. Third, our sample was heterogeneous, covering men and women of different sexual orientations, types of relationships, professional situations, socio-economic status, family structures, educational levels, and others. However, it was a convenience sample, since the data were collected online through the Qualtrics software, being accessible only to a part of the population that has internet and social networks, which does not make it representative of the entire Portuguese population (Miot, 2011; Wachelke et al., 2016). In addition, most participants were female, which may have conditioned the results. Fourth, participants responded to the questionnaire individually. In the future, it would be interesting to collect data from both members of the couple.

In conclusion, results of the present study add to our understanding of the impact of Covid-19 pandemic on IPV and showed that IPV increases over time of lockdown. In addition, we also showed that there is a strong relationship between IPV and relationship satisfaction, coparenting, emotional dependence, and division of domestic during the lockdown. Results contributed to the literature by proving the negative effects of social isolation. Our study has implications for clinical settings, such as the necessity of working with the couple to develop strategies (e.g., conflict resolution, adaptation to change). It would also be important to develop intervention programs for aggressive behavior and preventive measures to mitigate risk factors (time with the partner and economic situation) reinforced by lockdown. Future research should investigate these and other variables that may also predict IPV during natural crises, in order to increase the effectiveness of the intervention and, as a result, to increase psychological well-being and establishing of healthy intimate relationships.

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**Anexo: Parecer Comissão de Ética para a Investigação em Ciências Sociais e Humanas**



Universidade do Minho

Conselho de Ética

**Comissão de Ética para a Investigação em Ciências Sociais e Humanas**

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Relatores: Emanuel Pedro Viana Barbas Albuquerque e Marlene Alexandra Veloso Matos

Título do projeto: *Impacto do Isolamento Social na Violência Doméstica*

Equipa de Investigação: Leticia Dias da Costa e Diana Teixeira, Mestrado Integrado em Psicologia, Escola de Psicologia, Universidade do Minho; Joana Arantes (Orientadora), Escola de Psicologia, Universidade do Minho

**PARECER**

A Comissão de Ética para a Investigação em Ciências Sociais e Humanas (CEICSH) analisou o processo relativo ao projeto de investigação acima identificado, intitulado *Impacto do Isolamento Social na Violência Doméstica*.

Os documentos apresentados revelam que o projeto obedece aos requisitos exigidos para as boas práticas na investigação com humanos, em conformidade com as normas nacionais e internacionais que regulam a investigação em Ciências Sociais e Humanas.

Face ao exposto, a Comissão de Ética para a Investigação em Ciências Sociais e Humanas (CEICSH) nada tem a opor à realização do projeto nos termos apresentados no Formulário de Identificação e Caracterização do Projeto, que se anexa, emitindo o seu parecer favorável, que foi aprovado por unanimidade pelos seus membros.

Braga, 4 de junho de 2021.

O Presidente da CEICSH

(Acílio Estanqueiro Rocha)

**Anexo:** Formulário de identificação e caracterização do projeto