



The role of alcohol on femicide in South Africa: Evidence from the COVID-19 epidemic

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Gender-based violence, Femicide, COVID-19 and Alcohol

- Gender-based violence (GBV) is a serious public health problem affecting 1 in 3 women globally.
- Research on drivers of GBV has identified **alcohol** as a key risk factor with evidence mainly derived from intimate partner violence (IPV) studies. These studies also show alcohol use increases the severity of the violence experienced.
- Femicide is the most extreme form and outcome of GBV with intimate partner femicide the most common manner in which women are killed in South Africa (SA).
- The safety of women and children under **COVID-19 stay-at-home lock-down** conditions was a huge concern with many warning the home as the most dangerous place for women living with abusive partners.
- The 4th dedicated national femicide survey was done in the 1st year of COVID-19 in SA, and the alcohol sale restrictions provided us with an opportunity to examine the impact of the alcohol restrictions on femicide: compared with the 2017 survey.

Study design, data collection and analysis

Mortuary-based retrospective surveys using a multi-stage stratified sample

Mortuaries/Medical Legal Laboratories and Police

- 2017 and 2020/21 surveys
 - Mortuaries – primary sampling unit
 - At sampled mortuaries we identified **female 14 years and older** murdered.
 - Extracted data from mortuary files
 - Police data collection - interview with Investigating Officer (IO)/senior staff who extracted data from the murder dockets: confirmed, victims demographics, crime data, perpetrator data
- Identified the perpetrator and the **relationship between the victim and the perpetrator**

Analysis

Weighting applied

- Age Standardised Rates (ASR) calculated
- Incidence Rate Ratios (IRR) – to compare rates / no of cases across surveys and across restriction periods
 - Weekly weighted counts/ estimates prepared for both surveys – allowed for comparison across seasonal trends
 - Poisson models used to compare
 - Consecutive lockdown periods
 - Different levels of restrictions with period with no restrictions
 - Same applied to 2017 data to compare with 2020/21
 - Compared monthly (per 28 days) estimates for different restricted periods - to adjust for different lengths of each period

Femicide definitions used in the South African Femicide Surveys

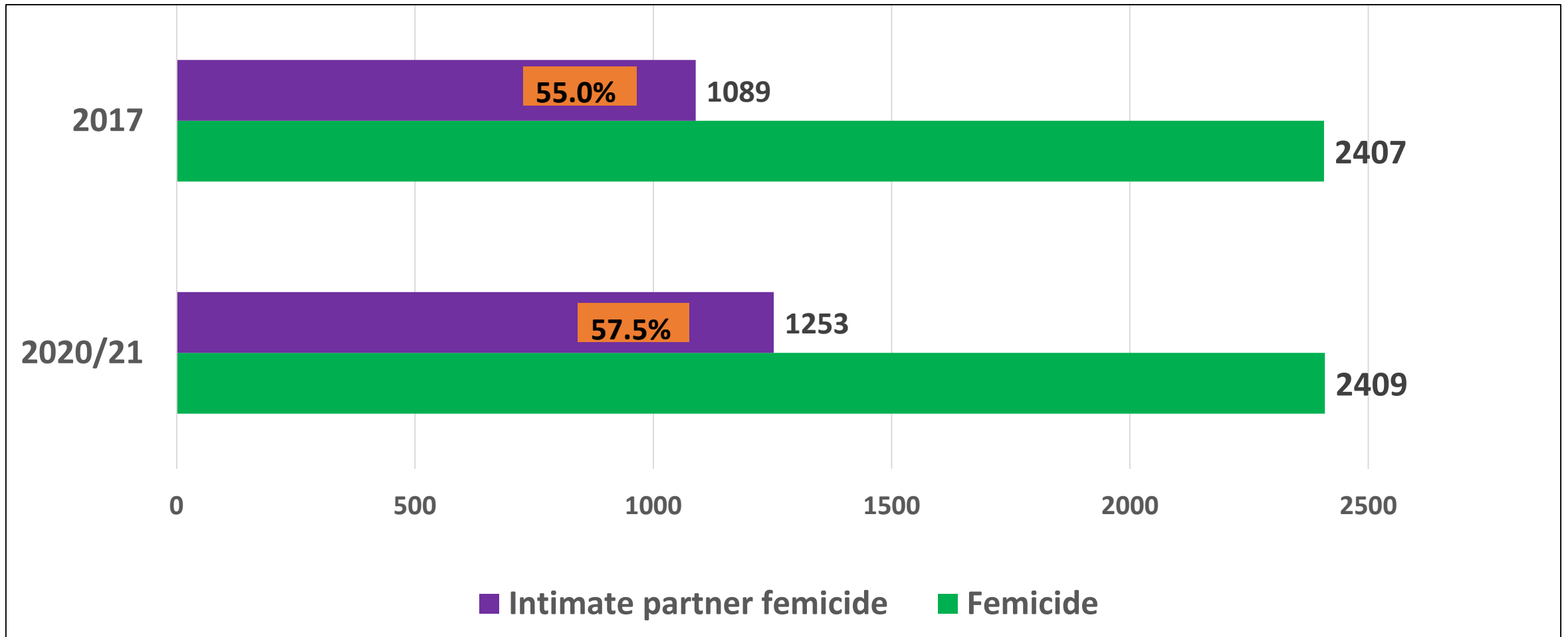
Femicide

Murder of a woman

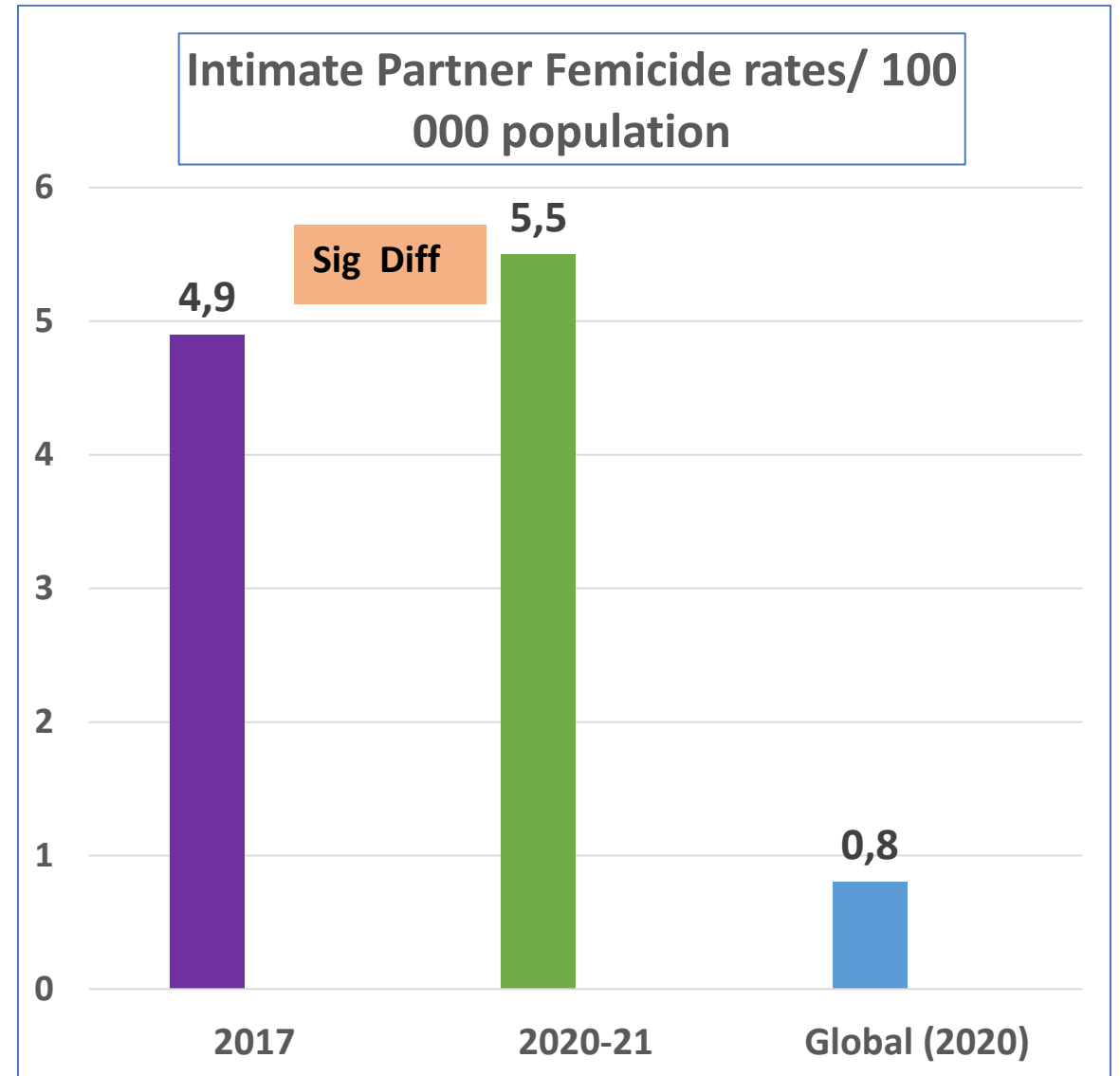
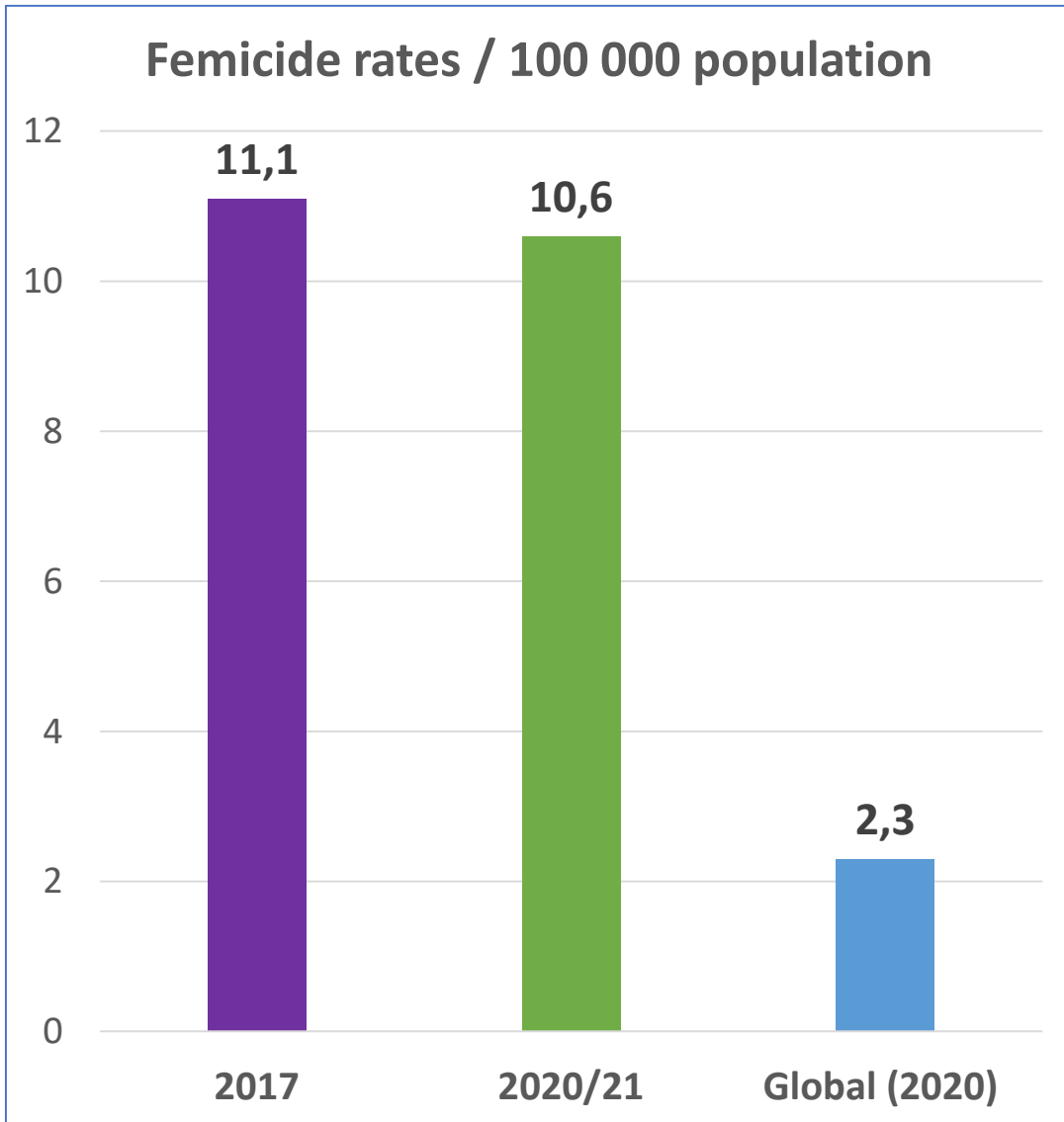
**Intimate Partner
Femicide (IPF)**

Murder of a woman by an intimate partner (i.e. a current or ex-husband/boyfriend, same-sex partner or a rejected would-be lover)

All Femicides and Intimate Partner Femicides (IPF) estimates & proportion of IPF among all femicides : South Africa



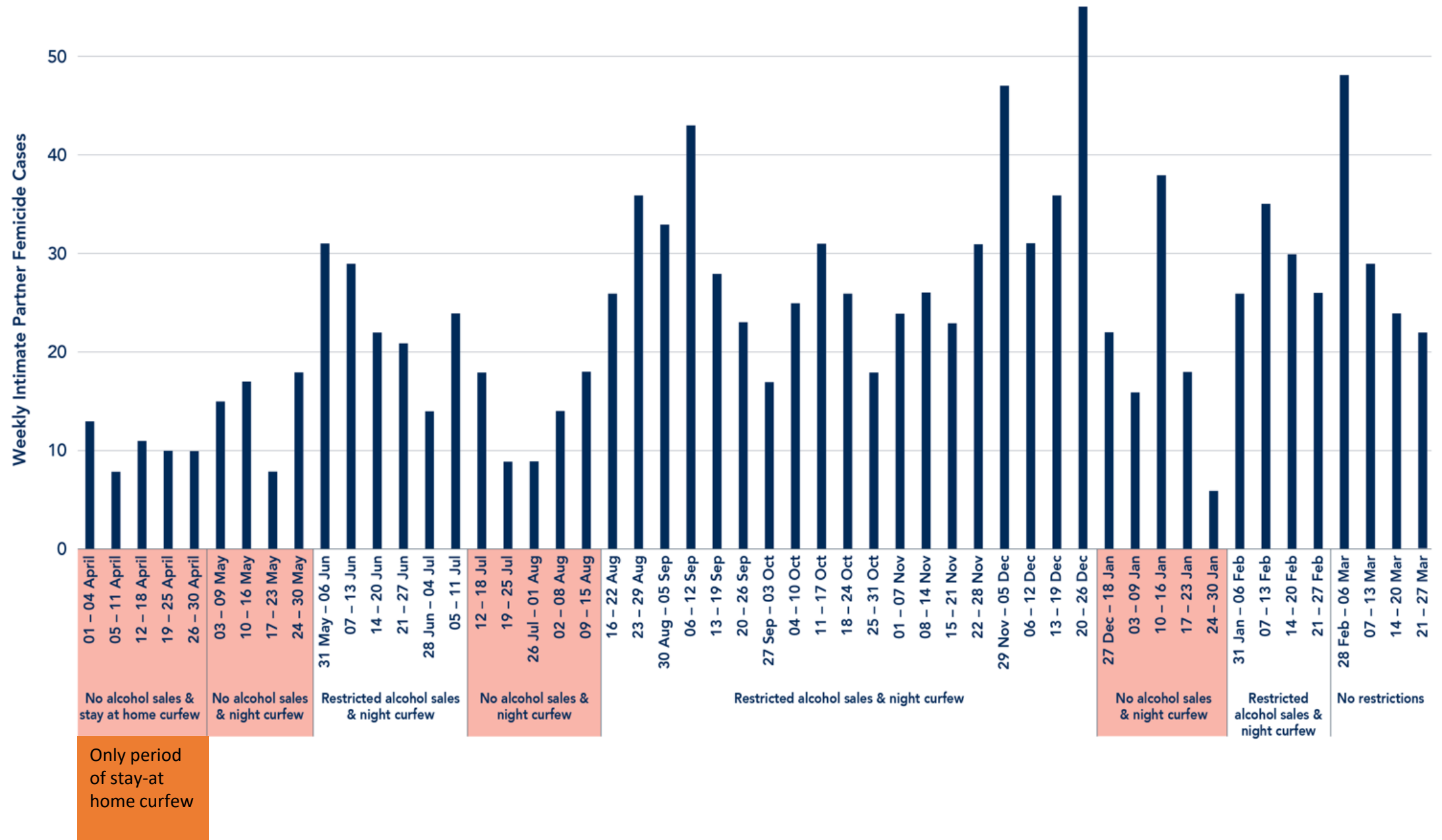
Age-standardised rates/100 000 female population



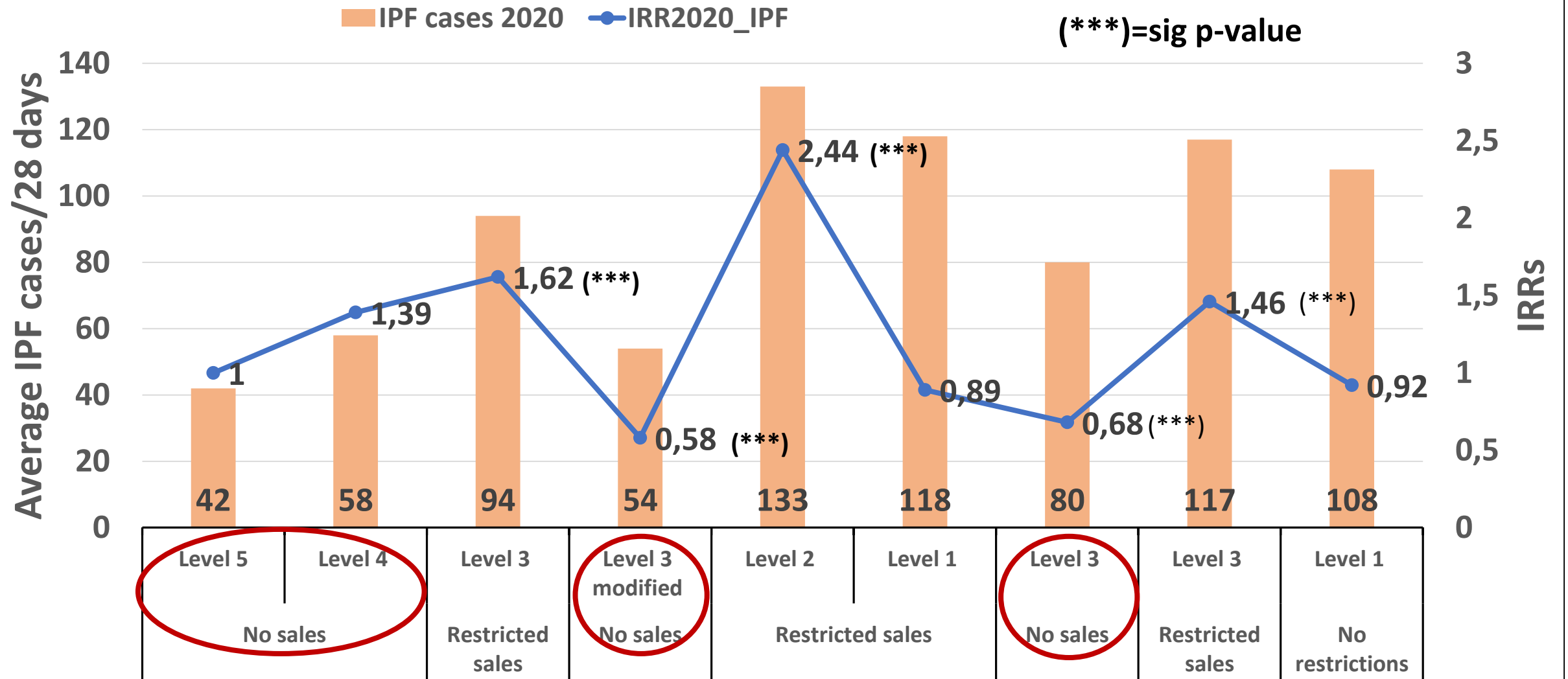
Lockdown in South Africa and periods of alcohol sale restrictions

Lock-down level and dates	No of weeks	Alcohol sales restrictions
<u>Level 5</u> 27 March – 30 April 2020	5	No alcohol sales Stay at home curfew
<u>Level 4</u> 01 May – 31 May	4	No alcohol sales Night curfew (20h00-04h00)
<u>Level 3</u> 01 June – 12 July	6	Alcohol sales permitted – with conditions Off site sales 10h00-18h00/onsite consumptions Mon-Thurs until 22h00 Night curfew (22h00-04h00)
<u>Level 3 modified</u> 13 July-17 Aug	5	No alcohol sales Night Curfew (22h00-04h00)
<u>Level 2</u> 18 Aug-20 Sep	19	Alcohol sales permitted – with conditions Late Night Curfew (23h00-04h00)
<u>Level 1</u> 21 Sep-28 Dec 2021		
<u>Level 3 modified</u> 29 Dec 2020 – 31 January 2021	4	No Alcohol sales Night curfew (21h00-04h00)
<u>Level 1</u> 1 February – 28 February	4	Alcohol sales permitted – with conditions Late Night curfew (23h00-04h00)
<u>Level 1</u> 1 March – 30 May 2021	4	No alcohol restrictions No curfew

WEEKLY NUMBER OF INTIMATE PARTNER FEMICIDE CASES DURING COVID-19: SOUTH AFRICA



AVERAGE INTIMATE PARTNER FEMICIDE CASES 2020/21 PER 28 DAYS: ACROSS LOCKDOWN LEVELS: COMPARING CONSECUTIVE PERIODS USING INCIDENCE RATE RATIOS (IRRs)



Poisson Regression models for all femicide and intimate partner femicide rates per 28 days comparing different COVID-19 restriction levels

Restriction Level	Number of weeks	2020/21		IRR (95%CI)	p-value
		Total cases	Average cases per 28 days		
All Femicides					
No restrictions	5	273	218 (142 ,294)	Ref	
Restricted alcohol sales & late-night curfew	23	1296	225 (206 ,245)	1.03 (0.91 ,1.18)	0.636
Restricted alcohol sales & night curfew	6	305	203 (178 ,229)	0.93 (0.79 ,1.10)	0.391
No alcohol sales & night curfew	14	432	123 (103 ,144)	0.57 (0.49 ,0.66)	<0.001
No alcohol sales & Stay at home curfew	5	102	82 (68 ,95)	0.37 (0.30 ,0.47)	<0.001
<u>Intimate partner femicide</u>					
No restrictions	5	135	108 (60 ,156)	Ref	
Restricted alcohol sales & late-night curfew	23	696	121 (106 ,136)	1.12 (0.93 ,1.35)	0.225
Restricted alcohol sales & night curfew	6	141	94 (74 ,114)	0.87 (0.69 ,1.10)	0.249
No alcohol sales & night curfew	14	226	65 (48 ,81)	0.60 (0.48 ,0.74)	<0.001
No alcohol sales & Stay at home curfew	5	52	42 (35 ,48)	0.39 (0.28 ,0.53)	<0.001

Conclusion

- We have seen how women were protected from being killed by their partners during periods of alcohol sale restrictions – this is despite increased risks related to being confined within the home.
- We have demonstrated the salient role of alcohol as a risk factor for intimate partner femicide
- Intentionally, addressing alcohol use in primary and secondary prevention of intimate partner violence would be an important component of the package of evidence-based prevention intervention.
- We have also shown tracking femicide is an effective tool for countries to monitor progress in their interventions to eradicate gender-based violence

ACKNOWLEDGEMENTS

- We acknowledge that behind each of these numbers is a woman/girl who have been murdered and a family affected.
- **Thank you to :**
 - National and Provincial Departments of Health – the Forensic Pathology Services
 - South African Police Service: Detective Services
 - Funders
 - The Dep of Justice and Constitutional Development and the ISCDVF
 - The fantastic research team



The South African Medical Research Council

recognizes the catastrophic and persisting consequences of colonialism and apartheid, including land dispossession and the intentional imposition of educational and health inequities.

Acknowledging the SAMRC's historical role and silence during apartheid, we commit our capacities and resources to the continued promotion of justice and dignity in health research in South Africa.

