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Review Article

The Effect of COVID on Child Maltreatment: A Review

Ami Rokach * and Sybil Chan

Department of Psychology, The Center for Academic Studies, Israel and York University, Canada.

Corresponding Author: Ami Rokach, Department of Psychology, The Center for Academic Studies, Israel and York University, Canada.

Abstract

This article addresses child maltreatment during the period where COVID-19 entered our lives in 2020. Repeated lockdowns kept children at home, away from school, from their support systems, and from their routine. Economic difficulties and having to look after the children who were at home were quite onerous on parents. The article explores the reasons that ACE increased during that time, and highlights what can parents, teachers, and the educational system do about it.

Key words: pandemic; child abuse; adverse childhood experiences; children; parents; teachers; educational system

Introduction

Child abuse is a global issue which impacts millions of children across the world (National Centre for Health Statistics, 2012) [137]. It includes the physical, emotional, and sexual mistreatment of children that are typically inflicted by those in power [225]. Research shows that victims of early abuse are at risk of permitting intergenerational trauma within their own families and communities through aggressive and antisocial behaviours [11,80,189]. This form of maltreatment is regarded as an important social issue by the public and threatens the morbidity and mortality by those all involved [26]. Consequently, early adverse experiences are known to place significant threats on children's neural systems [126]. Children faced with adversity are known to have impaired emotional processing systems that makes it challenging them to have trust in others [126]. This hostile attribution bias makes them more vulnerable to other mental health problems, thus, predisposing them to a poorer psychopathology over time [126].

However, the absence of social connection and certainty during the COVID-19 pandemic presents itself as a traumatizing and life-threatening experience for victims of child maltreatment. Reports of increased anger, frustration, confusion, and PTSD-like symptoms follow the natural progression of abuse to begin and persist [96]. Populations who are most vulnerable to the effects of abuse become subjects of its impact overtime. Even for children who are not the targets of these violent events can still be harmed by its psychological and behavioral inflictions later in life (Vu et al., 2016). Therefore, the drawbacks of social isolation at home may instill risks for children that are subject to experiencing maltreatment when left with their abusers [90].

In fact, 78% of child abuse and neglect has been found to be perpetrated by the guardians within an immediate household [220]. Further data also shows that this may be dispersed differently across several ethnic backgrounds. Sixty one percent of African American children and 51% of Hispanic children have experienced at least one ACE [Adverse childhood experience] on average when compared to the Caucasian, non-Hispanic youth [174]. This suggests that children of specific backgrounds are more likely to face ACEs during quarantine, as emerging evidence has found that rates of maltreatment are steadily increasing throughout COVID-19 [31,199].

Previous Research on ACES and Child Development

Theories detailing the resilience of children maintains that most will be able to overcome a single episode of maltreatment [142]. However, this ability diminishes as risk factors accumulate in their personal lives [109,119]. COVID-19 has set a new precedent for risk factors which may impact child development and can be most prominently understood through the consequences of prolonged social isolation. For example, the National Centre for Injury Prevention and Control (NCIPC) and Division of Violence Prevention (2020) note that the combination of heightened family and parenting stress, weakened social connections and social isolation presents several risks for maltreatment to occur [204]. It can be understood through the cumulative risk hypothesis which suggests that greater risks incite a greater prevalence of clinical and developmental issues [172,175,176]. This means that children who face multiple adversities are more likely to develop psychological or debilitating conditions as a result.

Specifically, the Isle of Wight Study conducted by Rutter (1979) and colleagues (Rutter et al., 1976) identified six factors which significantly correlate with childhood psychological disorders [172,173]. These include challenges associated with severe marital conflict, large family size, low social status, paternal criminality, maternal mental illness and out of home care placement. It was revealed that no exclusive factor substantially increased the risk for developing a disorder, but rather, an accumulation of these adversities together. A combination of only two factors was found to increase the likelihood of developing a mental

disorder by fourfold, with four or more factors presenting a 10-fold increase as well [172,173,175]. Similar results were shown in the Adverse Childhood Experiences studies which also featured a positive, cumulative relationship between adversity and poor psychophysiological health [61,65].

Poverty and socioeconomic instability have also been related to higher rates of child abuse in the past [28,140,196]. Studies have shown that higher rates of binge drinking, domestic violence and overall declines in health are evident during times of economic depression [28,56,180]. However, the relationship between these periods of economic downturn and its influence on different types of child maltreatment remains unclear. For example, Seiglie (2004) found that this was only true for cases of neglect, and not for physical abuse [184]. Schenck-Fontaine and colleagues (2017) decided to investigate this relationship further, finding that income inequality was most significantly related to increases in risks of child abuse and maltreatment to occur [178]. Overall, it is evident that the connection between economic decline and violence against children remains complex and requires further research to unravel.

Altogether, these findings reflect concerns made by Bryce (2020) regarding the health of child victims during COVID-19 [24]. Numerous risk factors which exist because of the pandemic may exacerbate pre-existing conditions that are already harmful to maltreated youth. This can be understood through Bromfield et al.'s (2007) term of cumulative harm which describes the exponential effects of accumulated adverse experiences on our health [19]. Bromfield et al.'s (2007) has been used to describe a variety of social issues evident in our society, even including the cumulative harm of global warming due to human and environmental factors [19, 82]. The same parallels can be drawn as well in the context of child abuse and COVID-19. Children who are now bound to the confines of their abusive household become scapegoats to their perpetrator's frustrations. Threats of unemployment, financial instability and hopelessness for the future may easily evolve into potentially dangerous situations for those in vulnerable positions. Children are no longer protected by institutions who had previously monitored their safety and are now easily accessible by abusers without consequence. Overall, the volatile and potentially harmful circumstances of the COVID-19 pandemic may instill several triggers that can result in cases of abuse and neglect against children [23,220].

The Social Ecological Model of Development during COVID-19

Interventions directed at minimizing cases of child maltreatment revolve around risk reduction and the promotion of protective factors against victimization [138,187]. This can be understood through the social-ecological model of development which organizes factors that interact with and influence children interchangeably throughout their development. For example, the Alliance for Child Protection in Humanitarian Action (ACPHA, 2019) found that pandemics and associated measures taken such as lockdowns drastically alters the environment and associated systems that children exist in. These changes contribute to their heighten vulnerabilities as targets for abuse, neglect, violence, exploitation, and psychological distress (ACPHA, 2019). This is further supported by observations from Fischer et al. (2018) who said, "…disruptions to families, friendships and the wider community can have detrimental consequences for children's well-being, development and their protection" (p. 9) [71].

Additionally, ecological changes in the treatment of children during COVID-19 also reflects distinctive patterns of its promotion of maltreatment and neglect to these individuals [24]. Social norms associated with individuals, families, communities, and societies have since been altered to adapt towards this new normal. In return, research observing the impact of pandemics on child welfare and safety is scarce and lacking. This means that we can only make predictions of these relationships using data from the effects of natural disasters, conflict, and extreme global events on child maltreatment. And by observing the patterns and effects of these circumstances on violence against children, we may be more prepared to reduce its potential for harm during the COVID-19 pandemic.

Disasters and Child Maltreatment

According to the United Nations International Strategy for Disaster Reduction (UNISDR, 2009), disasters can be understood as disruptions which severely impact the functioning of a community or society [213]. They may result in one or several human, material, economic and environmental losses which negatively contributes to the decline of a community [213]. This can be uniquely illustrated in the context of COVID-19, like with the increased access to children online from virtual abusers. Familial risk factors which contribute to child maltreatment also involves factors like social isolation, family stress (i.e., separation or divorce), violence and parenting stress. This may also be confounded by contributing community factors which are identified as disadvantages associated with one's socio-economic status [204]. By its very nature, the COVID-19 pandemic has clearly cultivated a variety of social, familial, and communal risk factors that contribute to child abuse. Its associated social restrictions confer to the growing amalgamation of adversities evident in vulnerable families and places them at intensified risk of maltreatment [72,127].

However, patterns of maltreatment and abuse against youth are not uncommon during cases of global or national adversity [20,180]. A systematic review by Seddighi et al. (2019) revealed that children exposed to higher rates of violence, social and economic pressures due to natural disasters were more likely to be subjects of child abuse themselves [183]. Consequences associated with these circumstances often threaten the stability of the family unit and has historically featured greater rates of violence against children to occur [13]. This can be clearly seen throughout the 2007-2009 economic recession in the United States, as a rise in head trauma known as 'Shaken Baby Syndrome' was found amongst newborn infants during this [12,63]. Other nations have shown different patterns of harm being inflicted onto children, as several countries in West Africa saw a surge in cases of child abuse and teen pregnancies throughout the 2014-2016 Ebola crisis [211]. Altogether, these unique trends may be reflective of violent behaviours associated with prolonged social exclusion (i.e., neglect or rejection) in families with young children during crises [62].

Additionally, pandemics and other disease-related crises often create fearful, uncertain environments which can exacerbate harm against children [215]. These outcomes have been shown have lasting psychological effects on the lives of those involved in these terrible circumstances. For example, parents and children who had quarantined during the H1N1 'Swine Flu' pandemic developed more severe post-traumatic symptoms than those who did not [21]. From this study, it was observed that social isolation was a potential factor for these stressors and has been an imminent problem throughout COVID-19 [21]. Similarly, other commonalities shared between the pandemic and other disasters have also been noted in the literature. This includes things such as: : conditions of vulnerability, the loss of socioeconomic stability and the inability to cope with the negative effects associated with these tragic events (United Nations Office for Disaster Risk Reduction, 2009; Centers for Disease Control and Prevention (CDC), n.d.).

As a result, the critical incident perspective attempts to describe the cumulative, causal relationship which exists between child maltreatment and environmental stressors. To begin, children are believed to be the targets of violent and aggressive behaviors from their caregivers as a response to a sequence of frustrating events like that of COVID-19 [22,76]. Burdens such as the threat of poverty, unemployment and so on

may provoke caregivers to experience higher levels of distress, resulting in poor impulse control that may perpetuate child abuse [24,25]. This was the case in other instances of extreme global disasters such as Hurricane Floyd in 2008, which saw a significant rise of severe brain injuries in children [12]. As such, it is evident that the stressors which follow significant, world changing events disrupt the usual patterns of everyday life and strip individuals of their autonomy. With time, these pressures can result in feelings of overwhelming stress, frustration, and helplessness [132,206]. And in return, acts of child abuse may be "…carried out by abusers to compensate for their perceived helplessness or loss of power" [67]. These fickle attempts of sovereignty contribute to the growth of cumulative harm in a child's life and can cause detriments in the long-term health of their development (Miller, 2007). Which, understandably, has been corroborated in the research thus far.

Long-term effects of ACEs and Trauma during COVID-19

Physical injuries sustained by instances of child maltreatment have also been associated with maladaptive psychological problems such as post-traumatic stress disorder, anxiety, and depression [74]. These issues are often carried into adulthood and inflict damages on various domains of one's life [86,143]. Mental health issues, substance abuse, suicidal ideation and risky sexual behaviour are commonly seen amongst victims of early child abuse and neglect [143]. On average, these individuals typically reach lower educational levels and suffer greater economic hardships [48]. As a result, victims are more likely to become perpetrators themselves and inflict the same abuse they suffered onto their own children and partners [70,222]. For these reasons, the safety of children during the COVID-19 pandemic should be of the utmost priority.

Trauma during COVID-19

The trauma associated with this pandemic has been linked to the development of serious psychological distress including post-traumatic symptoms and intense fear [21]. This may be worsened for individuals with histories of childhood trauma. Research conducted by Kim and colleagues (2020) has shown that increased risks for depression is evident in populations with ACEs even after controlling for various factors such as quality of life, COVID-19 knowledge, stress coping ability and demographics. Similar studies have also shown that traumatized individuals who perceived the pandemic to be more severe and demonstrated psychological distress from COVID-19 were predicted to have poorer psychiatric outcomes across several countries (Li et al., 2020) [58,167,185]. Researchers believe that the combination of learned hopelessness and increased sensitivities to stress create poorer appraisals of taxing circumstances like fears involving infection and mortality [118,170,219]. These findings support the idea that individuals with histories of childhood trauma may be at higher risk for developing poorer psychological health during the COVID-19 pandemic – especially with regards to depression and other mood disorders.

Two possible pathways were introduced by Kim et al. (2020) to explain the heightened depressive effects associated with COVID-19 fears and childhood trauma [100]. The first involves the impact of trauma on the body's approach and reactivity to stress. Severe childhood trauma has been known to significantly impact one's natural threshold to stress and alter several physiological mechanisms related to stress reactivity (Heim et al., 2019) [125,135;146]. This involves systems such as our immune and neurological processes, as well as the hypothalamic-pituitary-adrenal axis (Heim et al., 2019) [135,146]. As a result, inflictions to these systems by childhood trauma contribute to the risk of developing Major Depressive Disorder [MDD] and pose severe threats to the well-being of individuals [125]. This is especially true during a particularly volatile and especially lonely time like COVID-19 As several brain regions associated with the regulation of emotional appraisals like fear and sadness are impacted by MDD, symptomatic behaviours

including feelings of helplessness and victimization may also heighten one's panic of COVID-19 [52,147,153,173,200]. This influx of worries, anxieties and ruminations associated with the pandemic further challenge one's ability to take care of themselves and their families due to the invisible nature of COVID-19. As such, Kim et al. (2020) conclude that significant psychosocial stressors related to the effects of this pandemic may exacerbate troubles present in already vulnerable families and put them at risk of disease susceptibility [100].

Suicidality and COVID-19

It is apparent that outcomes of the COVID-19 pandemic are predicted to have lasting adverse effects on our physical and mental health (Joiner et al., 2020; Da Silva, 2020). For some, this may lead to permanent, irreversible decisions that will inflict incomprehensible pain to those closest to them. Concerns for suicide were first likened to the increased rates of loneliness, economic stress and anxieties reported by individuals during the early stages of the pandemic (Christodoulou et al., 2012). It left many vulnerable to their own inner demons, and without the aid of healthcare professionals and medical services due to lockdown (Christodoulou et al., 2012). Calls to suicide hotlines were found to have risen during the first year of this global disaster and have not declined since (Chuck, 2020). As such, it is patterns like this which indicate a dangerous and life-threatening path to those without adequate social support throughout the COVID-19 pandemic.

In one example, a man from Illinois was reported to have killed his partner out of suspicions of their contraction of the virus. The stress of this news was enough for him to seek violent means of expressing his anger and ultimately, led to his own death through self-inflicted wounds [8]. Another report based in Pennsylvania shared similar details, with a man committing the murder of his girlfriend due to frustrations of his recent unemployment because of COVID-19 (Burke, 2020). As such, murder-suicides throughout the pandemic were reported to be specifically related to cases of domestic violence and abuse against intimate partners [223]. These cases reflect a chilling trend that puts people at heightened risk of underreported COVID-19 related abuse and neglect [120]. And especially for children, abuse can easily become deadly when understanding that parental abusers are on average, more likely to kill their children under any conditions [87].

COVID-19 on Child Safety

Children and youth are believed to be at a heightened risk for abuse during COVID-19 as unreported cases of verbal, physical and sexual abuse go unnoticed. A report by Schmidt and Natanson (2020) found that reported cases of child maltreatment had dwindled throughout the pandemic. They proposed that parents and caregivers that inflict harm onto their children are not likely to report their actions, hence, making these instances invisible to the public. Despite this, surges of critical hospital cases related to severe head and body trauma in children was found during the early stages of the pandemics [144,150,179,205,223]. This aligns from data collected by the Centers for Disease Control (CDC, 2020b) which found a significant increase in child abuse cases across many U.S. emergency department visits throughout early 2020. And while these cases were not classified by maltreatment type, physical abuse is the most prominent form of harm inflicted onto young children which results in hospitalization [103,161,197].

Outreach to anonymous help lines has also become increasingly more common and beneficial for youth experiencing abuse at home during quarantine [89]. In March of 2020 alone, calls related to domestic abuse and violence rose by 30% in comparison to February of that year [209]. Data from other countries also show a similar trend, with reports relating to child abuse and neglect rising across the globe. Devastatingly, this pattern was found to have incredibly deadly consequences in Fort

Worth, Texas as a significant rise in severe abuse cases over the course of only one week left two out of seven children dead last year [30].

Articles from other news outlets have also found other devastating patterns of child maltreatment rising as a result of COVID-19 and quarantine. Alex Crowe (2020) of the Canberra times reported that online web content containing child sexual abuse material rose throughout the pandemic [46]. It was found that websites housing this type of media have reported mass crashes since the beginning of the virus's outbreak, with no indication of slowing down. Online perpetrators targeting minors during this time have also shown an upwards trend as well, with the Australian Centre to Counter Child Exploitation suggesting a 123 percent increase as of March 2020 [46]. It is believed greater time spent online is the leading cause of this pattern, with underage children and youth becoming more vulnerable at the hands of unsuspecting offenders without sufficient supervision (Welch & Haskins, 2020).. Howard Taylor, Executive Director of the Global Partnership to End Violence against Children had commented, "…School closures and strict containment measures mean more and more families are relying on technology and digital solutions to keep children learning, entertained and connected to the outside world, but not all children have the necessary knowledge, skills and resources to keep themselves safe online" (UN News, 2020, p.1) [210]. And with heightened accessibility to the online world, children are more prone to encounter dangerous perpetrators behind their screens. Quadara et al. (2015) believed that online communication serves as a natural environment which can easily facilitate contact between minors and adults [160]. The anonymity of the internet allows abusers to engage in their desires and detach themselves from their behaviors through online aliases. As such, these online personalities may become traps for young, naïve individuals hoping to escape from instances of abuse, parental neglect and substance misuse – making them easy targets for harm [68,69].

Financial strains and instability are also believed to be key contributors to rises of child abuse cases in vulnerable families during COVID-19 [1,3,32,114]. And in times of crisis, children are among the most vulnerable and easily affected populations. This is largely due to their need for safe and stable environments that foster healthy development for achieving critical milestones throughout their early years [117]. In turn, the influx of closures, restrictions and challenges placed onto families during COVID-19 has left many children vulnerable to the effects of the pandemic; resulting in a predicted rise in risks of family violence and abuse are to surge throughout COVID-19 [31,84,96].

Altogether, it is clear that the public's frustrations regarding the safety of abused children during the COVID-19 are not without reason [8]. Factors which contribute to the steady incline of child maltreatment cases may be the result of stressors which impact healthy functioning in families during the pandemic. For example, the closure of many institutions related to child development has left many to remain in the confines of their potentially abusive or toxic environments. Children who previously had the opportunity to escape from their households through youth advocacy centers or crisis hotlines are now bound to experience these tragedies outside the public's eyes [223]. And without the help of these reports, the expected number of cases relating to child abuse or neglect is expected to rise as lockdown continues.

The Consequences of Social Isolation

Quarantining and isolation protocols can be traced back to its earliest roots in the 12th century [141]. It was first used as a method to combat the spread of leprosy during the early age, and was most recently seen throughout the SARS1 and Ebola crises within the past decade [21,141]. And although its effectiveness in reducing the chances of infection is very high, quarantine does not come without its faults. A review by Đapić et al. (2020), found that mental health problems

associated with the early stages of the pandemic included issues like PTSD, anger, frustration, and boredom to ensue [53]. Research has shown that prolonged periods of isolation can intensify these responses and significantly damage the health of individuals in vulnerable populations [181]. This presents itself as a huge problem during pandemic, as social distancing and self-isolation protocols have been regarded as the most common measures to reduce the spread of COVID-19 during the pandemic [31,215].

For most families, this also means that life outside of the home is strictly minimal and prohibited – which is particularly harmful for those residing in abusive or toxic households. Increased time spent within these environments can potentially result in more stressful and intensive contact with abusers – placing children and partners at risk for experiencing physical, sexual and emotional abuse (National Society for the Prevention of Cruelty to Children [NSPCC] [214]. In fact, research by van Gelder and colleagues (2020) found that the combined forces of social isolation, psychological and economic stressors as well as increases in negative coping mechanisms (i.e., excessive drinking) contribute significantly to the occurrence of family violence [215].

These findings are incredibly important when disseminating other social trends found during this hostile time. For instance, alcohol sales in Australia rose more than 36% when quarantine measures were enforced at the peak of the pandemic (Common wealth Bank Group, 2020). This was likely due to the closure of establishments that allowed for the consumption of alcohol to occur under social situations. In turn, the threat of unemployment, financial strains and social isolation may encourage individuals to turn towards substances like alcohol to cope with these new realities [99,165]. Thus, increasing the likelihood of family violence to become a reality. In fact, 61% of parents have admitted to shouting and/or screaming at their child at least one time during the beginning of the pandemic [108]. More disturbingly, one in six have reported physically assaulting their child, with over 11% having repeated this action more than once [108].

Alternatively, the consequence of social isolation and physical distancing measures poses several risks to our mental and physical health as well. In previous epidemics, we have seen a surge of various mental health concerns rise in response to national and global disasters of the past [77,83,106,207]. The same is to be predicted with COVID-19, as mentioned by Galea and colleagues (2020) [78]. Researchers believe that significant increases in anxiety, depression, substance use, loneliness, and domestic violence will occur throughout the course of the pandemic. These influences all contribute to the very real possibility of children being in danger of abusers during such challenging times.

In fact, research by Rosenthal and Thompson (2020) contend that social isolation, or more accurately known as physical distancing measures, has been proven to pose great harms to children in abusive environments [168]. Observations made by by Campbell (2020) found that substantial rises of family violence reports in America were significantly related to the social isolation restrictions placed onto individuals throughout COVID-19 [31]. This may be attributed to the closures of organizations and social services that typically offer support to these victims like teachers and extended family members [168]. As such, perpetrators of family violence are now able to conduct their maltreatment within the confines of their home. And signs that may indicate instances of abuse are now concealed from the public and are less likely to encourage support from others to stop it [193]. As such, governments and other ruling bodies must recognize the increased risks for violence to ensue during COVID-19 and to encourage citizens to report such cases whenever possible [214]. Without these aids, it is unlikely for these cases to be recognized and in turn, largely remain unreported within these households. As such, the need for social connection has never been so necessary than at a time like this, with

support from friends and family being the true instigators of change for the trajectory of the abused.

COVID-19 and Family Stress

Public health measures designed to help mitigate the spread of COVID-19 have disrupted the ecological systems that children develop throughout their early childhood [5,47]. The disruption of social services, closures of schools and the erosion of family and community supports typically active in a child's live have been altered with throughout the pandemic. Coupled with these limitations, contextual stressors which are evident in most during COVID-19 have led to the development various mental health challenges. Feelings of distrust, uncertainty about the future and economic instability have significantly negative ramifications for the psychological health of families and youth [21]. This includes the development of post-traumatic stress symptoms, anger and fear [51].

Caregiver Stress and Burnout during COVID-19

As an estimated 74 million children under the age of 18 reside with their parents in the United States, it is clear that the challenges associated with the restrictions of the COVID-19 pandemic have substantial threats to the wellbeing of caregivers across the nation (U.S. Bureau of the Census, n.d.). This is seen most prominently in relation to the economic decline suffered by many across the globe. Over half (53%) of American adults reported having financial difficulties during the start of the pandemic [155]. Logically, this places parents at-risk for feeling 'burnt out' or overwhelmed with their caregiving roles. This can be understood as a prolonged response to stress that affects an average of 5-20% of parents [2,129,163,169,198]. Parental burn out features severe physical and emotional consequences that include decreased sleep quality, time spent with family, poorer confidence in caregiving roles and hopelessness [95,130,169]. According to Mikolajczak and Roskam (2018), the Balances between Risks and Resources theory posits that burnout begins when a mismatch between parenting-related demands, resources, and expectations of one's role in these circumstances occur [169]. And when chronically imbalanced, the likelihood of parental burnout occurring becomes more likely to happen.

Research has also shown that parents who are constantly stressed may also face greater troubles handling healthy relationships with their partners and children [17,128,129]. Specifically, parents who scored higher on measures of parental burnout report experiencing higher levels of escapism, suicidal ideation and conflicts with their partner [129]. Results from this study also indicated that these parents engaged in higher levels of child abuse and neglect. It is believed, then, that associations of child abuse and burnout fall in tandem with each other. This is further supported by Brianda and colleagues (2020) who found that levels of child abuse could be controlled and minimized through proper interventions aimed at reducing feelings of parental burnout [17].

Additionally, a unique between different parenting styles, parental burnout and child abuse has also been shown by Rodriguez (2020) [167]. Parents who are reportedly more overreactive, harsh and authoritarian with their caregiving style were found to engage in greater reports of child abuse [167]. However, its relationship with parental burnout remains less clear. Parents experiencing high levels of parental burnout typically do not endorse the use of harsh punishment on their children, but often feel guilty when engaging in such behaviours [128,130]. They report feeling fearful for the safety of their children when alone in their care, with similar reports being made with regards to lax and neglectful parenting behavior. In turn, the mental and physical exhaustion associated with parental burn out may play an important role when understanding the triggers of child abuse and neglect despite the parenting style used within the household. These findings all align with the idea that all parents can become abusive under certain circumstances, making COVID-19 an incredibly dangerous time for children and youth

[49,92,116,190]. For example, parents of school aged children (4-10 years) who had experienced job loss during the pandemic reported exhibiting increased abusive behavior towards their children (Lawson et al., 2020). This included physical behaviors ranging from corporal punishment (i.e., spanking) to even severe physical abuse like assault. Reports from several online crisis lines saw an overwhelming proportion (79%) of minors that disclosed residing with their abuser(s) during quarantine [115,162]. A staggering 40% increase in calls made to confidential hotlines were shown in May 2020 when compared to May 2019 (Childhelp, 2020) [37]. About half of all web and chat correspondences during this period were initiated by youth 13 to 17 years of age for of concerns including (38%), physical (32%), and sexual (12%) abuse [37].

Consequently, demands during the COVID-19 pandemic can be easily understood as risk factors that contribute to caregiver stress [159]. This may include things such as unemployment, financial insecurity, a lack of social support from others and the inability for leisure (Parkes et al., 2015) [43,112,118,195]. Restrictions placed onto resources that parents heavily depended on, including day cares, schools and community-based programs also play a huge role in the mental and physical exhaustion typically experienced by caregivers during the pandemic (Cameron et al., 2020) [44,129]. In turn, parental duties have increased significantly due to closures during this time that have left children in the hands of their caregivers 24 hours a day, seven days a week. This can be incredibly challenging given the circumstances of work, leisure, and self-care that caregivers are also responsible for in their personal life. For example, data shows that parents may be working an upwards of three additional hours per day during their pandemic working schedules [55]. This is particularly problematic, as resources that help buffer the effects of burnout like attending fitness/community centres, churches and restaurants have largely remained closed during COVID-19. Without these guards, parents will face difficulties in balancing their personal, professional, and parental responsibilities that will lead to eventual burnout – especially in those with perfectionistic tendencies (Parkes et al., 2015) [91,118].

Domestic Violence and COVID-19

Results from several studies showed that significant increases in IPV ([intimate partner violence] related calls across the world were made to law enforcement following the emergence of COVID-19 [4,60,101,108]. This means that child exposure to IPV was likely to have increased as well, with distinct surges in calls to crisis lines for children being seen during this time [136,157]. Changes in these tense environments may lead to exploitative relationships that are confined within the home due to reduced accesses to necessary health services. As such, victims of abuse may be forced to remain trapped with their abusers and suffer from non-accidental injuries (NAIs) that lead to increased risks of several medical and psychological problems [45,65,81,182].

Anecdotal evidence from several countries including the U.S., Brazil, China, and Australia have also seen significant growth in cases of child abuse and intimate partner violence due to quarantining at home [31,215]. In China specifically, rates of domestic violence were found to have risen threefold during February of 2020 with no signs of stagnation [4]. Measures taken by European authorities have sought to reduce these escalating numbers as well. In Italy and France, government-commissioned hotels were offered to those in abusive households (Reuters News Agency, 2020) [54]. This was done to combat the ever-growing pool of victims that surged during the beginning of the pandemic. Similar trends were also seen in the UK, as reports of domestic violence also increased during COVID-19. Countries in North America were also subjugated to comparable numbers of growth, as cases of family violence in various states in the U.S. were found to increase by a staggering 21%-31% in 2020 alone [217]. The significance of this data proves that risks

of abuse during quarantine present very real threats to those trapped in these circumstances and their livelihoods.

Schools and COVID-19

Children are also more vulnerable at the hands of their abusers due to the closures of schools and institutions that generally report this type of behaviour (*Fraihat v U.S. Immigration and Customs Enforcement,* 2020). Schools traditionally served as an alternative space for educators to supervise and protect children from harm (Making Caring Common Project, 2020) [5,68]. Those that were suspected of abuse or neglect were able to be identified, and thus, supported through their tragic circumstances. However, lower cases of child abuse were reported during the last week of March 2020 at the start of the pandemic [88]. And while some may interpret this as a positive trend, many believe that this is the outcome of absent reports. 22% of suspected child maltreatment cases in February of 2020 were made by school staff members [88]. This number dropped to 7% in the following month proceeding social isolation laws mandated by the federal government [88]. It is likely that challenges associated with communications to these victims prevent them from seeking help. Or, if discovered, may actually be more threatening to their livelihoods than previously before [158].

Overtime, several institutions have begun to recognize this problem and have started to implement policies designed for promoting child safety and protection. For example, some schools in Spain have enacted "**open door**" policies provide safe and supportive environments for children suspected of child abuse or neglect [166]. This involves a six-step action plan which is aimed at promoting dialogue concerning the challenges, risks, and consequences of unhealthy confinement at home. The benefit of this movement helps educate children on the signs of abuse, and what they can do to protect themselves [218]. This allows the stigmatization of child maltreatment to become normalized and understood as something that can be prevented.

Other approaches designed to reduce maltreatment against children includes the promotion of zero violence beliefs at an early age. Mottos such as, "Treat others how you would like to be treated" and "Reporting violence does not make you a snitch, it makes you brave" help socialize children to learn violence is never justified and that individuals with high morals are most well desired [23,145]. This can be further enforced by teachers who are educated on recognizing early signs of abuse, as they can promote positive messages about healthy relationships and provide them with resources to use if they are in danger [201,228]. Therefore, ensuring that the school space remains as an environment which advocates for child safety and welfare.

Research on child abuse prevention is clearly pointing to the need to equipping children with greater protective skills, while society does all it can to ensure the safety of children [68]. Consequently, many child abuse prevention trainings also target all school staff, families, and community members [16]. Bryant et al. (2020) have, in their study, implemented "opening doors" in schools to foster supportive relationships and a safe environment to prevent child abuse during COVID-19 confinement [23]. Their approach included: dialogic workspaces, dialogic gatherings with students, class assemblies or mentoring, dialogic pedagogical gatherings with teachers and community, mixed committees and community networks, and social network dynamization with preventive messages and the creation of a sense of community. These actions include elements identified by previous research on effective school-based programs to prevent child abuse and encourage the preventive socialization of violence.

Clearly, it is evident that further research and proactive change must be done to equip children with greater skills to protect themselves from harm [68]. This requires the need for all members of a child's early life to be involved in this process. For example, several child abuse

prevention programs involve school staff, families, and community members so that everyone is informed on what must be done in cases of abuse against children [16]. This is reflective of work conducted by Bryant et al. (2020), who sought to promote dialogue and social systems aimed at preventing child maltreatment through education and community-based resources [23]. Schools can become trusted environments that engage families and larger communities to share the responsibility of keeping children safe against abuse similarly to what teachers do already [69,171]. According to Oliver (2020), teachers play a significant role in supporting children suffering from abuse. They may conduct daily wellness or 'follow-up' calls with students who are suspected of harm and ensure that they supported throughout this time. Educators have also been known to encourage dialogues regarding abuse and violence prevention through school assemblies, classes and private conversations [41,75,202]. These instances allow children to place faith in their teachers and promote more positive relationships to emerge [23].

Helping Abused Children during COVID-19

Reducing the effects of cumulative risk and harm against children during the COVID-19 pandemic requires progressive action against the factors which perpetuate violence experienced by at-risk children [24,159]. Families which are disadvantaged in essential needs relating to housing, transport and medical support must be addressed to minimize the long-term implications related to the cycle of abuse and maltreatment [14,24]. Suggestions made by Bryce (2020) believed that greater social support provided by child welfare agencies must be at the focal point of such a movement to reduce the inequities faced by abused youth [24,187]. This involves the mobilization of social networks which help protect individuals against the negative, environmental pressures that are evident in their lives [98,156].

For example, telecommunication using online platforms like Zoom can be used as a safe and alternative form of remote contact for those limited by social distancing protocols [93,113]. This can be easily arranged for those may be separated from their parents and be done in secrecy. Technology has also been shown to be an effective method for administering parental training as well [6,7]. High-risk and low-income mothers were reported to engage in these services due to the flexibility it provided for them [7]. Findings like this share much potential in a pandemic world, as many are forced to juggle their work and personal lives all within the confines of their homes.

Following this, social media and other online platforms may also serve as a positive tool to help enable people's feelings of control and mastery during these challenging times. This can be seen through posts which encourage people to make significant changes in their lives, which is also known as the empowerment approach [208,230]. By promoting feelings of power, competency and positive self-worth, individuals can find the strength within themselves to make proactive changes in their lives. For the abused, this may involve finding the optimal balance between protecting themselves from their toxic environments and the challenges associated with physical distancing and lockdown measures from the pandemic.

As such, it is imperative that appropriate and proactive measures are made to address the restricted delivery of child welfare services to youth in need of help during COVID-19. Online media can be implemented to educate the public on how to spot and report abuse when it is suspected during COVID-19. This can make child safety and protection a shared responsibility that can be governed by our neighbors, colleagues and friends when deceptively hidden from law enforcement. Therefore, making it easier for children to be protected during a particularly isolating time such as this. *Final Thoughts*

Altogether, concerns for the increased risk of maltreatment against children is evident during a time like COVID-19 (The Alliance

for Child Protection in Humanitarian Action, 2020). No longer are we able to freely interact with others in the physical world without fears of infection and political dissent [225]. And no longer can children be protected from abusers that lurk in their physical and online spaces during lockdown [59]. There are, thus, worries regarding the sexual exploitation of children online, as our dependency on technology steadily increases with each passing day.

As a result, the COVID-19 pandemic fosters many risk factors that promote child abuse and neglect to occur. These influences can be identified from the following:

(a) Children who display lower self-esteem or somatic symptoms that require additional aid or emotional support [133,134].

(b) Parents with mental health or developing psychological issues that include the misuse of addictive substances [124].

(c) Financial or existential problems associated with health-related crises [148].

(d) Heightened levels of stress in response to viral epidemics or infections [10].

(e) Pre-existing problems or patterns of poor family functioning [62].

Clearly, social distancing measures designed to eradicate the spread of COVID-19 has also left many vulnerable to vicious environments that house intrafamily violence and abuse [36,53,57,107,151,227]. It is particularly rampant when stressors like economic instability, disease-related fears, exposure to exploitative relationships and reduced social support are present during a pandemic [152]. Especially during COVID-19, social isolation can exacerbate these instances as victims are placed in vulnerable situations without the support of others at their aid [215].

As such, it is necessary that protective factors which buffer the effects of child maltreatment during COVID-19 is addressed to reduce its risks on the livelihoods of youth across the world. Things such as the provision of a supportive family environment, stable parental employment and access to necessary health and social services are all factors that help children remain safe during such unprecedented times [204]. And although it is undeniable that all these factors were significantly affected throughout COVID-19, there is still time to learn from this period in history and implement change to help defend these children from harm.

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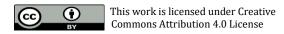
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