



Oxfam India Submission to the United Nations Special Rapporteur on Violence Against Women

Overall context from India: The first case of COVID-19 was detected in India on 30th January 2020 in the state of Kerala. However, the pandemic was not taken very seriously until the third week of March. On 25th March the government imposed a strict lock-down on all movements, schools, offices, all commercial activities and all outdoor activities giving no time to citizens to prepare for the lock-down. All were asked to 'stay home and stay safe'. Here we give an account of how the 'stay home- stay safe' policy worked out for many women. There were four phases of the lockdown until the first week of June after which the lock-down has been partially lifted and shops, offices and some commercial activities have been partially allowed. However various parts of the country continue to be locked-down based on the rise in COVID-19 cases (e.g. currently the states of Maharashtra, Jharkhand, West Bengal, Manipur and the cities of Chennai and Guwahati are under a lock-down as of 30th of June). Besides, smaller pockets of the country such as housing complexes and societies, continue to be under strict containment whenever cases are detected in these places.

Coming to the status of Violence Against Women and Girls, the National Family Health Survey-4 (2015-16) reports that one in three women ever married women in India (33%) in the age group of 15 to 49 years have faced domestic violence¹. In this sense we are perpetually in a domestic violence pandemic. However, the COVID-19 pandemic and the accompanying lock-down created circumstances which appear to have both aggravated the violence faced by women within the home (and also outside it in some cases), and limited their mobility, access to transportation, access to finances, access to social support mechanisms as well as access to crisis support centres, hospitals and police stations. This submission to the UN Special Rapporteur for Violence Against Women and Girls puts together the case stories and narrations which came from Oxfam India's areas of community work in the field of Gender Justice.

This submission related to status of violence faced by women and girls during the lock-down is based on the following evidence:

- A qualitative rapid assessment of the impact of the COVID-19 crisis on women and girls being undertaken by Oxfam India and is still in progress. Oxfam India works in five states of Odisha, Bihar, Jharkhand, Uttar Pradesh and Chattisgarh in India. This analysis is based on 29 qualitative Key Informant Interviews undertaken in our field areas in these states in the months of May and June 2020. Besides, 3 Focus Group Discussions (FGDs) were undertaken with Oxfam's community partners engaged in the humanitarian relief work. One of these FGDs was with women's rights organisations (WROs). The qualitative assessment included interviews with representatives of 13 community partners of Oxfam India, seven of which are Women's Rights Organisations. Among respondents were counsellors and manager from violence helplines or crisis support centres, women's rights activists, trade union activists and domestic workers' association representative. We also received two written submissions from two of our community partners who provide services for VAWG.
- The anonymity of identity and confidentiality of information given by respondents has been strictly maintained. Many names of services are also withheld so they may not be victimised for providing information on state run services.
- We have only answered questions to which we had evidence from our direct sources mentioned above.
- Since this was a qualitative assessment and only from our community partners and Key Informants the findings cannot be generalised to the whole country. However, we do believe that our study sheds light on conditions which could be very similar in other parts of the country as well.

¹ <http://rchiips.org/nfhs/NFHS-4Reports/India.pdf>

Questions and Answers

1. To what extent has there been an increase of violence against women, especially domestic violence in the context of the COVID-19 pandemic lockdowns? Please provide all available data on the increase of violence against women, including domestic violence and femicides, registered during the COVID-19 crisis.

Information from our respondents: The evidence on increase in number of cases is mixed. However, it does point to the strong possibility that women were facing high levels of violence and relatively lower access to services.

One helpline counselor we interviewed from Odisha state revealed that on an average they received 80 calls per day to seek help for domestic violence before the lock-down. After the lock-down this increased to more than 200 calls per day. The day after their state released a WhatsApp number specifically to report violence against women, they received 300 calls on that line.

Seven support centres in Odisha state which Oxfam India supported in the past in collaboration with the Police showed that a total of 284 women were provided services (122 on phone calls) during the period 1 March to 15 June 2020². Though these are physical centres where women are expected to receive in-person services, during the lock-down the centres functioned akin to helplines. The same time period in 2019 saw about 444 women visitors. On an average six districts each received 48 women visitors in 2019 (leaving out the district of Dhenkanal) and this number was 41 in 2020 (again leaving out Dhenkanal). Dhenkanal has been a slight outlier with 157 visitors in 2019 and 34 visits as well as calls put together in the specified time-period in 2020. Thus the average number for the other six districts is not very different in 2019 and 2020, despite the difficult access women had to information, phones as well as privacy and mobility to seek help. The Program Officer in charge of the work felt that if there was better access many more women would have reached out for help. Also very few phone calls were received in some districts as the phone numbers were not adequately publicized there.

Again pointing to the difficulty in access to services, our community partner from Bihar told that only the most serious cases of physical violence are seeking help. They found it difficult to reach women in distress because of the lock-down.

Qualitative evidence of rise in violence against women and girls

14 respondents of the 29 qualitative interviews we undertook during the qualitative rapid assessment of impact of the COVID-19 crisis on women and girls, and two written submissions reported that violence appears to have increased for women and girls. Some of the respondents mentioned that the forms and severity of violence seen were also different from what was generally seen before the lock-down. One disability rights activist told that the helpline they ran received many cases of domestic violence including some women violence service providers themselves. One women's rights organisation reported receiving 10 to 12 cases of domestic violence during the lock-down period and two respondents during Focus Group Discussions spoke of receiving 3 to 4 cases of domestic violence each (one at a crisis support centre and one based in the community). All of them voiced that given the restrictions imposed by the lock-down even these smaller numbers were telling. One spoke about approaching the police who ignored the complaints and they had to go to higher officers for the complaints to be registered. While respondents reported on increase in all forms of violence such as physical, emotional, sexual and economic violence, some specific insights we got from the assessment are given here.

Association of domestic violence with consumption of liquor and rise in men's frustrations: Increased frustrations of men within the home accompanied by either inability to procure alcohol (during the lock-down) or increased consumption of alcohol (when lock-down opened or illegally procured alcohol) was the most common association with increase in

² These statistics are based on the data maintained by the Women's Support Centres

domestic violence and a recurring theme in the interviews. Typically, men were frustrated on account of loss of jobs, loss of wages, increased economic insecurity and loss of mobility on account of the lock-down. Instances of fights breaking out were because of the following: at times men tried to sell the food meant for the family to buy alcohol; increased anxiety, irritability and restlessness due to alcohol withdrawal; alcohol became more expensive, men did not have the money to buy it and forced women to part with money; and husbands snatched away women's savings. Respondents also reported increase in domestic violence when liquor shops opened at the end of the lock-down. Women faced economic violence as also extreme emotional stress of putting food on the table in the context of losing their livelihood as well as savings. Women were also forced to seek loans from money lenders to run their homes. Another form of economic violence was women beaten and coerced to give up the money from social security schemes announced by the governments. Women were also forced to stand in queue and access any relief that was being offered which the spouses then snatched away for alcohol. Providing Unconditional Cash Transfers (UCT) in women's bank accounts is one standard practice for relief provision used by Oxfam India. At times, the humanitarian partners narrated, that men demanded that it should be transferred to their bank accounts instead of women's. Women also faced controlling behaviour such as not allowed to leave home, not allowed to visit the natal home, not allowed to use the phone, being locked up and such others.

Increase in severity of violence against women and additional hardships due to the lock-down: One violence helpline counsellor from Odisha reported hearing of more serious cases such as bite and burns injuries which they were not ordinarily called upon to respond. This may be due to increase in those forms of violence or reduced access to crisis support centres, hospitals and police where in-person services are provided. She talked about women sharing pictures of the injuries which appeared very serious. A written submission from one of our community partners in Uttar Pradesh who provides services for VAWG specifically mentioned that women were unable to complain as they were living with the abusers and could not escape to their natal homes. Two specific instances were narrated. In one instance a woman complained of her husband beating her relentlessly and threatening to throw her out of the home. However, she was living in a hotspot area and her natal family was very poor. Therefore, she could not go anywhere or contact anyone. The counsellor urged her to go to the local police station where the police official asked her to submit an application in writing. There was no cooperation from their side to help her file the complaint. They even refused to supply her with paper or pen. They asked her to return later with a written application which was not possible for her because it had been difficult for her to sneak out the first time itself. She had to live with her husband for the entire duration of the lockdown. Another woman survivor had conceived during the lockdown, but did not want to have the child since their financial situation was very poor. She was beaten repeatedly by her husband for two days and then sent to her natal home to stay for the duration of the lockdown. There were repeated instances of police refusing to file complaints for women facing domestic violence during the lockdown. Another community partner from Chattisgarh state also shared the case of a woman who was depressed because her husband was unemployed (from before the lock-down), ill-treated her and she suspected he had a mental illness. She had developed suicidal ideation and she had also attempted to commit suicide but the attempts failed. During the lock-down she decided to go to her natal home. When her husband suspected that she was trying to escape he started locking her up- sometimes in the kitchen and also at times in the toilet. He also sold household items to buy liquor. Finally, she approached our community partner who visited their home and counselled the husband to stop abusive behaviour and harassment. However, the same night he broke the furniture in the home- tables, chair, dressing table, damaged the sofa and created a severely intimidating atmosphere at home. The next day the counsellor accompanied her to the police station. However, the police refused to write down the complaint citing many other pending cases of domestic violence.

Increase in sexual crimes

A total of eight respondents independently spoke about at least thirteen instances of seeing or hearing about cases of sexual violence and two of these respondents were violence helpline counsellors.

- Increased and coercive demand for sexual relations by intimate partners (husbands) mostly in Odisha and Chattisgarh: This was the most common form of sexual violence, also described as marital rape by one respondent.
- Cases of sexual crimes in the cyber space in Chattisgarh: A helpline counsellor spoke about increased instances of boys and men putting objectionable pictures of girls or girl-friends on-line without their consent. The complaints were made by the girls. One specific instance was the complaint against a boy who threatened to shame his girl-friend by circulating her intimate pictures on the social media.
- Sexual abuse including child sexual abuse within the home: One violence crisis support worker in Odisha told about responding to cases of sexual abuse within the home, especially of minor girls. Two specific instances mentioned were sexual abuse of a minor girl by her uncle and for which a police complaint has been filed under the 'Protection of Children from Sexual offences' (POCSO) Act, 2012 and he is in custody. The other is sexual abuse of a young woman by her brother-in-law during the lock-down when her husband was stranded outside the home. The latter incident was also accompanied by severe domestic violence and increased burden of household work.
- Rape cases: One respondent from Bihar reported two cases of rape (outside the home space), and of 13 missing children. The children were probably put to work illegally as told by the respondent and the respondent felt that this has a chilling effect on reporting possibly even by parents. Another reported of an instance of a 25 year old man raping a 9 year old girl in the neighbouring village.

Increase in child marriage and trafficking of girls: One humanitarian partner spoke of parents contemplating early marriages (before age of 18 years) for their daughters after schools closed down and there was uncertainty of the girls resuming schooling again. talked with the families to prevent them doing so and the plans were averted. However, she also voiced the fear that there could be increase in trafficking and unsafe/ illegal migrations during the lock-down due to the situation of extreme hunger and poverty.

2. Are helplines run by Government and/or civil society available? Has there been an increase in the number of calls in the context of the COVID-19 pandemic?

Answer: Not enough consistent information was reported as we do not have presence in all districts of the state.

3. Can women victims of domestic violence be exempted from restrictive measures to stay at home in isolation if they face domestic violence?

Answer: No, currently there are no special concessions for women victims/ survivors to get any exemptions from restrictive measures to escape abusive relationships. On the contrary there are a number of anecdotal incidents reported where women were asked to leave shelter homes and go 'home' because shelter homes were asked to reduce number of inmates to

enable social distancing for the Corona Virus³. Also of women unable to leave abusive homes⁴, stopped by the police from meeting counsellors⁵ and also of activists unable to reach those who sought help from them.

4. Are shelters open and available? Are there any alternatives to shelters available if they are closed or without sufficient capacity?

Answer: Not enough consistent information was reported as we do not have presence in all districts of the state.

5. Are protection orders available and accessible in the context of the COVID-19 pandemic?

Answer: From our field accounts, the 'Protection of Women from Domestic Violence Act' (PWDVA), 2005 was not functional due to the lock-down as all courts were closed till 8th of June when the lock-down ended. The Protection Officers employed under the act were not available to provide any relief to women nor is there any evidence that they could be contacted on the phone by women facing violence. The Legal Aid Clinic at the Jindal Global Law School has given a representation to the Ministry of Home Affairs for inclusion of the work of Protection Officers as 'essential services' which should be functional at times such as the lock-down⁶. They have stated in the representation that based on multiple NGO accounts the PWDVA Act was not functional at all during the lock-down period and women had no recourse to immediate Protection Orders.

6. What are the impacts on women's access to justice? Are courts open and providing protection and decisions in cases of domestic violence?

Answer: As stated above and as per numerous media accounts in India, the courts were not open for routine business. They were only responding to some urgent petitions. There is no evidence that any case of domestic violence or violence against women and girls was brought in front of the courts as an urgent matter to be heard by the courts.

7. What are the impacts of the current restrictive measures and lockdowns on women's access to health services? Please specify whether services are closed or suspended, particularly those focusing on reproductive health.

Answer: Not focused on this particular aspect as the data pertaining to that is still being analysed.

8. Please provide examples of obstacles encountered to prevent and combat domestic violence during the COVID-19 lockdowns.

³ Reported by a speaker at the Lead Krea University webinar on Strengthening Emergency Response and Support Services for Gender Based Violence: Amid COVID and beyond

⁴ <https://www.youthkiawaaz.com/2020/05/gendered-impact-of-work-from-home-during-lock-down-period/>

⁵ Reported by a speaker at the Lead Krea University webinar on Strengthening Emergency Response and Support Services for Gender Based Violence: Amid COVID and beyond

⁶ <https://www.livelaw.in/news-updates/include-work-of-protection-officers-under-domestic-violence-act-as-essential-services-legal-aid-clinic-at-jgls-writes-to-mha-156076>

Answer: Examples of obstacles faced by women in reaching out for help during the lock-down have been recounted in the answer to question number one. Reiterating here the range of issues women faced; women were locked within the home, could not seek help, could not avail of transportation, were constantly under surveillance of the marital family- especially the husband, could not meet the neighbours and could not leave home to go to their natal families. Regarding the police, they were very busy with the enforcement of COVID related restrictions and were not inclined to help women facing violence. Police mostly discouraged or openly refused to file cases of domestic violence. Women also could not access crisis support centres as most were closed or functioning like help-lines.

9. Please provide examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by Governments.

Answer: The National Commission for Women activated a 'WhatsApp' number where cases of violence against women and girls could be reported. They also made data related to increased reporting of VAWG to their help-lines public soon after the lock-down started and this served to alert the media, civil society organisations and the government to the increase in cases of VAWG. At the national level, on March 25, 2020 the [Ministry of Women and Child Development](#) issued a circular for all state run 'One Stop Centres' and helplines to be made operational despite the lockdown⁷. In UP the government activated a special helpline number- 112- to receive complaints of any emergencies with a specific mention of domestic violence. However, these measures were found to be inadequate to cater to the needs of women as is seen from our ground level assessment given in detail in answer to question one.

10. Please provide examples of good practices to prevent and combat violence against women and domestic violence and to combat other gendered impacts of the COVID-19 pandemic by NGOs and NHRIs or equality bodies.

Answer: 1. Most WROs we spoke with were providing services for VAWG in whichever form possible whether by keeping their centres open in spite of hardships faced, through helplines or mobiles operating as helpline or direct reach out to survivors. Only when there are options for services are women motivated to come out and talk about the violence they are facing. Therefore, easy access to violence services is very important even to make the violence faced by women visible.

2. There are generally very few Women's Rights Organisations in humanitarian relief work. This time Oxfam India engaged some WROs in their humanitarian efforts. The feedback from other humanitarian partners was that they could not address concerns of women in distress or even reach out, to many women as much as could the WROs. More WROs need to be engaged to visibilise the violence faced by women and also to capacitate other humanitarian organisations to devise sensitive ways of working with women, providing them services, identifying women headed households and single and marginalised women to prioritise their needs. This is a best practice coming out of our field learnings.

3. The journey of men's frustrations, anxieties and alcohol consumption to perpetrating violence also points to gendered beliefs of masculinities and need for mental health services, emotional support as well as de-addiction efforts. These efforts could also help to prevent violence faced by women. Oxfam India works with young boys to challenge negative social norms linked to masculinities. We found that many of these young champions were sensitive to the plight of women, helped in domestic chores within the home, thus relieving women of some of their stress and also actively helped to reach out to women in distress. Working with

⁷ No. WW-22011/27/2016-WW, Government of India, Ministry of Women and Child Development (Women Welfare Division), dated 25 March 2020

men and boys to delegitimise negative social norms linked to masculinity is a good practice which will work in the medium to long term by nurturing sensitised men and boys in the community who can be role models as well as support to women in distress. It is also important to provide counselling and emotional support to women facing loneliness and isolation as was found with single women as well as anxieties and frustrations of women which are often overlooked.

11. Please send any additional information on the impacts of the COVID-19 crisis on domestic violence against women not covered by the questions above.

Answer: Please find here recommendations from our side, some specific to the Indian context while others can be applied universally. These have been provided in the policy brief we brought out on 6th April called 'COVID-19: Recommendations for a feminist approach'⁸. These are:

1. Services for VAWG including helplines, crisis support centres, shelter homes and the immediate provisions of domestic violence and other laws to protect women and girls from VAWG should be deemed 'essential services' so they can continue and be facilitated during emergencies and lock-downs such as these. For example, India has a law, the Essential Services Maintenance Act and Disaster Management Act, both of list essential services such as medical services and hospitals, law enforcement, and others which are required to be functional in all emergencies.
2. NGOs who operate helplines, run crisis support centres and operate shelter homes need to be given special passes, concessions and financial support to be able to continue their services.
3. In the long run, make a network of functional Crisis Support Centres, integrated across public services such as Hospitals and Police Stations and made functional upto the block level to enable access to a majority of women.
4. Take immediate and stringent action against perpetrators of gender based violence and sexual harassment to instil confidence in law enforcement enabling women's safety.

⁸ <https://www.oxfamindia.org/knowledgehub/policybrief/covid-19-recommendations-feminist-approach>