

SUBMISSION TO SPECIAL RAPPORTEUR ON VIOLENCE AGAINST WOMEN, OHCHR

By Jagori, New Delhi (www.jagori.org)

30th June 2020

- 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.**

An increase in domestic violence during the lockdown period has been observed. Jagori, a women's organisation in Delhi, recorded a total of **478** complaints of domestic violence over phone and email between **18th March and 29th June 2020**. This is 1.5 times more than the complaints recorded during a 3.5 month period under normal circumstances. Responses from Jagori's community survey with 150 community women respondents on the effects of COVID-19 also indicates that domestic violence is the form of VAW that has seen an increase during the lockdown.

In addition to Jagori's data in Delhi, data provided by the National Commission for Women (NCW) shows that 1,477 complaints of domestic violence were received between 25th March and 31st May 2020. This is claimed to be the highest rise of complaints of DV in the last 10 years for this period.

Besides this, the increased burden of unpaid care work during lockdown needs to be seen as a form of domestic violence in the larger domain of structural violence. The needs of families and returnee migrant workers have meant more cooking, fetching water, collecting fodder, fuel, caring for the sick, etc. for women. Jagori's survey reflected that with husbands and children at home, women's work in the kitchen has increased considerably. Due to the fear of contracting COVID-19, household tasks such as washing clothes and cleaning/dusting have also become more frequent and rigorous. Jagori's work and presence in Jharkhand verifies that in rural parts of the state, women are playing the roles of frontline workers in government efforts and producing masks, sanitizers and are running community kitchens to feed the vulnerable households. The additional burden of work on women is two-fold since.

The existing gender inequalities within the household and elsewhere have also become sharper in terms of food consumption, health care needs and access to resources like masks, sanitizers, etc. Single women, elderly women and women with disabilities are most at risk of violence. Women health workers are facing discrimination too. Though data is not available, many women didn't receive maternity and abortion services and children did not get access to immunization services. There is a possibility of a higher incidence of unprotected / forced sex during lockdown.

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?

Many civil society helplines run by women's organizations are available online and Jagori has verified the operational viability of many of them in the NCR region. However, the case is different with Government-run helplines. In Jagori's experience, the National Women's Helpline (181) has not been properly functional and their mobile services have been unavailable.

In the initial months of lockdown (mid-March-April), a drop in calls to women's helplines was widely reported - possibly because women did not have the privacy to make calls with all family members locked in with them at homes; because their phones were taken away by their abusers, or they did not have money to recharge their phones; or because women were prioritizing the survival of their family over their personal safety. In addition, only 38% women have access to mobile phones, they could not step out to access other avenues to call up helplines or had no cash in hand and therefore no recharge for their phones. However, as indicated by aforementioned data on domestic violence, calls to these helplines are steadily on the rise.

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

Women have been facing domestic violence as a result of being locked-in with their abusers who take out economic frustrations such as job-loss and the stress of isolation on women. Women are not being able to access many support mechanisms. However, they are exempt from stay-at-home orders to relocate to shelters if need be. Ideally the abuser should be taken away and woman should continue to stay in her home, but the general tendency is to move the woman to a shelter. The PWDVA Act 2005 has a built in provision for women's right to residence and for the abuser to be taken away.

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

Some shelters run by NGOs were open. Jagori verified some shelter homes available for women in Delhi and they assured us that they were open and available for women. However,

when the time came for survivors to actually be sent there, they refused admittance and claimed they were full¹. This brings us to the point of shortage of space during these times.

Shelters did not seem to have clear SOPs on functioning during lockdown and were worried about transmission of virus, so they were not willing to admit women to avoid crowding. As of now, there are no institutional alternatives available nor have been announced by the state agencies.

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

No protection orders are available. However, the issue of increased domestic violence and protection of survivors was brought to the Delhi High Court through a PIL by an NGO, it had urged the appointment of Protection Officers for the lockdown period but it is unclear to what extent this was taken forward.

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

Courts were closed during lockdown. For urgent matters, they have been using video-conferencing facilities. However, it is unclear whether they heard any cases pertaining to domestic violence. To help victims of domestic abuse during the nationwide lockdown, the Delhi State Legal Services Authority (DSLISA) is collaborating with Mother Dairy booths, pharmacists and chemists throughout the national capital for information on such victims, and has also launched an app to deliver legal aid. The DSLISA has been ramping up efforts to improve access to free legal aid for victims unable to find help due to the restrictions imposed by the lockdown. The service already had a helpline — 1516 — set up as well as a phone number (+91 96679 92802), which can be reached through messages on WhatsApp and SMS².

¹<http://www.jagori.org/sites/default/files/publication/LIST%20OF%20OPERATIONAL%20OSCs%20%28Delhi%2C%20UP%2C%20Punjab%2C%20Haryana%2C%20MP%2C%20Rajasthan%2C%20Bihar%2C%20Jharkhand%29%20%281%29.xlsx.pdf>

²<https://theprint.in/india/delhi-legal-services-launches-app-ties-up-with-mother-dairy-booths-to-help-abuse-victims/427080/>

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.

Jagori's community survey reveals that women are not able to access hospitals; however, they are able to access medicines through chemists, *mohalla* (locality) clinics and local doctors. Those who were able to access hospitals had to stand in long lines for medicines and were not given proper check-ups. Crises and emergency centres in hospitals have been converted to COVID-19 testing centres and women are unable to access emergency wards. There is a denial of admission due to a focus on COVID-19 testing.

Groups focusing on women and health, such as Sama (a women's health resource group based in Delhi, have been appealing for urgent attention to the continued denial of healthcare services for maternal and reproductive health needs, resulting in maternal and newborn deaths as well as other morbidities. Several women seeking maternal healthcare services- including for delivery- are experiencing trauma and denial of care as is evident from media as well as civil society organisations' (CSO) reports emerging from across the country. There are several barriers to access including non-availability of ante natal care, lack of transportation and ambulance services, non-implementation of the Ministry of Health and Family Welfare (MoHFW) guidance and State Government advisories for essential services. Non-availability of qualified human resources at health facilities, the lack of referrals, denial or postponement of services have caused severe trauma and distress.

News articles across the country outline how pregnant women were unable to access hospitals and often gave birth at home or in the street, which created complications or even death for the mother and the child. Women's groups and collectives have been petitioning for the declaration of sexual and reproductive health services as essential services during and have been successful, but there is a lack of implementation of updated MoHFW guidelines (13th April 2020).

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

Women have faced difficulties in accessing support services for cases of domestic violence. They were denied entry into police stations and police help and did not have any transport to reach shelter homes. Another potential obstacle was obtaining a medico-legal certificate to get admittance into shelter homes.

Jagori found it challenging to provide support to survivors of domestic violence during lockdown as we had to operate only on phone due to mobility restrictions. The violence intervention team ultimately had to struggle and negotiate with the police to provide support

physically. The team did extract survivors from abusive environments in extreme cases of violence during lockdown.

Jagori - on behalf of the national Aman Network comprising more than 145 NGOs across the country - presented a memo to the Minister Ministry of Women and Child Development, Chair, National Commission for Women, and Chair, Niti Aayog³.

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.

In response to reports of increases in domestic violence during lockdown, the State Governments of Kerala and Maharashtra instituted new helplines for women in distress. The Kerala Government attempted to reach more women in need by launching this new helpline as a Whatsapp helpline.

In response to a PIL by an NGO the Delhi Commission for Women (DCW) also launched a WhatsApp Number (+91- 9350181181) to register complaints regarding domestic violence. The Delhi Commission for Protection of Child Rights also launched a helpline number (011-41182977) for children who need any kind of mental health counselling.

The Assam State Government developed SOPs for shelter homes as a result of pressure from North East Network (NEN) - a women's rights organization.

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.

Many NGOs have adapted support services for VAW to make them available online.

Jagori's violence intervention team has been working with the police and pushing them to intervene in domestic violence cases and has been following up with them. They have also been strategizing with survivors with regard to their personal safety and security and talking to and counseling their husbands and other family members.

³http://www.jagori.org/sites/default/files/publication/Recommendations%20to%20NCW%20on%20Responding%20to%20Domestic%20Violence%20During%20Covid-19_Aman%20Network.pdf

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Jagori is also emphasizing and promoting bystander response – especially in thickly populated communities. Survivors are encouraged to go out of their homes, make noise and ask for help in their neighbourhoods in case of violence/ beatings, especially late in the night.

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.