

PREVENTION OF VIOLENCE AGAINST WOMEN- A PILOT PROGRAM IMPLEMENTED IN TWO MANDALS OF HYDERABAD

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Abstract: A pilot program was implemented in two Mandals of Hyderabad District, in the state of Telangana on Prevention of Violence against women by Young Women's Christian Association of Secundarabad-in collaboration with Makro Foundation and COVA. The researchers were part of this pilot programme. The objective was to determine and implement all the necessary measures required for the reduction of all forms of domestic violence, stigma and discrimination against women in the project area. Violence against women must be addressed on multiple levels and in multiple sectors of society simultaneously, taking direction from local people on how women's rights may be promoted in a given context. The strategy involved was to create public awareness and mental transformation on gender equality and domestic violence against women, and to reduce attitudes and behaviours that generate and reinforce domestic violence. This programme was implemented at various levels Community Leaders (Slum Leaders who are mostly men), Schools, colleges and Institutions and Networking with Non Government Organizations The major outcome of this program was 30 case studies on Domestic Violence from project area have been documented; Resource Directory was evolved for networking and linking of services for women in Project Areas as well as in the twin city. Sustainability of the program was ensured by linking to services and networking.

Keywords: Domestic violence- physical, psychological, sexual abuse, DVA- Domestic Violence Act, Non government organization-NGO, Intervention.

Introduction: Violence against women is a common occurrence in most societies whether the violence is physical or mental. Women suffer multiple forms of violence including domestic violence, rape, dowry deaths, sexual harassment, suicide, forced marriage, trafficking and other psychological and financial oppression. Violence against women has become one of the most visible social issues in this region.

Domestic violence is any act of physical, sexual, or psychological abuse, or the threat of such abuse, inflicted against a woman. The perpetrators of domestic violence have often been found to be the males & the victims, their sexual partners. (Heise et al. 1999). Many victims do not report incidents of domestic violence but keep it secret due to a variety of complex reasons. Some of the most common reasons are fear of the abuser, denial about the severity of the situation, economic limitations, lack of knowledge about alternatives available through social services, & more. In addition, victims often do not reach out for help from friends or family due to social stigmas, cultural taboos, feelings of shame or inadequacy, and/or a general lack of understanding about the cycle of domestic violence.

Defining Domestic Violence:

The term used to describe this exploding problem of violence within our homes is *Domestic Violence*. *Domestic Violence* includes harms or injuries which endangers women's health, safety, life, limb or well being, whether mental or physical. It may also be through physical, sexual, verbal, emotional & economic abuse.

Domestic violence is currently defined in India by the Protection of Women from Domestic Violence Act of 2005. According to Section 3 of the Act, "any act, omission or commission or conduct of the respondent shall constitute domestic violence in case it - (a) harms or injures or endangers the health, safety, life, limb or well-being, whether mental or physical, of the aggrieved person or tends to do so & includes causing physical abuse, sexual abuse, verbal & emotional abuse & economic abuse; or (b) harasses, harms, injures or endangers the aggrieved person with a view to coerce her or any other person related to her to meet any unlawful demand for any dowry or other property or valuable security; or (c) has the effect of threatening the aggrieved person or any person related to her by any conduct mentioned in clause (a) or clause (b); or (d) otherwise injures or causes harm, whether physical or mental, to the aggrieved person.

Review of Literature

According to available statistics from around the globe, one out of every three women has experienced violence in an intimate relationship at some point in her life. This is an average based on available national surveys across industrialized and developing countries (World Health Organization 1997).

Prevalence in India

The few studies available indicate that physical abuse of Indian women is quite high, ranging from 22 percent to 60 percent of women surveyed (Rao 1996 and Mahajan 1990).

According to a latest report prepared by India's **National Crime Records Bureau (NCRB)**, a Crime

has been recorded against women in every three minutes in India. Every 60 minutes, two women are raped in this country. Every six hours, a young married woman is found beaten to death, burnt or driven to suicide. The statistics of increasing crimes against women is shocking, where women are subjected to violent attacks i.e. foeticide, infanticide, medical neglect, child marriages, bride burning, Sexual abuse of girl child, forced marriages, rapes, prostitution, sexual harassment at home as well as work places etc. In all the above cases women is considered as aggrieved person. According to 'United Nation Population Fund Report', around two-third of married Indian women are victims of Domestic Violence attacks & as many as 70 per cent of married women in India between the age of 15 & 49 are victims of beating, rape or forced sex.

According to the NCRB statistics 2010, there has been a 4.8% increase in crime against women as compared to 2009.

- 22,172 cases of rape were recorded in 2010.
- 8.9% of the total victims of Rape were girls under 14 years of age, while 16.1% were teenaged girls (14-18 years) and 57.4% were women in the age-group 18-30 years.
- 94,041 cases have been reported under Section 498A IPC in 2010, showing an increase of 5% over 2009.

Human Development Index and Gender Inequality Index - Overview of Status of women in India.

- According to the UNDP Human Development Report 2011, India ranks 134 in the Human Development Index.
- India ranks 129 out of 187 countries in the Gender Inequality Index.
- Sex Selective Abortions: According to Census 2011, India's sex ratio of 940 is the second lowest (after China 926) amongst the top ten most populous countries in the world. Legal framework on sex selective abortions PC & PNDT Act –regulating sex determination tests and prohibiting sex selection. MTP Act –regulating the conduct of medical termination of pregnancies. IPC 1860-Sections 312-316 penalizing the causing of miscarriages.

Prevalence in Hyderabad, Andhra Pradesh

As per National Crime Records Bureau (NCRB) statistics, in 2011, Hyderabad stood at third place after Delhi & Bangalore among the list of 52 cities in the country for recording maximum cases pertaining to violence against women (excluding Cyberabad data). But, if the crime figures from Cyberabad were also taken into account, the state capital would be in second position. Hyderabad may not be exactly Delhi in terms of hostility towards women, but is not too far behind in terms of crime committed against the

fair sex. With 3,584 crimes reported, including 141 rape cases in 2012, Hyderabad definitely is one of the most hostile cities for women in the country. In policing terms, Greater Hyderabad is divided into Hyderabad Commissionerate & Cyberabad Commissionerate, the latter covering the Hi-Tec City & newer parts of the city & is several times bigger than its Hyderabad counterpart & more crime-prone. Studies worldwide have shown that hospitals and clinics, whether government owned or private, is an important entry point for women suffering from abuse within the family. A 1991 study found that the prevalence of violence and sexual assault was higher among those who used health services (Felitti 1991). Dobash and Dobash (1984) point out that in the U.S., physicians are approached for help earlier than other formal agencies. And finally, several studies (Golding et al. 1988; Koss, Koss, and Woodruff 1991; Heise, Pitanguy, and Germain 1994) demonstrated that a history of rape or assault was a stronger predictor of physician visits and outpatient costs worldwide than any other variable such as age or other health risks.

Rationale

Due to the hidden nature, domestic violence is virtually impossible to measure with absolute precision. It is further complicated by the varying definitions of abuse utilized in case studies. Domestic violence is not just a private family matter; it touches everyone in our community with its immediate & long-term effects, & requires that community leaders in all sectors partner together to break its ongoing cycle. It was strongly believed that violence diminishes women's & girl's ability to gain an education, earn a living & participate in public life. It has significant health impacts, including psychological consequences, physical injuries, sexual/reproductive health issues & death.

To address this problem a pilot project was implemented from September 2013-March 2014 to empower the vulnerable women with knowledge & awareness about human & legal rights so that they could emerge with strong leadership qualities & tackle the phenomenon of violence & discrimination against them.

Objective: The objective of the project was to determine & implement all the necessary measures required for the reduction of all forms of domestic violence, stigma & discrimination against women in project area. Given the complexity and sensitivity of domestic violence, it was essential to use a mix of qualitative and quantitative methodologies and tools for analysis in the program. One way to ensure participation was through conducting workshops that brought together various stakeholders and organizations involved in response efforts to elicit a wider information base of ongoing efforts.

Project Location: The project was implemented in 2 mandals –Charminar and Secunderabad mandals of Hyderabad. These areas were taken considering the reporting of vulnerability and prevalence of domestic violence cases.

Operational definition:

The study by Leela Visaria has explicitly considered psychological, emotional, physical, and sexual abuse in her analysis of forms of abuse. Similarly, studies on responses to violence against women examined herein explicitly state an operational definition of domestic violence that includes mental, emotional, and financial abuse of a woman. These acts of intimidation and cruelty led women or their family members to seek the support of agencies other than the family.

Thus for this study **Domestic violence** is operationally defined as verbal, physical, and emotional abuse against adult women in the family setting.

Given the varied objectives of this project, the methodology was designed with a combination of qualitative and quantitative strategy. The use of complementary methods created opportunities to present more detailed and multi-dimensional insights into the interactions between women who were subjected to violence.

The project was implemented with following two broad goals:

Goal I: To create public awareness & mental transformation on gender equality & domestic violence against women in order to reduce attitudes & behaviors that generate & reinforce domestic violence;

Objective I: To reduce the cases of violence and discrimination against women in the project area

Strategy : To help women afflicted with Domestic Violence

Activity I: Provided rescue and rehabilitation support to victims of extreme violence, discrimination and trauma with counseling and medical support

Activity II: Document existing cases of violence against women in the project area.

Outcome: 25 women affected with domestic violence were rehabilitated and documented in form of booklet

Objective II: To increase the knowledge and awareness of vulnerable women about human rights and legal rights

Strategy I : To create public awareness and mental transformation on gender equality and domestic violence against women in order to reduce attitudes and behaviors that generate and reinforce domestic violence

Activity: I: Flyers Printed and distribution of printed Flyers/ leaflets to ensure the reflection of gender equality principles and combat domestic violence

Outcome I: 3000 Flyers in English, 3000 Flyers in Telugu were printed

100 Posters in English and 100 Posters in Telugu were printed

Activity II: 2 Orientation and sensitization program one in Secunderabad and 1 in Hyderabad for ensuring awareness raising and mental transformation amongst Male Slum Leaders on gender sensitivity, Equality and violence against women was done.

Outcome II: 145 Male Leaders sensitized on Domestic Violence & its impact. They in turn have spread the message amongst other leaders in the community.

Activity III: Organized 2 sensitization program for women on human rights, domestic violence, stigma reduction and legal rights at grass root level in Hyderabad and Secunderabad respectively

Outcome III: 117 Women empowered on Domestic Violence & its impact & they will become our torch bearers in that community

Strategy II: To educate and mobilize the Adolescent & youth in addressing the issue of violence against women

Activity I) Sensitization on gender equality and domestic violence against women was held in 20 institutions in Hyderabad and Secunderabad respectively.

Outcome I : 1519 School/College Youth from 20 Educational Institutions sensitized

Activity II) 2 sensitisation program, 1 in Hyderabad and 1 in Secunderabad with Police personnel's on gender sensitivity, women's rights and domestic violence was done.

Outcome: II: 60 Police personnel sensitized on Domestic Violence

Strategy III: To make the necessary arrangements for strengthening the socio-economic status of women, and ensuring the enforcement

Activity I: 2 meetings were conducted to know the needs of women on project area so that the needs assessment for women in distress would help us in facilitating economic rehabilitation process. The Needs Assessment for women was done in two age groups- 15-20 yrs and 20 yrs-45 yrs. The Objective of the Program was to orient participants about:

Vulnerability of women, Importance of empowerment and to do a Need assessment. The result was that 90% of the girls needed empowerment on safety and self defense, financial education and linkage to women entrepreneurship programs.

Activity II: Capacity-building for women for uplifting their economic status or linking women to organization supporting training and skills development to develop women entrepreneurs were done

Outcome I: 1 Suicide prevention Program covering 75 people was done

Outcome II: 1 Financial Counseling session for women entrepreneurs was done covering 80 women

Outcome III: 60 women have taken up entrepreneurial activities for carrying out sustainable livelihood

skills development to develop women entrepreneurs were done

Outcome: 65 women has taken up entrepreneurial activities for carrying out sustainable livelihood

Objective II) To establish a mechanism of cooperation & networking amongst institutions & relevant sectors with regard to the service delivery to women victimized by domestic violence & their children.

Strategy : Advocacy at various levels

Activity I: Local coordination with organizations working in the area of women.

Activity II: 40 Institution Principals/Head of Institutions sensitized on issue of Domestic Violence.

Activity III Orientation on impact of domestic violence and collation of data of 4 women police stations and 9 police stations in project area was taken up.

Outcome I 150 NGOs personnel are sensitized on the issue of Domestic Violence & its impact through a meeting with NGOs, Religious leaders. The researchers shared the progress of the analysis with the participant organization in final workshops with key stakeholders to report the findings and facilitate Networking between organizations to develop advocacy efforts.

Outcome II Resource Directory prepared of services for women in Project Areas.

Citation of 3 cases studies amongst 25 cases documented

Case Study I: Radhika*** 24 years**** Married**** Labour work*** September 2013, Sexual Abuse- Radhika came in contact with us when we were talking to leader for arranging sensitization program for women leaders in old city on violence against women, She met our field counselor with a complain of abdominal pain.

Case II: Savithri***Age: 23 years **** Married*****Housewife**** September 2013, **Physical Abuse and Dowry Harassment** -Savithri was suffering from Emotional Abuse in Domestic Violence from her in laws and husband for dowry unsettlement.

Case III: Neeraja*** 38 years **** Secunderabad **** October 2013, Addiction and Financial Abuse Neeraja aged 38 years informed that her husband has alcoholic problem. He wants to come out of it but is unable to do so. Of late he has started to physically abuse her also. She is very stressed and wanted counseling

Counseling using cognitive behavior therapy and intervention, linkages to services was used to rehabilitate them.

Some observations and analysis of 25 Case studies:

Demographic description: When grouped by age and duration of marriage, all categories of women reported either psychological (60%) physical abuse (40%).When grouped by age and duration of marriage, all categories of women reported either psychological or physical abuse at incidence levels ranging from. Contrary to some expectations that violence might subside with age, adult children, and adjustments, women who suffer abuse early on continue to experience it throughout their marriage. As one respondent who had been married for several years remarked, "The frequency or intensity of beating or quarrels have not really decreased. It should have with the passage of time, but nothing of that sort has happened."

Initiation of Abuse: During the in-depth interviews, some women commented that once the initial inhibition was broken, it was not difficult for men to beat their wives. Most women remembered the first argument with their husbands. In most cases, the problems started within the first year of marriage and before the birth of any children. Women reported that after having children, the violence did not decrease but their husbands became accustomed to abusing them. Many also felt that if they listened quietly, their husband's abuse might die down. If instead a woman defended herself or responded angrily, the confrontation usually worsened and could escalate to physical violence

Precipitating factors: Women in the study frequently attributed an outburst of violence against them to proximate causes or precipitating triggers such as "mistakes" in running the household. The catalysts cited most often include: not preparing meals on time (66 percent), alcoholic husband, (51 percent), not caring for the children properly (48 percent), and economic stress (48 percent). Their husband's anger was aggravated further when the women resisted verbal abuse, asked money to run the house, fees for children education, or tried to defend themselves or use harsh language. One study in Karnataka found that alcohol use and dowry were primary and important determinants of abuse (Rao1997). Others argue that hierarchical gender relations, perpetuated through gender socialization and socio-economic inequities, are the root cause of violence against women (Heise, Pitanguy, and Germaine 1994). In addition to economic inequality between men and women, David Levinson (1989) outlines three other factors that together help predict violence against women: a pattern of using physical

violence for conflict resolution, male authority in the home, and a divorce restriction for women.

Forms of violence: The most frequently reported types of violence against a woman include abusive language (70 percent), beatings (83 percent), forcing her back to her parental home (42 percent), and threats to throw her out (51 percent). Other types of abuse include refusing to give money to manage the household, protracted criticism, and getting angry with the children. Two thirds of the women who were abused reported physical violence. David Levinson (1989) outlines three other factors that together help predict violence against women: a pattern of using physical violence for conflict resolution, male authority in the home, and a divorce restriction for women.

Communication with other: A woman's access to support or alternatives may effect her situation with domestic violence. Most of the women in the study were silent as concern for the honor of their husband and family as the primary reason for staying quiet. The isolation of women in violent households deepens when social and economic constraints preclude visits to their natal home

Perceived Options: Most of them were unable to access their parental home for support, abused women felt they had few alternatives. Although many reported that they had thought about running away or committing suicide, they felt these options were not feasible because of their young children and the lack of places to go. Barbara Miller (1992) listed some options that may seem viable for women who are considering escape from an abusive situation, including: support from the natal home, divorce/separation, bearing sons, age, and committing suicide. Public support institutions such as shelter homes are an option but are still not easily or widely accessible to most women.

From the above it has been a factor clearly responsible for inhibiting the choices of women in development is domestic violence. Abuse has been observed to impede the public participation of women, undermine their economic efficiency, cause increased health burdens, and impose a drain on scarce national resources (Heise et al. 1994).

A reciprocal concern is whether and how development efforts can impact violence within the home. Limited evidence from studies on microcredit lending programs, for example, suggest that improved household income by women and greater control over that income by them reduce the level of violence within the home (Schuler 1998; Kabeer 1998). Service of women has be strengthened. Networking and Advocacy done as a innovative model with the least cost and maximum output. Visibility of the Program and Transparency of the

program has definitely increased when so many key players are partners.

The prevalence of domestic violence in urban slums in our country is relatively high and confirms that domestic violence is a universal phenomenon. Unless the client is offered counseling to deal with various psychological aspects that come with violence, it would very challenging to deal with issue of domestic violence

Conclusion

The multi sectorial approach really was the key to success of this intervention. It has been a learning experience and focus was working on various levels i.e. institution level/community level and also the NGOs. Reviews and improvisation focused on the target including qualitative aspects. The programme was culminated with the international women's day celebration in March 2014, where in the case study book let and the resource directory was officially released. The process of rescuing, rehabilitating and linking the victims to livelihood continues with the colorations made and with the existing network of YWCA of Secunderabad, COVA, Makro Foundation, Human Rights Law Network

The limitation of this program was it was restricted to two mandals. Learnings and challenges included negotiating with different stake holders, government and interdepartmental coordination took a lot of time, rehabilitation of women with disability affected with violence, frequent transfer of government officials, attitude of women as help seekers, first information report from police station requires a lot of coordination. As the studies and discussions above have made clear, improved communication among and within institutions responding to domestic violence in India needs to begin, in part, with a dialogue about documentation.

Recommendation

1. Strategizing to work at various levels is important in order to empower women, who can take responsibility for their own well being.
2. Orientations and awareness programme help the victims understand their own plight, and make them aware that violence need not be part of their life, and they have a right to respect and dignity.
3. A comprehensive approach to the issue of domestic violence. More centers to deal with addiction with low cost treatment.
4. Cognitive behavior therapy with self esteem building in counseling session has come up very strongly.
5. Sex education has been a part of curriculum in some parts of country this gender sensitivity as a part of life skill education can be introduced.
6. Sensitisation of people who are at judicial system is recommended as part of their training.

7. It is necessary to turn one's attention to the creation of a systematic database. The purpose of a database on violence against women, whether gathered officially or unofficially, is to assist planning interventions to combat and prevent violence.

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