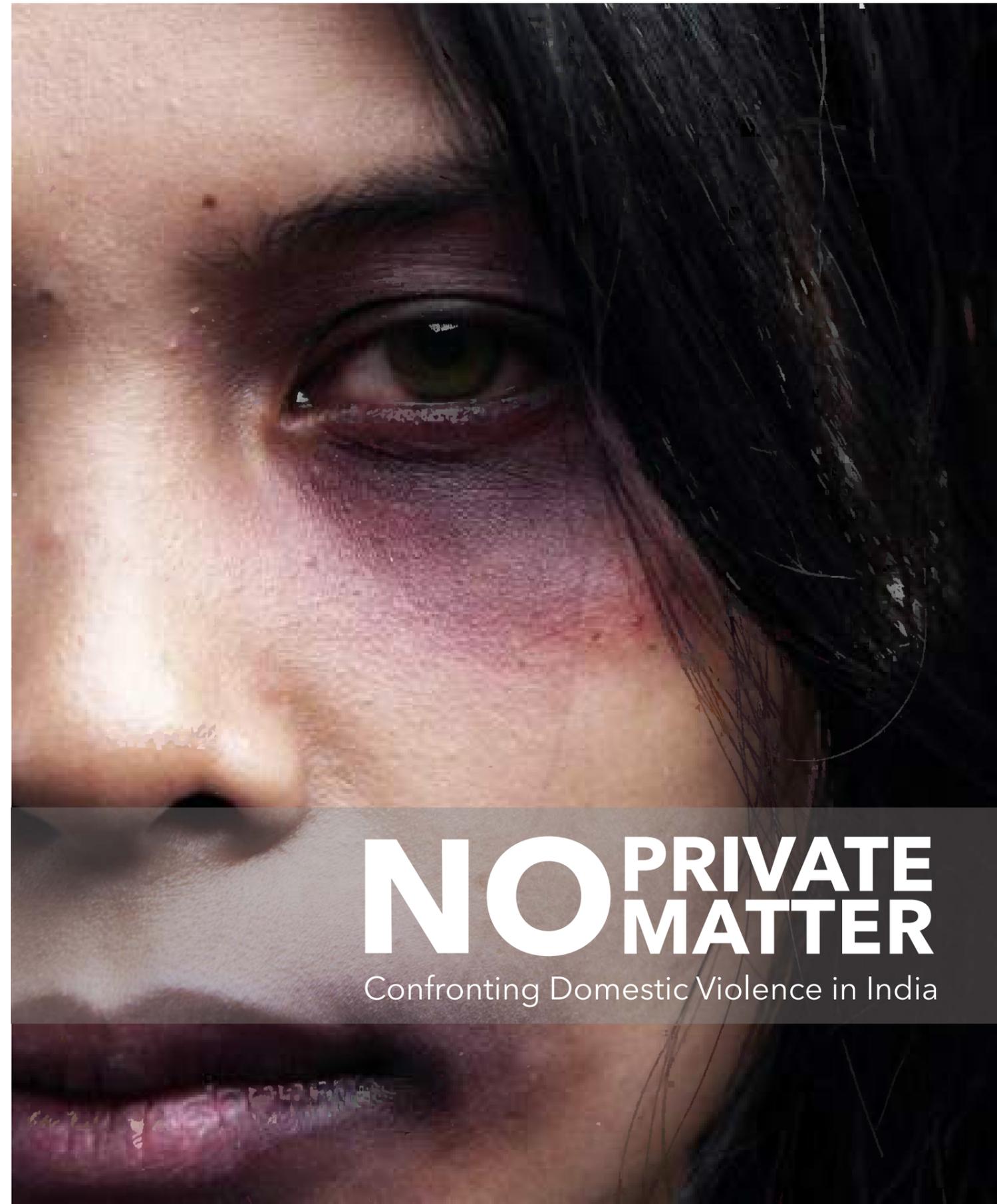




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NO PRIVATE MATTER

Confronting Domestic Violence in India



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Kiawah Trust

The Kiawah Trust is a UK family foundation that is committed to improving the lives of vulnerable and disadvantaged adolescent girls in India. The Kiawah Trust believes that educating adolescent girls from poor communities allows them to thrive, to have greater choice in their life and a louder voice in their community. This leads to healthier, more prosperous and more stable families, communities and nations.

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Omidyar Network is a philanthropic investment firm dedicated to harnessing the power of markets to create opportunity for people to improve their lives. To date, Omidyar Network has committed more than \$500 million to for-profit companies and non-profit organizations that foster economic advancement and encourage individual participation across multiple investment areas, including microfinance, property rights, consumer Internet, mobile and government transparency.

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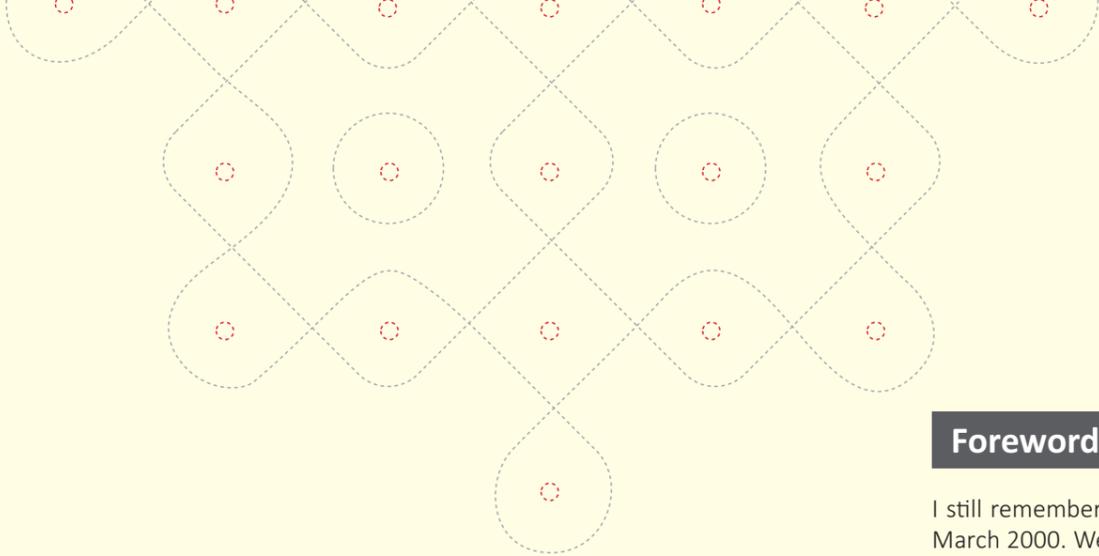


Dasra is India's leading strategic philanthropy foundation. Dasra works with philanthropists and successful social entrepreneurs to bring together knowledge, funding and people as a catalyst for social change. We ensure that strategic funding and capacity building skills reach non-profit organizations and social businesses to have the greatest impact on the lives of people living in poverty.

www.dasra.org

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And I have to accept a harder fact
That sometimes knowledge comes with pain.
There is a reason for this experience
And towards larger truths I walk another step,
And I have to know somewhere inside
That there is more learning that I need yet.

The pain will come, the ache is there
And that tear is bound to fall,
But how sad it would be if from my pain
I learnt nothing at all.

And as I walk my journey
My goal I always have to keep in sight,
For as each veil of dark is lifted
I walk closer to the light.

- Rashmi Anand
Survivor, author and activist

Foreword

I still remember the day I got my first posting as an Assistant Commissioner of Police (ACP) in March 2000. We had been waiting for some time for word on our postings and I was extremely disappointed when I finally heard I was to be ACP at a Crime Against Women (CAW) cell in Delhi. It felt as though I had been sidetracked from mainstream policing. Little did I realize the tough road that lay ahead.

With preconceived notions and barely any knowledge about the issue of domestic violence, I began dealing with the problem through a purely criminal justice framework. It didn't take long to realize how wrong I was in my approach. As I handled case after case of emotional, physical, and sexual trauma, I realized how the law in itself, as it existed then, offered no solution at all. The pain and desperation of a woman who had no choice but to return to her abusive husband for lack of parental support, economic dependence, social pressure and emotional insecurity was absolutely heart-wrenching. Aided by a masculine police system, most men just got away with the abuse, especially as the police had no answers around 'how' to stop violence within a home. Also, since the so-called crime was being committed within the confines of four walls, it was not regarded as a law and order issue that reflected poorly on police performance. Nor was it a serious concern for the police which was busy fighting more serious offences such as murder or robbery. A handful of police personnel posted in CAW cells were thus believed to be sufficient to deal with the issue.

Against this backdrop, the enactment of the Protection of Women against Domestic Violence Act 2005 came as a very welcome step in the right direction. It provided much hope for change. Unfortunately however, the Act's effectiveness on the ground has been greatly compromised by the inadequate provision of resources and infrastructure to effectively respond to the needs of victims. At an institutional level, there is now an urgent need to improve the implementation of this law. It is also critical that responses go beyond just strengthening of the law's implementation. We must tackle domestic violence in a holistic manner by empowering our women and educating them so that they become economically independent and emotionally capable. At the same time, efforts to educate both women and men on the issue and its consequences are needed, to challenge and ultimately change mindsets.

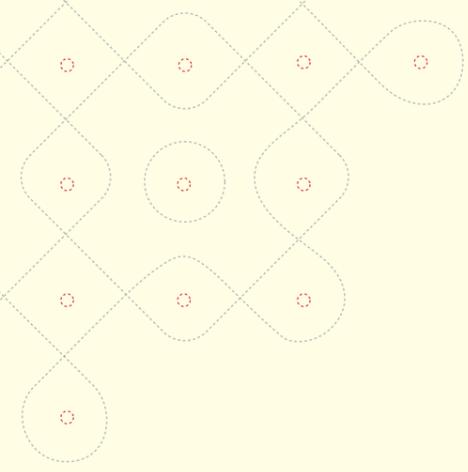
When we talk of domestic violence, somehow the word 'domestic' before the word 'violence' makes it lose its severity. Yet all of society is affected by the ripple effect that begins behind closed doors - over half of Indian women have experienced domestic violence, and it is an issue that cuts across caste, class, religion and geography. It is imperative that we acknowledge the seriousness of the problem, recognize the issue for all that it is - a crime, a human rights violation and a major public health concern - and play our respective roles as a society striving to address this epidemic.

To live a life free of fear is a basic human requirement. Confronting and preventing violence against women in their own homes then becomes a question of our fundamental humanity.



Suman Nalva

Additional Deputy Commissioner of Police, Special Branch, Delhi Police



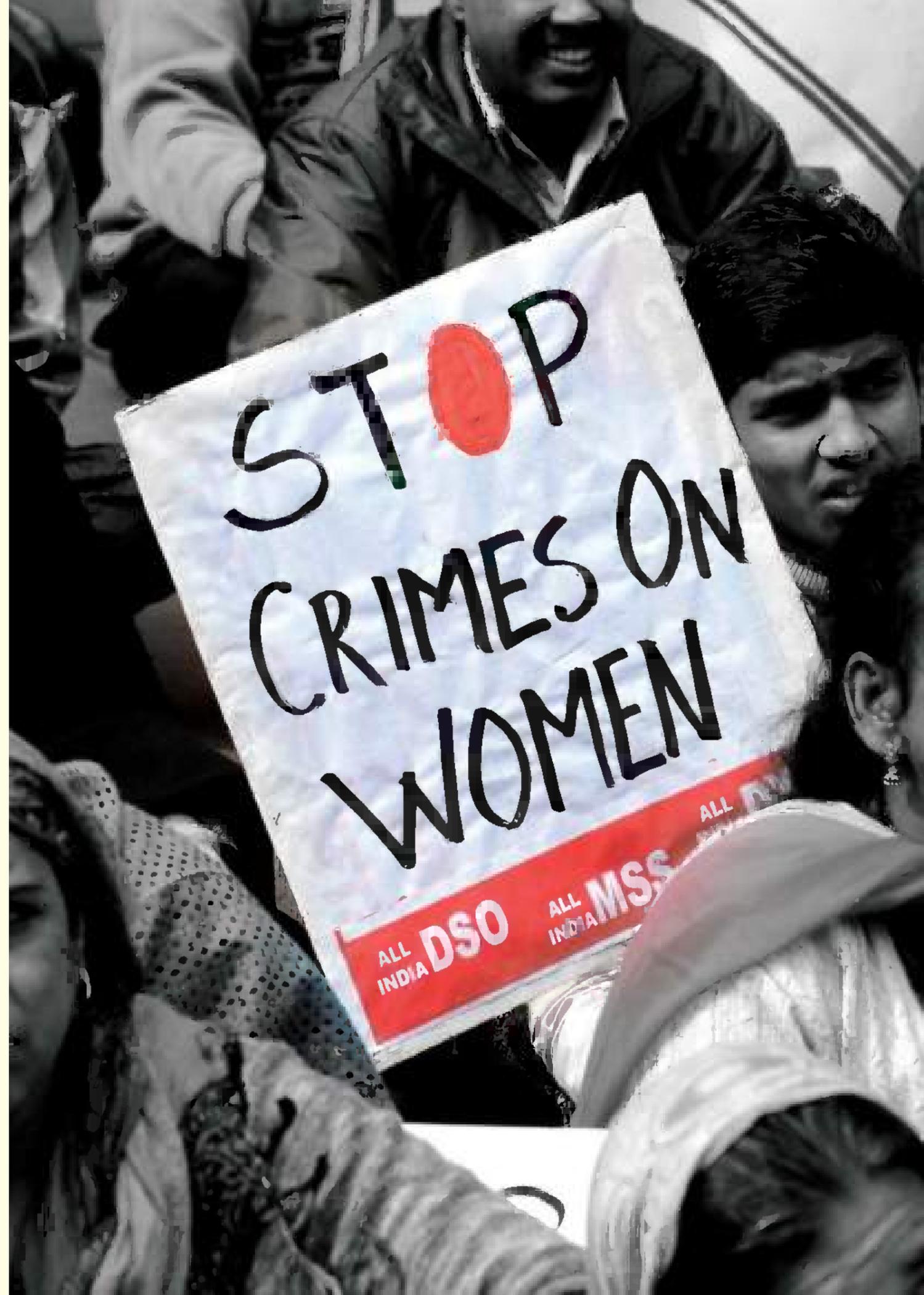
Acknowledgements

Dasra's research focuses on framing the nebulous and difficult issue of domestic violence in India with the principal aim of identifying high potential non-profit organizations that strategic philanthropy should look to support and scale. This nearly year-long initiative would not have been possible without the support of USAID, the Kiawah Trust and Omidyar Network. Their commitment and dedication to addressing this under-the-radar issue in India – despite it being a pressing global issue – gave strong impetus to Dasra's efforts in composing a publication that we all hope will contribute to moving the needle on ending domestic violence in India.

Dasra's advisory research team would especially like to thank Anju Pandey, Dr. Charu WaliKhanna, Pranita Achyut, Rashmi Anand and Dr. Sharmila Neogi for taking time out from their busy schedules and providing not only invaluable insights into the issue but also the numerous practical realities surrounding it. Dasra would also like to convey its deep sense of gratitude to the team at Copal Partners for their extremely timely and efficient support in reviewing and editing the report thereby bringing in a high level of quality and cogency to it.

Last but indisputably not least, Dasra would like to thank all the non-profit organizations that have been diligently working on the issue of domestic violence in India. It is their warmth and openness in spending the time, sharing details of their programs and providing perspectives of ground realities that allow this publication to be action-oriented. Their willingness to come together during Dasra's four day residential workshop is further testament to their readiness to converge and co-operate, which is one of the principal keys to solving this issue.

Finally, thank YOU, for picking up this report and reading it. It is ultimately through the support and generosity of those who read this report and are spurred to action that *No Private Matter* would serve its role as a catalyst for the domestic violence sector in India.



Greatest Challenges

- *Nearly 70% of women in India face some form of domestic violence*
- *57% of boys and 53% of girls aged between 15 and 19 believe that wife-beating is acceptable*
- *66% of women in abusive relationships remain silent about their suffering*
- *75% of Indian women who reported domestic violence have attempted suicide*

Greatest Opportunities

- *60% women reported a decrease in violence and discrimination following a 15 week program with men and boys*
- *A powerful media campaign can result in up to 5x increase in the number of women reporting abuse, and their awareness levels of the law and its entitlements*
- *INR 1,200 crores per annum can enhance the effective implementation of the Protection of Women against Domestic Violence Act (PWDVA)*
- *Close to 50 non-profit organizations in India have dedicated domestic violence programs*

Executive Summary

Nearly
70%
of women in India
face some form of
domestic violence

At least 170 million women in India are victims of domestic violence. Despite this widespread prevalence domestic violence is not customarily acknowledged and has remained largely invisible. The social construct of the divide between public and private underlies the hidden nature of domestic violence against women. The fact that most violence occurs behind closed doors - within families and inside homes - has contributed to the belief that domestic violence is a private matter.

Impact of Domestic Violence - why should it be No Private Matter?

Domestic violence is a public health problem of epidemic proportions. If not prevented or addressed, domestic violence tends to continue unabated and may actually intensify, taking on different forms. Besides obvious and grave physical consequences including death or disability, domestic violence has a profound and lasting impact on the mental health of its victims - nearly 75% of Indian women who reported domestic violence have attempted to commit suicide.

Children in abusive households also suffer, with negative repercussions for their health, education and employment outcomes, in turn perpetuating poverty. Worst of all, they are highly susceptible to adopting the same behaviors when they grow up - creating an endless cycle of mindless abuse and deprivation. For society, domestic violence conclusively impedes development - perpetrators cost nations fortunes in terms of law enforcement, healthcare, lost labor and general progress in both social and economic development.

Deconstructing domestic violence

Domestic violence, also known as 'intimate partner violence', is not simply an argument or a one-off incident but a pattern of coercive controls exercised by one person over another. What makes domestic violence particularly complex is that it is generally cyclical and often inconsistent in nature, spanning periods of violence and relative calm.

At a societal level, domestic violence has its roots in rigid patriarchal structures, gender roles and notions of masculinity and male entitlement. UNICEF's recent 'Global report card on adolescents 2012' reveals that in India 57% of boys and 53% of girls aged between 15 and 19 believe that wife-beating is acceptable.

How the woman responds to violence is limited by the options available to her. Various factors keep her in the abusive relationship that may include stigma of divorce or separation, concern for her children, lack of economic independence, emotional dependence, misplaced feelings of guilt, and an abiding hope that the man will change. Lack of support from family and friends also contribute towards her silence and tolerance. A population-based study in India revealed that for 58% of women reporting violence, members of their immediate family (both natal and marital) were aware of the violence but did nothing to improve the situation.¹ Feared consequences such as intensified violence, losing her children, and bringing shame to the family further deter a woman from seeking institutional support services.

What has been achieved so far?

Recognizing these unique challenges and following decades of lobbying by women's rights groups and other stakeholders, the Protection of Women against Domestic Violence Act was finally enacted by the government in 2005. This landmark, victim-oriented civil law provides for a coordinated response to domestic violence, and mandates participation from a comprehensive range of organizations including providers of medical services, police, judiciary and social support services.

A wide range of organizations, both public and private, have been involved in tackling domestic violence in India, including the government and its various agencies, international development agencies (IDAs), private foundations and non-profit organizations. Academic and research institutions, corporates and media can increasingly play an important role as well.

Non-profit organizations themselves have been playing a critical role in confronting domestic violence. Many non-profit organizations visited and recommended by Dasra have been working with these stakeholders. For example, to strengthen the implementation of the law, to improve the delivery and effectiveness of government services, and as funding partners or service delivery arms of IDAs and foundations.

Where can further focused action make a difference?

Based on Dasra's advisory committee and 16 expert interviews, there are four priority areas where further action should be focused:

- **Emphasizing prevention and early intervention:** Changing attitudes that condone violence against women and intervening early to address the causes of abusive behaviour are absolutely essential ingredients of any long-term solution to domestic violence.
- **Strengthening implementation of the Protection of Women against Domestic Violence Act:** Improving the implementation of this legislation requires both state and non-state agencies to acknowledge and address current deficiencies by increasing budget allocations, providing additional human resources, and enhancing coordination and cooperation among relevant agencies.
- **Leveraging the power of the community:** Involving local community leaders such as politicians, religious authorities, and other formal and informal agencies is vital to ensure long-term support for all constructive measures taken within communities to reduce violence and address its associated problems, including effecting permanent changes in underlying attitudes.
- **Building knowledge and evidence:** Non-profit organizations working with existing or potential victims of violence in India need to know where their limited resources can be most impactful. The generation of an evidence base that documents 'what works' will provide organizations the tools they need to demonstrate successful models for upscale and adoption by government.

Which non-profit interventions are high impact and scalable?

Currently, efforts by non-profit organizations to address domestic violence can be framed along three response mechanisms:

- **Preventive interventions** are those that seek to create a gender-equitable environment.
- **Ameliorative interventions** are services that a woman requires when she first seeks formal assistance such as shelter, legal aid, medical aid, and remedial counseling.
- **Reconstructive interventions** are focused on helping a victim to rebuild her life.

Non-profit interventions with the highest impact and scale are those that mobilize communities and engage youth. Other high impact interventions include leveraging infrastructure within existing institutions, legal case management and counseling services, public awareness generation, capacity building and sensitization of stakeholders, and research and advocacy.

Following a comprehensive sector mapping of over 110 non-profit organizations across India that address violence against women, Dasra shortlisted and highlighted 13 organizations that have innovative and impactful domestic violence programs and represent high potential investment options for funders and sector supporters.



High impact non-profit organizations

	Youth Engagement	Research and Advocacy	Capacity Building of Stakeholders	Community Mobilization	Public Awareness	Leverage Existing Infrastructure	Legal Case Management	Counseling Services
AWAG			✳️	👥		🏛️		🗣️
Breakthrough	🌱	🔗	✳️	👥	📣			
CEHAT		🔗	✳️			🏛️		
CORO	🌱	🔗		👥				🗣️
CSR	🌱	🔗	✳️	👥		🏛️		🗣️
ECF	🌱	🔗		👥	📣			
Jagori		🔗	✳️	👥	📣			🗣️
Lawyers Collective		🔗	✳️				⚖️	
Majlis		🔗	✳️				⚖️	
SNEHA	🌱	🔗	✳️	👥		🏛️		🗣️
Swayam	🌱	🔗	✳️	👥	📣			🗣️
TISS		🔗	✳️			🏛️	⚖️	🗣️
Vimochana		🔗	✳️		📣	🏛️		🗣️

Where can you make the difference?

Domestic violence is a complex and multi-faceted issue but it is not inevitable. Improved coordination, especially between the government and non-profit organizations, can make a big difference. More money is needed to scale innovative non-profit solutions and secure greater impact. Supporting high impact non-profit organizations will help bring about a noticeable reduction in domestic violence.

Dasra envisions a society where this private abuse is no longer tolerated; where civil society and organisations offer support to victims and hold the police to account; and where the judiciary punishes the perpetrators and protects the innocence of future generations. Domestic violence is not a problem that can be solved by government alone. Indeed, the progress that has been made thus far would not have been possible without the tireless passion and commitment of social workers, survivors, campaigners and non-profit organizations throughout India. Educating ourselves is the first step towards supporting the best possible solution and ensuring that domestic violence is **No Private Matter**.

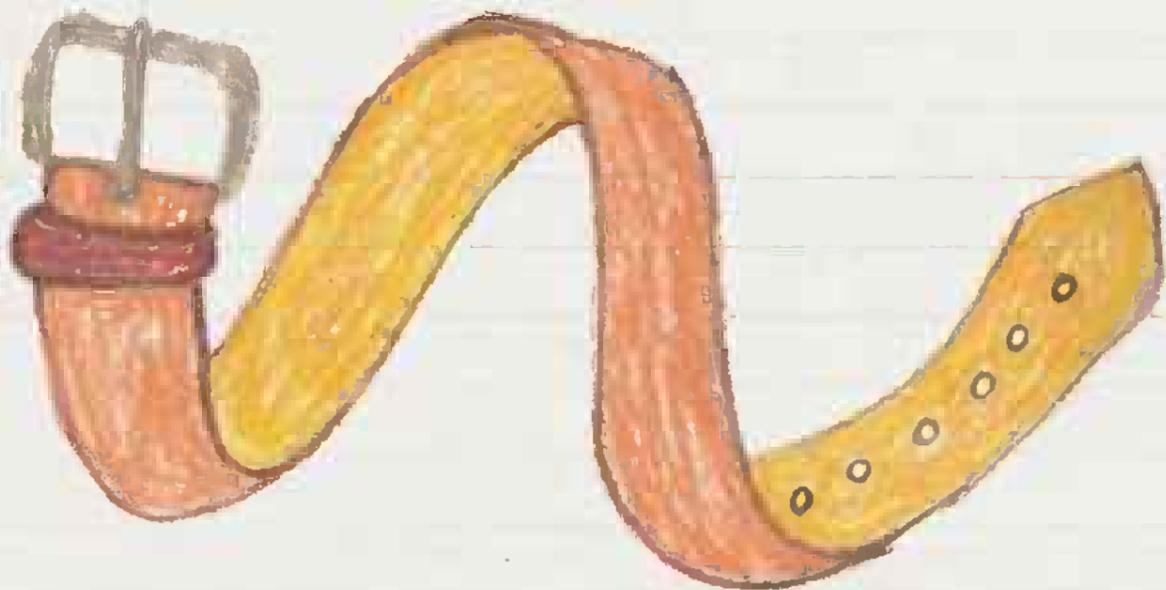


Photo credit: www.huffingtonpost.com

B = Belt.

I have a small belt.

Daddy has a big belt.



He beats my mother with it.

Chapter 1: Behind closed doors An overview of domestic violence in India

“The ache for home lives in all of us: the safe place where we can go as we are and not be questioned.”²

Sakina was a child bride, married at the age of 16 to a man 13 years older than her. Just a few days after her marriage, she discovered that her husband was having an affair with his aunt. When she started to ask questions, the beating started. Initially he would slap her in the face or kick her, but as time passed he got more violent. He would return home drunk late at night, beat her and then compel her to behave in bed like the other woman with whom he had illicit relations. Sakina suffered three stillbirth deliveries, due to her husband having forceful, violent sex with her during her last trimester. Battered, humiliated and emotionally drained, Sakina finally confided in her family who urged her to find ways to appease her husband. She managed to escape back to her parents' home once but was promptly sent back. On her return, he became even more aggressive, refusing to give her food and beating her naked so she could not escape again. Unable to bear the torture, Sakina consumed sleeping pills to end her life. She succeeded on the third attempt. She was 24.³

What is domestic violence?

“Behavior adopted by a person to control their victim that results in physical, sexual and/or psychological damage, forced isolation or economic deprivation, or behavior that leaves the victim living in fear. These behaviors are perpetrated by someone who is known to the victim.”

- International Center for Research on Women (ICRW)

For more than a third of women worldwide, heart-warming sentiments about home life are empty, unattainable ideals.⁴ These women have been denied their basic human right to a violence-free home and have been subjected to lives of intimidation, fear and humiliation at the hands of their own partners and families. Domestic violence, the least recognized human rights abuse in the world, is sustained by a culture of silence and denial of the serious consequences of abuse.

Domestic violence, also known as ‘intimate partner violence’, is not simply an argument or a one-off incident but a pattern of coercive controls exercised by one person over another.⁵ It affects a large proportion of the population, with the majority of those directly experiencing such violence being women and the majority perpetrating it being men.

While violence at home is a global issue that occurs in all settings and across socio-economic, religious and cultural groups, research shows that women living in poverty are disproportionately affected by it

Physical Violence	Sexual Violence	Emotional Abuse	Controlling Behaviors
<ul style="list-style-type: none"> • Slapping • Hitting • Kicking • Beating 	<ul style="list-style-type: none"> • Forced sexual intercourse • Other forms of sexual coercion 	<ul style="list-style-type: none"> • Insults • Constant humiliation • Intimidation • Threats of harm • Threats to take children away 	<ul style="list-style-type: none"> • Isolation from family and friends • Monitoring movements • Restricting access to: <ul style="list-style-type: none"> - financial resources - employment - education - healthcare

So far, the central government has recorded the prevalence of domestic violence only within the purview of marital relationships. According to data from the last National Family Health Survey of 2005-06 (NFHS III), nearly 40% of Indian women experience violence- physical, sexual or emotional- a figure that is widely believed to be under-reported. Independent studies conducted by the National Commission for Women reveal the prevalence to be much higher- between 50% and 70% (at least 170 million women⁷) - with the worst affected women aged between 20 and 40 years.⁸ The NFHS III survey also revealed that 95% of women experiencing violence are subjected to extreme forms, namely physical and sexual violence

Despite this widespread prevalence domestic violence is not customarily acknowledged and has remained largely invisible. The social construct of the divide between public and private underlies the hidden nature of domestic violence against women. The fact that most violence occurs privately- within families, inside homes, and out of sight- has contributed to the belief that domestic violence is a private matter. This seclusion coupled with the shame of violence stimulates a culture of silence, making it difficult to obtain an accurate assessment of its extent.

Violence in India kills and disables as many women between the ages of 15 and 44 years as cancer.

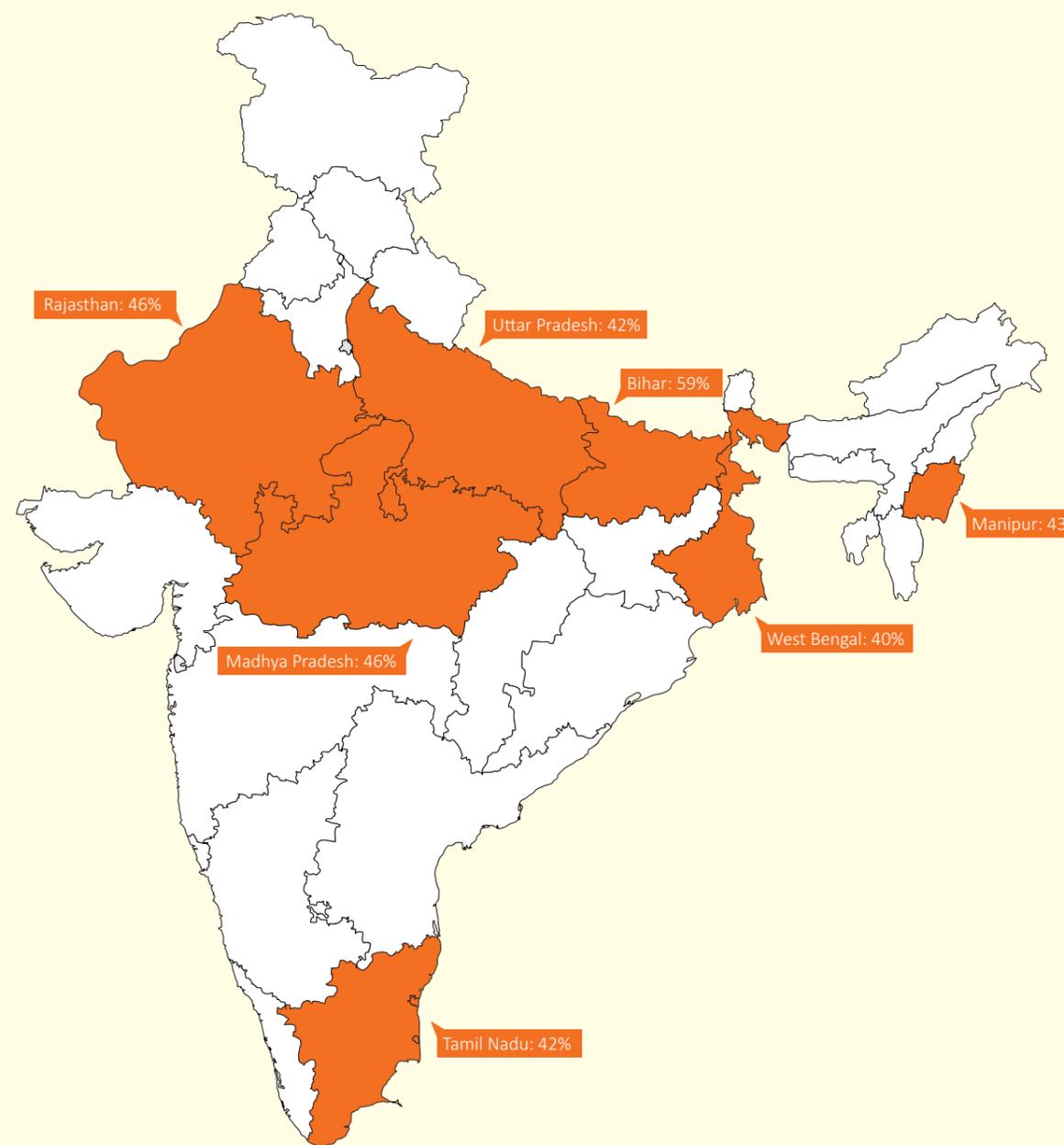
Source: Addressing Domestic Violence in India: An Unfinished Agenda (2008). Indian Journal of Community Medicine

In India domestic violence occurs across states, though its magnitude varies significantly. Violence seems to be most common in Bihar (~60%) followed by Rajasthan and Madhya Pradesh (over 45%), and least common in Himachal Pradesh (6%), followed by Jammu and Kashmir and Goa. In all states, however, physical violence tends to be the most common form of violence reported.



Source: National Crime Records Bureau, 2011

Prevalence of domestic violence in worst affected states (NFHS III, 2005-06)



All her married life, Kanaka Thilaka used to hide the bruises on her body with her sari. Early this year, her husband made sure she could not afford even a strand of camouflage. Traumatized by years of physical abuse, Thilaka confronted her husband, saying that if he didn't stop, she would commit suicide. But he mocked her and threw kerosene on her. Today, she's barely alive and the scars all over her body cannot be hidden. "My future is gone. All that worries me now are my children," she whispers.

Source: India Today, "Brutal Retaliation." December 7, 1995

Domestic violence: Tracing the life course

Traditional gender roles, patriarchal attitudes and societal sanction drive the belief that domestic violence is justified

More than 50% of men and women in India believe that wife beating is justified



Vulnerable to domestic violence if she has:

- Experienced violence as a child
(3.8x more likely to face violence after marriage)
- Low levels of education
(Educated women are 20-55% less likely to face violence)
- Witnessed violence as a child



Vulnerable to domestic violence if he has:

- Experienced violence as a child
(40% more likely to perpetrate violence)
- Low levels of education
(40% more likely to perpetrate violence)
- An abusive history
(3x more likely to perpetrate violence)
- A history of alcoholism



Violence begins early, usually in the first year and before the birth of children
50-70% (at least 170 million) of women face domestic violence



Forms of violence increase and intensify as the relationship progresses:
physical, emotional, sexual, and financial



If she suffers abuse early, she is likely to experience it throughout her marriage, with negative consequences for her health, earning capacity and development of children

Remains silent

66% of victims remain silent due to shame, concern for children and honour of the family

Reports violence to family and community elders

58% of victims report that their families know about the violence but do nothing about it

Seeks healthcare

50% of victims reported needing healthcare during periods of violence

- ! Apathy of healthcare providers and lack of rigorous recording systems

Seeks police intervention

Only 2% of victims have ever sought help from the police

- ! Patriarchal attitudes and superficial knowledge of domestic violence, relevant laws

Seeks justice

A minority of victims seek legal redress which is routinely delayed: None of the 14,887 cases registered in Delhi courts since 2007 have been settled.

- ! Few convictions; lack of clarity around terms such as "cruelty"; lack of documented evidence

Does not receive support

Receives some support

Seeks longer-term support services such as vocational training, employment and housing

Unable to access support

Able to rebuild her life

Suicide

75% of victims who have reported abuse have attempted suicide

Prevention

Amelioration

Reconstruction

Deconstructing the reality of domestic violence in India

Setting the stage

Domestic violence is the result of a combination of complex factors at play that put both perpetrators and victims of domestic violence at risk of perpetuating such behavior.

At a societal level, domestic violence has its roots in rigid patriarchal structures, gender roles and notions of masculinity and male entitlement. From an early age, traditional gender roles are endorsed - boys are socialized to believe that they are superior to girls and should dominate their partners, while girls are conditioned to grow up to look after their marital home and children, and be obedient and respectful to their husbands.

As well as societal risk factors, there are others at the individual, relationship and cultural level that can also determine the likelihood of a girl experiencing abuse after marriage. Low academic achievement is an example. Research by the World Health Organization (WHO) suggests that women who report lower levels of education (primary or none at all) are 2-5 times more likely to experience domestic violence, and men with lower levels of education are 40% more likely to perpetrate violence than their educated peers.¹¹ Other risk factors are listed in the adjoining box.

Within the state of Uttar Pradesh, the percentage of men who admit to beating their wives varies from 18% to 45% across districts.⁹

What accounts for such significant differences in seemingly similar environments?

Individual risk factors¹⁰

- Young age
- Witnessing or experiencing violence during childhood
- Low academic achievement
- Alcoholism

Relationship risk factors

- Gender gap in education or employment
- Extramarital relationships

Cultural risk factors

- High rate of neighborhood poverty and unemployment
- Traditional gender norms
- Community sanctions for domestic violence

At a macro level, studies from a wide range of settings show that while domestic violence cuts across socio-economic groups, women living in poverty are more likely to be affected.¹² A marginalized girl typically grows up in an environment of poverty, dropping out of school between grades 6 and 8 to shoulder household responsibilities. She routinely witnesses violent incidents between her parents and in many cases experiences abuse herself. Eventually she takes up a job as a domestic help or finds employment in an informal industry at low wages. Having learnt her domestic duties at an early age and therefore being considered to be prepared for matrimony, she is often married between the ages of 15 and 18. She begins her marital life believing that subordination and submission are normal, expected, accepted and even justified.¹³ This girl, like many others in her situation, is at high risk of experiencing domestic violence.

The beginning

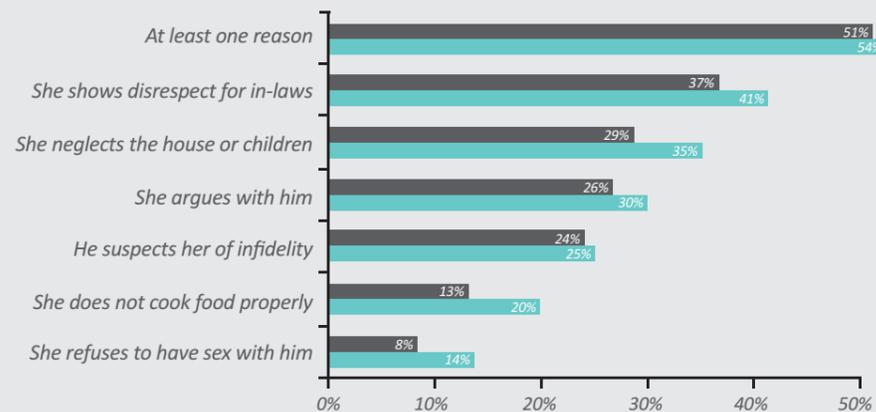
For vulnerable women in India, the violence begins almost immediately - in most cases within the first year of marriage and before the birth of any children¹⁴. Though marital violence in India is often equated with dowry violence, as shown by a multi-household study conducted in Gujarat, just 1% of women surveyed stated that inadequate dowry precipitated the abuse¹⁵. Instead, other trivial matters tend to serve as triggers for abuse - not obeying the husband, arguing back, not cooking meals on time or to his taste, enquiring about the husband's whereabouts or refusing sex. What makes matters worse is the woman's belief that such behavior is to be expected, thereby failing to perceive it as violence in the first place. Over 50% of men and an even higher proportion of women in India agree that wife-beating is justified if there is at least one "reason" for it.¹⁶ The situation is further complicated by a common belief that violent acts are an expression of love and of a desire to help the victim to become a "better" person.

“If it is a great mistake, then the husband is justified in beating his wife. Why not? A cow will not be obedient without beatings.”

- Woman interviewed in Tamil Nadu, India

Justifications for violence

■ Men
■ Women



Percentage of Indian men and women aged 15-49 (NFHS-III, 2005-06)

Once initial inhibition has been broken, violence typically tends to increase in frequency and intensity over time, taking on different forms. Apart from being physically battered, the woman knowingly or unknowingly tends to be subjected to psychological, sexual, financial and emotional abuse. The husband may use abusive language, force her to return to her parental home, threaten to abandon or kill her, refuse to provide money to manage the household and even take out his anger on the children. Often this behavior occurs outside the bedroom or home. Considering the social sanction that domestic violence enjoys, husbands tend to use abusive language and even worse, batter the wife in the presence of their children, extended family or even the community.

Why does she stay on?

What makes domestic violence particularly complex is that it is generally cyclical and often inconsistent in nature, spanning periods of violence and relative calm.¹⁷ A cycle typically begins with trivial issues that worsen, ultimately leading to a so-called trigger which is then perceived as the cause of the violent incident. This is usually followed by a period of reconciliation and denial, ultimately resulting in a calm phase in which the husband promises never to repeat the violence. The entire cycle may occur in one day or be spread over weeks, months or even years. The (temporary) time of reconciliation after the violent episode can in part explain why many women stay in abusive relationships or do not report the abuse. The generosity of the non-violent period inspires a false belief that this will be the end of the abuse, which is rarely the case. Not all relationships follow this cycle though- many report a constant state of siege with little relief.

In India, two out of three women in abusive relationships stay silent about their suffering because of shame and concern for the husband and family's honor.

Source: NFHS-III, 2005-06

Why does she seek - or not seek - help?

How the woman responds to violence is often limited by the options available to her. Various factors keep her in the abusive relationship. Concerns over family honor, preservation of marital status, fear of intensified violence, and misplaced guilt – of feeling responsible for the violence – often take precedence over the desire to speak out or fight for the right to a violence-free life. Further, a lack of economic independence, concern for her children, emotional dependence, stigma of divorce or separation, a lack of support from family and friends, and an abiding

hope that the man will change, contribute towards her silence and tolerance.

Often she will not speak up even after a lifetime of abuse. It is only after she starts to recognize that her husband or partner will not change, or the situation starts to noticeably affect her children, or when she realizes she has access to external support, that she is driven to speak up. In most cases, it may take many years before a woman begins to challenge or question the violence in her life, and even longer before she seeks help.

Who does she reach out to?

Family and friends

The victim tends to confide first in those closest to her- her parental and marital family, followed by friends and neighbors within the community. In most cases, family members condone the man's violence, asking her to “adjust” and prioritize the needs and well-being of the family over her own safety. A population-based study in India revealed that 58% of women reporting violence said that members of their immediate family (both natal and marital) were aware of the violence but did nothing to improve the situation, leading them to feel helpless.¹⁸ Feared consequences such as further violence, losing her children, and bringing shame to the family further deter a woman from seeking institutional support for both ameliorative and reconstructive services.

- **Ameliorative** services are those that a victim encounters when she first seeks formal assistance. These include short-term services addressing the immediate and practical needs of a woman, such as shelter, legal aid, medical aid, and remedial counseling.
- **Reconstructive** programs try to sustain the impact of the ameliorative recourse taken. They consist of a smaller range of programs that focus on rebuilding the well-being of the woman and the family by improving livelihoods, self-esteem, and empowerment.



58% of women reporting violence said that members of their immediate family (both natal and marital) were aware of the violence but did nothing to improve the situation, leading them to feel helpless.

Source: Domestic Violence in India (2000), ICRCW

Healthcare systems

In India, nearly 50% of domestic violence victims reported needing healthcare due to the violence they experienced, as per a multi-site household study.¹⁹ Owing to the fear instilled by their abusers, victims do not easily come forward for treatment, leading to a multitude of health issues. However, most victims come into contact with the health system at some point in their lives, when they give birth for example, or seek care for their children. As a result, the healthcare setting is an important place where women undergoing abuse can be identified, provided with support and referred if necessary to specialized services.

Unfortunately, studies show that doctors and nurses rarely check for obvious signs of violence or enquire if a patient is being abused.²⁰ Even when they are convinced that the patient is a victim of abuse, they tend to ignore it altogether. This is because either they do not know how to support the victim or they do not want to become involved in what they consider a “family matter”.

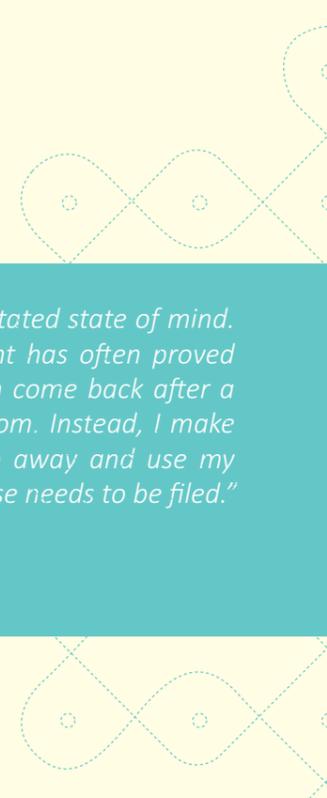
Police

A victim approaching the police is often faced with the same prejudices and deep-rooted patriarchal mindsets prevalent in her family and society. According to government data, only 2% of victims approach the police.²¹ It is not uncommon to find an official unwilling to register a complaint, and instead asking a victim to resolve the issue within the confines of her home. She tends to be heard and taken seriously only when accompanied by a male relative. Even if the case is lodged, the police typically have a superficial understanding of domestic violence and its forms, causing them to register most

“These women usually come in an agitated state of mind. Filing a case based on their complaint has often proved worrisome, because the same women come back after a day demanding their husband's freedom. Instead, I make them write a complaint which I keep away and use my discretion to understand whether a case needs to be filed.”

- Inspector at Charminar police station, Hyderabad
Source: Times of India, March 8, 2012

complaints as dowry offences and overlooking more subtle considerations involving psychological, sexual and financial violence. Generally, the police aim to mediate solutions in a manner that does not lead to the breakdown of marital relations. This tendency is partly dictated by the ground reality that many victims may not necessarily wish to terminate their marriages, and partly by the cultural view that marriage is an inviolable institution that needs to be preserved.



Shelter and counseling

In the event that the victim has to leave her marital home, she tends to have limited, if any, support services. The quality of facilities and services offered as immediate and long-term relief tend to be very poor. Government shelter homes, often regarded as shelter for the victim and her dependents, usually restrict both the number and age of the dependents as well as the mobility of residents. Typically, they are strictly policed and are generally not conducive to recovery from the trauma that victims experience in an abusive relationship. It is hardly surprising then that in a state such as Madhya Pradesh where nearly half the women experience domestic violence, only 112 women accessed the seven shelter homes available, which collectively offer accommodation for up to 370 residents.

State-run psychological and medical services are virtually non-existent. Concerns surrounding a woman's fears of further abuse, the dilemmas she might be facing, concern for her children and her own negative self-image largely go unaddressed. Comprehensive attention to her needs is not on the agenda of most of the counseling cells sponsored by the state, nor are there trained counselors to facilitate this process.

Judiciary

It is extremely challenging for a victim of violence, should she desire, to pursue criminal proceedings against her husband in a court of law. In fact, this is a problem not confined to India. Legal aid fees to ensure legal representation at hearings are unrealistically low leading to alleged corruption even amongst those who volunteer their services. Further, a lack of understanding of gender issues, violence, patriarchy and sexuality by lawyers and judges often encourages decisions and outcomes that favor reconciliation, completely overlooking the victim's needs and demands. This is reflected in data provided in Parliament by the Ministry of Women and Child Development.²² In 2009, approximately 7,800 domestic violence cases were registered nationwide. However, only

eight people were convicted. The number of registered cases increased considerably in the following year to over 11,700 but the number of convictions decreased to five. In 2011, only three people were convicted.

Judge in support of domestic violence?

Activists in the state of Karnataka have submitted a complaint against Justice K. Bhakthavatsala who reportedly stated in court that it was acceptable for a man to beat his wife as long as he took good care of her. Lawyers say Justice Bhakthavatsala advised the woman in the case to learn to adjust to life with her husband for the well-being of their children. "Such insensitive remarks by people of influence send out the wrong message and strengthen harmful gender norms", remarked an activist.

Source: BBC News, Bangalore, September 6, 2012

In 2010 around 11,700 cases of domestic violence were registered across the country. However, only five people were convicted.

Source: Deccan Herald, December 5, 2012

The unending cycle

Two thirds of Indian women who suffer domestic violence do not report it. Of the one third that do, only a small minority receive an opportunity to rebuild their lives. For those who do not report violence and others who are unable to access support services, life is constantly clouded by the shadow of abuse and exploitation. Indeed, forms of violence tend to multiply with the length of the marital relationship. Contrary to expectations that violence may subside with age, adult children, and adjustments, women continue to experience it throughout their married life.

Impact of domestic violence on the victim and family: Multi-dimensional and intergenerational

Living in a violent relationship affects a woman beyond just physical injury- the abuse destroys her sense of security, self-esteem and her ability to participate in the world. Studies show that an abused woman will spend more on healthcare, be less productive and have a reduced earning capacity.^{23 24 25} The development of her children will also be affected.

Health impact of violence

A growing body of evidence reveals that sharing a life with an abusive partner can have a profound impact on a woman's well-being, both immediate and long-term. Moreover, the influence of abuse may persist long after the abuse itself has stopped, resulting in negative consequences for physical, mental and reproductive health.

- **Physical health:** It is obvious that violence can lead to injuries, ranging from cuts and bruises to permanent disability and death. Population-based studies indicate that 40-70% of all women who have been physically abused by a partner are injured at some point in their life.²⁷ Injury, however, is not the only physical outcome of partner abuse. "Functional disorders" are common and include various conditions that frequently have no identifiable medical cause, such as irritable bowel syndrome, fibromyalgia, and gastro intestinal and chronic pain disorders.
- **Mental health:** It is not surprising that victims suffer more depression, anxiety and phobias than non-abused women. Similarly, research suggests that women abused by their partners are at greater risk of suicide. Nearly 75% of Indian women who reported domestic violence have attempted to commit suicide.²⁸



Photo Credit: www.tuschman.wordpress.com



Source: The Hindu, September 2, 2004

- **Reproductive health:** Women who live with violent partners find it difficult to protect themselves against unwanted pregnancies or sexually transmitted infections. This often occurs due to coerced sex or by interfering with the woman's ability to use contraceptives. Researchers have long assumed that the stress of having many children increases the risk of violence. However, recent data from parts of Central America suggest there may be an opposite relation.²⁹ The onset of violence largely precedes having a large number of children, indicating that violence may be a risk factor for such an outcome.

Violence not only results in multiple and unwanted pregnancies; it also continues to occur frequently during pregnancy - thereby increasing the likelihood of abortion, miscarriage, stillbirth, pre-term delivery and low birth weight; as well as maternal morbidity and mortality. A study in the states of Tamil Nadu and Uttar Pradesh in India found that women who had been beaten were significantly more likely than non-abused women to have experienced an infant death or pregnancy loss - abortion, miscarriage or stillbirth.³⁰ Domestic violence also accounts for a substantial but largely unrecognized proportion of maternal mortality figures.³¹ A recent study by WHO of 400 villages and 7 hospitals in Pune, India, found that 16% of all maternal deaths during pregnancy were the result of intimate partner violence.³²

Abused women are subject to twice the risk of miscarriage and four times the risk of having a baby that is below average weight, a major cause of infant death in the developing world.

Source: Addressing domestic violence in India: An unfinished agenda (2008). Indian Journal of Community Medicine



Economic impact of violence

Given the long-term impact of violence on women's health, those women who have suffered abuse are more likely to be long-term users of health services, thereby increasing healthcare costs. On average, victims experience more operative surgery, visits to doctors and pharmacies, and hospital stays over their lifetime than non-victims.³³

Apart from the abusive household, the natal family of the woman may also be economically affected by violence. Significantly, in India, when violence occurs during pregnancy, healthcare expenses are typically met by the woman's parents. For one such victim in Nagpur, expenditure of INR 20,000 drove her parents into serious debt.³⁴

In addition, a study conducted by ICRW in 2000 estimated that both the victim and the perpetrator will lose 7-10 days of work each year, due to domestic violence.³⁵ The findings of this study, which sought to ascertain the cost of domestic violence at household level, are summarized below:

Indicative cost to the household of a single incident of domestic violence in India ³⁶ (\$ figures based on exchange rate in 2000)		
• Loss from waged work	INR 759	\$17
• Loss of capacity to do household work	INR 215	\$5
• Loss from healthcare expenditure	INR 1085	\$25
Total economic cost	INR 2059	\$47

Intergenerational impact of violence

As the primary care giver of the family, the ill health of the mother due to exposure to violence has a profound adverse impact on the health and well-being of her children. This is in part due to increased rates of depression and traumatic stress amongst abused mothers, and the destructive effects of domestic violence on the quality of their parenting capacities.³⁷ As a result, children of abused mothers typically have lower rates of immunization, higher rates of diarrheal disease, and are more likely to be malnourished and die before the age of five.³⁸ Further, children exposed to domestic violence are more likely to experience difficulties in school and score lower on assessments of verbal, motor, and cognitive skills.³⁹

The implications of children witnessing violence tend to remain with them throughout their adult life. Global studies suggest that children who witness marital violence in the home are more likely to consume drugs, commit crimes, attempt suicide or become abusers or victims themselves, perpetuating the cycle of violence for the next generation.

The cost of inaction for India

Increasing evidence from research conducted worldwide shows that domestic violence significantly impedes development, both in terms of the financial costs to victims and the broader impact on national economies.

Generally, there are two types of costs:

- **Direct costs**, which include expenditure on services such as healthcare, welfare, counseling, legal aid, transportation and refuge services used by victims of domestic violence; and

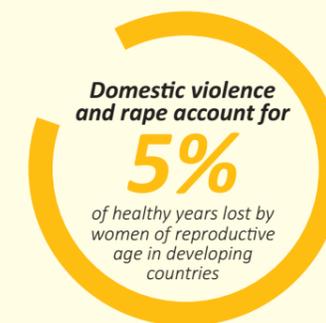
- **Indirect costs**, which include lost earnings and decreased productivity in the workplace. Global studies consistently show that abused women earn 50-60% less, have lower rates of labor force entry and poorer job retention than their non-abused peers. An Australian study estimated the annual cost of domestic violence to be \$8.1 billion.⁴⁰

Unfortunately there are no studies that show the direct and indirect cost of domestic violence in India. However, considering statistics from developed nations such as the United States and Australia, there is no doubt that the cost of domestic violence to the Indian economy is extraordinarily high. Domestic violence ultimately prevents an economy from reaching its full potential, stunting economic growth, hindering productivity and reinforcing poverty.

	United States	India
Prevalence	1 in 4 women ⁴¹ ~21 million ⁴²	1 in 2 women ~170 million
Annual Cost	\$12.6 billion ⁴³	
Annual No. of days lost ⁴⁴		
- From paid work	8.0 million days	
- From household productivity	5.6 million days	



The failure on the part of individuals, communities and governments to speak out and tackle the issues of domestic violence is tantamount to condoning it. Huge efforts are required, by governments and communities, to change attitudes, hold perpetrators to account, and provide effective support services to women affected by domestic violence. By failing to act, communities and nations play a part in perpetrating it.



Source: World Bank

Domestic violence is a burden on numerous sectors of the social system and quietly, yet dramatically, affects the development of a nation...batterers cost nations fortunes in terms of law enforcement, healthcare, lost labor and general progress in development. These costs do not only affect the present generation; what begins as an assault by one person on another reverberates through the family and the community into the future."

Source: Zimmerman C. *Plates in a Basket will Rattle: Domestic Violence in Cambodia, Phnom Penh. Cambodia: The Asia Foundation; 1994*

Key takeaways

- A shocking 50-70% of women (at least 170 million) in India are victims of domestic violence.
- Domestic violence is a violation of a woman's basic human right to life, liberty, and freedom from violence. Abuse subjects a victim to a life of constant fear, loss of dignity and serious health consequences leading to disability or even death.
- Living in a violent relationship affects a woman beyond just physical injury - abuse increases expenditure on healthcare, decreases a victim's productivity and earning capacity, reinforces gender inequality and negatively affects the development of her children. At a household level, every incident of abuse costs an Indian household an average of INR 2,000 (\$47), enough to drive a marginalized family into further poverty.
- Increasing evidence worldwide shows that domestic violence significantly impedes a nation's development, affecting businesses, government, and society as a whole - it costs the United States' economy \$12.6 billion annually.
- Domestic violence is not inevitable though. It can be confronted through a concerted and coordinated multi-stakeholder engagement that functions at both policy and grassroots levels, all the way through the prevention-amelioration-reconstruction continuum. As an example, the healthcare setting is an important place where women undergoing abuse can be identified, provided with support and referred if necessary to specialized services.

INR

1200 cr.

*per annum can enhance
the effective implementation
of the
PWDVA*

Chapter 2: Making the links

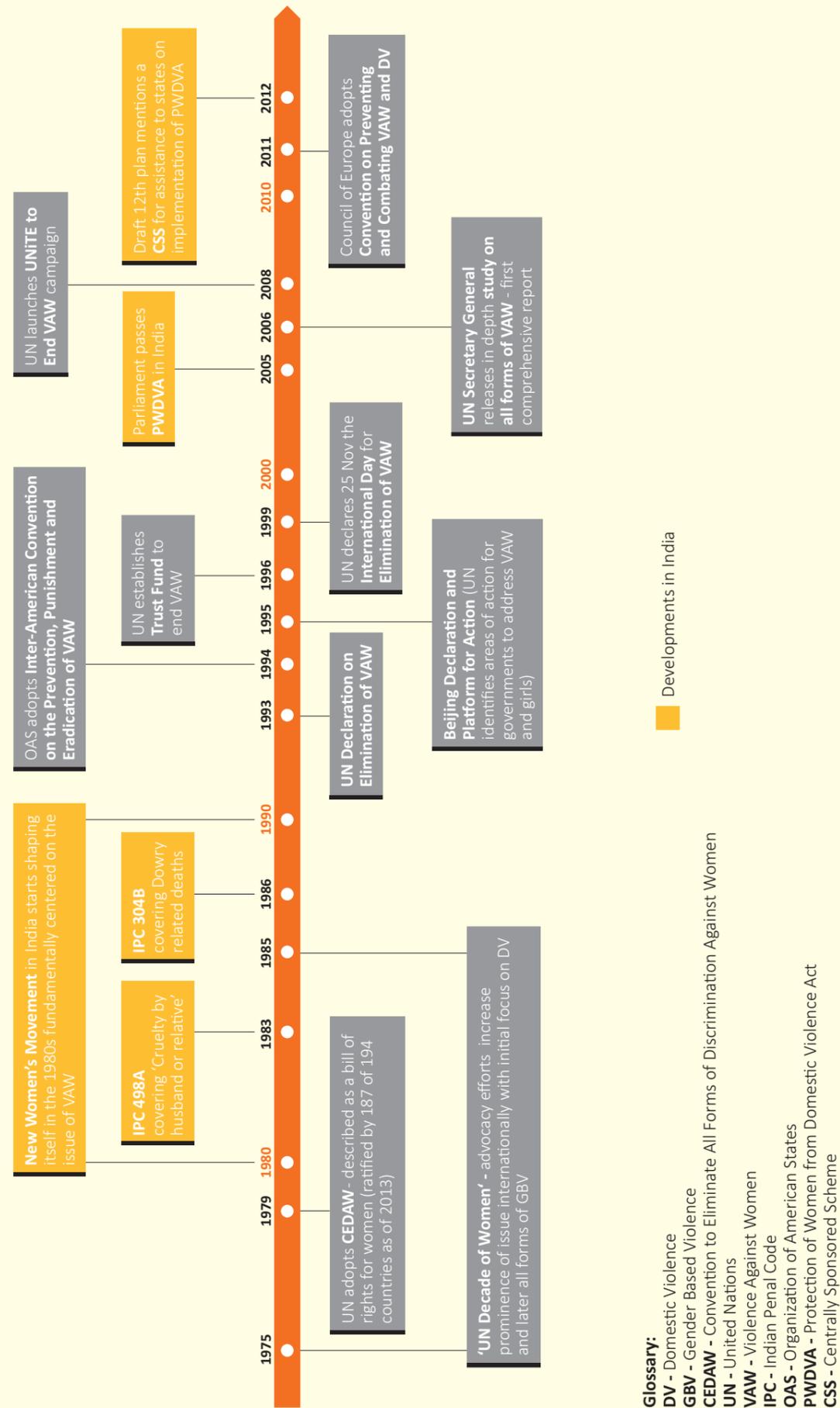
Stakeholders involved in tackling domestic violence

A wide range of organizations, both public and private, are involved in tackling domestic violence in India, including the government and its various agencies, international development agencies (IDAs), private foundations, corporates, the media and researchers. This chapter outlines the distinctive role played by each of these key agencies, highlighting both progress and failures, to provide donors with the context in which non-profit organizations are working. It also discusses the much heralded Protection of Women against Domestic Violence Act, 2005 (PWDVA) upon which the police, health services, judiciary, counseling services and shelter homes are required to act. Many non-profit organizations visited and recommended by Dasra work with these agencies – for example, to strengthen the implementation of the law, to improve the delivery and effectiveness of government services, and as funding partners or service delivery arms of IDAs and foundations.

The historic background to domestic violence in India

Historically, the human rights paradigm was largely based on individual civil and political rights in public affairs, while omitting rights violated in the household. Only in the late 1960s did feminists begin to fight to extend this discourse to include domestic violence within the sphere of human rights violations. By 1979, global advocacy by the women's movement resulted in the UN Convention to Eliminate All Forms of Discrimination against Women (CEDAW), which mandated that states take necessary measures to tackle domestic violence. Under this recommendation, the state is required to provide adequate resources to support women who are victims of domestic violence and need protection. This encouraged criminal and legislative efforts in India that resulted in the PWDVA in 2005 – a landmark victim-oriented civil law which recognizes domestic violence as a punishable crime and supports the victim through amelioration and rehabilitation.

Key global and Indian milestones in the effort to address domestic violence



The PWDVA has adopted the WHO's description of domestic violence as a complex medico-legal and social issue, best addressed through a public health approach. Previous approaches within the human rights and criminal justice frameworks have failed to duly recognize domestic violence as a serious and preventable public health concern. The public health approach seeks to address this gap by focusing on populations rather than individuals, and by emphasizing primary prevention i.e. preventing violence before it occurs, through a coordinated response from multiple sectors and stakeholders⁴⁵.

Public health refers to all organized measures (whether public or private) to prevent disease, promote health, and prolong life among the population as a whole. Its activities aim to provide conditions in which people can be healthy and focus on entire populations, not on individual patients or diseases.

World Health Organization

The role of government

It is generally agreed that the most important single function of government is to secure the rights and freedoms of individual citizens.⁴⁶ Domestic violence is one of the most pervasive human rights violations in the world. It is naturally incumbent on the government – especially in a liberal democracy like India – to play the biggest role in promoting and protecting the rights of those who have been violated. Through effective legislation, efficient law enforcement and a fair judiciary, the government can create a zero tolerance environment for domestic violence. It can also advance policies that help prevent such violence from occurring in the first place. This can be achieved by encouraging, and where necessary, requiring various parts of the socio-economic system such as education, healthcare and the media, to concert and coordinate their efforts on domestic violence prevention.

The Ministry of Women and Child Development is the nodal agency responsible for enactment of the PWDVA in India, while the Department of Women and Child Development or Department of Social Welfare is responsible for allocating budgets, infrastructure and protocols to implement the law at the state level.⁴⁷

What is the PWDVA?

As a civil law, the PWDVA is designed to be victim-oriented. It differs from the criminal law in that it is not focused on punishing perpetrators through imprisonment or fines. Instead, it seeks to empower women – rather than the police – to take action; and confers on victims various legal and civil remedies. Examples include protection orders (which are similar to injunctions or restraining orders), residence orders (which are used to prevent a woman from being evicted from a shared household), monetary relief (for medical expenses, loss of earnings, damage to property), and custody orders (which grant a woman temporary custody of her children). Entities that form the system of response established by this law are known as 'PWDVA agencies'. The principal figure is the protection officer, who is expected to be appointed by the state government, while stakeholders such as medical facilities, shelter homes, police, lawyers, legal and other service providers, and magistrates comprise its support structure.

Dasra's workshop with practitioners highlighted that the PWDVA necessitates collaboration across multiple stakeholders to facilitate justice and relief to victims of domestic violence.

Role of the PWDVA actors



Central Government

Role: The Ministry of Women and Child Development (MWCD) at the Centre is the nodal agency responsible for enactment of the PWDVA in India

- ⚠️ **Lack of budgetary support to the states – annual requirement for implementation of the PWDVA is INR ~1200 crores; the Centre budgeted only INR 68 crores in 2013-14**



State Government

Role: The Department of Women and Child Development and Department of Social Welfare are responsible for implementation of the PWDVA, providing enabling infrastructure and personnel, allocating dedicated budgets, establishing coordination and monitoring committees

- Only **14 out of 28 states** have separate budgets for the implementation of PWDVA so far
- ⚠️ **Outlays vary from INR 2.3 lakhs in Meghalaya to INR 7.2 crores in Karnataka**
- Some high incidence states such as Bihar (59%), Rajasthan (46%) and Uttar Pradesh (42%) have **no plans yet to implement the Act**



Protection Officer

Role: The key point of contact for a domestic violence victim, required to coordinate with other PWDVA agencies so as to facilitate a victim's access to support services

- ⚠️ **Only 7 states** have independent Protection Officers so far



Police

One of the first points of entry into the formal justice system

- Patriarchal attitudes
- ⚠️ **Unaware about PWDVA**
- Lack of role clarity



Medical Facilities

Authorized to record domestic incidence reports (DIRs) and duty-bound to provide medical care to victims

- Only 21 states and union territories have notified medical facilities
- ⚠️ **Absence of standardized protocols for screening and reporting**



Shelter Homes

The Act provides for registration of non-profit organizations or government run shelter homes

- ⚠️ **260 Swadhar homes and existing short-stay homes are too few to address needs**



Judiciary

Under the Act, proceedings must be completed by courts within 60 days

- ⚠️ **None of the 15,000 cases filed in Delhi courts in the last 5 years have been adjudicated within 60 days**



Service Providers

The Act provides for the registration of non-profit organizations as service providers

- Only 15 states and UTs have notified service providers
- ⚠️ **Lack of investment by the state deters non-profit organizations from registering**

- ⚠️ **Absence of coordination committees**
- Inadequate sensitization of stakeholders
- Lack of monitoring and evaluation

Experts consulted by Dasra agree that the PWDVA is progressive on paper and long overdue. However there are several critical gaps in the implementation of the law on the ground, which include:

- **Inadequate infrastructure and resources to provide immediate relief to victims.** Financial support during the period between a woman accessing the law and securing a maintenance order is a practical necessity that is not being addressed. The lack of trained counselors remains a severe issue, as well as the dearth of shelter homes for victims of domestic violence. India's meager 260 Swadhar homes and existing short-stay homes are unable to address the needs of women who have escaped from violence.
- **Inadequate capacity building, training and sensitization of stakeholders,** including the police, protection officers, service providers, lawyers and judges. In a number of states, the extent and nature of training provided is grossly inadequate and needs to be sustained over a longer period of time.
- **Under-utilization of the law by victims.** Victims are reluctant to use the law, due to poor awareness of the entitlements it provides.
- **Lack of mechanisms to ensure accountability and proper functioning.** There is no mechanism yet, within the government, through which the operation of the PWDVA may be reported and monitored. This impacts every aspect of its implementation, including awareness generation, capacity building, enforcement, and breach of orders.
- **Inadequate coordination between different agencies under the PWDVA** is a critical issue given the multi-sectoral nature of the problem. Most states do not yet have coordination committees, though these have been recommended for better implementation of the Act.

States so far have been free to implement the law as they deem fit, which explains the significant variations in progress made. It is therefore critical that the central government signals a positive commitment and provides adequate budgetary support for more effective implementation of the PWDVA. The state governments must in turn ensure coordination amongst agencies and effective utilization of budgets. Dedicated efforts at both national and state levels are required for the PWDVA to have real effect on how victims are treated.



The role of international development agencies (IDAs) and private foundations

Domestic violence is a pressing global issue and largely supported by several international development agencies – multilateral and bilateral bodies, international NGOs and private foundations. In India, six institutions have been at the forefront of initiating and maintaining momentum against domestic violence - UN Women, USAID, Ford Foundation, Oxfam, Asia Foundation and Oak Foundation. Collectively, this stakeholder group has been instrumental in kick-starting the movement against domestic violence, providing policy guidance to the government, running campaigns and supporting innovative (now well-established) models, including special cells in police stations and crisis centers in hospitals. This group also supports the sector by providing funds for a wide range of non-profit activities, to be discussed in Chapter IV. Unfortunately however, domestic violence remains an under-funded issue. More money is needed for new and innovative solutions, existing funds must be pooled to secure greater impact, and funds must be built in for monitoring and evaluation, to address current gaps in knowledge and impact assessment. Appendix I provides more detailed information on the work of these IDAs and private foundations.



How are bilateral aid agencies tackling domestic violence? USAID's domestic violence-related efforts in India

"It is time for all of us to assume our responsibility to go beyond condemning this behavior, to taking concrete steps to end it, to make it socially unacceptable, to recognize it is not cultural, it is criminal." – Secretary of State, Hillary Clinton

USAID, a key supporter of this report, is focused on preventing and responding to domestic violence globally, viewing it as a public health concern that requires a multi-sectoral response. In India, USAID has played a fundamental role in enabling some of the first research studies on domestic violence in India by ICRW (1998-2004). Seven research studies were completed during the grant period – four examined the links between masculinity and violence against women, whilst three investigated the impact and features of community level responses to violence against women. These were widely disseminated through workshops and media campaigns and became critical to lobbying efforts for effective legislation on domestic violence. Experts consulted by Dasra commented that practitioners continue to use these research studies, regarding them both as useful tools to support advocacy efforts and as a basis for designing their domestic violence services.

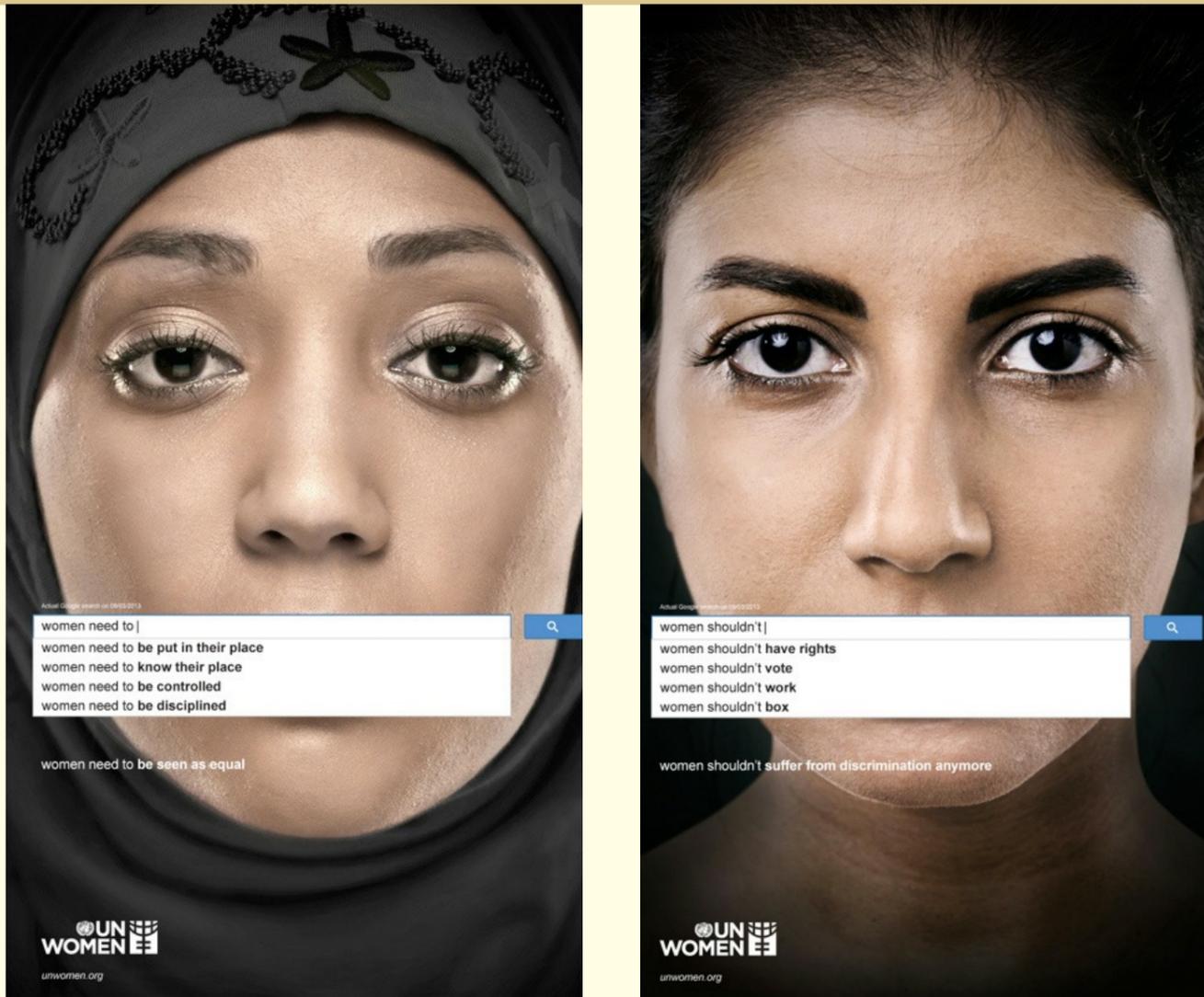
The role of corporates

Unfortunately there is no data available to quantify the extent of corporate funding of the domestic violence non-profit sector. However, from an analysis of non-profit budgets and discussions with experts, it is clear that corporate funding for the issue of domestic violence is extremely limited.⁴⁹ However, corporates can also support this sector in other ways. They are uniquely positioned to use their influence, resources, and ability to innovate and come up with practical responses to the problems posed by domestic violence. Illustrative roles corporates can play are highlighted below using international examples:

- The Liz Claiborne *Love is Not Abuse* campaign is an excellent example of a corporate-run domestic violence campaign in the US.⁵⁰ The company aligned its core business activities with its social mission, creating shared value through its work. The campaign increased brand awareness amongst its consumer target group (consisting mainly of women) and raised awareness about the issue of domestic violence.
- The Vodafone Foundation used its core business skills to introduce innovative applications to the sector. It developed the TecSoS phones, which have been specially adapted for use by victims of domestic violence as an emergency response system. They enable users to establish immediate police contact at the touch of a single button. The alert call provides details of the victim's location and triggers an immediate recording of all activity in the vicinity of the device. When a TecSoS call is received, it is treated by the police as a high priority and officers are dispatched accordingly. First used in Spain six years ago, the phones are currently being employed by police forces in Italy, Portugal, Hungary and the UK. They have been used by at least 22,386 women.⁵¹
- Other corporates, such as the Avon Foundation, have also provided the sector with financial resources. In 2012, it announced ten \$ 60,000 grants to support women's domestic violence shelters and agencies around the world, including India.

In India, corporates have been more active in providing employability options to victims of domestic violence. For example, **Swayam**, a non-profit organization in Kolkata, has partnered with the social business **iMerit** to provide training in IT services to women in its intervention community of Metiabruz, a Muslim-majority neighborhood. By establishing a Technology Services office in Metiabruz, iMerit has empowered over 100 women – many of whom are victims of domestic violence – by conferring a measure of economic independence and mobility that should also improve their ability to secure the right to a life free of violence.⁵²

Corporates can also protect their own employees in the workplace both as an end in itself and to cut absenteeism, improve productivity, increase turnover and reduce excessive use of medical benefits.⁵³ By supporting women affected by violence, corporates can go some way to decreasing these health-related costs. For example, the **Corporate Alliance against Domestic Violence (CAADV)** has brought several progressive companies together by raising awareness, sponsoring programs and establishing best practice benchmarks. Working collaboratively with other businesses on strategies to address domestic violence in the workplace is a good starting point from which Indian corporates can begin engaging with the issue of domestic violence.



Above: A UN Women campaign uses the world's most popular search engine (Google) to show how gender inequality is a world-wide problem. The adverts show the results of genuine searches, highlighting popular opinions across the world wide web.



The role of the media

The media has a crucial role to play in the prevention of domestic violence by raising awareness and educating the public. Leveraging its power to shape public opinion, it can break down prevailing stereotypes and negative patterns of behavior that are central to the issue of domestic violence. Research states that women who have never had any exposure to mass media are 18% more likely to be beaten than those who have been exposed.⁵⁴



Photo credit: Taproot

The Abused Goddess is a provocative and controversial print campaign. It uses bruised and beaten faces of Hindu goddesses to simply and effectively capture India's contradiction – revering women in religion and mythology whilst permitting widespread abuse of them in the home. The campaign declares, "Pray that we never see this day. Today, more than 68% of women in India are victims of domestic violence. Tomorrow, it seems like no woman shall be spared. Not even the ones we pray to."

Dasra's interviews with experts showed that the media needs to portray healthy, constructive communities in its content and communication to help establish positive aspirational behavior norms and role models. For example, the media can develop storylines, images, characters, programs, and products that promote healthy attitudes towards women, masculinity, relationships, and sexuality. Highlighting women in politics, sports, business, health and education as role models has a positive impact on young girls and women.

The role of academic and research institutions

Building research infrastructure and competency within academic and research institutions is essential in better understanding domestic violence. Rigorous research can help to develop effective policies, assess implementation and provide much needed services for both victims and perpetrators. Improving research capacity in India can strengthen connections between researchers and practitioners. In fact, government agencies and private funders need to support collaborative research and community-based evaluation studies to ensure more effective intervention.

Since 1997, international research firms like **ICRW** have led India-specific research into the effects of various intervention measures aimed at addressing domestic violence. However, there are few Indian-based research organizations operating in the sector. Dasra recommends that leading academic institutions – with a social science faculty – should receive funding to become stronger research centers for domestic violence. **Tata Institute of Social Sciences** and **Jawaharlal Nehru University** are good examples of this.

With the growing recognition that domestic violence is best addressed through a public health approach there has been an increase in research conducted by health focused organizations such as the **Indian Institute of Health and Family Welfare**, Hyderabad and the **Public Health Foundation of India**. There is a need for researchers and practitioners to better collaborate, exchange knowledge, and improve the design and evaluation of programs and policies to more effectively tackle domestic violence.

The role of networks

In India, networks exist to enable non-profit organizations and women's groups to lobby for legislative coordination, budget allocations and effective implementation of the PWDVA. During Dasra's workshop for organizations targeting the issue of domestic violence, participants expressed a need for a network that strengthens coordination within the domestic violence sector by sharing resources and best practices, improving connections between service providers, and advocacy and policy change to improve collective action.⁵⁵

Three key networks for domestic violence practitioners in India are described below:

AMAN: Global Voices for Peace in the Home is an international network to end violence against women, particularly domestic violence, established by the non-profit organization **Swayam** in December 2006. This network has grown to include over 90 member organizations from 11 states in India.⁵⁶ Key activities enabled by the network include referrals of survivors to member organizations, collaboration with international member organizations to support Indian women facing domestic violence overseas or from non-resident Indian spouses, development of common ethical norms for working with survivors, increasing the capacity of member organizations to handle problems, and liaising with appropriate institutions to effectively implement the PWDVA.⁵⁷

Women Power Connect (WPC) is a national organization of 1,400 women's groups and individuals across India working together to formalize the process of legislative coordination.⁵⁸ Its activities are aimed at influencing legislators and policy makers to frame gender-friendly policies. WPC works with **Oxfam** to engage with members of Parliament in five states to improve implementation of the PWDVA, and connect activists and social thinkers to a common platform.⁵⁹

PWDVA Action and Advocacy Group is a national level network of 39 organizations and individuals formed in December 2012 to promote effective implementation of the PWDVA.⁶⁰ The group also campaigns for increased central government funding.⁶¹

Key takeaways

- Decades of lobbying by women's rights groups culminated in the enactment of the Protection of Women against Domestic Violence Act (PWDVA) in 2005. This landmark, victim-oriented civil law provides for a coordinated response to domestic violence, and involves participation from a comprehensive range of organizations and other parties including providers of medical services, the police and judiciary.
- Progress on the law's implementation has however been slow and there are wide variations in application by states. More funding and a much greater political commitment to ensuring that the rights it confers get enforced are necessary.
- Despite financing of welfare organizations by prominent IDAs such as USAID, domestic violence remains an under-funded issue in India.
- While the involvement of corporates is currently limited, they have potential to engage with the issue by creating shared value through their core business activities and by providing funds to finance the activities of non-profit organizations.
- Non-profit organizations have a critical role to play in improving the implementation of the PWDVA, through using findings from research to lobby the government and to hold it to account. They also work directly with agencies involved in delivering the rights provided by the PWDVA, building their capacity and sensitizing them to the issues of domestic violence.
- Greater collaboration between non-profit organizations, and between government agencies, is critical for improved responses to domestic violence.





Chapter 3: Priorities for action

Cornerstones for addressing domestic violence

Photo credit: Breakthrough

Domestic violence is a cross-cutting issue. Responses, whether focused on prevention, amelioration or reconstruction, are many and wide-ranging. They also involve a large number of stakeholders, including government and non-profit organizations. Effective responses to abuse, especially at the ameliorative stage, need to be multi-sectoral – involving health, legal, judicial and social support systems – and coordinated. Efforts should focus on preventing violence occurring in the first place, and in protecting and supporting victims. Through secondary research and expert consultations, Dasra has identified four priority areas, or cornerstones, which require critical attention from donors. These should form the basis of any strategy to tackle domestic violence in India:



Stage	Issue	Root Causes
Before Violence	At Risk	<ul style="list-style-type: none"> - Witnessed DV in childhood - Low levels of education, income - Alcoholic male partner
During Violence	Victim takes no action at initial stages of violence	<ul style="list-style-type: none"> - Lack of realization/recognition of DV - Belief that DV is justified – entrenched gender norms
	DV incidents are underreported	<ul style="list-style-type: none"> - Fear of intensified violence - Private matter/societal stigma – shame, isolation - Poor awareness of recourse options - Healthcare providers fail to identify DV victims - Police reluctance to register complaints - No faith in the legal system
After victim seeks institutional help	Victim reaches out to community, kin, friends- does not receive support	<ul style="list-style-type: none"> - Entrenched gender norms - "Deal with it" - Normalization and acceptance of DV - Reluctance to intervene in a 'private' matter
	Victim is unable to leave	<ul style="list-style-type: none"> - Economic dependence - Lack of natal family support - False hope - Most shelter homes do not cater to children - Stigma associated with being a divorcee/single mother
Overall	Apathy of key responders	<ul style="list-style-type: none"> - Patriarchal attitudes - Lack of awareness about laws, poor role clarity
	Poor implementation of the PWDVA	<ul style="list-style-type: none"> - Over-ambitious role of Protection Officers - Lack of political will - Lack of budgetary support - Lack of trained personnel - Lack of accountability
Overall	Lack of victim focus	<ul style="list-style-type: none"> - Historic focus on criminalizing the perpetrator - Too focused on dowry victims
	Poor quality of short and long term support services	<ul style="list-style-type: none"> - Lack of importance given to mental health of victims - Limited supply of quality counselors - Lack of housing with rehabilitation services - Poor linkages to vocational training and sustainable livelihoods - Poor coordination between service providers - Insufficient up-scale of successful models by government
Overall	Most initiatives are reactive	<ul style="list-style-type: none"> - DV is not recognized as an economic and health cost
	Lack of evidence regarding successful interventions	<ul style="list-style-type: none"> - Lack of systems and processes to gather data - Attitudinal change is difficult to measure - Longitudinal studies required - Funding usually does not cover cost of impact assessment

Cornerstones for confronting domestic violence (DV)

Strengthening implementation of the PWDVA

Emphasizing prevention and early intervention

Leveraging the power of the community

Building knowledge and evidence

“In the shortest period of time, the Protection of Women from Domestic Violence Act, 2005 has emerged as one of the most important and influential pieces of social reform legislation ever enacted by the Indian State.”

— Dr. G Mohan Gopal, Director, Rajiv Gandhi Institute for Contemporary Studies

The PWDVA was designed as an instrument to protect the human rights of women in domestic relationships. Most agree that it was a much needed positive step towards enabling women in India to live lives of equality, dignity and freedom within their families. However, progress on the ground on the implementation front has been slow, plagued by structural issues involving institutional capacity, infrastructure, and the functioning of law enforcers.

First and foremost, there is a need for increased cooperation between stakeholders, given that victims have complex needs and may require support for a range of services, including healthcare, social services, legal entities and law enforcement.⁶² Historically, programs have tended to concentrate on a single sector, which has very often been shown to produce poor results. For example, a study that undertook an analysis of responses to domestic violence in Madhya Pradesh and Maharashtra found that both state and non-profit sector responses, on their own, failed to treat the problem effectively.⁶³

The PWDVA in contrast, does provide for a coordinated, multi-sectoral response, with seamless referrals between PWDVA agencies - it stipulates that for the victim, the response system should function in such a way that no matter what the entry point of the woman, whether a police station, hospital or counseling center, she is subsequently connected smoothly to all other services she may require without feeling further victimized. Mechanisms and protocols for more effective coordination and referral are thus urgently required.

A coordinated response to domestic violence in the UK

The UK-based non-profit organization **Standing Together Against Domestic Violence (Standing Together)** helps all agencies involved in tackling domestic violence in the London borough of Hammersmith and Fulham to work together effectively. It does so by agreeing protocols and procedures for communications between agencies and their individual responsibilities to ensure every victim receives the same high quality support. It also monitors each organization's performance and holds each agency to account. From the moment a woman in the area calls the police regarding an act of domestic violence, Standing Together coordinates the help she requires. It brings together the police, the criminal justice system, probation, social and health services, and voluntary organizations. It coordinates them to ensure they provide the services they have agreed to supply in protocols, both within their own organizations and in the way they deal with other organizations helping victims.

This approach has been extremely effective. It has resulted in an increase in the number of arrests for domestic violence and halved the number of women withdrawing from a case. In four years, the rate of convictions rose from 36% to 52% of defendants, while in three years, repeat victimization decreased by one third.

This example clearly shows that effective coordination can yield impressive results. There is a strong case for replication of this model in the Indian context, either by a government agency or through the non-profit sector.



66%

of women in abusive relationships stay silent about their suffering

In addition to increased convergence and cooperation between response providers, there is a clear need for significantly increased budgetary outlays for adequately responding to the scale of the domestic violence issue in India. Unfortunately the Ministry of Women and Child Development has not set any minimum benchmark for states for allocating funds to implement the PWDVA, so funding for domestic violence and its implementation varies considerably between them.⁶⁴ Unsurprisingly, those with the highest incidence of domestic violence such as Bihar, Rajasthan and Uttar Pradesh also have the smallest budgets, the lowest number of protection officers and the least overall preparedness to provide victim relief under the PWDVA.

To address inadequate budgeting and remove inter-state disparities in implementation of the PWDVA, the draft 12th Five Year Plan (2012-17) includes a component dealing with financial assistance for states to implement the PWDVA in the 100 worst performing districts in India.⁶⁵ However, while the annual requirement for implementation of the PWDVA is estimated at almost INR 1,200 crores in the current year (2013-14), the central government has only allocated INR 68 crores.⁶⁶ Non-profit organizations thus have a major role to play in lobbying the government for increased resources, and holding it to account by monitoring and evaluating its implementation.

The central government has budgeted a mere 5% of the INR 1,200 crores needed to implement the PWDVA in 2013-14.

One of the critical gaps identified through some of the annual monitoring and evaluation of the PWDVA implementation is also the lack of awareness and proper understanding of the law and its provisions amongst many of the agencies charged with its implementation.⁶⁷ For example, medical facilities can register domestic incident reports (DIRs) and forward a copy to protection officers, but rarely do so. Many protection officers also misunderstand the PWDVA, often wanting to settle cases by counseling rather than using designated service providers. Protection officers appear to be similarly confused about the nature of complaints and DIRs. There is also a lack of uniformity between states on what qualifies as a 'complaint'. It is essential that these key agencies are trained to better understand how they should act when confronted by a victim of domestic violence.

Besides providing technical training for those responsible for administering and enforcing the law, it is also important to sensitize such persons to ensure that a victim is not once again subjected to the same patriarchal and gender-biased attitudes that lie at the heart of domestic violence. Owing to their lack of understanding of domestic violence, government agencies such as the police often encourage reconciliatory outcomes and decisions, or label women survivors as 'bad women' and 'home breakers'.⁶⁸ Addressing these attitudes is critical in helping enable women to report violence, access justice and exercise choices based on their own needs and interests. Several non-profit organizations are undertaking this task of educating, sensitizing and providing capacity building support to a range of PWDVA agencies, based on their geographic regions of presence and areas of expertise.



Emphasis on prevention and early intervention

Domestic violence is not inevitable and can in fact be reduced through well-designed and effective programs and policies.⁶⁹ This is evidenced by the wide variations in incidence, both between and within countries. Investments made now, to stop domestic violence before it occurs, will protect the physical, mental and economic well-being and development of individuals, families, communities and whole societies.⁷⁰ Prevention is far better than cure.

The pervasiveness of domestic violence in our society is fundamentally attributable to traditional and continuing notions of how men and women are socialized. Males are most often seen as protectors and providers for their women and families - qualities sometimes considered essential for male identity and male power; while women are seen as home-makers and nurturers.⁷¹ From this privilege arises a sense of male entitlement to discipline the woman in case of any transgression or unsatisfactory performance of her traditional role. This normalization of violence becomes deeply embedded in the collective mindset with such ideas passed on from generation to generation unless explicitly challenged. These attitudes also begin to develop at a very young age, making adolescence and youth a critical time to intervene to break the pattern by which violence is perpetuated. Changing mindsets and preventing violence in the first place is absolutely essential in formulating a long-term solution to domestic violence.

UNICEF's "Global report card on adolescents 2012" shows that 57% of boys – and more disturbingly, 53% of girls – in the 15 to 19 age group in India believe that wife-beating is acceptable.

Whilst it is important to work to change the mindsets of all members of society, it is paramount to do so with two groups in particular:

- Men and boys because they perpetrate acts of domestic violence, and
- Youngsters in general, because attitudes and beliefs are still being formed

Besides changing attitudes and social norms regarding domestic violence, prevention efforts should also focus on creating an enabling environment of social and economic empowerment for women so they may be better positioned to negotiate their right to a violence-free home in the first place, or at least feel equipped to prevent further violence by removing themselves from the domestic situation with dignity. Protective factors, such as education, supportive social structures, financial independence and ownership of assets, must be fostered.⁷² For example, interventions that combine microfinance with gender-equality training have proved effective in reducing levels of domestic violence, as shown by the IMAGE (Intervention with Microfinance for AIDS and Gender Equity) study in South Africa.⁷³



Preventing domestic violence by empowering women: IMAGE in South Africa

The IMAGE (Intervention with Microfinance for AIDS and Gender Equity) intervention program, delivered by the Small Enterprise Foundation in South Africa, has effectively reduced domestic violence in its intervention area. This microfinance program has included an integrated participatory learning component, called Sisters for Life. This first phase included 10 one-hour training sessions and covered topics including gender roles, cultural beliefs, relationships, communication, domestic violence, and HIV infection. Its aim was to strengthen communication skills, critical thinking, and leadership. The second stage encouraged wider community mobilization to engage both young people and men in learning. The rationale behind the initiative was that group learning fosters solidarity and collective action.

The intervention ran for two years, during which the risk of physical or sexual intimate partner violence in the following year was reduced by more than half.⁷⁴ These decreases in violence were the result of a range of responses that enabled women to challenge its acceptability, including leaving violent relationships, giving material and moral support to those experiencing abuse, mobilizing new and existing community support groups, and raising public awareness about the need to challenge domestic violence.⁷⁵

Early intervention, as well as prevention, is a critical strategy for addressing domestic violence. We know that domestic violence is an issue for all sections of society. However, there are well-researched underlying factors that put some people at greater risk of both perpetrating and experiencing domestic violence – such as being of a young age, low levels of education, substance abuse, and childhood experience of abuse. With such high-risk families, it is necessary to intervene early and to provide support and other services before dysfunctional patterns of behavior are established within the unit, setting the stage for abusive behavior in adolescence or adulthood.⁷⁶ For example, studies show that the successful treatment of alcohol dependence in men reduces domestic violence to a greater degree than is typically found with domestic violence interventions per se.⁷⁷

Leveraging the power of the community

Experts consulted by Dasra recommended two ways to leverage the power of the community to protect women from domestic violence: nurturing informal networks, and involving influencers, such as political, religious and other community leaders.

Research shows that informal networks such as family, friends, and neighbors usually provide the first point of contact for abused women.⁷⁸ While the low use of formal services is partly a reflection of the lack of effective response services (see adjoining box), very often and more importantly, this behavior stems from barriers such as fear of intensification of violence, societal stigma, and the threat of losing children.⁷⁹

The beneficial effects of social support from friends and family are quite apparent. At the very least, it provides an anchor that increases a woman's ability to cope with violence and empowers her to negotiate her situation better. It can also serve as an effective deterrent and help prevent and reduce the incidence of violent behavior. One study found that higher levels of emotional support can ameliorate the effect of domestic violence on a woman's mental and physical health.⁸⁰ Programs should place greater emphasis on enabling these informal groups and individuals to deal with violence and related issues.⁸¹ How they respond will determine whether a victim takes action or retreats into isolation and self-blame.

Additionally, the local community can be used to protect women by involving its influencers – i.e. local political, religious and other leaders, and governing bodies such as panchayats. They typically exercise significant soft influence over social norms and sanctions and help determine what is considered acceptable or unacceptable behavior. A comparative study of 16 communities worldwide found that those with the lowest levels of domestic violence had community sanctions against it. They also enabled abused women to access a place of safety or sanctuary (either in the form of a shelter or family support). It is important to engage with this group to influence social opinion to challenge attitudes that condone gender inequity and domestic violence.

In a multi-country study conducted by the WHO, the majority of physically abused women (between 55% and 95%) reported that they had never approached any formal agencies (health services, legal advice, shelters) nor contacted people in positions of authority (police, women's non-governmental organizations, local and religious leaders).



Building knowledge and evidence

Over the past 30 years, the women's movement has grown considerably throughout India. In that time, a multitude of organizations have been established to work to address domestic violence through a wide variety of programs and interventions.

There is a growing body of knowledge regarding the magnitude, patterns and risk factors associated with domestic violence, but many research gaps remain- including patterns of women's responses to violence and the effects of domestic violence on children. Expanding the knowledge base and disseminating existing and new information will lead to more effective programs and strategies. Data on prevalence and patterns can also be important tools to engage governments and policy makers in addressing this issue. There is a need for civil society and state level research organizations to move towards a more centralized 'knowledge hub', moderated by a committee of members from both groups. In addition there is express demand for wider dissemination of such information through local and national level forums.

There is also a strong need for research that evaluates the efficacy and effectiveness of various responses to domestic violence. Whilst individual-level interventions are relatively easy to assess, evaluation of comprehensive, multi-level, multi-component programs and institution-wide reforms is more challenging.⁸⁵ The generation of an evidence base for 'what works' will give organizations the tools they need to demonstrate successful models for upscale and adoption by government.

Key takeaways

- Tackling domestic violence in India requires responses to be multi-sectoral, especially ameliorative ones.
- Dasra has identified four priority areas for action, which should form the basis of any strategy to tackle domestic violence in India. These include strengthening implementation of the PWDVA, providing a focus for prevention and early intervention activities, leveraging the power of the community and building a knowledge and evidence base.
- Activities aimed at strengthening the implementation of the PWDVA are critical for a scalable and sustainable response to domestic violence. Efforts should be focused on improving convergence and cooperation between stakeholders, increasing budgetary outlay and political commitment by states, and raising awareness and building capacity among government agencies tasked with implementation.
- Prevention is better than cure. Domestic violence is not inevitable, so investments made to stop it before it occurs will protect the physical, mental and economic well-being of individuals, families, communities and whole societies.
- Communities have the power to condone violence, or speak out against it. Activities which mobilize the power of the community are an effective way to both prevent it happening and to protect women. Two effective approaches include stabilizing informal networks of friends, family and neighbors, and involving local leaders.
- There is a growing body of knowledge regarding the magnitude, patterns and risk factors associated with domestic violence, but many research gaps remain. Expanding the knowledge and evidence base will allow for even more effective programs and strategies and the ability to scale and institutionalize effective interventions. This information would also provide non-profit organizations with the advocacy tools they require to engage government.



Photo credit: blogs.blouinnews.com



Chapter 4: Ground work

Non-profit interventions in the field

Dasra has identified 12 key non-profit interventions in India through its sector mapping and field research. These range from the provision of counseling or legal case management for a victim, to building public awareness at large and capacity building of stakeholders. Dasra assessed these interventions on the ground, according to their a) impact on an existing or potential victim and b) current and inherent potential to scale, in order to highlight those which are most critical from an investment perspective.

Linking interventions to cornerstones

Preceding sections of this report have described the various key factors concerning domestic violence in India and the cornerstones that are crucial in addressing it. The diagram on the following page provides a link between the cornerstones (what is needed to tackle domestic violence) and non-profit interventions on the ground (how these cornerstones are being addressed).

It may be observed that 'strengthening the implementation of the PWDVA' as a cornerstone maps to the greatest number of interventions on the ground, highlighting the volume of work being undertaken by non-profit organizations to deal with the gaps in implementing this well-drafted law. On the other hand, the 'building evidence' cornerstone maps to few interventions on the ground, revealing the mismatch in terms of what is required on this front and what is actually being undertaken.

It may be further observed that several interventions link to at least two cornerstones, representing strong interventions for tackling domestic violence. For example, community mobilization and research and advocacy link to at least three cornerstones, while youth engagement, counseling services, legal case management and public awareness generation link to at least two. That said, any donor interested in tackling domestic violence should aim to achieve a balanced portfolio of interventions across the four cornerstones, if domestic violence is to be tackled holistically and comprehensively.



Effectiveness of interventions on the ground

All 12 key non-profit interventions currently being implemented to tackle the issue of domestic violence align with one or more of Dasra’s cornerstones as depicted above. They have subsequently been mapped onto the matrix below in order to determine their relative position in terms of Dasra’s chosen criteria i.e. a) impact on an existing or potential victim and b) current and inherent potential to scale. The sub-criteria to define both impact and scale are outlined in some detail in Appendix II. The mapping on the matrix has been validated by an expert advisory committee, convened by Dasra, as well as representatives from 14 non-profit organizations who attended Dasra’s capacity building workshop.⁸⁶

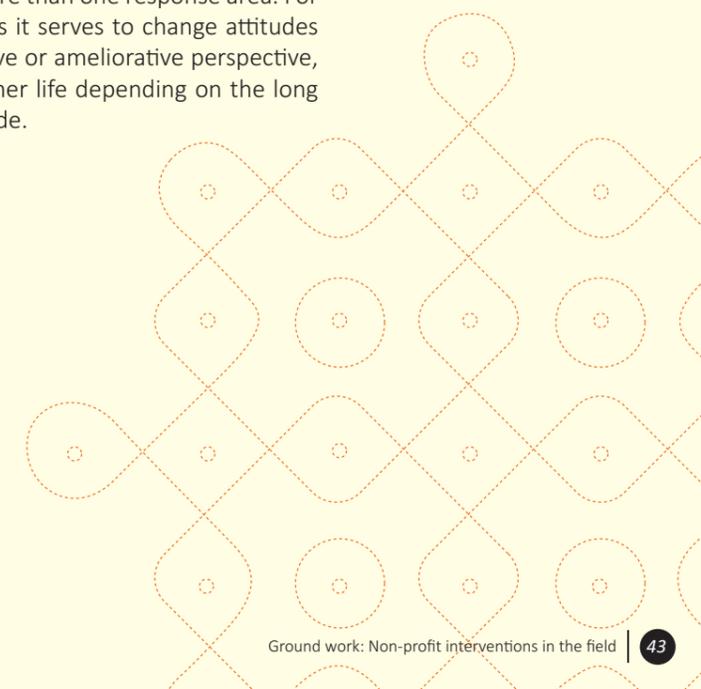
Following this exercise, eight of the 12 interventions are classified as ‘high impact’- i.e. those categorized as having a high or medium impact on the matrix. Dasra has further assessed each intervention’s ability to scale in order to allow donors to understand the inherent capacity of these interventions to be expanded to a large beneficiary base, a priority and measure of which may vary from donor to donor.

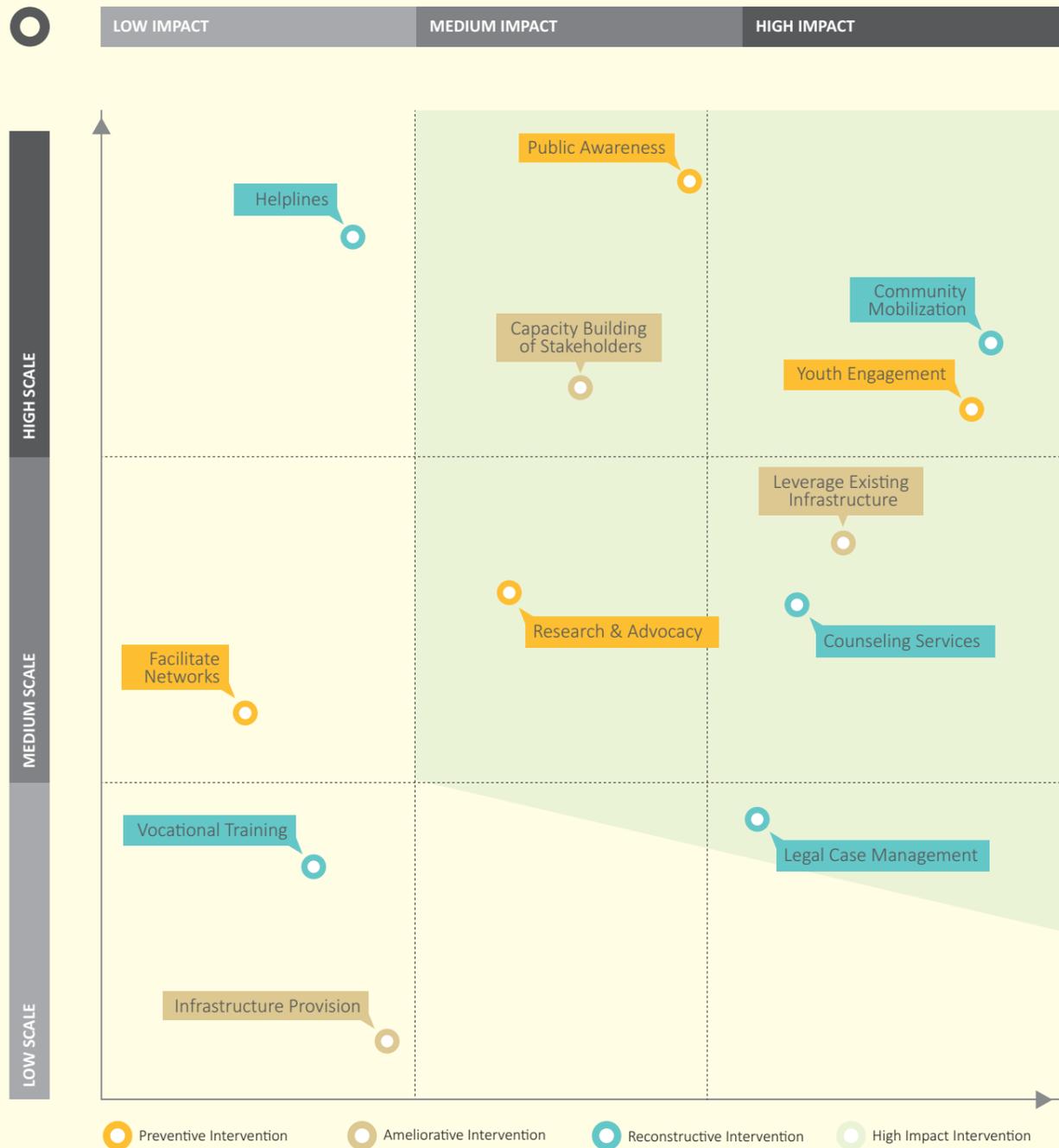
The remaining four interventions - facilitating networks, vocational training, infrastructure provision and helplines - while categorized as low-impact interventions are much needed to address the issue of domestic violence. However, the current manner in which they are being administered is not yet creating the requisite impact. For instance, even though networks exist in the sector, there is limited attendance of non-profit organizations and minimal exchange of best practices. If this issue were to be addressed, facilitating networks would have the potential to positively impact a victim far more than they currently do. Similarly, the availability of a good shelter home would ideally have a major impact on the ability of a domestic violence victim to leave her household and seek immediate respite. However, at present, there are virtually no shelter homes that accept women with children or provide a supportive environment for a victim.

Currently, efforts by non-profit organizations to address domestic violence focus on three response mechanisms:

- **Preventive interventions** seek to create a gender-equitable environment where both men and women uphold women’s right to a violence-free life.
- **Ameliorative interventions** are those services that a woman requires when she first seeks formal assistance. These include various short-term facilities addressing the immediate and practical needs of a woman, such as shelter, legal aid, medical aid, and remedial counseling.
- **Reconstructive interventions** are focused on helping a victim to rebuild her life by providing access to a livelihood, well-being and empowerment.

In the following matrix, the interventions have been colour coded into one of these three response categories- preventive, ameliorative, reconstructive – based on Dasra’s assessment of their primary fit. However, some of the interventions do link to more than one response area. For example, community mobilization actually cuts across all three as it serves to change attitudes within the community, which is not only relevant from a preventive or ameliorative perspective, but also determines the ability of a victim to eventually rebuild her life depending on the long term support and understanding her community chooses to provide.





High impact interventions

Community mobilization

Communities have the power to condone or condemn violence. Informed communities can therefore serve as effective deterrents to domestic violence, and also become immediate providers of rehabilitative support to victims. It is therefore important to work with such communities, whether through formal public institutions, community groups, or individual members of the public, to mobilize this potential, and support them to come together and respond to domestic violence-related issues.

Non-profit organizations have been engaging with and sensitizing existing groups, such as *panchayat raj* institutions, which comprise key influencers who have the power to denounce violence and establish precedents for a violence-free society. For example, the non-profit organization **AWAG** runs several workshops and training sessions for *panchayat* leaders, as well as the police, accredited social health activists (ASHAs), and village health and sanitation committees.

Non-profit organizations are also developing new groups made up of young people and survivors. Their objective is to generate youth role models who can in turn play a significant part in raising awareness, demonstrating positive deviance and influencing behavior change. The non-profit organization **SNEHA** has established groups for men, women and young people to increase awareness of the issue of violence and the PWDVA and its consequences through the use of theatre, dance and community meetings. It has also established local women's groups to increase vigilance and ensure immediate action is taken in response to incidents in their surrounding area.

Survivor groups play a crucial role in creating a safe space for other victims to report violence and seek support. Swayam is another non-profit organization that hosts various group activities such as picnics, workshops and support group meetings to enable survivors to explore, mingle, relax, and learn, and in the process, bring a semblance of normalcy back to their lives. It also helps them to feel less isolated by connecting with other survivors with similar experiences, enabling them to form bonds of solidarity.

"Shama is a 28 year old woman who had attempted suicide. Her husband had asked her to leave the house with a son who was mentally challenged. He refused to give custody of either of her other two children. After being thrown out of her own home and living with her parents for a while, she was referred to a support group run by a women's organization. Shama attended its meetings. They helped her connect with other women who had suffered similar experiences including violence. This gave her the strength to move on. She found employment and decided not to fight for the custody of her children until she became independent. Today, she has moved out of her parents' home and has gained custody of her youngest child."⁸⁷

Self-help groups (SHGs) also help mobilize communities. While they usually seek the economic empowerment of women, which in itself is part of a long-term strategy to prevent domestic violence, they can also serve as community platforms through which women can become active in village affairs, and take action to address issues such as domestic violence. SHGs can also act as effective pressure groups to ensure that responding agencies such as the police and health services are accountable to the communities they are meant to serve. This requires that efforts be made to build sufficient numbers of capable SHG members through training and education on relevant laws and legal procedures, women's rights and entitlements, and similar subjects.

Case study: Self-help groups in Pune

A non-profit Mashal helped form the first SHG in the Shankar Maharaj Math slum in Pune. They "spotted these strong-willed women who really wanted to do something about the problems women-folk faced". The SHG worked hard to help women in the slum fight instances of domestic abuse and other forms of violence.

"We get at least four complaints every month of violence against women. So far, we have been able to help women in 12 different cases. However, our journey has been arduous as we don't always enjoy the cooperation of the police," says Kavita Waghmare, chairperson of the SHG, who along with other members, often goes to the police station after receiving complaints of domestic abuse in the slum.

"The police sometimes talk down to us, asking us whether we know about the relevant laws pertaining to violence against women. In some cases, they do not entertain our complaints at all. We have decided to gain some legal knowledge to help women in a more professional manner," adds Waghmare.⁸⁸

Two years after its formation, the group received training on the provisions of the PWDVA, which enabled them to refer cases and instances of domestic violence to the relevant bodies, support groups and organizations.





Youth engagement

Any domestic violence prevention effort requires an overwhelming attitudinal and behavioral change that begins by working with young people. This is because values and beliefs at a younger age can be more easily shaped. Much of what they internalize results from their experiences in their homes and communities, what their peers are doing and what is taught to them in schools. Many of these influences have a potentially negative impact on their attitudes and mindsets, which can lead them to believe that domestic violence is acceptable, making them potential future perpetrators themselves. Interventions aimed at addressing these deep-rooted patriarchal views are slowly gaining traction in India. However, this approach has received comparatively little attention, investment, and commitment compared to other ameliorative and rehabilitative responses.

“I was struck by the confidence, self-esteem, and pride that the performances instilled in the young men. They acknowledged that while they were promoting the rights of women and girls, they were in essence empowering themselves. It was their voices that were changing mindsets; they were helping to realign values; and in standing up for women's rights, they were protecting their families and their community at large.”

- Melanne Verwee, US Ambassador-at-Large for Global Women's Issues, writing about the USAID funded Garima program, which works to change attitudes about the acceptability of violence at the community level.⁸⁹

Currently non-profit organizations engage adolescents either in communities or schools. Within communities, they develop peer leaders as role models for other adolescents. These leaders use positive peer influence to promote a healthy, supportive, respectful and violence-free environment. They help to develop social responsibility in youth and model pro-social behavior. Non-profit organizations also create awareness of gender-based violence through specially designed modules that are incorporated into the school curriculum. Schools provide access to the critical mass of youth, allowing for the standardization of curriculum. They are also easy to scale up. Non-profit organizations, having recognized this, are currently developing and reforming curricula to be used in schools to break down gender stereotypes in classrooms.⁹⁰

Significantly, several of these organizations have realized that boys (as well as men) play a crucial role in confronting domestic violence. Evidence suggests that one of the most promising ways to reduce communities' tolerance of domestic violence is to promote non-violence and gender-equitable norms among boys and men.⁹¹ As potential perpetrators, or simply watchdogs in the community, adolescent boys are educated to reflect critically on masculinity and gender.

They are engaged in gender-specific activities, discourse and discussions that allow them to deconstruct gender norms and realign values. Themes and discussions are often connected to real

life- reflecting how gender norms affect the men and boys themselves and their partners and families. At least some of the sessions involve personal reflections and discussions about how these issues affect their own lives. Unfortunately, at present, less than 5% of community-based organizations in India engage men to tackle attitudes, beliefs and behaviors.⁹²

Experts consulted by Dasra strongly suggest that engaging young people, particularly boys, vastly enhances awareness of domestic violence and mobilizes entire communities to take an active stand against such behavior.

“Women are often raised and socialized within a culture that says that women are subservient, that women are expected to be unassertive and that women are expected to be care-taking and put their needs last,” Storm said. “Then men have this ‘bottle-up your emotions’ socialization and we wonder why there is violence. I believe that the source of domestic violence starts from a very young age.”

- Rachel Storm, Assistant Director of the Women's Resource Center, University of Illinois.



Photo credit: <http://sttorquayindia.edublogs.org>

- **CORO** has developed and implemented a curriculum with ICRW to engage young girls and boys between the ages of 12-14 years, to critically reflect on issues related to inequitable gender norms and violence. The *Gender Equality Movement in Schools (GEMS)* project was introduced in public schools in Goa, Kota and Mumbai using different approaches such as extracurricular activities, role-playing and games. The evaluation of the program has been very encouraging. Key gender-based attitudinal and behavioral changes - including raising the age at which girls marry, greater male involvement in housework, and opposition to gender discrimination - were observed during the pilot stage in Mumbai. In addition, the results of the intervention show a decrease in domestic violence among students after the program.⁹³
- **ECF's Action for Equality** aims to provide men and boys with tools to change their behavior and advocate that change to others. This results in men acting as leaders or advocates of change even after ECF has withdrawn from their communities. This 15 week program reaches 40,000 people in 20 low-income communities. A recent survey indicated that 61% of women, who live with the graduates of this program, have reported a reduction in violence or discrimination.

Public awareness

The culture of silence surrounding domestic violence means that many women are reluctant to report abuse or are unaware of alternatives and services. Public awareness campaigns play a crucial role in helping women recognize that they are facing domestic violence and directing them to relevant services. Most importantly, they transfer the issue from the private domain into the public arena, thereby breaking the previous culture of silence.

Public awareness campaigns can range from large-scale national activities to smaller movements and demonstrations within different localities. Mass media campaigns normally use radio, television, billboards and other platforms to reach a large segment of a community. They also tend to employ national and international celebrities and public figures to ensure greater influence and impact. Innovative approaches that can be effective in reaching diverse audiences include the use of technology (mobile phones and computers), street theatre, art, music and cultural activity.

In India, awareness campaigns about domestic violence have stimulated discussion that would not otherwise have taken place. They have not only increased awareness amongst men and women, but also amongst different stakeholders of domestic violence in India. Since 2006, non-profit organizations have made effective use of such methods to raise awareness of the issues surrounding implementation of the PWDVA.

The *Bell Bajao (Ring the Bell)* campaign in India was launched in 2008 by the non-profit organization **Breakthrough**, in collaboration with the Ministry of Women and Child Development, UNIFEM and the UN Trust Fund. The campaign aimed to create widespread awareness of the issue of domestic violence. It called on members of the community, particularly men and boys, to take a stand if they came across any incident of domestic violence in their neighborhoods. They were urged to ring the doorbell and ask for a simple favor - such as to borrow some tea, to use the phone, or to have a glass of water. This was meant to let the abuser know that others could hear them and would act to interrupt their violence.

"Put yourself in the shoes of your partner for a day, and see the world from her viewpoint. To be a real man, stop domestic violence at your own home first, and go further, 'Ring the Bell' in your neighborhood."

- Ramesh Aravind, Actor

The effectiveness of *Bell Bajao* as a media and grassroots campaign stems from its dual approach of media messaging through a series of award-winning television advertisements, combined with community mobilization efforts. For example, in 2010, Breakthrough's video vans traveled 14,000 miles through cities and villages screening public service ads and involving communities through games, street theatre and other cultural tools. This

represented a sustainable, on the ground process of transforming hearts and minds.

The **Breakthrough** campaign to end domestic violence reached 240 million people during 2009-10. Figures from the organization's base-line and end-line surveys reinforce the power of public awareness campaigns to change the landscape and mindset that sustains domestic violence.

Impact (Reported figures before and after <i>Bell Bajao</i>)	Before	After
Women who would protest if abused by their husbands	29%	43%
Men and women who had heard about the PWDVA	3%	15%
Women who understood that the PWDVA could entitle them to residence and compensation	22%	56%

"One day I heard the sound of a man beating his wife. I thought of an excuse and let my dog loose. I rang the doorbell of the house pretending I was searching for my dog. Since then I have not heard any sound of violence from that house."

- Pinky, young man in Uttar Pradesh⁹⁵



Photo credit: Candace Hill

Leverage existing infrastructure

Non-profit organizations have the expertise to address domestic violence but lack the resources to scale their interventions. Considering that victims of abuse tend to approach the police and access healthcare systems, these organizations are beginning to use this existing infrastructure to deliver high quality ameliorative services to a wider base of beneficiaries.

The two most successful models that leverage existing infrastructure are the establishment of crisis intervention centers in public hospitals and special cells within police stations. These public-private partnerships represent a win-win situation for both the non-profit and the public institution. The government agency benefits because the non-profit cell within the premises eases the responsibility of the already over-burdened government staff, and the non-profit organization benefits because it receives a critical mass of beneficiaries with minimum investment. Collaboration amongst non-profit organizations, as well as with the government, is essential in combining the passion and commitment of the former and the ability of the latter to scale.

- **Dilaasa**, a crisis center for women established in 2000, is the first hospital-based crisis intervention department designed to respond to the needs of women facing violence within their homes and families. It represents a joint initiative by the Public Health Department of the Brihanmumbai Municipal Corporation and the non-profit **Centre for Enquiry into Health and Allied Themes (CEHAT)**. There are currently two crisis centers at the Bhabha Hospitals in Mumbai, where women are counseled and supported, within a large feeder network of public health facilities in the city. It also provides them with any medical aid they might need. Women who face extreme restrictions on their mobility by their abuser find it easier to come to Dilaasa on the pretext of a hospital visit. Over the past year, the numbers of women visiting the center increased from 400 to 680, which seems to indicate a positive trend in terms of encouraging victims of domestic violence to seek help, acknowledging more widely the importance of combatting domestic violence, and stimulating active screening for victims by hospital staff.
- In 2000, **SNEHA** established a crisis counseling center in the Chota Sion Hospital in Mumbai. The center acts quickly to arrange medical care and temporary shelter if necessary, provides immediate and long-term counseling for the victim, and facilitates interventions at a variety of levels, including with the police and legal services.
- While **CEHAT** and **SNEHA** have set up their crisis intervention centers in hospitals, **Tata Institute of Social Sciences (TISS)** has established its own special cells in police stations. The TISS Special Cell for Women and Children was created in 1984 as a collaborative initiative between the Maharashtra State Police and Tata Institute of Social Sciences to provide professional support services to women and children facing violence. As of 2013, 40 special cells have been operationalized throughout the state of Maharashtra, while 104 more are being established. TISS has also demonstrated the impact of the special cell model in other states, including Madhya Pradesh, Delhi, Odisha, Andhra Pradesh, Rajasthan, Haryana and Gujarat.

Counseling services

A victim of domestic violence needs immediate care including medical, psycho-social and legal aid. Counseling services provide them with a safe space, emotional support and a place to exercise their choice without fear of judgment. Such services are expected to address the multiple needs of these victims, and so typically comprise some or all of the following - emotional, psychological, social, legal, judicial, shelter, medical and economic support. Studies that have evaluated the efficacy of counseling for abused women suggest that psycho-social, supportive counseling for victims may be an effective approach to improve their self-esteem and allay anxiety.⁹⁵

Based on Dasra's field research, two main counseling approaches exist on the ground - a) counseling based on mediation, and b) counseling based on feminist principles. The former tries to mediate between the victim and her family, providing an opportunity to resolve the problem internally. The latter approach believes a woman's choice and consent are of utmost importance and allow her to make decisions after she has been offered a thorough understanding of all her options. Most non-profit organizations evaluated by Dasra undertake the latter, which reflects the victim-centric approach.

Currently, non-profit organizations provide the following counseling services to victims:

- **Psycho-social counseling:** addresses lingering post-traumatic stress, fear, insecurity, and concern. The victim is also referred to relevant medical practitioners or healthcare facilities depending on the severity of her injuries.
- **Legal counseling:** provides the victim with basic awareness about her options for legal recourse. The counseling service refers her to an independent lawyer, or a legal aid non-profit organization, depending on her individual circumstances. Legal counseling is different from legal case management; the latter is a comprehensive follow-up process from the moment at which the complaint is made until the verdict is announced.

"I was only 18 years old when my parents brought me to a counseling center. I had been thrown out of my husband's house after only eight months of married life. Through counseling, I came to realize how important it was for me to have self-respect and I also realized that my parents wanted my happiness foremost. With my parents' support, I took legal action and obtained a divorce from my husband. I was paid compensation on the instruction of my husband's community. With further counseling, my self-confidence returned. I loved to make clothes and was encouraged to set up a tailor's shop, which keeps me busy and gives me independence. I have started a new chapter in my life and am much happier."

Anonymous (aged 20 years)⁹⁶

Currently, several non-profit organizations provide counseling services to victims of domestic violence. However, they face a significant challenge in offering professionally trained psycho-social counselors. While the services of non-profit organizations lend emotional support to the victim, they are unable to provide her with the cognitive therapy that she critically needs. Further, non-profit organizations that do provide counseling to victims are unable to follow them up unless they choose to approach the organization again. Interaction and engagement with the victim is rarely sustained over a prolonged period, making the quality of the service and its impact on the woman difficult to measure.

- Counseling is an essential part of **Swayam's** work. As each woman's situation is unique, rather than offering a formulaic solution, the organization helps each survivor to define her particular problem and explore possible ways of dealing with it, taking into account not only her material and economic circumstances but also her values, priorities and personality.
- The non-profit organization **Jagori**, based in Delhi, also provides direct support to survivors of domestic violence through its counseling centers, via telephone helpline and email.

- **Vimochana**, through its crisis center *Angala*, has provided systematic support to victims and survivors of domestic and social violence since 1993 by offering moral and legal assistance, as well as negotiated settlements. In the long-term it aims to develop an integrated and holistic approach to counseling and crisis intervention that involves the woman, her marital and natal family and if necessary the larger community of which she is a part.



Legal case management

Case management involves undertaking, managing and tracking victims of domestic violence as they progress through the legal system. This includes maintaining records of her case history, making her aware of her rights under the PWDVA, keeping her concerns central while representing her in the court of law, driving and monitoring the progress of her case in court, and ensuring effective action on judgments.

Several gaps within the legal system highlight the importance of undertaking legal case management for a victim. Once a case is registered, the promise that a case will be completed within 60 days from the date of the first hearing- as stipulated by the PWDVA- is rarely honored by the judiciary. Most often, inexperienced and insensitive judicial and prosecutorial staff delay proceedings, and intimidate and stigmatize victims. The execution of court orders made under the PWDVA also entails a complex process – lengthy legal battles and sluggish implementation exacerbate a victim's existing economic burdens, while delays in the enforcement of protection orders can also place her at further risk of violence.

Non-profit organizations have the resources and expertise to ensure that a victim's case is not neglected, and that a court order is implemented. In doing so, case management makes certain that the perpetrator is held accountable and the victim has access to protection and resources to rehabilitate herself and her children. Legal case management also becomes the basis for identifying gaps in the judicial system and provides non-profit organizations with tools to advocate for change.

- **Majlis** legal center, a forum for women's rights discourse and legal initiatives, comprises a group of women lawyers and social activists committed to informing, educating and empowering women concerning their legal rights. Over the past 25 years, Majlis' team of 35 lawyers has helped over 50,000 litigants throughout Maharashtra to access formal justice delivery systems in their fight against domestic violence.



Photo credit: www.theprovince.com/

Capacity building of stakeholders

Having identified that the lack of capacity of key responders is a critical gap in implementing the PWDVA, there is an urgent need to sensitize a wide range of stakeholders about the factors which give rise to and perpetuate domestic violence and their particular responsibility in tackling the issue.

Different non-profit organizations are currently working with various stakeholder groups. Usually training involves gender sensitization workshops for groups such as the police, protection officers appointed under the PWDVA, judges or lawyers provided by the state, and also other members of the judiciary, medical personnel, community-based workers such as ASHAs, and local health workers such as *Sanginis*.

Training these stakeholders involves making them aware of the PWDVA; teaching them to identify victims of domestic violence and to provide them with all available options of recourse; and equipping them with the ability to effectively implement the PWDVA. Building their capacity to make an effective, victim-centric response, by promoting an environment of respect for a woman's choice as opposed to pushing for "reconciliation" or "saving the Indian family" also forms part of this initiative.

Additionally, a few non-profit organizations are designing and documenting curricula, standard operating procedures and guidelines that can be easily replicated to achieve greater scale.

- **SNEHA** focuses especially on sensitizing stakeholders who are in direct contact with survivors of domestic violence, and over time has established protocols for these stakeholders when dealing with them. The program has been directed towards two major groups – police personnel and public healthcare professionals – as both are very often the first point of contact for a victim of domestic violence.
- To create a culture of women's rights, **Majlis** provides training to individuals and institutions that interact with victims of violence to help them protect women's rights effectively. Training programs are held for various groups including the judiciary, police and public administrators, social workers, educational institutes and even corporate employees, to help them develop feminist sensibilities and in turn help victims more effectively.

Research and advocacy

Research is the first and most crucial step to understanding the problem of domestic violence. It includes analyzing existing literature to develop new frameworks for tackling the issue, building new knowledge of the problem, developing guidelines for the sector, assessing the effectiveness of the law, documenting best practices and interventions, and conducting monitoring and evaluation.

Robust research is also used to inform and enable strategic advocacy. Advocacy involves lobbying the government and other stakeholders and funders to recognize domestic violence as a problem that affects the entire population. It was strong and successful advocacy for a civil law on domestic violence by several members of the women's movement that led to the PWDVA being enacted.



- The importance of timely research-based advocacy is evidenced by the work undertaken by the non-profit organization **Lawyers Collective**. It has regularly evaluated and reported on both the effectiveness of the infrastructure envisaged under the PWDVA, and the performance of the implementing agencies in delivering services. It has also examined the responsiveness of the judiciary to the issue of domestic violence as part of this effort. The Lawyers Collective's six consecutive reports on the status of the PWDVA on the ground have provided advocacy-based organizations with the necessary evidence to highlight the poor performance of the government in protecting and providing for victims of domestic violence. Initiatives such as this have greatly contributed to the increased accountability of the state to civil society.⁹⁷
- The **Tata Institute of Social Science's (TISS)** research wing, the **Resource Centre for Interventions on Violence Against Women (RCI-VAW)**, undertakes interventions with different stakeholders such as the police, state governments and other non-profit organizations to develop innovative methods to prevent violence against women. With streamlined processes for reporting and data collection procedures, RCI-VAW analyzes the successes and failures of each of their interventions to inform the organization's future strategy and disseminate lessons learned to a wider stakeholder group.

Key takeaways

- Efforts by non-profit organizations to address domestic violence focus on three response mechanisms- preventive interventions that aim at creating a gender-equitable society; ameliorative interventions that a woman requires when she first seeks formal assistance, such as shelter, legal aid, medical aid, and remedial counseling; and reconstructive interventions, which focus on helping a victim rebuild her life.
- Through its sector mapping and field research, Dasra identified 12 key non-profit interventions in India. These interventions relate to one or more of the three response categories mentioned above. Dasra assessed each intervention according to its impact on the ground, its ability to scale, and its alignment with Dasra's cornerstones.
- Interventions focused on mobilizing communities and engaging youth have the highest impact and are also amongst the most scalable. Key community groups engaged could include local political and religious leaders, youth groups, and even survivor groups. Outcomes from these engagements can prove beneficial on all counts – prevention, amelioration and reconstruction. Besides engaging youth within the community, gender-based awareness raising programs in schools are an invaluable way to reach out to large numbers of youngsters. Such interventions also bring about lasting change by effecting permanent changes in underlying attitudes.
- Public awareness generation is the most scalable of all interventions. It can have far-reaching impact in terms of motivating change in a shorter time periods, as evidenced by Breakthrough's Bell Bajao campaign.
- Leveraging existing infrastructure is another effective intervention that utilizes the expertise of non-profits within the limited resources available to them. The two most innovative and successful models developed by non-profit organizations are the establishment of crisis intervention centers in public hospitals and special cells within police stations. It is worth noting that the healthcare setting is a particularly strategic location where women undergoing abuse can be identified and support linkages established.
- Other interventions that create high impact are the provision of counseling services and legal case management, both of which entail one-on-one service provision to a victim. Legal case management can also serve an important tool to identify gaps in the judicial system and thus support critical advocacy efforts. Research-based advocacy is critical to direct policy changes and also improve accountability.
- Capacity building and sensitization of stakeholders is much needed across the country to educate different actors on their particular responsibility in tackling domestic violence and drive a victim-centric response. Non-profit organizations have been undertaking trainings to achieve these outcomes for a wide variety of groups such as the police, protection officers, judges and lawyers, medical personnel, and community-based health workers.



Photo credit: The Guardian

Close to
50
non-profit organizations
in India have dedicated
domestic violence
programs

Chapter 5: Painting the picture

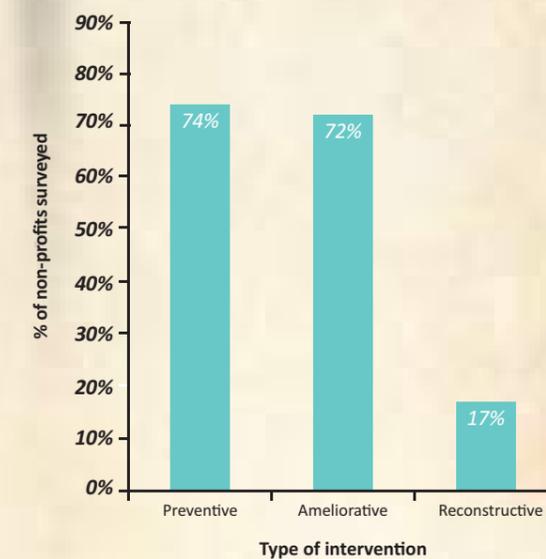
Non-profit sector trends

Dasra's comprehensive non-profit organization sector mapping aims to provide donors with an understanding of anti-domestic violence efforts in India from the ground up. This chapter examines the structure and characteristics of the domestic violence non-profit sector in India. The final chapter goes on to highlight domestic violence non-profit organizations that run interventions that are effective and have the potential to scale.

Common trends

Initial Dasra mapping, discussed in Appendix III, identified a universe of over 110 non-profit organizations throughout India that work on the issue of violence against women. Of these, 47 organizations ran domestic violence specific programs. Using key organization-level data of these 47 organizations, a selection of key characteristics of the domestic violence sector in India is provided below.

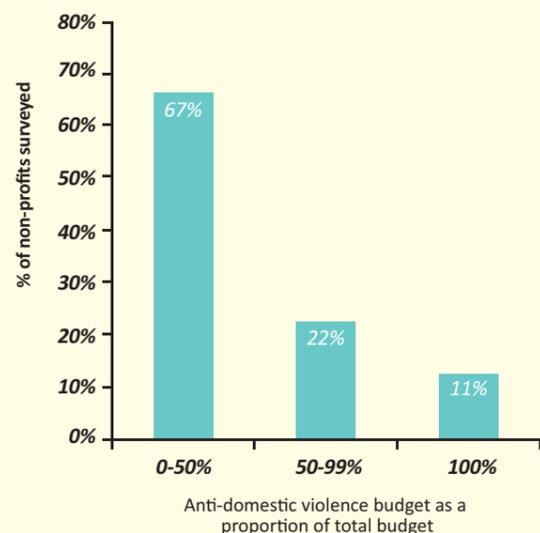
Most non-profit organizations offer preventive and ameliorative services



Only 17% of the organizations currently working to address domestic violence focus on rehabilitation. Rehabilitation is a long-term process that serves as the final and necessary stage in helping victims to rebuild their lives. Rehabilitation interventions must be customized as domestic violence cuts across age, class and educational boundaries, and the impact on a woman's health can vary hugely. Current rehabilitation interventions in India comprise very basic vocational training such as sari-making or limited financial literacy. As well as providing desired skills and resources to the victim, it is crucial to connect her with sustainable employment and livelihood options. According to the non-profit experts interviewed at the Dasra workshop, the high cost of customization, resulting in a lack of scale, explains the low prevalence of rehabilitative interventions.⁹⁸

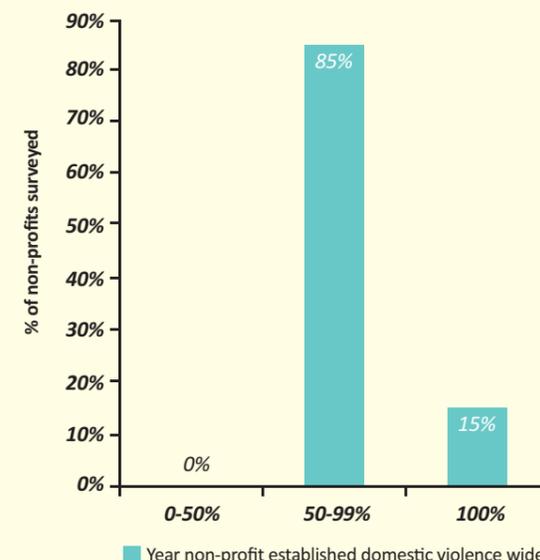
Dasra's sector mapping revealed that 74% of non-profit organizations working to combat domestic violence currently focus on preventive interventions. This is good news, as successful prevention over time would reduce the need for post-violence assistance. Some 72% of non-profit organizations surveyed focus on ameliorative interventions, such as short-term relief to the victim by providing counseling services, healthcare facilities, legal advice, access to the courts, and shelter for the victim and her children. Considering the poor quality of ameliorative services offered by the government, the non-profit sector has been filling a critical gap that helps the victim take her first steps out of an abusive relationship.

One third spend over half their budget on domestic violence work



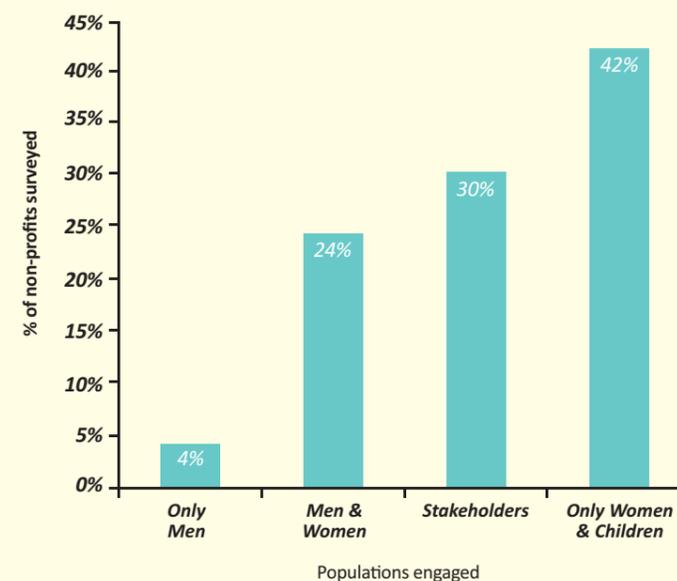
For several organizations, domestic violence is one component of their work in the area of violence against women (e.g. trafficking, rape and foeticide). Some other organizations work more broadly on issues relating to women and children, focusing on gender-equality through women's empowerment, education and livelihoods, and domestic violence related work is then woven into this. One of the ground realities organizations have to deal with is the overwhelming stigma and resistance within the community to intervening in situations involving domestic violence. To overcome this, organizations typically have to enter and mobilize communities around economic and social empowerment and gain their trust before addressing sensitive topics such as domestic violence. These factors explain why only 11% of non-profit organizations reviewed are wholly focused on domestic violence activities, and why for two-thirds, domestic violence accounts for less than half of their budget.

Domestic violence work began in the 1980s



This graph shows that non-profit organizations began working on domestic violence mainly after the women's movement became established in the 1980s. A total of 85% established their domestic violence programs after 1980 as the understanding of domestic violence broadened from dowry-related incidents to include a more nuanced and comprehensive understanding of the issue as involving sexual, economic and psychological violence as forms of abuse. Since the PWDVA was enacted in 2005, organizations have adapted their programs to work towards strengthening and filling crucial gaps associated with the implementation of the PWDVA on the ground.

Non-profit organizations work with a broad range of populations



Only two of the non-profit organizations surveyed by Dasra, **Men Against Violence and Abuse (MAVA)** and **Equal Community Foundation (ECF)**, solely engage men and boys to address the issue of domestic violence. These organizations as well as those that work to involve men alongside women are attempting to widen the focus from the victim alone. Dasra's interviews with these non-profit organizations revealed that they encounter significant challenges in raising funds,

especially from the government, as they do not engage directly with women. It is crucial that funders appreciate the importance of their approach and support organizations that engage with existing or potential perpetrators. Such interventions, if implemented well, have the potential to create sustainable and lasting change.

The enactment of the PWDVA in 2005 and its subsequent implementation has required renewed efforts to build the capacity of and sensitize stakeholders. Currently, 30% of non-profit organizations surveyed by Dasra engage stakeholders such as the police, protection officers, judiciary and hospitals.

Key takeaways

Dasra's mapping identified over 110 non-profit organizations working on the issue of violence against women in India. Using key organizational data for the 47 non-profit organizations that run domestic violence specific programs, Dasra has identified various defining features of this sector.

- Three quarters of organizations deliver preventive and ameliorative initiatives, but less than a fifth offer reconstructive interventions, such as livelihood creation activities, due to the high cost of customization these interventions require, resulting in a lack of scale.
- Only one tenth of these organizations are wholly focused on domestic violence work. Two thirds of the organizations surveyed spend less than half of their budget on domestic violence. This is on account of the fact for some organizations, domestic violence is one component amongst many involving violence against women (e.g. trafficking, rape and foeticide) while others work more broadly on issues relating to women and children, partly in view of the difficulty in entering and mobilize communities on a sensitive, so-to-speak 'private' topic.
- Non-profit organizations working on domestic violence were first established in the 1980s, as part of an increasingly popular and successful feminist movement.
- Non-profit organizations work with a wide range of people, including men, women, children and stakeholders. This is important since a holistic, high level approach to preventing and addressing domestic violence requires working with all groups.

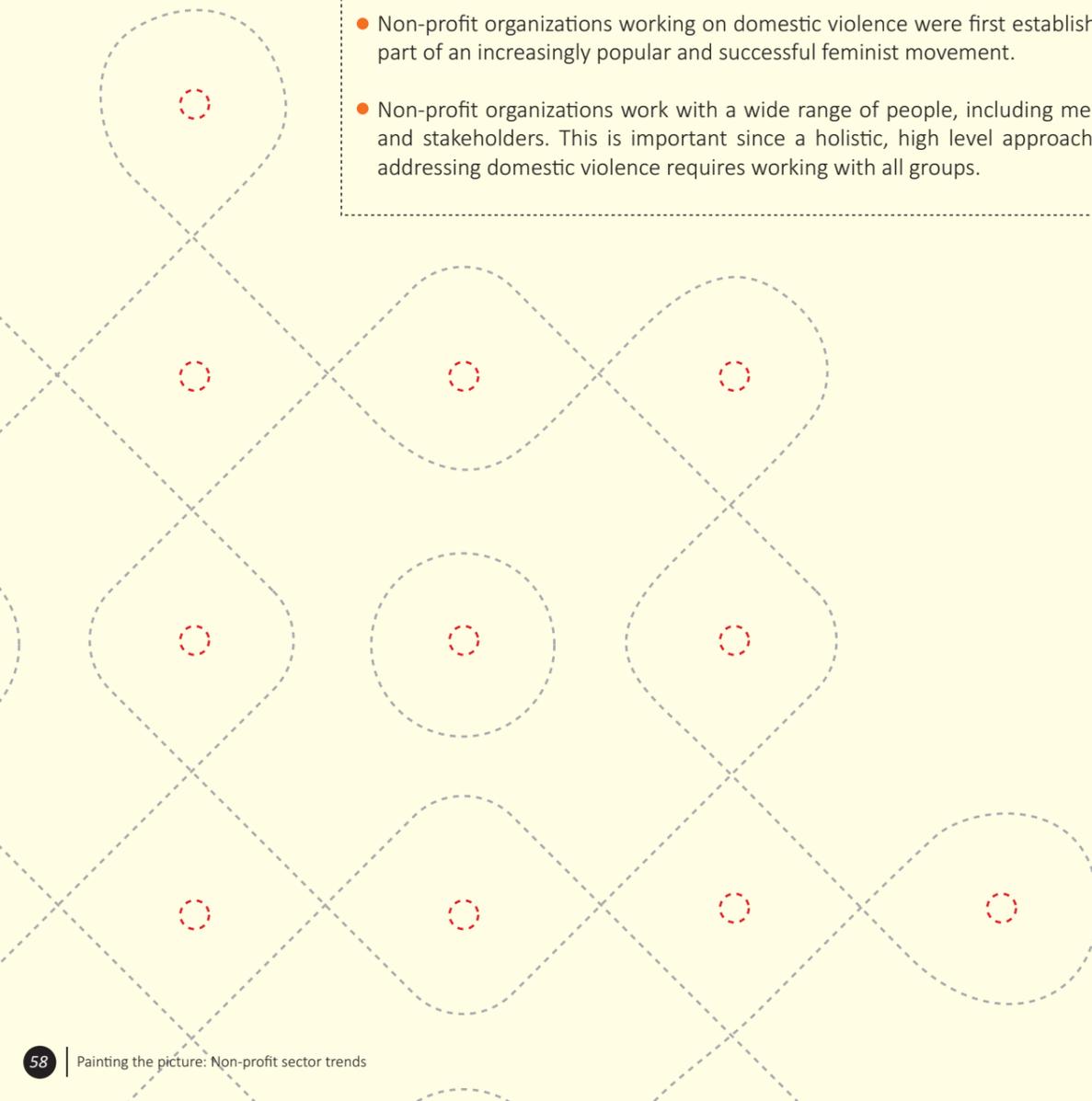


Photo credit: www.newvision.co.ug



Photo Credit: www.thehungerproject.co.uk

Chapter 6: Funding Options

Profiling high impact and scalable non-profit organizations

Dasra identified over 110 non-profit organizations throughout India to evaluate their approaches, models and interventions. Following a comprehensive diligence process, it has shortlisted and highlighted 13 of these non-profit organizations, which represent high potential investment options for donors.

Several of the following organizations implement programs in addition to those that address domestic violence. However, for the purpose of this report, Dasra has chosen to focus only on their anti-domestic violence initiatives. The chart below compares the most effective non-profit organizations mapped to the most high impact interventions, as discussed in the preceding chapter.

	Youth Engagement	Research and Advocacy	Capacity Building of Stakeholders	Community Mobilization	Public Awareness	Leverage Existing Infrastructure	Legal Case Management	Counseling Services
AWAG								
Breakthrough								
CEHAT								
CORO								
CSR								
ECF								
Jagori								
Lawyers Collective								
Majlis								
SNEHA								
Swayam								
TISS								
Vimochana								



- Founder Secretary: Dr. Ila Pathak • Founded: 1981 • Coverage: Gujarat
- Total Budget: INR 81 Lakhs (\$135,000) • DV Budget: INR 81 lakhs (\$135,000)

OVERVIEW

AWAG was established in 1981 to empower women and help them fight for their basic rights. The organization's programs and services reflect its holistic approach in tackling domestic violence by providing support services and implementing training programs.

Support Services: The organization's support services are designed to meet survivors' ameliorative requirements. These include counseling, legal aid, police assistance, a short-stay home, a 24 hour help line and crèche facilities.

Awareness-Raising Workshops and Trainings: Through workshops and training, AWAG sensitizes various community structures and service providers such as the police, village leaders, adolescent girls' groups, women leaders, protection officers, medical professionals, and village health and sanitation committees. The group seeks to strengthen mechanisms that support women at ground level.

Income-Generation Activities: Enabling women to be financially independent is essential for their empowerment. AWAG provides vocational training in tailoring and embroidery work and in helping establish kitchen gardens. Additionally, the group has created a garment co-operative with its own dedicated retail outlet, EK AWAG.

KEY INTERVENTIONS



AWAG operates four counseling centers in various communities and three Police Counseling Centers at police stations in collaboration with the District Superintendent of Police.

AWAG, in consultation with the National Commission for Women, operates a 24/7 helpline staffed by trained counselors, whose coverage extends across western India.

THEORY OF CHANGE

If women are empowered to assert their individuality and gain access to social justice, then their self-awareness and self-worth is raised, thereby enabling them to be equal contributing members towards a fair and just society.

SCALABILITY

AWAG seeks to leverage its existing relationship with the Gujarat State Government to expand the scope of its training of community stakeholders and first responders to include Accredited Social Health Activist (ASHA) workers, government-appointed protection officers, officials of Multi-Purpose Women Welfare Centers and counselors from family counseling centers throughout Gujarat. Over the next two years, the group hopes to expand its unique police counseling center model from three to ten districts within the state of Gujarat.

QUALITY INDICATORS

OUTREACH

AWAG undertakes work in Ahmedabad and in the rural areas of Radhanpur and Rapar. Over the past two years, its counseling centers have assisted over 1,200 women, 670 of whom sought support from the police in connection with their legal rights. During the same period, AWAG has also built the capacity of over 10,500 community structures and community service providers.

LEADERSHIP

Dr. Ila Pathak, the Founder Secretary has over thirty years of experience concerning women's issues. She serves as President of the Gujarat Women's Federation and as Vice President of The Women's International League of Peace and Freedom. A group of three secretaries oversees day-to-day operations and leads a team of 42 staff members with strong backgrounds in community development.

ENDORSEMENTS

AWAG is supported at the highest level of policy making by bodies such as the National Commission for Women, The Government of Gujarat's Department of Women and Child Development, and the Department of Health and Family Welfare. Its projects have been supported by prominent donors, including Oxfam, UNICEF, Ford Foundation and CARE.

PARTNERSHIPS

AWAG's co-operative unit has entered into a unique partnership with Fabindia to serve as its supplier. The Government of Gujarat has selected AWAG as a partner to provide various community structures with capacity building support. The organization has forged a partnership with the National Institute of Mental Health and Neurosciences to train its staff in psychological and social counseling.



- Director: Mallika Dutt • Founded: 1999 • Coverage: Pan India
- Total Budget: INR 400 Lakhs (\$666,000) • DV Budget: INR 300 Lakhs (\$500,00)

OVERVIEW

Breakthrough was founded in 1999 to promote and improve human rights, with a focus on women and gender equity. The organization leverages multimedia for community mobilization, leadership development and strategic cross-sector partnerships and engages young people and communities to challenge violence and discrimination against women.

Direct Support Services: Breakthrough trains community-based and non-profit organizations, local stakeholders and community leaders. Together with trained partners, it helps mobilize communities against domestic violence. Mobilization activities include community awareness sessions consisting of plays, puppet shows and video vans. Breakthrough builds peer leaders through its 'Rights Advocacy' and 'Master Training' programs, and trains local service providers (e.g. government employees and teachers) to provide essential services such as legal aid and counseling.

Developing and Delivering Media Strategy: Breakthrough's media campaigns include television, radio, print, video vans, social media, mobile media, and street theatre. 'Bell Bajao', Breakthrough's largest campaign, calls on men to challenge domestic violence while simultaneously empowering women and girls to exercise their rights. Campaigns are disseminated at both community and national level.

KEY INTERVENTIONS



By identifying and coaching peer leaders from the same community, Breakthrough creates role models for girls and also provides a support system, which many of them lack in slums. Peer leaders independently implement outreach events within the community through use of popular culture and other forms of cultural expression, such as puppet shows and theatre, sensitizing both men and women and calling upon the larger community to take action against domestic violence.

THEORY OF CHANGE

If mass media and interactive training are used to make people more aware of violence and discrimination against women, then individuals are better positioned to advocate for women's rights. If large numbers of people stand up for the rights of women then the world will be a safer and more secure place for all.

SCALABILITY

Breakthrough trains community leaders to take ownership and local non-profit organizations to implement the program, while gradually withdrawing direct implementation. Initially, Breakthrough directly implements the program. Subsequently, it monitors its delivery through partners, provides on-going support and focuses on advocacy within states. The organization has established the Breakthrough Institute to train non-profit organizations worldwide to implement its model for tackling domestic violence.

QUALITY INDICATORS

OUTREACH

Since its inception, Breakthrough has reached over 200 million people through its media campaigns. Through direct community intervention, Breakthrough has reached over 7.5 million people. A strong focus on delivery of comprehensive and high quality services has led to robust impact figures, such as 91% men and 87% women advocating for community intervention against domestic violence in Uttar Pradesh.

LEADERSHIP

Founder Mallika Dutt, who leads Breakthrough's global practice, has over ten years of experience in working to promote human rights. She is assisted by a team of 59 highly committed employees led by Sonali Khan, who serves as Vice President, overseeing operations in India. Mallika is the co-founder of SAKHI for South Asian Women and serves on several boards, including the World Economic Forum's Global Agenda Committee and Open Society Institute.

ENDORSEMENTS

Breakthrough's work has been endorsed both by the United Nations and the Government of India. It has been honored by Avon Foundation, and has won two Lions Awards for Global Excellence in Communication. Breakthrough is supported by prominent funding agencies, such as JRD Tata Trust, Vodafone Foundation, Ford Foundation, Oxfam, UN Women, and the American India Foundation.

PARTNERSHIPS

Breakthrough maintains strong government and local partnerships when implementing its programs. Government partners include the MWCD (Ministry of Women and Child Development), NIPCCD (National Institute of Public Cooperation and Child Development) and SIPCCD (State Institute of Public Cooperation and Child Development) and local partners include Gamyta, Sahayog and the Uttar Pradesh Police.



- Coordinator: Padma Deosthali • Founded: 1994 • Coverage: Maharashtra
- Total Budget: INR 103 Lakhs (\$171,000) • DV Budget: INR 12 Lakhs (\$20,000)

OVERVIEW

CEHAT conducts research in areas pertaining to health, and develops workable models to address systemic problems in the healthcare sector, providing its expertise and technical assistance in the institutionalization of these models.

The Dilaasa model was conceived by CEHAT and the Municipal Corporation of Greater Mumbai (MCGM) in 2000. It involves the training and sensitization of healthcare providers, and the establishment of crisis centers to aid survivors of domestic and sexual violence. All healthcare providers in a given medical institution- nurses, attendants and doctors- are trained and sensitized to regard violence against women as a health issue. As the program is intended to be organic, CEHAT believes in 'training trainers' from within institutional staff. Following training, healthcare providers are expected to be able to screen suspected cases of violence and provide treatment and basic psycho-social support. They are also expected to refer survivors to the Dilaasa crisis centers if required.

Two crisis centers have been established in the Bhabha Hospitals in Bandra and Kurla, respectively. They provide extensive support to survivors and attempt to ensure their future safety. The centers also arrange for short-term shelter at the hospital when needed, and leverage existing support networks for women - e.g. Majlis, a legal support group - when legal proceedings become necessary.

KEY INTERVENTIONS



Research and Advocacy



Capacity Building of Stakeholders



Leveraging Existing Infrastructure

The Dilaasa model owes its effectiveness to exhaustive research by CEHAT. The public hospital network has maximized its accessibility, and the organic approach to training and management has ensured that the public health system has assumed ownership of the program and is a stakeholder in its success. This has manifested in the MCGM funding around 70% of the program since 2006. The Central Government has also expressed interest in leveraging CEHAT's expertise in an initiative to establish 100 'One-Stop-Crisis-Centers'.

THEORY OF CHANGE

If functionaries of the public health sector (doctors, nurses and attendants) are sensitized towards viewing domestic violence as a health sector concern, then survivors of domestic violence can be more effectively identified and assisted, due to the easy accessibility of public hospitals. Sensitive screening can lead to early identification, reducing domestic and sexual abuse of women.

SCALABILITY

The model is highly scalable; its success mainly depends on the willingness of public hospitals and the government to assume ownership of the program. Additionally, the model has been replicated at a civil hospital in Shillong, and a maternity home in Bangalore. With 100 'One-Stop-Crisis-Centers' (OSCC) in 100 districts projected under the 12th Five Year Plan, the model could be scaled to all such OSCCs. CEHAT believes it has a key role to play in this implementation through consultation, instruction and training.

QUALITY INDICATORS

OUTREACH

CEHAT's network in Mumbai currently consists of 5 general hospitals, 16 peripheral hospitals, 20 maternity homes, and 20 dispensaries. An estimated 400 women are referred to Dilaasa crisis centers each year. On average, 250 immediately use Dilaasa's services, while between 60% and 70% of the remaining women do so later.

ENDORSEMENTS

CEHAT representatives have provided expert analysis for several national newspapers, including The Hindu and The Times of India. CEHAT was requested by the Justice Verma Commission to provide its views concerning the institutionalization of a health-sector response to violence against women. CEHAT has many well-regarded funders, including Ford Foundation and UNDP.

LEADERSHIP

CEHAT has adopted a democratic and participatory decision-making process. An elected working-group (WG) manages the day-to-day functions of the organization. Coordinator Padma Deosthali, an ex-officio member of the WG, has worked with the organization since its inception and is a widely published researcher. Currently, she is completing her PhD. She also serves on the International Board of IFHHRO.

PARTNERSHIPS

CEHAT is a member of several alliances, including the People's Health Assembly and the International Federation for Health and Human Rights Organizations (IFHHRO). It has a close relationship with the Mumbai Government. The Deputy Chairman of the Planning Commission, with representatives from Ministry of Women and Child Development, has visited CEHAT to understand the model.



- Secretary: Sujata Khandekar • Founded: 1989 • Coverage: Maharashtra
- Total Budget: INR 197 Lakhs (\$328,000) • DV Budget: INR 77 Lakhs (\$128,000)

OVERVIEW

CORO uses a rights-based approach to address gender inequality amongst marginalized groups through a comprehensive community development model. The organization conducts four primary interventions that seek to create awareness and mobilize different stakeholders to address gender-based violence:

Mahila Mandal Federation (MMF) is a CORO-initiated self-help organization of women from urban slums. They handle issues concerning violence against women, women's sexual and reproductive health, and access to basic amenities. MMF is a collective of women's groups that identifies issues affecting the community and takes decisive action to tackle problems at grassroots level.

Center for Leadership (CFL) is a grassroots leadership development program that builds the capacities of potential leaders from the community to spearhead rights-based collective activism on issues involving women's empowerment and social justice.

Gender Sensitization is an in-school initiative, forming part of the Gender Equitable Movement in Schools (GEMS) and Meena-Raju Manch program, which seeks to foster gender equitable attitudes and behaviour among adolescents by engaging them in critical thinking and self-reflection on issues of gender and violence.

Research and Advocacy includes project implementation, intervention research, and knowledge creation to help share best practices and develop scalable models.

KEY INTERVENTIONS



Youth Engagement



Research and Advocacy



Community Mobilization



Counseling Services

MMF establishes case registration centers in slum communities run by trained community women, supported by a central legal aid and counseling center to address special cases of domestic violence. The GEMS Meena-Raju Manch program is run in upper primary schools in partnership with the government, and uses participatory methods such as group education activities and campaigns to engage students (especially boys). The Center for Leadership is a year-long program that aims to identify and develop potential grassroots leaders through training, experiential learning and peer learning.

THEORY OF CHANGE

If women from vulnerable communities are provided with adequate knowledge, skills and support to facilitate the development of leadership skills, then they can become agents of social change. If rights-based leadership can be facilitated and women leaders are created, then they can be empowered to access their basic rights, ensuring comprehensive community development.

SCALABILITY

CORO's vision is to become an effective training and resource organization for marginalized community development. Over the next three years, MMF will be scaled across Maharashtra. The Center for Leadership will be expanded to include an advanced learning program with the intention of promoting grassroots leadership development. Going forward, in-school sensitization programs will expand to include upper primary schools. CORO will also aim to effect policy changes that include gender education.

QUALITY INDICATORS

OUTREACH

The MMF has a total membership of over 9000 women from 300 women's groups. Additionally, 44 community case registration centers have been established in the Chembur-Trombay region of Mumbai. Since 2008, 590 leaders from the state have completed the grassroots leadership program. Currently, the Meena-Raju Manch program is being implemented in 24,000 primary schools in Maharashtra.

ENDORSEMENTS

CORO's work has been supported by international agencies such as ActionAid India, Paul Hamlyn Foundation, International Center for Research on Women (ICRW) and UNICEF. Domestic funders include institutions such as Sir Dorabji Tata Trust and Anu Aga Foundation. The CFL is run in partnership with Leaders Quest Foundation, UK.

LEADERSHIP

Secretary and Coordinator, Sujata Khandekar, is a founding member of CORO and brings 24 years of experience to the sector. She holds an MA from University of London and is also a MacArthur Leadership Development Fellow. CORO's board includes 13 members with backgrounds in media, education and consulting. MMF has a democratically elected 15-member executive council which is independently run and managed.

PARTNERSHIPS

CORO has conducted various projects in partnership with research and academic institutes, such as Population Council and Tata Institute of Social Sciences (TISS). CORO is a resource agency for the Government of Maharashtra's gender-based education initiatives, having trained government teachers in the Meena-Raju Manch module, which is being implemented as part of the Sarva Shiksha Abhiyan scheme.



- Director: Dr. Ranjana Kumari • Founded: 1983 • Coverage: Pan India
- Total Budget: INR 279 Lakhs (\$465,000) • DV Budget: 85 Lakhs (\$141,000)

OVERVIEW

CSR's mission is to empower the women and girls of India, guarantee their fundamental rights, and increase understanding of social issues from a gender perspective. CSR engages key stakeholders – including men, boys and law enforcement agencies – to change social mindsets and ensure that women possess the resources they need to escape violence.

Crisis Intervention Centers (CICs): CSR's CICs in Delhi provide counseling and free legal aid to victims of domestic violence. They also run multiple awareness generation programs. Further, CICs focus on engaging men and boys, community groups, and local police to help prevent violence against women.

Gender Training Institute (GTI): GTI conducts capacity-building and training programs that focus on the role of gender in communities, organizations, businesses, government policy and institutions. GTI has worked with a wide range of clients including the Delhi Police, Haryana Government and State Bank of India.

Advocacy and Capacity Building: CSR led the lobbying campaign which resulted in the enactment of the Protection of Women from Domestic Violence Act, 2005. Currently, it focuses on improving implementation of the law through research, awareness generation, and capacity building of police, judiciary, and service providers.

KEY INTERVENTIONS



The CIC program seeks to end violence in several communities in Delhi. Each CIC represents a safe space for women, and includes an in-house expert to provide legal assistance and counselors to offer individual/family counseling. Victims are provided with medical treatment, given assistance in filing charges, and help in finding employment or skills training.

THEORY OF CHANGE

If women understand their rights and have access to resources that help them escape violence, then they will be empowered to use them to escape violence when it occurs. Additionally, if the root causes of violence are addressed by community engagement and mobilization, then communities will become safer, violence-free spaces for women.

SCALABILITY

Going forward, CSR is focused on deepening and replicating the CIC model to provide more comprehensive services to survivors, such as on-site medical treatment, professional psychological counseling, and more robust legal assistance. CSR also plans to involve the police in developing and executing community safety plans, which are intended to make communities safer and more responsive to violent crimes against women.

QUALITY INDICATORS

OUTREACH

CSR evaluates its success in terms of whether women are empowered to make decisions affecting their lives, influence their communities, access justice, and improve their standards of living. Each year, CSR's CICs service around 600 women involved in direct cases of violence. Additionally, CSR has also trained other stakeholders, including young people, community men and the police, to become agents of change.

ENDORSEMENTS

CSR has Economic and Social Council (ECOSOC) status, recognized by the UN, and is a member of the Conference of Non-Profits (CONGO). CSR has been supported by major institutions including the Embassy of the Republic of Germany, UNDP, Asia Foundation, and the Ministry of Women and Child Development. CSR's work has also been featured by the The Times of India, The Economic Times and The Hindu.

LEADERSHIP

CSR is led by Dr. Ranjana Kumari, a prominent activist and a leading force in the women's movement in India. Dr. Kumari is the President of Women Power Connect and has served as senior advisor to the Ministry of Labor, Government of India and Coordinator of South Asian Forum for Women's Political Empowerment. CSR's Board is comprised of leaders from the social sciences and members with business expertise.

PARTNERSHIPS

CSR advises the government on plans to improve cross-sector collaboration to improve results under the Protection of Women from Domestic Violence Act. CSR is an Advisor to the National Mission for Empowerment of Women and Advisor to National Commission for Women. It is also a nodal agency for initiating dialogue among government departments, non-profit organizations, the police and media.



- CEO: Will Muir • Founded: 2009 • Coverage: Pune
- Total Budget: INR 55 Lakhs (\$91,000) • DV Budget: INR 55 Lakhs (\$91,000)

OVERVIEW

ECF regards violence against women as a man's issue. It has found that less than 5% of those non-profit organizations that advocate for women's empowerment, work with men. For this reason, ECF was founded to ensure that every man in India has the opportunity to study and practise gender equality. ECF's programs are as below:

Action for Equality (AfE) builds peer groups of boys aged 14 to 17 to tackle violence in their respective communities. Mentors deliver a foundation course in gender equality through 20 modules taught over 15 weeks, covering topics such as masculinity, sexual health and violence. 60% of women who live with graduates of the program report experiencing less violence as a result. After graduating, men volunteer to recruit others to the course. The most committed graduates work with parents and teachers to change the way these key groups raise young boys, and lead the program in their own community.

Research provides evidence for program development. A recent report called 'What About the Boys?' identifies media, parents and teachers as key influencers of men's attitudes. In addition, 'Man Up India!' is a nationwide campaign launched on March 8, 2013 to raise awareness of the role of men in violence. Currently, ECF conducts corporate seminars as part of its campaign to engage men to consider the issue of violence against women.

KEY INTERVENTIONS



ECF mobilizes boys aged 14-17 who are encouraged by program mentors, with leadership and peer support, to develop the knowledge and skills they need to take action in their communities. Graduate program leaders go on to mobilize groups of parents, teachers and media. ECF believes it is vital to engage with adolescent males as they are the future earners, husbands and fathers. It also ensures that knowledge about women's rights is retained within communities, even after ECF's withdrawal.

THEORY OF CHANGE

If men study and practice gender equality with others they trust, then they will take personal action to end violence against women in their own community; and work with parents, teachers and the media to raise all men to respect women.

SCALABILITY

ECF is working to a six-year, \$1 million plan to scale the AfE program across India through existing networks of grassroots organizations that work with women. The AfE program is in a modular format, and all key elements have been documented to help transfer knowledge to partners. The program is especially suited to the wide range of organizations that have experience delivering programs on HIV/AIDS and sexual health.

QUALITY INDICATORS

OUTREACH

Since January 2011, AfE has been delivered in 20 communities and reached 40,000 people. 1,500 men have participated in the program and 970 have graduated. ECF has published an academic report 'What About the Boys?' researching how to engage men to empower women, and has gathered over 1,000 pledges to support the 'Man Up India!' campaign.

ENDORSEMENTS

ECF's work has been featured in Huffington Post, Times Group's 'Amazing Indians', and in TEDx Barcelona and TEDx Pune. In 2013, Will Muir was selected as an Ashoka Fellow and UK delegate to the G8 Youth Summit. ECF has secured seed-funding from UnLtd India, Savitri Waney Trust, iPartner India, Global Fund for Children and Sigrid Rausing Trust.

LEADERSHIP

Will Muir is a graduate of the Dasra Social-Impact program, and has thirteen years of management experience. In 2013, he was selected as an Ashoka Fellow. Rujuta Teredesai, Co-founder and Executive Director has over seven years of experience working with non-profit organizations and Program Director Danit Shacham (12 years at Amnesty International) is instrumental in leading program development at ECF. They are supported by a strong 20 member program team.

PARTNERSHIPS

ECF only works in communities that have organizations actively delivering programs for women. ECF partners with such groups to leverage their contacts and infrastructure, and complement their services for women empowerment. Partners comprise non-profit organizations such as Akanksha, Swadhar and Deep Griha, and corporates including Zensar, Suzlon and Forbes Marshall. Since 2011, ECF has been an UnLtd India investee.



- Director: Suneeta Dhar • Founded: 1984 • Coverage: Pan India
- Total Budget: INR 200 Lakhs (\$333,000) • DV Budget: INR 30 Lakhs (\$50,000)

OVERVIEW

Jagori was founded to help build a just society through encouraging the inculcation of feminist values. The organization works to end all forms of violence against women including domestic violence through the following interventions:

Direct Intervention: Jagori operates three centers in New Delhi that provide counseling and referral services to survivors of domestic violence. It also offers similar services through a telephone helpline and by email. Further, Jagori holds regular group meetings for victims of domestic violence to enable healing and other forms of support.

Learning Workshops: Jagori shares its experiences of working with survivors of domestic violence at workshops and sensitization training sessions. It organizes workshops for various stakeholders including *mahila panchayats*, protection officers, helpline operators, *mahila nyaya samitis*, police, community paralegal workers, and other non-profit organizations throughout India.

Advocacy and Campaigns: Jagori is active in campaigns from grassroots to national level. Together with SANGAT, it mobilized organizations and individuals in Delhi and nationwide in 2012 to support the One Billion Rising Campaign to end violence against women. As a member of the AMAN Network, Jagori also supported advocacy efforts to increase budget allocations to promote effective implementation of the Protection of Women from Domestic Violence Act 2005.

KEY INTERVENTIONS



Community Mobilization



Counseling Services



Research and Advocacy



Capacity Building of Stakeholders



Public Awareness



Facilitate Networks

Jagori's counseling centers offer social, psychological, and referral support to survivors of domestic violence. Counselors ensure that the rights and autonomy of each woman are central to her decision-making and choices, without threatening her dignity and integrity. Peer educators support victims wishing to file FIRs at police stations, and access legal support, or relevant health and medical services.

THEORY OF CHANGE

If patriarchy and unequal gender relations embedded in society are transformed at structural levels through changes in laws and practices, consciousness raising and collective efforts of women and communities, then a gender-just, peaceful and non-violent society can be built.

SCALABILITY

Jagori's model leverages advocacy and partnerships with agencies, and utilizes technology, feminist counseling, women's leadership development, and expertise of service providers and partners to achieve its objectives. Going forward, it is establishing a comprehensive range of services to enable women survivors to access high quality support such as counseling, health, healing, and legal advice and representation. At the same time, Jagori is also working with agencies to prevent domestic and other forms of violence.

QUALITY INDICATORS

OUTREACH

In 2012–13, Jagori supported more than 800 victims of domestic violence at its drop-in counseling centers, through its telephone helpline and via email. In the past year, it has trained over 6,500 women, young people and men on issues such as gender, patriarchy, and violence against women. Jagori has also partnered with over 100 organizations in various campaigns to end violence against women.

ENDORSEMENTS

Jagori was presented with the Roland Berger Human Dignity Award in 2013 in recognition of its successful and longstanding commitment to women's rights and safety. The organization's work has featured in various newspapers including The Hindu, Times of India, Livemint and The Wall Street Journal. Jagori's funder-partners include Bread for the World, Misereor, DanChurchAid, UN Women, and UN Habitat.

LEADERSHIP

Suneeta Dhar currently serves as Director of Jagori. Prior to this, she has worked with the United Nations Development Fund for Women, specialising in areas of gender training, adult and general education and organisational development. The Jagori collective is comprised of 38 members from a wide range of backgrounds, which includes activists, community organizers, and professionals with experience in social work.

PARTNERSHIPS

Jagori partners with women's groups, community-based organizations, survivor collectives, rural and community women's federations, international and UN agencies, and government departments. It is a member of the AMAN Network, a national forum dedicated to ending domestic violence, The Global Safe Cities Initiative, and SANGAT, a South Asian Feminist Network.



- Executive Director: Indira Jaising • Founded: 1980 • Coverage: Pan India
- Total Budget: INR 183 Lakhs (\$305,000) • DV Budget: INR 112 Lakhs (\$186,000)

OVERVIEW

LCWRI began its campaign for a civil law on domestic violence in the early 1990s. The organization played an important role in helping create a nationwide consensus on the need for such a law. Since the enactment of the PWDVA, LCWRI has focused on securing its effective implementation and in creating an enabling environment in which women can access justice and other support services. The organization specializes in policy level interventions, including research and advocacy for law reform, collaboration with national training institutions to promote capacity development of functionaries, and the conduct of strategic litigation through 'Public Interest Litigations' (PIL) on women's issues, including domestic violence.

Legal Aid program of the LCWRI is based in Delhi and Mumbai, and provides high quality legal services to women from marginalized and vulnerable sections of society.

Capacity Development includes training programs for protection officers, service providers, police, legal services authorities and the judiciary. They seek to increase the visibility of the roles of protection officers and other service providers and extend free legal aid, in accordance with the law against domestic violence.

Monitoring & Evaluation (M&E) seeks to evaluate the extent to which the PWDVA is enforced. LCWRI assesses sample court orders to evaluate outcomes in three key areas: protection against violence; right to residence; and speedy access to justice.

KEY INTERVENTIONS



Research and Advocacy



Capacity Building of Stakeholders



Legal Case Management

LCWRI has produced six reports since 2005, which monitor and evaluate implementation of the PWDVA. It has devised various tools to assess execution in two control states. Under the PWDVA, LCWRI has developed a training manual for protection officers and a manual for judges. Its legal team provides counseling and legal aid to survivors on a need-based basis.

THEORY OF CHANGE

If stakeholders and beneficiaries are made aware of the existing provisions for relief available under the Protection of Women from Domestic Violence Act (PWDVA), and monitoring measures are strengthened to improve its implementation, then an enabling environment can be created in which women can access justice and other support services.

SCALABILITY

The model is designed to ensure that government is ultimately responsible and accountable for effective implementation of the law. LCWRI aims to serve as a resource agency that designs monitoring and training tools that government can adopt. It seeks to build a research database that includes the synopsis of judicial orders and a state-based directory of sector experts. The organization intends to conduct more strategic litigation through PILs, for upholding the rights of victims of violence.

QUALITY INDICATORS

OUTREACH

Between 2009 and 2012, LCWRI's Legal Aid program handled 442 domestic violence cases in Delhi and 531 cases in Mumbai. The organization analyzes the extent of protection against violence for women within the framework of marriage and other domestic relationships in its 6th M&E Report. It summarizes the analysis of nearly 9,500 Magistrate/Sessions Court Orders received over a period of nine months.

ENDORSEMENTS

LCWRI has been associated with various international and multi-national funding organisations, particularly Ford Foundation, MacArthur Foundation, UNIFEM (renamed UN Women) and United Nations Trust Fund to End Violence against Women. Indira Jaising was awarded the Padma Shri for her contribution to public affairs in 2005.

LEADERSHIP

LCWRI was founded by Indira Jaising, who is also the Executive Director. Practising law since the early 1960s, she was the first woman to be appointed as Additional Solicitor General of India, an office she currently holds. She is supported by a team of 10 lawyers engaged in professional and public interest work. Fees from the former subsidize the public interest work.

PARTNERSHIPS

LCWRI has collaborated with national training institutions including National Institute of Public Cooperation and Child Development, National Judicial Academy, National Police Training Institute and agencies such as National Commission for Women and the National Mission for Empowerment of Women. It also partners with various non-profit organizations including CEHAT and ICRW.



- Director: Flavia Agnes • Founded: 1991 • Coverage: Maharashtra
- Total Budget: INR 180 Lakhs (\$300,000) • DV Budget: INR 180 Lakhs (\$300,000)

OVERVIEW

Majlis is based in Mumbai, but operates across the state of Maharashtra. It seeks to create a rights-based culture through practical interventions.

Litigation: The organization helps victims of domestic violence to take their cases to court. Its lawyers represent women in Family, Magistrate, Sessions and High Courts. They advise victims on their legal rights, and seek to secure maintenance, residences, compensation and protection for women who have suffered domestic violence.

Training: Through courses, workshops and lectures, Majlis trains various groups, including members of the judiciary, police, public administrators, social workers, educational institutes and corporate employees that deal with victims of domestic violence. These measures help participants to develop feminist sensibilities and understand feminist rights, enabling them to respond more sympathetically and effectively to victims of domestic violence.

Government Collaboration: Majlis works closely with the Government of Maharashtra to effect fundamental long-term changes in systems and attitudes. The organization collaborates with the Department of Women and Child Development to ensure systematic implementation of the Protection of Women from Domestic Violence Act under its 'MOHIM' program and offers socio-legal support to survivors of sexual abuse through another program named 'RAHAT'.

HIGH IMPACT INTERVENTIONS



Legal Case Management



Capacity Building of Stakeholders



Research and Advocacy

Majlis provides high-quality legal services including litigation, mediation and negotiated settlements. Its training programs and government collaborations prepare different stakeholders to deal with victims more effectively. The organization works closely with educational institutions and engages students to increase their awareness of domestic violence. It campaigns for changes in laws governing women's rights. It has published several books on domestic violence and laws affecting Muslim women.

THEORY OF CHANGE

If women are aware of their rights and can access them, and if all those who deal with victims are properly trained and adequately sensitized, then women will acquire the confidence to fight against violence and live with dignity.

SCALABILITY

Majlis has worked closely with victims of domestic violence for the past 25 years and possesses considerable expertise and understanding of the issues surrounding such crimes, particularly from the victim's perspective. It has held legal rights lectures for educational institutions, conducted para-legal courses for social workers, law implementation training for police, and skill-building training for women's rights litigation, for lawyers. Majlis plans to scale its training through a learning center to build capacities and provide sustained support for all state-appointed stakeholders and non-profit organizations that deal with victims of domestic violence.

QUALITY INDICATORS

OUTREACH

Majlis has successfully represented over 50,000 women litigants throughout Maharashtra. Between 2003 and 2010, it operated the District Lawyer Fellowship Program. Each year 100 lawyers from remote state districts attended an orientation program, from which 15 were selected for a year of training. Currently Majlis is training 600 police officials from 12 zones of Mumbai.

ENDORSEMENTS

Flavia Agnes, the founder of Majlis, was awarded the 11th Annual Kelvinator Gr8! Women Award in 2012. Majlis has featured in various press publications, including The Times of India, Hindustan Times, Indian Express and online news portals such as Tehelka.

LEADERSHIP

Flavia Agnes, the founder of Majlis, is a women's rights lawyer by profession. She has been a pioneer of the women's movement since the 1980s and has worked consistently on issues connected with gender and law reforms. Her autobiography has been translated into several languages. Other books published by Oxford University Press include 'Law & Gender Inequality' and 'Women and Law' (co-editor).

PARTNERSHIPS

Majlis' key partners include the Government of Maharashtra and various community-based organizations. It has signed a Memorandum of Understanding with the government to train, guide, supervise and monitor stakeholders appointed under the Protection of Women from Domestic Violence Act at taluka, district and state levels, to improve the law's effectiveness. Majlis has partnered with several non-profit organizations such as CORO, SNEHA and CEHAT.



- Executive Director: Vanessa D'souza • Founded: 1999 • Coverage: Mumbai
- Total Budget: INR 578 Lakhs (\$963,000) • DV Budget: INR 60 Lakhs (\$100,000)

OVERVIEW

SNEHA was founded by a group of doctors and social workers led by Dr. Armida Fernandez, a neonatologist and former Dean of Sion Hospital. During her tenure at the hospital, Dr. Fernandez developed a perspective on domestic violence and antenatal health issues based on the experiences of underprivileged women. SNEHA's work on domestic violence is conducted through the organization's 'Prevention of Violence against Women & Children' (PVWC) program. Its components are as follows:

Crisis Intervention: SNEHA's crisis intervention centers provide medical care and both immediate and long-term counseling for survivors and their families. SNEHA facilitates interventions at various levels by the police, and the provision of legal services to victims.

Developing Protocols: SNEHA develops protocols and undertakes sensitization of stakeholders who come into direct contact with survivors, to help them advocate effectively for the rights of women. So far, the program has focused on assisting police personnel and public healthcare professionals.

Community Mobilization: SNEHA has established and trained groups of men, women and young people to increase their awareness around the issue of violence and the Protection of Women from Domestic Violence Act (PWDVA), encouraging vigilance and catalysing immediate action in communities.

HIGH IMPACT INTERVENTIONS



Youth Engagement



Research & Advocacy



Counseling Services



Capacity Building of Stakeholders



Community Mobilization



Leverage Existing Infrastructure

SNEHA has established crisis intervention centres at hospitals, providing access, counseling and security for survivors. While developing protocols for stakeholders, the organization focuses on aspects of communication. It trains police personnel and healthcare professionals on how to identify incidents of domestic violence. Through regular workshops and trainings, SNEHA has mobilized the community by establishing volunteer groups to initiate primary counseling and generate awareness of issues concerning sexuality, gender roles and violence.

THEORY OF CHANGE

If women are empowered to demand their right to a life free of violence by negotiating control over their own lives, if families and communities are empowered to prevent and respond to gender-based violence, and existing public systems of health, law enforcement and the judiciary are strengthened, then the well-being of women and children in urban areas can be significantly improved.

SCALABILITY

Acknowledging the increasing role of the community in crisis interventions, SNEHA seeks to further empower it by increasing the number of volunteers from 340 to 745 over the next three years, creating peer-leaders, and replicating the organization's model in other slum establishments in Mumbai. Going forward, SNEHA will leverage government hospital infrastructure to replicate its counseling services. It plans to establish Women Out-Patient Departments (OPD) in three hospitals, staffed by trained personnel.

QUALITY INDICATORS

OUTREACH

In 2012-13, SNEHA support enabled 822 women to receive crisis intervention and counseling, and 198 women to access legal advice. In addition, 480 public healthcare professionals and 354 police officers were given protocol training to deal with survivors of domestic violence. Further, 216 youth volunteers were trained on gender issues, and have been campaigning to make violence an issue of public concern.

ENDORSEMENTS

Recognized as a leading authority in dealing with cases of violence against women, SNEHA was secretary of the Maharashtra chapter of the AMAN Network in 2012-13. The organization's efforts in arguing that domestic violence is a matter of public concern have been featured in 26 media articles in 2012-13. The PVWC program has been funded by leading donors including Sir Dorabji Tata Trust and Ford Foundation.

LEADERSHIP

Dr. Nayreen Daruwalla, Director of the PVWC program holds a Doctorate in Social Psychology. She has 18 years of experience in handling mental health issues, including counseling, crisis intervention, community engagement and training. For the past 22 years, she has worked extensively in areas connected with violence against women and children, both in India and internationally. Currently, she leads a team of 36 members at SNEHA.

PARTNERSHIPS

SNEHA works with the District Legal Services Authority to provide legal aid in support of beneficiaries. Since 2006, the organization has partnered with UNICEF to conduct urban micro-planning of households in Dharavi. During the same period, SNEHA, with its strong research focus, has also worked in partnership with University College, London to study violence against marginalized women.

- Executive Director: Anuradha Kapoor • Founded: 1995 • Coverage: West Bengal
- Total Budget: INR 77 Lakhs (\$128,000) • DV Budget: INR 68 Lakhs (\$113,000)



OVERVIEW

Swayam was founded in 1995 to provide holistic support services to women facing violence in their lives. Through its interventions, the organization focuses on empowerment by adopting a woman-centric approach, which looks beyond a victim's immediate need for support to encourage self-confidence, self-sufficiency and self-reliance. Its interventions combine preventive, ameliorative and reconstructive services; the organization believes that a multi-faceted, holistic approach is key to addressing such a complex issue effectively.

Direct Support Services: Swayam works with women survivors of violence and their families. It provides a portfolio of individual and group services, which may typically include counseling, legal/child/healthcare support, liaising with police, vocational training, a drop-in center, workshops, establishment of support groups, and provision of recreational activities.

Initiatives for Social Action and Change (ISAAC): This program seeks to stimulate widespread social awareness of the problems caused by violence against women, and encourage responses by society to end gender-based violence. This is achieved through community mobilization and outreach, capacity building, networking, training, campaigns, research and publications.

KEY INTERVENTIONS



Through its community outreach program, Swayam conducts workshops and training for stakeholders, including the police, judiciary and young people. Its case workers and lawyers work with survivors to provide legal, social and psychological counseling both in person and by phone. In-person counseling is conducted at the organisation's support center which, together with its drop-in center, provides a safe space for victims, and also a place where most individual group support services such as workshops and support group sessions for survivors can take place.

THEORY OF CHANGE

If women facing violence are empowered and made self-reliant, then they will be able to move forward with confidence and dignity to exercise control over their lives, leading to a just and equitable world, where there is peace, tolerance, cooperation, and equality between men and women.

SCALABILITY

Going forward, the organization plans to broaden the coverage of its community mobilization program in the suburbs of Metiabruz and Diamond Harbour in Kolkata. It seeks to increase interaction with young people through its community outreach programs. Since the organization believes that the health system is the weakest link in the provision of services accessed by survivors, it works closely with the Health Department of the State of West Bengal to train staff and place dedicated personnel at government hospitals.

QUALITY INDICATORS

OUTREACH

Over the past two years, Swayam has served over 1,750 women and their families by providing direct support services, and has reached out to over 57,000 individuals through its community mobilization and ISAAC programs. The organization's strong focus on high quality services has had a major impact on the treatment of survivors of abuse, with over 70% of women benefiting from increased confidence.

ENDORSEMENTS

Swayam's work in Kolkata has been featured by many highly regarded media organizations such as The Guardian, NDTV, The Times of India, The Indian Express, Hindustan Times and The Hindu. Since its inception, the organization has been supported by several major institutions including Ford Foundation, Oak Foundation, Cardinal Leger Foundation, UNIFEM and Global Fund for Children.

LEADERSHIP

Founder and Director, Anuradha Kapoor has over twenty years of experience working on issues related to gender-based violence. She is an Ashoka and Eisenhower Fellow and a regular speaker at workshops and seminars held in India and worldwide. She leads a team of 23 full time staff, many of whom have worked with Swayam for over ten years and possess strong backgrounds in working on women's issues.

PARTNERSHIPS

Swayam initiated AMAN: Global Voices for Peace in the Home, an international network of organizations involved in combating domestic violence. It is also an active member of various other networks such as Maitree, SANGAT (South Asian Network for Gender Activists and Trainers), Bhavna and Muslim Women's Rights Network. In 2006, Swayam organized the National Conference on Autonomous Women's Movements in Kolkata.

- Director: Trupti Panchal • Founded: 2008 • Coverage: Pan India
- Total Budget: INR 86 Lakhs (\$143,000) • DV Budget: INR 70 lakhs (\$116,000)



OVERVIEW

The Resource Center for Interventions on Violence Against Women (RCI-VAW) nurtures effective interventions by stakeholders concerning violence against women. It does this through training and research to enable a deeper understanding of the problem and of the means to address it. In 1984, Tata Institute of Social Sciences (TISS), in collaboration with the Maharashtra state police, established the **Special Cell for Women** to provide socio-legal services to women facing violence. The experience of engaging with survivors in this forum led TISS to realize the need for a dedicated resource center to tackle the issue of violence against women, particularly by focusing on strengthening the Special Cells. As a result, RCI-VAW was founded in 2008. For the past 30 years, Special Cells have provided a wide range of legal and welfare services to innumerable women, served as a training site for young social work students, and demonstrated that a strategic alliance with the police can significantly improve the quality of support available to women. Since 2005, Special Cells have been working under the Department of Home Ministry, and Department of Women and Child Development of the State of Maharashtra, and have been replicated in many districts within the state. As of 2014, 144 Special Cells have been sanctioned to operate throughout Maharashtra. Due to its success in Maharashtra, Special Cells have been established in other states such as Gujarat, Rajasthan, Delhi, Odisha, Andhra Pradesh and Haryana.

KEY INTERVENTIONS



RCI-VAW consists of experienced past or present practitioner members of Special Cells in Maharashtra, who help institutionalize similar facilities in other states. As a resource center, the RCI-VAW trains new social workers, helps develop context specific strategies, and evaluates the work of new cells. It also leverages its relationships with state authorities to conduct research on issues concerning gender-based violence.

THEORY OF CHANGE

If survivors of domestic violence are provided with support and social services through the development of a strategic alliance with the police to ensure a more co-ordinated, coherent and thorough response to violence, then women will enjoy equal rights and a life free from violence.

SCALABILITY

RCI-VAW has effectively developed the efficacy of its Special Cell model in Maharashtra; as a result the government has authorized the establishment of 144 such facilities across the state. Through the quality of its work and its ability to leverage relationships with several government institutions, RCI-VAW has successfully advocated the adoption of Special Cells in Haryana, Gujarat, Rajasthan and three other states. TISS plans to scale the Special Cells to more states and increase the number of cells in existing states.

QUALITY INDICATORS

OUTREACH

In 2012, TISS maintained 34 operational Special Cells in Maharashtra, which reported a cumulative total of 28,919 cases. The program has supported over 50,000 women through one time interventions. In 2013, the government approved the opening of 144 cells in Maharashtra and to increase the number of cells in six other states. Each cell receives an average of 250 complaints from women annually.

ENDORSEMENTS

RCI-VAW has worked with the Government of India, the Department of Home Ministry, and Department of Women and Child Development in states such as Haryana, Maharashtra, Gujarat and Delhi to open Special Cells. The organization has received funding from donors such as OXFAM and UNDP. In Haryana, Special Cell workers are legally empowered as protection and prohibition officers to ensure the effective implementation of the law against domestic violence.

LEADERSHIP

Project Director, Trupti Panchal is Assistant Professor at the Center for Equity for Women, Children & Families (CEWCF), School of Social Work. She has over twenty years of experience working on issues connected with domestic violence. Anjali Dave, Associate Professor at CEWCF, one of the first cell workers and ex-Project Director, is Advisor to RCI-VAW. They are supported by nine team members at RCI-VAW and 28 Cell workers and co-ordinators.

PARTNERSHIPS

RCI-VAW has worked with the Government of India, UN Women and UNDP to demonstrate and replicate Special Cells on a pilot basis in select districts of Madhya Pradesh and Haryana. The organization also works with the Department of Women and Child Development in various states. Additionally, it provides and monitors training of members of Special Cells run by partner non-profit organizations.



- President: Corinne Kumar • Founded: 1979 • Coverage: Karnataka
- Total Budget: 116 Lakhs (\$193,000) • DV Budget: INR 116 Lakhs (\$193,000)

OVERVIEW

Vimochana, meaning “liberation”, was founded in 1979 by employees of the Centre for Informal Education and Development Studies (CIEDS Collective). Vimochana was inspired by an intense need for a public forum that supported organized resistance to increasing violence against women and was assertive in challenging widespread apathy to problems faced by women in the context of larger structures of violence and power.

Direct Support: Vimochana works individually and collectively with victims of violence, by providing moral and legal assistance, counseling, healthcare, vocational training and follow-up assistance in dealing with the police. It seeks a universal commitment to reject violence within the home and society.

Campaign and Advocacy: Vimochana networks at all levels through focused public campaigns, including the ‘Movement to Defend a Woman’s Right’ and global campaigns such as ‘Women in Black’ and ‘Courts of Women’. The organization seeks to promote non-violent forms of conflict resolution, while drawing public and state attention to specific issues that require definitive changes in policy.

Trainings and Workshops: The organization also provides gender training to the police, government authorities and other activist groups.

KEY INTERVENTIONS



Vimochana’s own crisis intervention center and shelter home, and the team’s representation at the Victoria Hospital Burns Ward, have enabled it to develop an integrated and holistic approach to counseling and crisis intervention. By hosting group meetings, resolving problems through structures (e.g. jamaats), holding creative workshops with media groups, and conducting other forms of intervention, it seeks to mobilize the collective conscience of the community to oppose violence against women.

THEORY OF CHANGE

If we adopt and develop a multi-layered approach, including crisis intervention, campaigns, community-based initiatives, and create space for alternative concepts of justice and redressal, then we will be successful in eradicating violence against women.

SCALABILITY

The organization plans to scale-up and deepen current initiatives to reach out to more victims of violence. Such measures will include direct support services, such as crisis intervention centers, community mobilization and crafting alternative forms of women-centered dispute resolution methods, such as out-of-court settlements. Also, it will help promote a number of social forums (e.g. Courts of Women) in which women can obtain justice.

QUALITY INDICATORS

OUTREACH

Vimochana has provided counseling, legal support, shelter and healthcare facilities to over 2000 women in 2012-13. Of these, over 600 received help through individual counseling, around 800 at the Victoria Hospital Burns Ward, and others through urban communities. Further, the team has reached out to several thousand people through public programs including workshops and training.

LEADERSHIP

Vimochana is a member of a larger collective, The Society for Informal Education and Development Studies (SIEDS). Vimochana has a team of 36 full-time members led by Corrine Kumar, its President. All team members are highly experienced, with a majority having worked with Vimochana for more than twenty years. A large share of the team consists of counselors and community activists.

ENDORSEMENTS

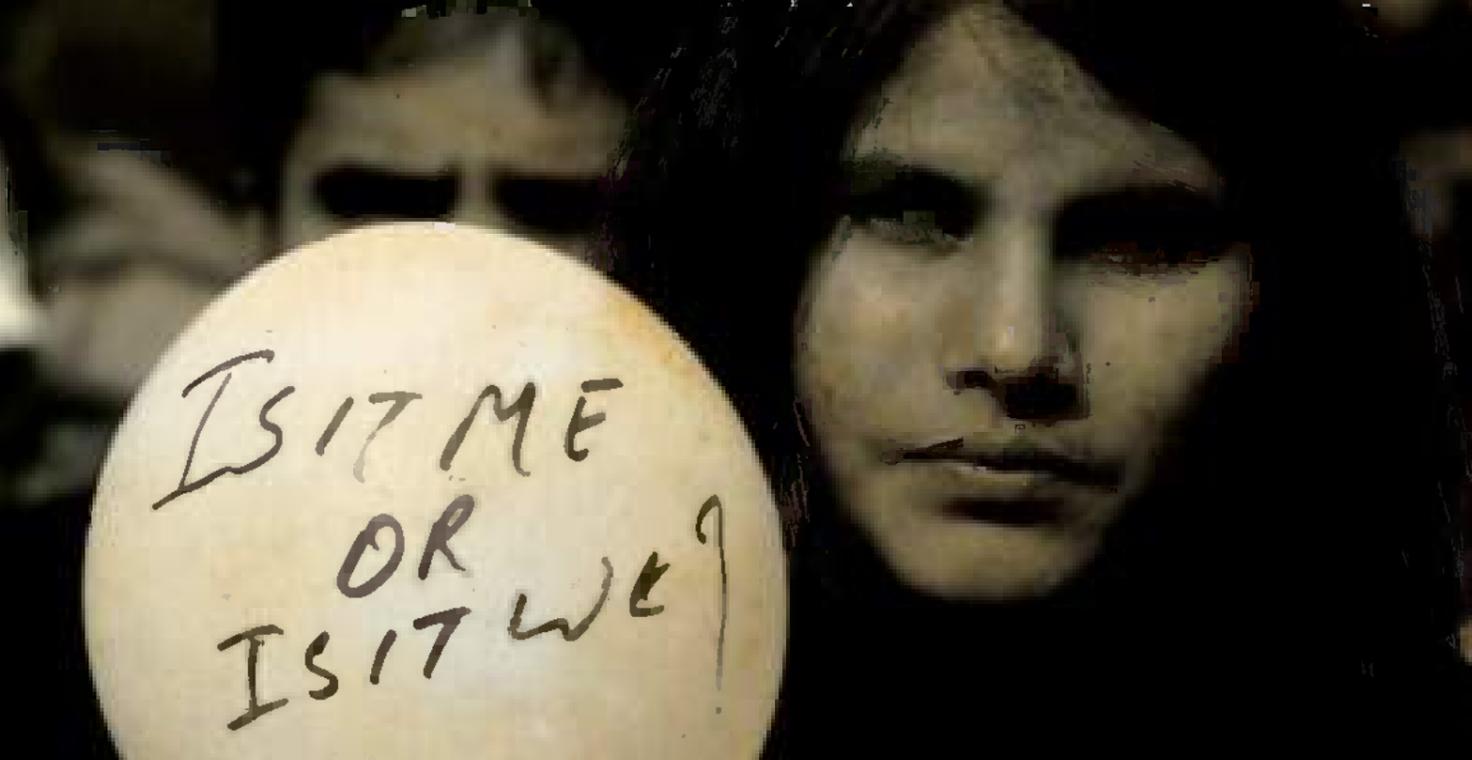
Vimochana has been funded by several leading organizations including Bread for the World, Global Fund for Women and UN Women. The team has also collaborated with over 100 organizations and individuals worldwide such as Indian Social Institute, Australian National Commission of Refugee Women, and CREA- for the India Court of Women on Dowry and Related Forms of Violence.

PARTNERSHIPS

Vimochana has strong relationships with the government. It is a member of various government bodies including The Sexual Harassment Committee of Karnataka, and has received funding from the Central Ministry of Health and Family Welfare for various projects. It is also an active member of networks such as AMAN, Muslim Women’s Rights Network, Asian Women’s Human Rights Council and India Social Forum.



Photo credit: www.childfundalliance.org



Recommendations and Conclusion

Domestic violence is not just a violation of an individual woman's basic human right to life, liberty, and freedom from violence. While the human rights angle to this issue is undeniably important, it is crucial to wake up to the fact that domestic violence is a public health epidemic that directly impedes both the social and economic development of a country.

Because the normalization of this form of violence is steeped in longstanding patriarchal structures and gender roles, an effective solution requires a concerted and coordinated response on many levels. Everyone has a role to play - be it the government, development agencies, non-profits, corporates, media, research institutions or donors. Let us start NOW to save India's children from inevitably becoming tomorrow's victims.

The recommendations contained in this section reinforce ideas and suggestions included in preceding chapters and provide a framework to build the capacity of the eco system aimed at tackling domestic violence in India.

Recommendations for building a sustainable eco system for the issue of domestic violence

Promoting partnerships and networks to deliver a comprehensive response

No single stakeholder can combat domestic violence alone. Instead, many must work together to eradicate its scourge. While the government has a key role to play, PWDVA agencies including protection officers, the police, judiciary, and healthcare and other service providers must work together to ensure their actions are effective. There are also enormous opportunities for other stakeholders such as corporates, media, academia and research institutions to supplement the substantial efforts of development agencies and non-profit organizations to date. Such groups may contribute their unique resources and expertise through innovative forms of support for those dealing with domestic violence, including hard-hitting marketing campaigns, technology solutions, and knowledge creation and sharing. Effective networking and partnerships amongst all those involved will also enable synchronized objectives to be set, roles to be defined, and responsibilities allocated. This will also support the efficient use of resources, and complement efforts to provide a comprehensive and timely response.

Undertaking advocacy to intensify political support and resources

Over the years, international development agencies and non-profit organizations concerned with the issue of domestic violence have relentlessly advocated strong, customized laws to appropriately address this complex medico-legal and social issue. While the resulting legislation (PWDVA) itself is well-drafted, continued campaigning is necessary to enhance political commitment, and increase budgetary and human resources, to ensure that the vast scale of the problem can be adequately addressed.

"It is time for all of us to assume our responsibility to go beyond condemning this behavior, to taking concrete steps to end it, to make it sociably unacceptable, to recognize it is not cultural, it is criminal."

– Secretary of State, Hillary Clinton

Integrating the domestic violence agenda with other development sectors

Efforts to address domestic violence must be integrated with those of other development sectors such as education, employment, and the empowerment of women. For example, establishing relationships with those working in education to ensure that school curricula include gender sensitive modules and that teachers are trained to model such behaviour will, in time, decrease violence against women, including domestic abuse. Similarly, connecting with systems that seek to empower women by improving opportunities for livelihoods or those that provide leadership training will help reduce their innate vulnerability to such violence, ensuring robust outcomes and promoting lasting change.

Recommendations for proficient programing and service delivery

Leveraging innovative and successful models

During the past few years, several highly innovative models have been developed, including special cells in police stations and crisis intervention centers in hospitals. All have helped to provide ameliorative support to victims. Similarly, gender equality programs integrated into school curricula have promoted gender neutral behaviour during pupils' formative years, when negative attitudes and anti-social behaviour can be effectively challenged. Both state and non-state organizations must now work hard to leverage their resources to build on these successes and encourage others to follow in their footsteps. They can do so by sharing information on the nature of these models and how they work with relevant local authorities and agencies, and by helping them build their capacities to replicate these models effectively in their respective geographical areas of operation.

Monitoring and evaluation to identify evidence-based approaches

Many non-profits implementing measures to combat domestic violence have not integrated rigorous monitoring and evaluation mechanisms within their programs, due to a lack of financial and human resources. Regular in-house monitoring of programs including their periodic evaluation by a credible independent consultant helps measure the extent to which an organization's objectives are being met and provides information to improve their effectiveness. Such evaluations will also be immensely useful to identify the most cost effective and / or most scalable, high-impact interventions – thereby informing policy, as also enhancing visibility for the sector and attracting new and major funders.

Conclusion

Domestic violence is a human rights abuse that covertly denies millions of women and children their basic rights to liberty and civilized existence. Silently, yet significantly, it impedes both social and economic development, generation after generation. This situation demands the urgent attention of policy makers, donors and society at large. The sheer scale of the issue calls for a strong thrust from each and every individual to recognize their ability to play a role, big or small, in confronting, preventing and ultimately eradicating domestic violence. The generosity and commitment of donors can contribute substantially to supporting and scaling suitably identified and screened non-profit organizations working to prevent and / or ameliorate the effects of domestic violence. Dasra recommends that strategic donors prioritize this subject and play their part by providing catalytic support to this area.

Appendix I

IDAs and private foundations involved in tackling domestic violence

UN Women

UN Women has played a key role in championing the cause of domestic violence by working with governments to help them adopt and enact laws consistent with international standards.⁹⁹ It also finances non-profit organizations working in this area, and was a major funder of the award winning *Bell Bajao* campaign delivered through the **Breakthrough Trust** which urged 130 million men and boys to take a stand against domestic violence (discussed in more detail in Chapter IV).

The Ford Foundation

The Ford Foundation provides resources through its focus on *Protecting Women's Rights*, directing \$5 million in global funding into the field in 2013. It played a pivotal role in enabling the creation and passage of the PWDVA by providing start-up funding to **Lawyers Collective**, a non-profit organization with a mandate to provide legal aid to survivors of domestic violence, sexual harassment and sexual assault.¹⁰⁰ Lawyers Collective identified the need for a civil law on domestic violence, drafted the bill in 1999, and held several consultations and lobbied with various groups for its passage until 2005. Recognizing the important role of the public health system in responding to women victims of violence, the Ford Foundation is a major funder of the pioneering public-private partnership, the **Dilaasa** center (discussed in more detail in Chapter IV).

The Asia Foundation

A more recent supporter is Asia Foundation, a private foundation whose focus on domestic violence started in 2010. It has supported initiatives to evaluate and strengthen implementation of the PWDVA, as well as policy advocacy and prevention measures. The Asia Foundation provides funds to non-profit organizations, which seek to increase the capacity of government protection officers, police, service providers, civil society representatives, family welfare workers, and self-help group members in Haryana, Meghalaya, and Uttar Pradesh. Its partners on the ground include organizations such as **CREA**, **Breakthrough Trust**, **North East Network (NEN)**, **Centre for Social Research (CSR)**, **Dalit Foundation**, and **Institute of Social Studies Trust**.

The Oak Foundation

Another significant funder to the domestic violence sector in India is the Geneva-based Oak Foundation. Between 2008 and 2010, its *Issues Affecting Women* program provided approximately \$ 500,000 in grants to non-profit organizations working to combat violence against women. The Oak Foundation is committed to addressing the root causes of intra-familial violence by investing in initiatives that create awareness among women and girls of their rights, promote a "positive masculinities" approach, and offer services to violent and abusive men who want to change their behavior.

Oxfam India

Through its *Gender Justice* campaign, Oxfam India has addressed the issue of violence against women in 13 Indian states through various programs and campaigns, such as the *We Can* campaign which reached out to more than 2.5 million women and 1.4 million men since its launch in 2004.¹⁰¹ As well as running campaigns, Oxfam India works with state governments, advocating better implementation of the PWDVA. It also provides legal and emotional support services to women affected by violence, through its partner civil society organizations working on the ground. In the past year Oxfam has worked with 33 partners in 13 states, directly reaching over 450,000 women and approximately 500,000 men.¹⁰²

Appendix II

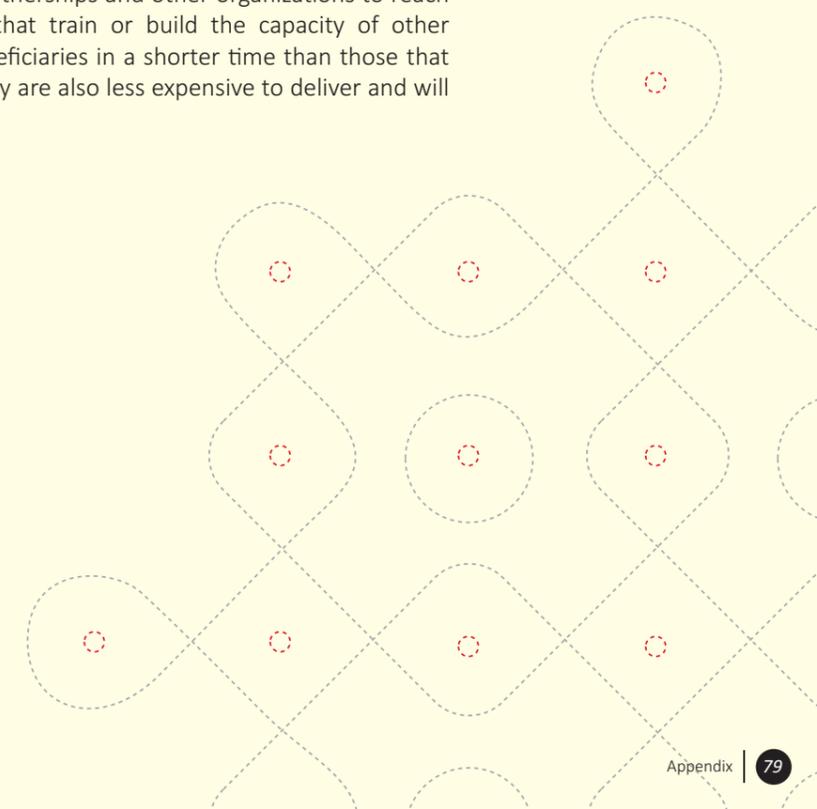
Criteria used to define 'impact' and 'scale'

Defining impact

- **Proximity to end beneficiary:** Measures that involve direct contact with a victim, such as legal case management, more deeply impact individuals than indirect activities, such as facilitating networks.
- **Duration of engagement:** Interventions that involve engagement with beneficiaries over a longer period may potentially have a greater impact on their lives and situations than a one-off short-term engagement.
- **Evidence for effectiveness:** Interventions may be effective on paper, but the ground reality may be quite different. For example, the availability of a good shelter home can ideally have a major impact on the ability of a domestic violence victim to leave her household and seek respite. However, at present, there are virtually no shelter homes that accept women with children or provide a supportive environment for a victim who may have suffered severe physical and mental trauma. Such an intervention is therefore rated lower on impact.
- **Ability to empower the end beneficiary:** Interventions which empower the victim can bring about more lasting impact on end beneficiaries.

Defining scale

- **The evident availability of required resources:** This would include human and financial resources. For example, the need for skilled medical practitioners to provide a service in urban slums may be a factor limiting an increase in scale. On the other hand, relatively few resources are required to train community members to deliver a service, inherently making it a more scalable intervention.
- **Gestation period:** This refers to the time required to realize impact once a program has started. For example, it takes longer for evidence-based advocacy to provide benefits to the victim (owing to the need for gathering data, analyzing information, advocating for change by the government, securing acceptance of change and implementing legislation) than, for example, a powerful and well-distributed public awareness campaign. Consequently, advocacy is deemed less scalable.
- **Partnerships leveraged:** This refers to the use of partnerships and other organizations to reach out to more people. For example, interventions that train or build the capacity of other organizations have the potential to affect more beneficiaries in a shorter time than those that implement the program in communities directly. They are also less expensive to deliver and will therefore qualify as more scalable.



Appendix III

Non-profit mapping methodology

Dasra's non-profit mapping included site visits to witness programs on the ground and interact with beneficiaries, in-depth personal interviews with managers of non-profit organizations, phone interviews and desk research.

The operational diligence process was as follows:

Initial Mapping: The mapping process first collated a comprehensive list of non-profit organizations working within the sector. This list was compiled through internet research, interviews with participants in Dasra Social Impact (Dasra's Executive Education Program) and referrals from sector experts. Initial mapping yielded a list of over 110 non-profit organizations throughout India.

On-Call Interviews: The second stage involved identifying those non-profit organizations that allocate significant resources to an anti-domestic violence program. A total of 47 were selected for on-call interviews. Information for this stage was gathered from telephonic interviews with the heads or program heads of these organizations. The interviews discussed:

- Proportion of total non-profit budget allocated to tackling domestic violence
- Outreach of the anti-domestic violence program since its inception and over the previous year (2012–13)
- Extent of diversification by program area
- Organizational and anti-domestic violence program team size

Additional information gathered included the years in which the non-profit organization and anti-domestic violence program were established, the organization's theory of change, its geographical coverage, operational model, and interventions implemented. Based on the information provided, Dasra selected 17 non-profit organizations to visit.

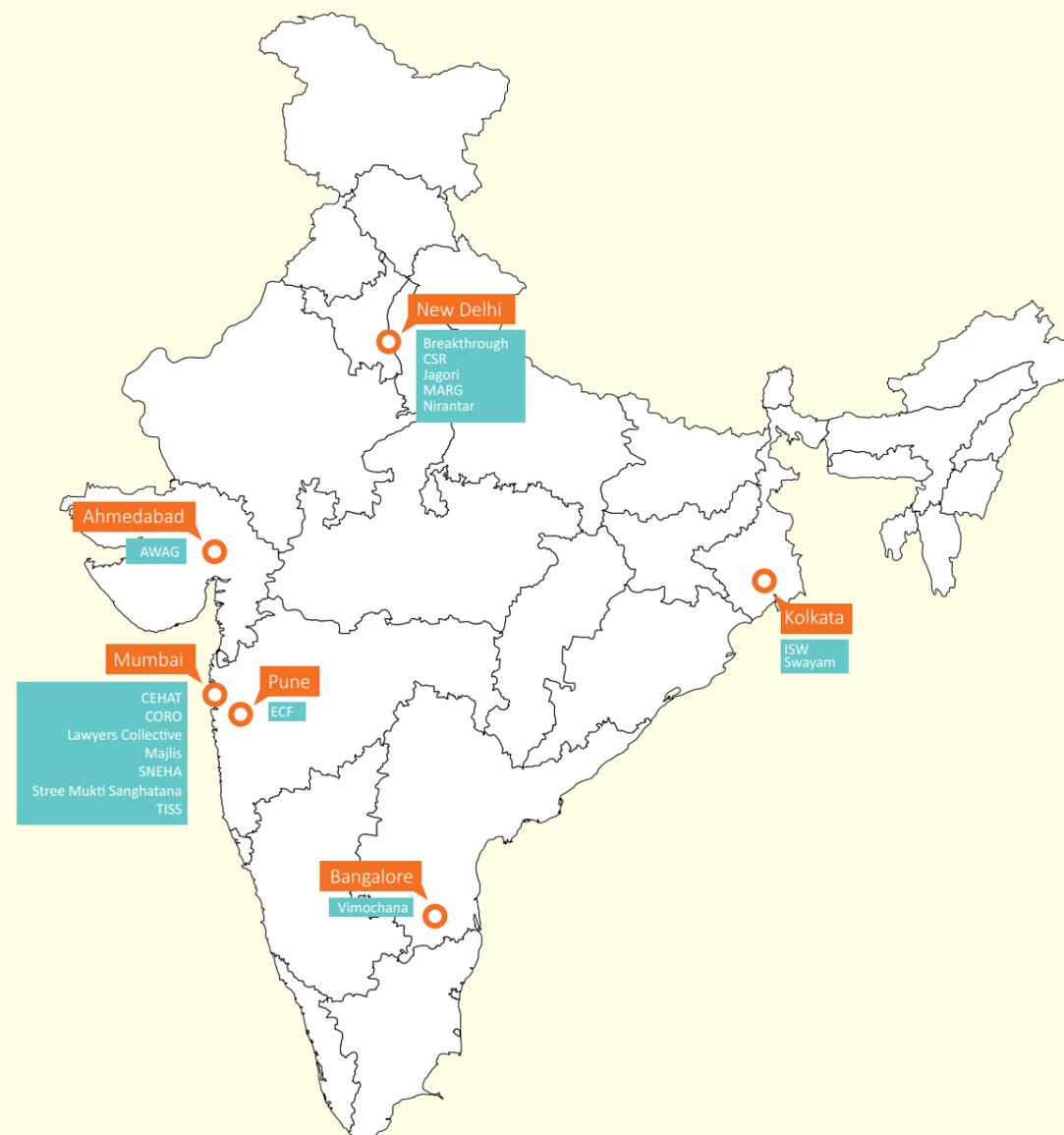
Site Visits: The third stage of mapping consisted of meetings with managers and field staff of the non-profit organization, seeing first-hand its operational model, and understanding how effectively its theory of change was being translated into impact on the ground. Dasra spent 2-3 days with each non-profit organization acquiring detailed information about the organization in general and its anti-domestic violence program in particular, including the evolution of the program, its model, management structure, program financials, outreach and outcomes achieved. This stage was used to identify those non-profit organizations that would be highlighted in this report and recommended for funding. The criteria used to shortlist were as follows:

- Program structure and documentation
- Management team
- Growth over the previous three years (2011, 2012, 2013)
- Future scaling plans
- Proven outcomes/impact
- Current partnerships (government, academia, international NGOs, other non-profit organizations)
- External endorsements (historical and current funders, prestigious awards)

Based on the evaluation of these criteria, Dasra has identified and profiled 13 established non-profit organizations (see Chapter VI) implementing high impact anti-domestic violence programs in India.

The following map shows the geographical distribution of the 17 anti-domestic violence non-profit organizations visited by Dasra.

Geographical Location



Workshop: As part of its research, Dasra invited all organizations visited to participate in a capacity building workshop. This was attended by 19 participants from 14 non-profit organizations. Using a curriculum and a facilitation methodology from Dasra's globally recognized Dasra Social Impact Executive Education program, the workshop helped to strengthen these organizations' strategic thinking, their impact assessment methodology and operational planning and communications with donors and stakeholders. The workshop also provided an opportunity for Dasra to present its research findings and framework to the leading non-profit experts in the anti-domestic violence sector. Their input has been included in this report.

Appendix IV

Acknowledgements

Dasra would like to extend its sincere thanks to all the individuals, academics, experts, government officials and non-profit organizations that have made invaluable contributions to its research and this report. In particular, Dasra would like to thank:

Individuals

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Falvia Agnes	Majlis
Jacinta Saldanha	Majlis
Julie Thekkudan	OXFAM
Krati Prakash	Breakthrough
Madhu Bhushan	Vimochana
Mandakini Devasher Surie	Asia Foundation
Manjula Sunil	Breakthrough
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Nayreen Daruwalla	Society for Nutrition, Education and Health Action (SNEHA)
Pallavi Palav	Committee of Resource Organizations for Literacy (CORO)
Pooja Badrinath	CREA
Pranita Achyut	ICRW
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Dr. Ranjana Kumari	Centre for Social Research
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Shobha Kokitkar	Stree Mukti Sanghatana
Sonali Khan	Breakthrough
Sujata Lawande	Committee of Resource Organizations for Literacy (CORO)
Suman Nalva	Delhi Police
Suneeta Dhar	Jagori
Suraj Pawar	Samayak
Trupti Panchal	TISS (Resource Centre for Violence Against Women)
Vanita Mukherjee	Ford Foundation
Winnie Singh	Maitri

Non-profit Organizations

Ahmedabad Women's Action Group (AWAG)	www.awagindia.org
Breakthrough	www.breakthrough.tv
Centre for Enquiry into Health and Allied Themes (CEHAT)	www.cehat.org
Centre for Social Research (CSR)	www.csrindia.org
Committee of Resource Organizations for Literacy (CORO)	www.coroindia.org
Equal Community Foundation	www.ecf.org.in
Institute of Social Work	www.iswindia.org
Jagori	www.jagori.org
Lawyers Collective Women's Rights Initiative	www.lawyerscollective.org
Majlis	www.majlislaw.com
Marg	www.ngo-marg.org
Nirantar	www.nirantar.net
Society for Nutrition, Education and Health Action (SNEHA)	www.snehamumbai.org
Stree Mukti Sanghatana	www.streemuktisanghatana.org
Swayam	www.swayam.info
Tata Institute of Social Sciences (TISS)	www.tiss.edu
Vimochana	www.vimochana.in

Organization Database

Non-profit Organizations - Initial mapping

Action India	
Adithi	www.adithi.in
Akshara	www.aksharacentre.org
All India Women's Conference	www.aiwc.org.in
Amcha Ghar	www.amchaghar.org
Anchal Gramin Vikas	
Angaja Foundation	
Ankuram	www.ankuram.org.in
Anweshi	www.anweshi.org
Apnalaya	www.apnalaya.org
Apne Aap Women's Collective	www.apneaap.org
Arpan	www.arpan.org.in
Asmita	www.asmitacollective.in
Association for Advocacy and Legal Initiatives (AALI)	
Astitva	www.ngoastitva.in
Avinav Niketan	
Ahmedabad Women's Action Group (AWAG)	www.awagindia.org
Backward Area Women's Welfare Society	
Breakthrough	www.breakthrough.tv
Care India	www.careindia.org
Catholic Relief Services	www.crs.org/countries/india
Centre for Enquiry into Health and Allied Themes (CEHAT)	www.cehat.org
Centre for Health and Social Justice	www.chsj.org
Centre for Social Research (CSR)	www.csrindia.org

Committee for Resource Organizations for Literacy (CORO)	www.coroindia.org
CREA	www.web.creaworld.org
Deepa Devi Manav Kalyan Sansthan	
Delhi Brotherhood Society	www.delhibrotherhoodsociety.weebly.com
Delhi Mahila Kalyan Samiti	
Equal Community Foundation (ECF)	www.ecf.org.in
Fedina Vikasa	
Human Rights Law Network	www.hrln.org
Humsafar	www.humsafar.org
ICRW	www.icrw.org
INCLIN Trust India	www.inclen.org
Indian Social Security	www.indiansocialsecurity.org
Institute of Social Work	www.iswindia.org
International Foundation for Crime Prevention and Victim Care	www.pcvconline.org
Jagori	www.jagori.org
JWP Joint Women's Programme	www.jwpindia.org/actionagainstviolence
Kajila Janakalyan Society	www.kjksindia.org
Khazani Women's Polytechnic	www.khazaniwomenpolytechnic.com
Lawyers Collective	www.lawyerscollective.org
Lok Panchayat	www.lokpanchayat.com
Mahila Dakshata Samiti	
Mahila Mandal INDL Cooperative Society Ltd.	
Mahila Margadarshi	www.mahilamargadarshi.org
Maitri	www.maitriindia.org
Majlis	www.majlisbombay.org
Mamta	www.mamta-himc.org
Manushi	www.manushi.in
Marg	www.ngo-marg.org
Masoom	www.masoomeducation.org
Men Against Violence and Abuse	www.mavaindia.org
Mithra Foundation	www.maitrifoundation.com
Nari Raksha Samiti	www.narirakshasamiti.com
Nari Sewa Samiti	
Nari Uddug Kendra	www.nuk-bd.org
Navjyoti	www.navjyoti.org.in
Nirantar	www.nirantar.net
Nirmala Niketan	
Northeast Network	www.northeastnetwork.org
Oasis India	www.oasisindia.org
Olakh	
Path India	
Point of View	www.pointofview.org
Population Council	www.popcouncil.org
Poster Women	www.posterwomen.org
Pragatisheel Mahila Manch	

Pratidhi (collaborative project between the Delhi Police and the Association for Development)	www.pratidhi.org
Prayatan	
Recovering and Healing from Incest (RAHI)	www.rahifoundation.org
RUWA	www.uniraj.ac.in
Sachetna	
Sahaara	www.sahaarasociety.org
Sakshi	www.sakshingo.org
Sama (Resource group for Women and Health)	www.samawomenshealth.org
Samajik Sansthan	
Samvada	www.samvada.net
Samyak	www.samyakindia.org
Sangat	www.sangatsouthasia.org
Sanjeevani	www.sanjeevaningo.org
Sanjeevani Voluntary Organization	
Sehat	www.sehatngo.in
Sewa Bharat (All India Federation of Self Employed Women's Assn.)	www.sewabharat.org
Shakti Shalini	www.shaktishalini.org
Shakti Vahini	www.nagaland.ngosindia.com
Shri Chetna	
SNEHA	www.snehamumbai.org
Socio-Legal Aid Research and Training Center (SLARTC)	www.slartc.org
SOSRAC- SCR/TV (Shubhodaya Centre for Rehabilitation of Victims of Torture and Violence)	www.sosrac.org/Subhodaya
SPECTRA	
Stree Adhaar Kendra	www.streeadharkendra.org
Stree Mukhti Sanghatna	www.streemuktisanghatana.org
Streebal	www.streebal.com
Suraksha	
Swadhar	www.swadharpune.org
Swayam	www.swayam.info
Tanaangana	
Tarshi Helpline	www.tarshi.net
Tata Institute of Social Sciences (TISS)	www.tiss.edu
The Foundation	www.thefoundation.in
The Law Research Institute	
Trimurti Sanghalaya	
Vacha	www.vacha.org.in
Vatsalya Trust	www.vatsalyatrust.com
Vimochana	www.vimochana.in
We the People Trust	www.wethepeoplengo.com
Women's Development Programme	
Women's Emancipation and Development Trust	www.wedtrustindia.org
Women's Rights Committee Against Atrocity	
YWCA	www.ywcaindia.org

Appendix V

Acronyms

ASHA	Accredited Social Health Activist
AWAG	Ahmedabad Women's Action Group
CAADV	Corporate Alliance against Domestic Violence
CEDAW	Convention to Eliminate All Forms of Discrimination against Women
CEHAT	Centre for Enquiry into Health and Allied Themes
CIA	Central Intelligence Agency
CORO	Committee of Resource Organizations for Literacy
CSR	Centre for Social Research
CSS	Centrally Sponsored Scheme
DIR	Domestic Incident Report
DV	Domestic Violence
ECF	Equal Community Foundation
GBV	Gender Based Violence
GEMS	Gender Equality Movement in Schools
ICRW	International Centre for Research on Women
IDA	International Development Agency
IMAGE	Intervention with Microfinance for AIDS and Gender Equity
IPC	Indian Penal Code
IT	Information Technology
MAVA	Men Against Violence and Abuse
MWCD	Ministry of Women and Child Development
NEN	North-east Network
NFHS	National Family Health Survey
NGO	Non-governmental Organization
OAS	Organization of American States
PWDVA	Protection of Women against Domestic Violence Act
RCI-VAW	Resource Centre for Interventions on Violence Against Women
SHG	Self-help Group
SNEHA	Society for Nutrition, Education and Health Action
TISS	Tata Institute of Social Sciences
UK	United Kingdom
UN	United Nations
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VAW	Violence against Women
WHO	World Health Organization
WPC	Women Power Connect

Appendix VI

Glossary

Accredited Social Health Activists (ASHAs) are community health workers instituted by the Government of India's Ministry of Health and Family Welfare as part of the National Rural Health Mission.

Capacity building is the process of equipping individuals, groups, and communities with the skills and competencies needed to take on new roles, or to improve their existing abilities. The term 'capacity-building' is often used when discussing international development as many international organizations often facilitate capacity-building as part of their programming with local NGOs and beneficiaries.

Dowry constitutes an ancient custom in India and refers to the payment, either in cash or kind made by the bride's family to the bridegroom's family at the time of marriage. This payment typically includes items such as cash, jewelry, electrical appliances, furniture, bedding, crockery, utensils and other household items that help the newlywed set up her home. The dowry system is thought to put great financial burden on the bride's family and has been prohibited under the 1961 Dowry Prohibition Act in Indian civil law and subsequently by Sections 304B and 498A of the Indian Penal Code (IPC).

Gram Panchayat is a local self-government at the village or small town level in India

Panchayati Raj is a decentralized form of governance where each village is responsible for its own affairs, as the foundation of India's political system. It is the oldest system of local government in the Indian subcontinent.

The **Swadhar Scheme** addresses the specific vulnerability of each group of women in difficult circumstances through a home-based holistic and integrated approach.

Appendix VII

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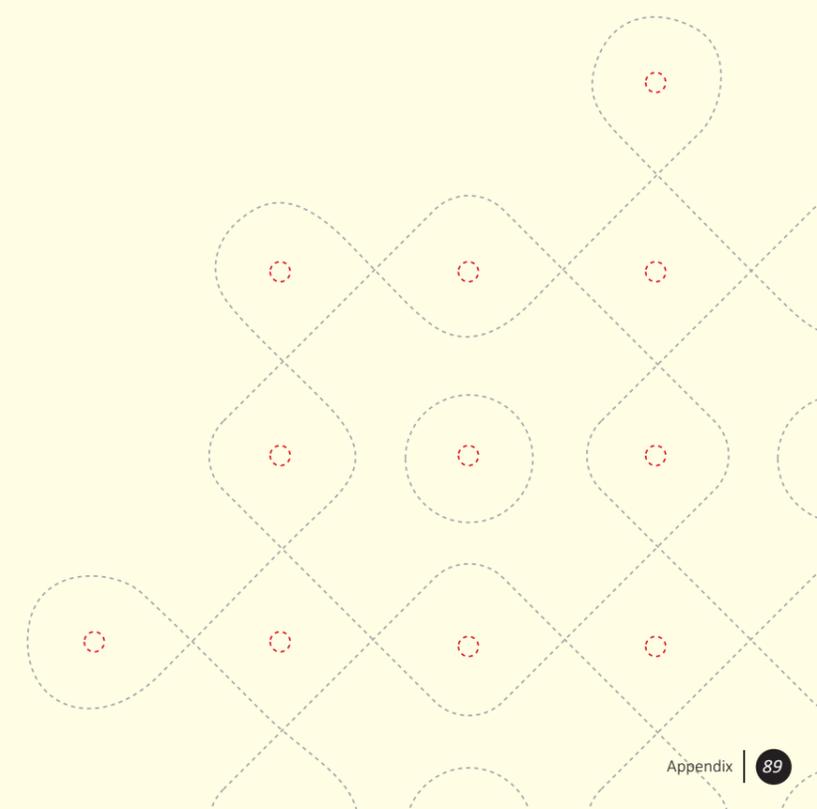
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