Beyond the Roof

An action-research study on women survivors of violence and shelter homes in Delhi

Action India, Jagori and Nazariya
Beyond the Roof.
Rights, Justice and Dignity
An action-research study on women survivors of violence and shelter homes in Delhi

Action India, Jagori and Nazariya
On behalf of Lam-lynti Chittara Neralu
a national network for shelter homes in India

Supported by Visthar Trust
ABOUT LAM-LYNTI CHITTARA NERALU

Shelter homes for female survivors of violence have long been a tangential, if not missing, piece in the conversations among the human rights, feminist and women’s rights groups and movement. This recognition by several women’s rights activists and LGBTQ groups, feminist collectives and NGOs from across the country led to two national-level consultations in 2016. The first one in March 2016 was hosted by Vimochana (Bangalore) and the second took place during October in Delhi, courtesy of Jagori, AALI, SWATI and Action India. Groups from different parts of the country shared their experiences of running shelter homes, offering referrals to shelter homes and/or support services to survivors; they talked about conditions for and concerns of staff members of shelter homes, undertaking small studies on shelter homes, counselling and so on. These conversations, wide-ranging observations and experiences were consolidated in the various Time for Overhauls report.¹

These vigorous conversations led to the genesis of an informal, national network of shelter homes called Lam-lynti Chittara Neralu (LCN). This name means “to lead the way under the vista of stars” and derives from three Indian languages. In Khasi, Lam-lynti means to “lead the way”. Chittara is a Telugu word that means “star”, and Neralu in Kannada refers to “shelter”. This assortment of languages reflects the diversities and collaborations across regions and states represented in LCN.

One of the outcomes of LCN was to help leverage the options that shelter homes could offer to survivors and work in solidarity with shelter home staff and survivors to reconceive shelters as open, positive spaces that offer care within a rights-based support system for women and girls.

It became obvious to members of LCN that to take the issue forward, the network needed to address the huge gap on data and evidence via research. This led to the undertaking of research among survivors of violence and their experiences.

Eight women’s and LBT rights organizations from five states—Action India, Jagori and Nazariya from Delhi, North East Network from Assam and Meghalaya, Vimochana, Visthar and Sangama from Karnataka and Ekta from Tamil Nadu—undertook to conduct a collaborative action research study in their respective states.

This report is a result of the action research conducted in Delhi between April and November 2018.

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<td>--------------</td>
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<td></td>
</tr>
<tr>
<td>AAA</td>
<td>Ashray Adhikar Abhiyan</td>
<td></td>
</tr>
<tr>
<td>DD</td>
<td>Daily diary</td>
<td></td>
</tr>
<tr>
<td>DLSA</td>
<td>Delhi Legal Services Authority</td>
<td></td>
</tr>
<tr>
<td>DSWB</td>
<td>Department of Social Welfare Board</td>
<td></td>
</tr>
<tr>
<td>DV</td>
<td>Domestic violence</td>
<td></td>
</tr>
<tr>
<td>IHBAS</td>
<td>Institute of Human Behaviour and Allied Sciences</td>
<td></td>
</tr>
<tr>
<td>LBT</td>
<td>Lesbian, Bisexual and Transwomen</td>
<td></td>
</tr>
<tr>
<td>LCN</td>
<td>Lam-lynti Chittara Neralu</td>
<td></td>
</tr>
<tr>
<td>LGBTQ</td>
<td>Lesbian, Gay, Bisexual, Transgender and Queer</td>
<td></td>
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<tr>
<td>MLC</td>
<td>Medico-Legal Certificate</td>
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</tr>
<tr>
<td>NCW</td>
<td>National Commission of Women</td>
<td></td>
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<tr>
<td>NFHS</td>
<td>National Family Health Survey</td>
<td></td>
</tr>
<tr>
<td>OSCC</td>
<td>One Stop Crisis Centre</td>
<td></td>
</tr>
<tr>
<td>STOP</td>
<td>Stop Trafficking and Oppression of People</td>
<td></td>
</tr>
<tr>
<td>TISS</td>
<td>Tata Institute of Social Sciences</td>
<td></td>
</tr>
<tr>
<td>MWCD</td>
<td>Ministry of Women and Child Development</td>
<td></td>
</tr>
</tbody>
</table>
Terms in this study

“Women” signifies cisgender persons and transwomen.

“Survivor” refers to cisgender persons and transwomen who have experienced violence, discrimination, abuse and/or harassment. Our use of “survivor” is based on the debates on the politics of labelling women who experience violence. We recognize that calling women “victims” implies that they are weak, helpless and incapable of fighting. It erases the junctures of resistance they put up. On the other hand, calling them “survivors” can cover up how they remain victims of a negligent and callous society. The third alternative of calling them “agents” does not reveal that many are barely surviving, not living fully or realizing their potential.

We chose “survivor” with the acceptance that although it lacks the shades of meaning we want to convey, it is closest to the term that would have been ideal to use—victim-survivor-agent—but for its hyphenated verbosity.

Terms such as “homeless”, “destitute”, “disabled” or even “poor” are used to refer to the conditions – not identity - of certain persons. The intention is to contribute to making these conditions temporary.

ACKNOWLEDGEMENTS

We are deeply grateful to the following colleagues and partners for their contributions to this study:

- AJWS, for the inputs and financial support;
- The survivors who shared their valuable time and experiences (in the hope that this study will bear fruit);
- Our partner organizations and members of the Lam-lynti Chittara Neralu – Action India (Geeta Rani, Gouri Choudhury, Gyanwati, Ram Pyari, Sangeeta, Saroj, Shobha Verma, and Sushila), Jagori (Chaitali, Geetha, HiraRati, Madhu, Neetu, Richa, Sunita Tannu, Sunita Thakur and others) and Nazariya (Ritambhara Mehta and Rituparna Borah) for undertaking this joint research;
- Members of our Advisory Board—Harsh Mander, Meera Khanna, Ranjani K. Murthy and Suneeta Dhar; a special word for Suneeta who, in her role as Senior Advisor to Jagori, provided direction to the entire research from time to time;
- Our ethical advisor, Prof. Renu Addlakha;
- The organizations, shelter homes, individuals, stakeholders and informants who participated in the research;
- Neelima P. Aryan for design;
- Mahabir for his help with layout, and production;
- Karen Emmons for her copy-editing;
- Amrita Nandy (Lead Researcher), Ananya Basu (Research Associate), and Surabhi Tandon Mehrotra (Research Consultant) for designing the tools, training partner organizations on research methodology, and conducting the research in Delhi; and
- Amrita Nandy and Ananya Basu for writing the report.
CHAPTER I
INTRODUCTION AND THE CONTEXT

Khud pe ye zulm gavara nahin hoga hamse
Ham to sholon se na guzrenge, na Sita samjhein\(^2\)
(I shall not tolerate this cruelty upon myself
I shall not pass through flames; don’t take me for Sita)

This couplet is a testament to a woman’s agency, her choice to not endure violence and abuse. It is this voice of resistance that this research set out to find and share, among other ambitious aims.

Our pragmatic aim has been to add to the body of feminist knowledge on the status and conditions of survivors of violence in shelter homes for “women in distress” (this term is victimizing and disempowering but because it is the Indian State’s expression to refer to a certain type of institution, it is used here in relation to those establishments). We have tried to gather first-hand accounts of diverse survivors and their experiences, from admission to a shelter home to rehabilitation and reintegration, as well as the links between shelter homes and service providers and the challenges for staff and management of the shelter homes. It also attempts to archive the histories of shelter homes for women in Delhi through a timeline that creates a useful resource for other researchers and activists.

Another prominent aim of this action research\(^3\) exercise is to give itself an “afterlife”—that is, to start and sustain empowering programs for survivors of violence and the staff in shelter homes. The organizations that were a part of this action research in Delhi have mobilized conversations and built momentum on issues in and around survivors and shelter homes.

Even though we could not cover as large a span of survivors’ voices and shelter homes as we had hoped, the contacts we have made should help build bridges for the next round of work—advocacy and collaboration between women’s rights and feminist organizations, networks working with survivors, local community groups, shelter home staff and residents.

We also set some conceptual and what may seem like visionary aims... to undo the stereotype of women experiencing violence and redefine how they are seen and to re-imagine shelter homes as per feminist notions."

\(^2\) Copuelt by Bilquis Zafirul Hasan, translation by Rakshanda Jalil, in The Indian Express, 4 Nov. 2018.

\(^3\) The use of the term “action research” here refers to research that acts to further the interests of disadvantaged and marginalized individuals or groups, in this case, women survivors of violence. Such research involves the generation of knowledge about the issue, interpretation of findings and collaboration with stakeholders to react to the findings and cause favorable changes in policy and practice.
Guided by feminist mindfulness about the unequal encounter between the researcher and the researched persons, an attempt has been made to not replicate that inequality by using principles of informed consent, minimizing risk through confidentiality and participants’ right to privacy, empathy and respect. Our experiences during this research bring home the need for concerted efforts by all duty-bearing agencies to improve survivors’ lived experiences in and around shelter homes. We hope this is the beginning of a conversation between the many actors who crisscross the redress architecture around survivors of violence.

This research study is but a milestone in a longer pursuit and process that we hope to sustain and be a part of.

**A. VIOLENCE AGAINST WOMEN IN DELHI**

Data suggest that at least ten women kill themselves every hour in India, and domestic violence is one of the major causes of female suicide in India.4 Delhi reflects this trauma, even though it has earned itself the problematic moniker of the “rape capital”, the expression tends to gloss over other forms of violence5 commonly perpetrated against women in the city. As per the Delhi Commission of Women, the largest number of cases received fall under the category of domestic violence.6 Data from the National Crime Record Bureau show that the systemic abuse of women in Delhi is much higher than in other cities in the country: One in every three cases of crime against women in metropolitan cities in 2016 took place in Delhi. Crime under the “cruelty by husband or his relatives” category increased 45 percent over a ten-year period, from 75,930 cases in 2007 to 110,378 cases in 2016.

What the National Family Health Survey (NFHS) IV (2015–2016) tells us about violence experienced by women in Delhi is that:

- the percentage of ever-married women experiencing domestic violence increased from 16.3 percent in NFHS III to 26.8 percent in NFHS IV and
- among all metropolitan cities, Delhi reported the largest number of cases of “cruelty by husband or his relatives”.

> “Delhi police data reveal that the perpetrator in almost 96.5 percent of rape cases was known to the woman (a family member or friend) and the place of crime was mostly the house (85.8 percent till from January to March 2018 and 85.8 percent in 2017).”

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5 For the purpose of the study, we use the term “violence against women” in the comprehensive sense of the Protection of Women from Domestic Violence Act, 2005, which includes all forms of physical, emotional, verbal, sexual and economic violence (including marital rape and dowry harassment), both in terms of the actual acts of such violence as well as threats of violence. Our understanding of violence against women includes structural violence, wherein patriarchy is bred by norms, traditions, laws and policies. This manifests as lack of opportunities for girls and women, their limited aspirations and a larger rationalization for discrimination against women and their inferior socioeconomic status.

Delhi police\textsuperscript{7} data reveal that the perpetrator in almost 96.5 percent of rape cases was known to the woman (a family member or friend) and the place of crime was mostly the house (85.8 percent till from January to March 2018 and 85.8 percent in 2017). Crimes against women in Delhi has a history that is backed by data, as shown in Table 1.

**Table 1. Crime Rates against Women in Delhi**

<table>
<thead>
<tr>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Rape</td>
<td>8.3</td>
<td>5.6</td>
<td>6.9</td>
</tr>
<tr>
<td>Kidnapping and abduction</td>
<td>14.0</td>
<td>16.3</td>
<td>22.9</td>
</tr>
<tr>
<td>Dowry deaths</td>
<td>1.6</td>
<td>1.5</td>
<td>1.4</td>
</tr>
<tr>
<td>Cruelty by husband and relatives</td>
<td>22.2</td>
<td>17.5</td>
<td>22.3</td>
</tr>
<tr>
<td>Molestation</td>
<td>9.7</td>
<td>7.3</td>
<td>7.9</td>
</tr>
<tr>
<td>Eve-teasing</td>
<td>2.5</td>
<td>1.7</td>
<td>2.2</td>
</tr>
<tr>
<td>Importation of girls</td>
<td>0.0</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>58.2</strong></td>
<td><strong>49.8</strong></td>
<td><strong>63.6</strong></td>
</tr>
</tbody>
</table>


Even though data on violence against women from the police, the National Crime Record Bureau or the NFHS cannot be fully accurate because too many incidents are never reported, these conservative estimates are alarming enough in terms of the number of affected women and children.

The gravity of the situation is also underscored by the fact that the Delhi Commission of Women’s round-the-clock helpline is increasingly receiving distress calls, and most of the calls relate to domestic and dowry violence, trafficking, sexual abuse, acid attack and eve-teasing.\textsuperscript{8}

Given the high rates and pervasive incidence of violence against women in the city, the response by the government of the National Capital Region of Delhi has been mostly directed at redress mechanisms. The current Delhi Commission of Women has been rather active on many fronts, including taking action against state-run shelter homes.\textsuperscript{9} However, the response to violence against women demands a ceaseless and seamless network of services directed at the prevention of violence.

**B. INTERSECTING ORBITS: DOMESTIC VIOLENCE AND HOMELESSNESS**

Being abandoned or rendered homeless is one among the many serious and diverse repercussions of violence experienced by women. Violence, harassment or abuse—of different


forms and degrees—may result in women being thrown out of or feeling compelled to escape their natal or marital home or other place of residence. Although not every such survivor is left homeless but those who are may find immediate and temporary shelter in unlivable conditions, such as on the streets or in parks. Being without a safe space to live in is a direct violation of the Universal Declaration of Human Rights, which states under Article 25 (1):

“Everyone has the right to a standard of living adequate for the health and wellbeing of himself and his family, including food, clothing, housing, medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.”

Yet, the use of the term “homeless” for such women comes with its own difficulties because of the interpretations it engenders. For example, the Census of India defines homeless as persons who are not living in “census houses”, or a structure with a roof. According to the government’s definition, homeless refers to people living in “the open or roadside, pavements, in hume pipes, under flyovers and staircases, or in the open in places of worship, mandaps, railway platforms, etc.”

This definition is rather linear and restrictive because it qualifies the state of being without a home only in a physical sense, and, crucially, it does not represent the complexities of women facing violence. And it does not convey the nature and degree of violence, stigma and neglect that a homeless person experiences. Because homelessness is a structural phenomenon that points to the failure of state policy and governance, it also needs a political framing with the objective of seeking state accountability.

Cooper (1995) found such interpretations to be “accommodation oriented” and thus limited the understanding of homelessness to not having a house or being houseless. He discussed the ideas of relative homelessness, wherein a person may have a shelter but not have a home, and absolute homelessness, when there is neither access to shelter nor the elements of home. Such an understanding also conveys the duration of time when individuals are houseless or homeless, as the case may be. This research employed the broader understandings of homelessness offered by Cooper, who argued for multiple definitions that encompass myriad dimensions.

Violence against women could leave them relatively or absolutely homeless, to borrow Cooper’s terms. The constituency of homeless women encompasses a large and diverse group but the focus of this research is the survivors who have been rendered homeless as a result of the violence they experienced, or as they are called in official-speak: “women in distress” or “women in difficult circumstances”.

10 In the 1971 census, “house” was defined “as a building or part of a building having a separate main entrance from the road or common courtyard or staircase, etc., used or recognized as a separate unit. It may be inhabited or vacant. It may be used for a residential or non-residential purpose or both”. See http://censusindia.gov.in/Data_Products/Library/Indian_perceptive_link/Census_Terms_link/censusterms.html.

11 The Hindustan Times (2017), “There are 1.77 million homeless in India, but the State is blind to them”, 17 Sept., www.hindustantimes.com/editorials/there-are-1-77-million-homeless-in-india-but-the-state-is-blind-to-them/story-ypUh96FiXsxZbhrs86GnK.html. Mandap is a Hindi word meaning a covered structure with pillars.

It is critical to note that the homelessness experienced by such survivors of violence is distinct from, yet overlaps with, poverty- and destitution-related homelessness. Women typically escape or leave their home to seek respite and solutions, with the hope that they can return in better times. Because cycles and intensities of abuse and violence vary, and wax and wane over time, some women leave and return home multiple times while trying to work out a solution. Thus, their needs for shelter may be more fluid and dynamic, unlike women who are homeless out of poverty and destitution and mostly need long-term accommodation.¹³

The largest numbers of survivors are found neither on the streets nor in shelter homes—they continue to live in their abusive homes, with their families, because they do not know of alternative safe spaces and/or because they think that the alternatives are not viable. As the NFHS IV revealed, around 76 percent of women who experienced physical or sexual violence in the country never sought help or informed anybody about it.

In a feminist as well as human rights-based understanding, homelessness—sparked by any form of violence, threat, abuse or harassment or by poverty—is not a private matter. It is part of structural violence and of our social and political systems and processes.

¹³ Ibid.
C. HOMELESS WOMEN OR SURVIVORS OF VIOLENCE

Abandonment-related homelessness is not simply an effect of violence experienced by women but can and often does morph into a cause of greater harm, resulting in cycles of neglect, harassment and violence. Table 2 presents different forms of abuse that women living on the streets are vulnerable to, although each of these forms are linked and overlapping. Above all, the table points to the dire need for spaces that can offer safety and immediate access to survivors of violence.

Table 2. Forms of abuse that women living on the street are at risk of

<table>
<thead>
<tr>
<th>Issue</th>
<th>Perpetrators</th>
<th>Causes, vulnerabilities exploited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trafficking</td>
<td>Middlemen, contractors hired by agencies</td>
<td>Economic; promise of job or marriage</td>
</tr>
<tr>
<td>Sexual abuse (including</td>
<td>Husband or partner, police, homeless men, passersby</td>
<td>Sexual favors in lieu of promised employment; threats and intimidation; lack of access to safe bathroom or toilet (having to undress and change in the open)</td>
</tr>
<tr>
<td>physical and verbal abuse)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Verbal abuse</td>
<td>Homeless men, passersby, police officials, husbands</td>
<td>Food not cooked properly, chores not done as per expectation</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>Homeless men, passersby, police officials, husbands</td>
<td>At home (food not cooked properly, chores not done as per expectation); display of power by state authorities, such as police officials</td>
</tr>
<tr>
<td>Medical risks</td>
<td>Abuse by medical staff; lack of facilities or services by state government</td>
<td>Unhygienic conditions in toilets and bathrooms; unsafe drinking water; exposure to harsh climatic conditions; lack of access to medical care</td>
</tr>
<tr>
<td>Lack of livelihood opportunities</td>
<td>State-police officials</td>
<td>Stigma attached to homelessness makes employment difficult; insensitive and abusive state machinery</td>
</tr>
<tr>
<td>Denial of food as a basic right</td>
<td>State (no provision of sustainable livelihood); police (destroy cooking utensils if women are seen cooking during the day)</td>
<td>Lack of access to means of livelihood; insensitivity toward homeless persons</td>
</tr>
</tbody>
</table>


D. TIMELINES: SHELTER HOMES FOR WOMEN IN DELHI

“...a homeless man can return to his family but a homeless woman can’t.”

Indu Prakash Singh, facilitator, CityMakers Mission International, and President, Forum Against Corruption and Threats

The history of shelter homes for women in distress in Delhi has been checkered and their evolution slow. As the narrative around women’s rights became textured over the decades, the State and civil society paid greater attention to shelter homes for women in distress. It remains debatable, however, whether the understanding and approach to responding to such women has yet to shift from a welfare mode to a rights-based perspective.
Policy and groundwork for (a) shelter homes for destitute and homeless individuals and (b) shelter homes for women in distress have had their own distinct trajectories in Delhi. These distinctions between the two types of shelter homes can and do merge in the choices and vulnerabilities of survivors of violence. For example, as shelter homes for destitute and homeless persons gradually came about in Delhi over the decades, more women sought refuge in them. It is thus important for any analysis of the trajectory of shelter homes for women in distress in Delhi be done in the context of the evolution of shelter homes for destitute and homeless individuals.

The intention behind this simultaneous exploration of these two types of shelter home is to emphasize that the women survivors of violence who live in a shelter home for the destitute and homeless are without the support services that they require. These services are supposed to be provided to them in the shelter home that caters to women in distress.

The following three timelines illustrate the chronology of the creation of different and currently functional shelter homes in Delhi.

Table 3. Timeline for short-stay shelter homes for women in distress

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1967</td>
<td>Short-stay home scheme</td>
</tr>
<tr>
<td>1970</td>
<td>Widows home for 100 residents (women with physical and/or mental disabilities ineligible)</td>
</tr>
<tr>
<td>1986</td>
<td>Shakti Shalini (in response to dowry-related violence)</td>
</tr>
</tbody>
</table>
| 1988 | • Nirmal Chhaya (statutory home) for 100 residents, declares a “protective and corrective institution for girls and women in moral danger”  
• Nirmal Chhaya non-statutory homes  
• After-care homes  
• Short-stay homes (survivors with physical and mental illness ineligible)  
• Widow homes |
| 2000 | Snehalaya, a short-stay home |
| 2001-02 | Swadhar scheme |
| 2012 | STOP Ujjawala home (for survivors of commercial sexual exploitation and human trafficking) |
| 2010 | Sisters of the Destitute (shelter home for abandoned women with mental health issues) |
| 2011 | YWCA and Delhi government-run Matritva Chhaya Shelter Homes (Jahangirpuri and Sarai Rohilla) |
| 2013 | One-stop crisis centers |
| 2016 | Swadhar Greh scheme (after merger of short-stay home scheme and the Swadhar scheme) |
| 2018 | Swadhar Greh (Bapnu Ghar and Snehalaya homes converted) |

The short-stay home scheme was created in the late 1960s by the Department of Social Welfare to cater to women in difficult circumstances. This was in recognition of the need for temporary shelter for women and girls who are in “social and moral danger due to family problems, mental strain, violence at home, social ostracism, exploitation and other causes”\(^\text{14}\). These early institutions were set up as “protective” and “rescue” homes for women and girls in different parts of the country.\(^\text{15}\) Shelter homes also became part of the preventive


\(^\text{15}\) Lam-Lynti Chittara Neralu (2018), Time for Overhauls, Delhi: Jagori.
strategies and response mechanisms of women’s rights and feminist organizations and other NGOs enmeshed in their anti-dowry work in the 1980s. In other words, women who faced the threat of violence also started to occupy these homes, such as Shakti Shalini.

In Delhi, the Director of Social Welfare has been the licensing authority for setting up short-stay homes for women and children survivors of violence. These homes are run under the Delhi Women’s and Children’s Institutions (Licensing) Rules, 1960, which is drawn from the Women’s and Children’s Institutions (Licensing) Act, 1956.

Additionally, the Department of Women and Child Development operates both statutory and non-statutory homes. The difference between the two is that admission to a statutory shelter can only be done by a court order, whereas admission to a non-statutory shelter home can also be on the recommendations of the Admission Committee (comprising the district officer and the superintendent of a shelter home).

In Delhi, girls and women who had been trafficked were sent to Nirmal Chhaya and Nirmala Niketan, respectively, which are government-run custodial institutions. But their rehabilitation was arbitrary, and they languished in these homes for years. The Nirmal Chhaya Home was set up for women rescued under the Immoral Trafficking (Prevention) Act, 1956. It is the only statutory home in Delhi and, in 1988, was declared as a Protective Home and Corrective Institution. The home has capacity for 100 residents. Within the Nirmal Chhaya complex, there are three non-statutory homes: a widows-only home, an after-care home for survivors aged 18–35 and a short-stay home for survivors aged 18–45. The capacity of the first two homes is 100 residents and 50 residents for the short-stay home.

In 2007, the Ministry of Women and Child Development launched the Ujjawala scheme to provide not just shelter to survivors of trafficking for commercial sexual work, bonded labor and so on but also to address their rehabilitation and livelihood issues. The scheme includes half-way homes for survivors, who are given alternative employment and begin the process of “reintegration” with their family.

The Department of Women and Child Development also runs two shelter homes in partnership with the YWCA for pregnant and lactating women, called Matritva Chhaya. These homes were an outcome of the long-standing campaigns by civil society organizations for access to safe spaces for homeless women.

By 2001 and 2002, as part of the Swadhar Scheme by the Department of Women and Child Development, Swadhar Homes were introduced to enhance the limited assistance offered by the short-stay home scheme. Swadhar Homes were meant to provide multiple and integrated services to many survivors, such as destitute persons, impoverished widows, survivors of natural disasters and terrorist or extremist violence, migrants or refugees, ex-prisoners without family support and women deserted by their family because of a physical or mental disability. Its services included food, clothing, shelter, health care, counselling, legal support and socioeconomic rehabilitation through education, awareness generation and skills building.

16 Lam-Lynti Chittara Neralu (2017), Time for Overhauls, Delhi: Jagori.
The short-stay home scheme merged with the Swadhar Home scheme in 2007. Although Swadhar also continued to support shelter homes that were similar in purpose and function, it offered a longer duration of stay.

By 2013, as an outcome of the Nirbhaya gangrape case, the government announced the setting up of One Stop Crisis Centres in every district of the country at select government hospitals. These were meant for survivors of sexual violence so they could access single-window, round-the-clock, immediate and wide-ranging services and support: specialized medical examination and treatment, legal and psychological counselling, besides temporary shelter. These centres along with medical, legal and counselling support also provide temporary shelter (maximum period of five days) to the survivor and further referral to Swadhar/Short Stay Homes, if required.

By 2013 and as an outcome of the Nirbhaya gang-rape case, the government announced it was setting up one-stop crisis centers in every district of the country at select government hospitals. They are intended for survivors of sexual violence to help them access single-window, round-the-clock, immediate and wide-ranging services and support—specialized medical examination and treatment and legal and psychological counselling—as well as temporary shelter. These centers, along with the medical, legal and counselling support, also provide temporary shelter (maximum period of five days) to survivors of domestic violence and further referral to the Swadhar short-stay homes, if required.

By 2016, the short-stay home scheme and the Swadhar scheme had merged to become the current Swadhar Greh scheme. The Swadhar Grehs are similar in purpose and function to the short-stay home scheme, but the primary difference is that the former provides longer duration of stay.

As of November 2018, there were seven homes licensed under the Delhi Women and Children’s Institutions (Licensing) Act, 1956 that are run by NGOs (table 4). During this research, two of the seven homes moved from the short-stay scheme to the Swadhar Greh scheme. Each home accommodates between 10 and 60 residents.

Table 4. Number of Swadhar Greh homes and licensed shelter homes for women in distress in Delhi

<table>
<thead>
<tr>
<th>Schemes</th>
<th>India</th>
<th>Delhi</th>
</tr>
</thead>
<tbody>
<tr>
<td>Swadhar Grehs*</td>
<td>559</td>
<td>2</td>
</tr>
<tr>
<td>Delhi Women and Children’s Institutions</td>
<td>NA</td>
<td>7</td>
</tr>
<tr>
<td>(Licensing) Act Homes (as of January 2018**)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ujjawala homes</td>
<td>NA</td>
<td>0</td>
</tr>
</tbody>
</table>

Note: As of November 2018. NA=not applicable.
** Department of Women and Child Development (2018), www.wcddel.in/.

17 This is the infamous gang rape of and fatal assault upon a 23-year-old woman in a private bus in south Delhi in December 2012. The word ‘Nirbhaya’ means ‘fearless’ in Hindi and is a prevalent expression for the case.
Together, the shelter homes for women can accommodate, at the most, 500 women, which is far fewer than the number of survivors who need shelter at any given day in Delhi (going by the conservative estimate of 46,724 homeless people, according to the 2011 Census findings). Many survivors who are unable to access these shelters turn to ashrams, dharmsalas or shelter homes run by private, faith-based, non-government or women’s rights organizations.

Table 5. Timeline of shelter homes and safe spaces for women and couples

<table>
<thead>
<tr>
<th>Year</th>
<th>Shelter Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>Ummeed Ki Kiran</td>
</tr>
<tr>
<td>2016</td>
<td>Mahila Samman Aashiyana</td>
</tr>
<tr>
<td>2017</td>
<td>Dhanak</td>
</tr>
</tbody>
</table>

In addition to the state-run and funded homes and schemes, different civil society organizations in Delhi have responded to the need for shelter homes or safe spaces for women in difficult circumstances. Table 5 focuses on three such organizations that approach this need through specific interventions and services. These spaces differ from the earlier mentioned short-stay homes in important ways, too: either by being open to a wider range of “women” (such as transwomen), offering longer-term accommodation or a bigger or specific canvas of support services.

For example, **Ummeed Ki Kiran** is an initiative of Médecins Sans Frontières, which is an international, non-government humanitarian organization offering medical care. In Delhi, it started as a first-of-its-kind emergency medical service only for survivors of gender-based violence. Ummeed Ki Kiran provides first-response medical treatment (for both physical and mental health) to survivors and offers shelter for up to 24 hours, if required. The survivor is then either referred to a shelter home or to an alternate safe space, if required. Ummeed Ki Kiran is based in an area of the city that records high numbers for gender-based violence. The details of survivor’s cases are kept confidential.

**Mahila Samman Ashiyana** is a residential shelter home run by the NGO Aman Biradari’s Centre for Equity Studies for the most vulnerable women, who are either survivors of gender-based violence and/or are destitute. The shelter offers recovery services (physical and mental health) and livelihood training. **Dhanak**, also an NGO, offers legal services and social support to interfaith or inter-caste couples who face the threat of honor crime, besides a short-term safe space (for more on Dhanak, see p. 26).
Shelter homes for destitute or homeless persons in Delhi were created after a lengthy battle by civil society organizations and collectives with the state for the realization of their “right to adequate housing”. Most shelters are ill-equipped, poorly located and characterized by the lack of basic services, such as drinking water, toilets, bathing facilities, electricity, clean bedding, storage space and facilities for cooking and food distribution. Recent surveys and visits by civil society groups report improvements in the infrastructure.

As late as the early 2000s, there were only a few night shelters (rayn baseras) in Delhi, and these were meant exclusively for destitute or homeless men. For a city with a growing population of migrants and homeless persons, shelters were quickly crowded and unable to accommodate the many more who needed sheltering. Women who were homeless, however, had no place to take refuge, even for a night.

It was only after years of mass campaigns, public interest litigation and advocacy by civil society groups and human rights activists that the shelters spurted in numbers (Action India, Ashray Adhikar Abhiyan and Aman Biradari were at the forefront of these initiatives). As of 2010, there were nearly 14 orders by the Supreme Court on homelessness under the right to food (PUCL vs Union of India and others, Civil Writ Petition 196 of 2001). The large number of Court orders in 2010 alone resulted after news reports of homeless people dying in New Delhi.18

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Ashray Adhikar Abhiyan (with help from ActionAid) started the first shelter home for destitute or homeless women at the YWCA premises in 2002. Almost two decades later, the number of shelters that accommodate women have increased, thanks to the Supreme Court orders that mandated the provision of adequate shelter for destitute or homeless women. For example, Ashray Adhikar Abhiyan currently manages 23 shelter homes in Delhi; these include two homes exclusively for women (in the Karol Bagh and Kharia Mohalla areas of Delhi), while the rest are for homeless families and children. The Delhi Urban Shelter Improvement Board pays for the caretakers, cleaners and the maintenance of the home. Currently, of the 263 “night shelters” for homeless persons in Delhi, only 21 offer shelter for homeless single women.

Despite the growth in the number of shelter homes for Delhi’s female destitute population, they do not provide for the growing number of destitute or homeless women, many of whom could be considered as women in distress.

Unless there is (bad) news about a shelter home, these spaces remained on the periphery of the public radar. In the history of the Delhi-based women’s rights and feminist groups and movement, there was a time when shelter homes were more of an integral part of their reflections and conversations. This was particularly so in the 1980s, when the issue of dowry murders dominated the Indian women’s movement and led to much mobilization around the issue of violence against women. Shelter homes were in demand in Delhi, largely to cater to women escaping harassment and violence related to dowry. It was at this time that Shakti Shalini was established by feminist and women’s rights activists as a shelter home for women survivors of violence.

E. ALTERNATIVE SAFE SPACES

I. Religious sites: Multiple atrocities and generosities

Among the women survivors of violence we met in Delhi’s shelter homes for women in distress as well as the homes for destitute women, many reported that they had lived outside temples, mosques or gurudwaras. Most of them were poor migrants. They had heard of the charitable devotees at these spots and decided to throng there for food and income through begging. Delhi’s popular religious sites, such as Gurudwara Bangla Sahib, Jama Masjid, Kalkaji Mandir, Nizammuddin Dargah and Hanuman Mandir, cater to the destitute and homeless population, including women and children. From time to time, NGOs, such as Aman Biradari, Ashray Adhikar Abhiyan, the Society for Promotion of Youth and Masses, have been involved in the running of night shelters and/or organizing periodic outreach “camps” that offer medicine, addiction treatment, clothes and so on.

“Unless there is (bad) news about a shelter home, these spaces remained on the periphery of the public radar.”

19 A place that offer accommodation to the homeless at night
21 Places of worship for Sikhs.
It was the period of the horrific “stove burst” deaths in Delhi, as dowry murders were sometimes euphemistically called, when Delhi’s skies were pierced by screams of women being burned alive and the loud slogans of protests by women’s rights activists. It was 1979, when the iconic feminist play against dowry, Om Swaha, was staged across Delhi.

The play was created by Stree Sangarsh, a group of academics and activists. About 100 shows were performed in the first year—in working-class neighborhoods and gated residential colonies, the busiest of intersections and even at the Boat Club tourist attraction. For three years, volunteers (students from Delhi University, activists and intellectuals) joined the campaign to stop dowry killings. These consciousness-raising groups comprised such women as Geeta Sehgal, Rani Jethmalani, Amrita Chachhi, Urvashi Butalia and Runu Chakravarty, among others. And it was the dawn of Jagori, Stree Sangharsh, Action India, Saheli and other NGOs and women’s rights groups.

Hundreds of men and women would turn up and watch, motionless, but moved. The response was instant. Brothers, fathers and mothers of victims of violence in the audiences told their stories of similar but real cases involving their sister or daughter.

It was around this time that Satyarani Chadhha—whose daughter, Shashi Bala, had died of dowry-related violence when she was six months’ pregnant—had started attending protests against dowry. At a feminist street play in the Nangloi section of Delhi, a woman named Shahjahan told the story of her daughter, Noor Jahan, who had been burned to death in 1979. Eventually, the two women started to meet other women and families whose daughters experienced dowry harassment and started to help them lodge police reports. People came to them with questions like, “If I keep my married daughter at home, what do I say to my daughter-in-law?” Still, only some parents took in their married daughters if they experienced violence; the others needed a safe place to live.

Satyarani ji and Shahjahan apa (as they came to be known) not only intervened in dowry-related cases but also started counselling parents. Dowry retrieval became a major activity. Several cases were followed simultaneously. Every day, there were court cases to attend, visits to police stations and/or rescues of women harassed by their family.

It was clear that a place was needed where women could talk about their experiences of family violence and learn what they could do about it. And it became evident that young women who wanted to leave their marital home had nowhere to go. Nari Niketan, one of the oldest shelter homes in the city that takes in survivors of violence, was only accessible through the police and had gained a reputation for not being a place for a “decent” young woman.
When Satyarani ji and Shahjahan apa saw the dire need for a safe space for survivors of violence—women whose in-laws were out to kill them, harassing them for dowry and/or whose natal families were unable to help or did not want them back. In 1986, Viji Subramaniam of the Ford Foundation suggested a shelter home for survivors of dowry-related violence. Soon, a house was rented in south Delhi’s Pamposh enclave. They called it Shakti Shalini. The Norwegian Embassy gifted the shelter a jeep for dowry-related field work.

“We would visit the burn wards in hospitals but could not talk to women because they were surrounded by their in-laws. A woman would not issue a statement against the in-laws, especially if she had children. We mostly saw this as a sacrificing Indian woman. She would not tell her parents about the harassment she faced; parents would insist that she somehow continue living with the violent husband and in-laws,” recalled Gouri Choudhury, Chairperson of Action India.

Very quickly the home was packed and stayed that way. Despite a capacity for ten women, the home at one time had 45 residents in age from 18 to 60, including those with children. They spoke different languages and had their own food preferences. There were working and upper-class women, too. By the 1990s, many teenage girls were reportedly running away from their family, mostly to avoid a forced marriage, and coming to the shelter.

Over the years, Shakti Shalini has had to struggle for funds and other resources. Yet, it continues to shelter survivors and offer vocational training, legal help and mental health care. Shakti Shalini is a survivor of apathy and neglect but thrives on commitment and hope.

*Based on conversations with Bharti Sharma, Gouri Choudhury and Sudha Tiwari.*
Our visit to a shelter home in Jama Masjid’s Urdu Park in south Delhi revealed that many women residing there had been rendered homeless due to the domestic violence they had experienced at an earlier point in their life. For example, there were women who had come to Delhi as migrants with their husband in search of work but were later harassed or abandoned by the husband and left homeless. Because they did not come into contact with the organizations and authorities that assist women in difficult circumstances at the time the violence had occurred, they did not know where to go. They did not know then that there were shelter homes in the city that they could access. Today, these women are not categorized as women in distress but as “homeless”. Many of them—and their children—have been homeless for several years.

The issue of safety remains a major concern for women living in the crowded streets and alleys. Women and children are vulnerable to violence of all kinds, including sexual abuse. Kanchan Gandhi\(^\text{22}\) talked of drug peddlers and human traffickers that hover around the Jama Masjid, which is a popular destination for homeless persons in Delhi. She observed difficulties faced by single women:

> “Women with partners would dominate the shelter space and nag the ‘single’ women to get into relationships. These relationships would help women in improving their social acceptance in the shelter as women without partners would be constructed as ‘loose’ and ‘available’.”

The Delhi Urban Shelter Improvement Board operates a night shelter in the Bangla Sahib Gurudwara neighborhood, which was the site of a 6-year-old girl’s rape in August 2015, remains as unsafe as it was then. Intoxicated boys and men reportedly are seen in and around the shelter. Bhuwinder, a mother of six children who spends a few nights each week either in a homeless shelter in north Delhi or the family shelter near Bangla Sahib Gurudwara, described her experiences in the area:

> “Akeli aurat dekh ke log aa hi jaate hain. Koi kehta hai humare saath chal. Aur bohot chhedhkhani hoti hai, izzat pe haath dalte hain...ek baar Bangla Sahib mein hi main so gayi thi, thaki hui thi. Meri doorsri wali ladki khel rahi thi raaste pe, toh usko uthha ke le gaye the. Jo ghunte rehte hain nashedi...phir subah paanch baje woh mili Hanuman Mandir ke pas.” (They see a single woman and come to her. Some say, ‘Come with me.’ There is a lot of sexual harassment, they molest, assault...once when I was tired, I slept at Bangla Sahib. My second daughter was playing on the street, and they took her away. Those drug addicts...she was found at Hanuman Mandir at 5 in the morning.)

In the homeless shelters we visited, begging was the main source of income for most residents. Many of the shelter homes had provided the residents with a physical space to reside but had not been successful in persuading them to learn skills and earn a living. As 45-year-old Shabana explained:

> “I have done many menial jobs in my life, but I could never earn as much as I make in begging outside Jama Masjid. All my school-going children need books, clothes, things. I cannot educate them with those other jobs.”

\(^{22}\)Kanchan Gandhi, op. cit.
Forty-something Raaka had been trafficked to Mathura and she used to live on the streets around Kalkaji Mandir. She said:

“I have asked many women to join the shelter and learn a skill so that they can get a job, but no one wants to leave this place. It has become comfortable for them to stay here in safety and continue to beg near Kalkaji Mandir.”

Although the creation of a shelter near religious sites goes a long way in sustaining the homeless-survivor physically, it also perpetuates the cycle of poverty and heightens vulnerabilities, especially in the utter absence of long-term rehabilitation mechanisms and housing.

II. Feminist and queer safe spaces

Access to Delhi’s few and mostly occupied government-run shelter homes for women is coursed through the police and/or courts. Over the years, as and when these shelter homes have not been available, accessible or not preferred by survivors, human rights and women’s rights activists and organizations have opened up their personal homes or offices—if not set up safe spaces—to accommodate women experiencing threats or violence. Legal and psychological counselling, food and even financial assistance would be arranged, if needed.

Some of the survivors who felt moved by the help they received and were convinced by the importance of this work joined the staff of these spaces that gave them a new lease on life. Scores of these survivors are employees, volunteers or friends of the organizations. Others are running their own organization and offer safe spaces to women in need. This has both positive and negative implications. The following is an alphabetical snapshot of such organizations in Delhi. We feature them as alternatives to the shelter homes for survivors in Delhi and to explore the links between shelter homes for women in distress and these human rights, feminist, women’s and lesbian, bisexual and transwomen (LBT) groups. By including them here, we acknowledge their role. We realize – and hope – that this list is partial and that there are more safe spaces in the city.

Dhanak

Set up in 2005 as a support group for and by interfaith couples to promote their “right to choice” in marriage or relationships and ending honor-based crime, Dhanak remains a unique presence in Delhi. This is also because, in November 2017, it opened a safe space (shelter) for interfaith and inter-caste couples who have escaped the violence or threats of violence their families and communities tend to unleash. Unlike the state government-run “couples homes”—with police protection—to ensure the safety of inter-caste and interfaith couples in Haryana and Punjab states, Delhi has had no such government-run facility, despite the Supreme Court’s 2010 judgment requiring safe houses to be set up in each district for the safety of inter-caste and interfaith couples. Dhanak fills this crucial gap.

Dhanak works on multiple fronts. It helps couples who have left their family, acting as a mediatior to prevent the family of the woman (in the couple) from pressing charges of abduction or rape to falsely implicate the male partner. They also guide couples through legalities of their imminent marriage. Dhanak’s larger mission is to advocate for diversity, secularism, interfaith and inter-caste marriages and families and legislative changes to the Special Marriage Act. It has also been advocating with the Delhi government to set up safe homes for couples.
At the time of our meeting with Dhanak, they were sheltering, among others, their first lesbian couple from a neighboring state. One of the women had been forcibly engaged to a man against her wishes. The couple’s attempt to win acceptance from their respective families—after the Supreme Court’s September judgment decriminalizing homosexuality—had failed. Their parents threatened to kill themselves and the young women. The families had placed restrictions on their mobility and interaction. Left with no choice but to run away from their families, they surfed the Internet and found the Lawyers Collective, who, along with the Nazariya LBT rights NGO, helped them find emergency accommodation in Delhi at a women’s shelter and then at Dhanak. Members of Dhanak informed the local police station and secured a protection order from the Delhi High Court.

Dhanak receives an average of nearly four queries daily from interfaith and inter-caste couples. Its Delhi-based members meet once a month to discuss developments and concerns.

**MAHILA PANCHAYAT**

Created in 1994 to facilitate a community-based redress mechanism against domestic violence, Mahila Panchayat was initiated by Action India as a women’s collective in urban resettlement colonies. Mahila Panchayat provides safe spaces for survivors of violence by offering paralegal support with a feminist approach. At its weekly meetings, paralegal workers and other collective members mediate cases, facilitate survivors’ access to services (such as protection officers), file police reports, facilitate investigations and advocate for better implementation of the Protection of Women from Domestic Violence Act, 2005. These alternative dispute-resolution collectives have grown in number to 20 and are active across Delhi, with some 3,000 members. The paralegal workers are trained on women’s legal rights and feminist counselling to support survivors of domestic violence. Enforcing and implementing the Protection of Women from Domestic Violence Act, in its true spirit, is the mission of the Mahila Panchayat network.

**NAZARIYA**

Formed in October 2014 by Delhi-based queer feminist activists, Nazariya came about in response to the void that was felt among LBT individuals after Sangini (described on the next page) closed down. Because LGBT spaces tended to be male-centric or hijra-oriented, the Nazariya founders decided to work toward affirming the rights of LBT and queer people via the creation of an enabling environment. Primarily, it conducts capacity-building workshops on gender, sexuality and harassment in schools, colleges and organizations. It also runs a Delhi-based, peer-counselling helpline for women struggling with their gender identity and/or sexual orientation. Nazariya works with a team of lawyers to provide legal assistance to queer women. This is done through a referral system whereby it connects queer individuals with the nearest rights-based organizations and lawyers, ideally in the same city or town.

Nazariya’s crisis intervention work started in 2015. They were assisting people looking to escape violent situations from their natal or marital family due to their gender identity or orientation. For women facing a threatening situation, Nazariya used to offer a modest safe space in Delhi. People can stay there for a maximum of three to four days. Due to safety concerns, however, it was shut down. Now when a need arises, Nazariya offers survivors an alternative space for a brief period.
SAHELI

In the early 1980s, when women hesitated to inform their parents or policemen about dowry-related or other forms of abuse and violence, partly because they would be pushed to “compromise”, Delhi-based feminists set up a drop-in crisis intervention center. In 1981, with four old chairs and 80 rupees, the center opened in the garage of someone’s home in Delhi’s Nizamuddin neighborhood. Meant to be a space where survivors could talk and seek help during a crisis, it was run by 16 women who volunteered their time to keep the center open, morning to evening, seven days a week. Feminism was central to the center’s democratic vision and practice.

In the beginning, the volunteers were available even on Sundays and offered some financial support to women. Part-time domestic workers would drop in every afternoon for a chat with peanuts or bananas for a chat, and in time, referred many survivors of violence to the shelter. By the second year, a survivor of violence decided to become a full-time volunteer—she had been tricked into marriage with a mentally challenged man but walked out of the marriage and back into her parents’ home with help from the Saheli group.

Saheli received about 500 cases between 1981 and 1986, many of which pertained to interfaith and inter-caste marriages. Because these young couples needed safety from their threatening families, some members of Saheli opened their own homes to them.

Saheli tried running a safe space for female survivors of violence in the mid-1980s. After much difficulty, an affordable room was found outside a cowshed near Barapullah. At that time, homeowners were wary of renting their space to single women who lived away from their family. After sheltering a few women for a couple of months, the space had to be shut down because it was not financially or logistically viable. Saheli continues to be a prominent and autonomous feminist voice in Delhi and outside.

SANGINI

Sangini was set up in 1997 as a helpline for the LGBT community. By 1998, it also had become a self-help group. By 2005, it expanded to an informal shelter for queer individuals who were experiencing violence at home and wanted to move out. Initially, survivors stayed at the home of Sangini’s co-founders, Maya Shankar and Betu Singh. Because they had no funding to support the shelter, they ran a guest house in the same space. But the guest house eventually was forced to close due to frequent raids by the police who came in search of survivors.

Between 2008 and 2012, Sangini’s safe space received funding, and a few hundred individuals accessed its services. Mostly they were female-to-male transgender individuals, women attracted to women and bisexual individuals. Sangini offered accommodation for a maximum of three months with free food, counselling and legal services.

The shelter space shut down in 2013 due to lack of financial resources. Funding for LGBT issues is constrained. Officially, Sangini the organization does not exist anymore, but unofficially Maya Shankar still responds to individuals who reach out to her. In most instances, shelter homes refuse to take in individuals referred by Sangini, she explained:
“When two women approached a shelter together...they would refuse them admission. Women facing trauma want to speak about it and hence living in a space where one has to stay quiet about the violence was problematic. Shelters could recognize violence when a woman is beaten by her husband... but it was difficult for them to acknowledge a same-sex couple who wanted to live together. And the women’s movement then was not supportive of the LGBTQ movement. So, many women’s organizations did not know how to approach issues faced by LGBTQ individuals.”


F. GAPS IN RESEARCH ON SHELTER HOMES FOR WOMEN

“The state is [reluctantly] compelled to provide physical space, food and water for [women]. It is a highly judgmental, moralistic and punitive space where there is little respect for the resident’s privacy. The painful facts of their lives and stories of abandonment by family and community are shared widely with everyone in the shelter. Often, the women are labelled as ‘paagal’ (mad) or (lovewalis) [those who fell in love with someone their family did not approve of].” – Prita Jha 23

In the Indian literature on survivors of violence and shelter homes, the issue of shelter homes for women in distress is an underexplored subject. One reason is the extremely difficult access to such shelter homes, unless of course, it is a government-commissioned study, such as the study of Bihar’s shelter homes by the Tata Institute of Social Sciences (TISS).24

As discussed in the 2017 national consultation report25 by the Lam-lynti Chittara Neralu collective, the few studies on survivors of violence finding refuge in shelter homes (conducted by civil society and women’s rights groups from different states) expose the difficulties and impossibilities of meeting their needs. Nonetheless, they mention a shortage of shelter homes, physical and verbal abuse and harassment of shelter home residents, infrastructural deficiencies, service-related lapses, restrictions on mobility and poor rehabilitation efforts. The report on the status of widows in Swadhar Homes in Uttar Pradesh, Uttarakhand, West Bengal and Odisha brings to light the difficult conditions under which some of the most deprived older women live.26

Barring occasional news reportage about specific cases of violence, abuse or raids by state authorities, shelter homes for women in Delhi have remained hidden from the public eye.

There are only a few studies by groups working on homeless person's rights that mention women’s specific vulnerabilities. They have largely focused on shelter homes for destitute or homeless persons and not for women in distress, which is the focus of this study.27 Central and state governments have not paid adequate attention to these institutions over the years. As a response to the findings of the TISS audit on violence and abuse in Bihar’s shelter homes, civil society groups and human rights organizations across the country demanded greater transparency in the functioning of these homes, including conducting regular social

24 The audit found that almost all 110 government-funded institutions were run in violation of the mandate of schemes and the Juvenile Justice Act. It reported abuse in various forms and degrees, as well as inadequate infrastructure and shortage of staff.


audits (social audits of shelter homes are not mandatory under law). Eventually, the National Commission for Women announced the social audit of almost 500 of the total 559 Swadhar Grehs (government-run shelters) across India, and the Delhi Commission for Women announced a social audit of all children’s and women’s shelter homes in Delhi.

Due to the acute shortage of data and accounts from within shelter homes for women in distress, it has been difficult to find a coherent and up-to-date picture on the conditions of survivors living in state-, private- or NGO-funded or operated shelter homes or to learn about issues for the staff of these institutions.

As far as we know, there is no Delhi-based research on survivors of violence and shelter homes that delves into their journeys before, during and after the shelter home experience. Although the gaps that we identified are many and substantial, our action research looks to make a small and limited attempt to fill a few, such as:

- first-hand accounts of current and former residents in shelter homes, women at the risk of being homeless and women who did not know about or refused to live in shelter homes;
- concerns and issues faced by staff and management of shelter homes;
- experiences of more vulnerable survivors, such as older women and differently abled women from a certain faith, caste or gender-queer community;
- mental health and psychosocial care and services; and
- rehabilitation and the post-shelter home life of survivors.

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CHAPTER II.
FEMINIST RESEARCH AND METHODOLOGY

Our action research on survivors and shelter homes was envisioned within the feminist understanding and praxis of the organizations participating. We see violence against women as a “violation of the rights and fundamental freedoms of women”. Our perspective on patriarchy and rights-based empowerment for women, as well as the thrust on justice, are central to the analytical framework for the research.

The process of knowledge production can often reflect the world from male or privileged positions and neglect women and their subjugated positions. To undo this, feminist research highlights the worlds of the marginalized—in this case, women survivors of violence. For example, our action research is politically committed to lending more power to participants who are seen as knowledge agents who speak for themselves. We want to make the research process as rewarding as possible for the participants: to make an actual impact on the lives of the survivors during and after the research exercise. Sensitivity to the power relationship between researchers and the people researched is also at the core of feminist research, as discussed further on.

As qualitative research, this study involved in-depth interviews with survivors and key informants as well as focus group discussions and several informal conversations with a range of stakeholders. Table 7 presents details on the number of participants the research team spoke with for each tool (interviews and group discussions). It also encapsulates the nature of violence faced by survivors. As for the key informants who participated in the

study, the table categorizes them in terms of the roles they had in the redressing of the violence experienced by survivors and therefore the relevance of their knowledge and/or experience for the study.

Table 7. Survivors and the nature of violence experienced

<table>
<thead>
<tr>
<th>Research activity</th>
<th>No. of survivors spoken to</th>
<th>Nature of violence faced by survivors</th>
</tr>
</thead>
</table>
| Nature of violence faced by survivors In-depth interviews | 28 | • “Right to choice”-related conflict  
• Elderly abuse or abandonment  
• Sexual abuse by brother  
• Intimate partner violence: physical, verbal, emotional, sexual (including marital rape)  
• Emotional and mental abuse by in-laws  
• Abandoned by husband and in-laws or no natal family support |

<table>
<thead>
<tr>
<th>No. of key informants</th>
<th>Role of key informant</th>
</tr>
</thead>
</table>
| Key informant interviews | 17  
• Counsellors working at shelter homes  
• Management of shelter homes  
• Current and former Delhi State Legal Services Authority members  
• Advocates working on human rights cases  
• A protection officer  
• Activists working on homelessness and women’s rights issues |
| Focus group discussions | 18  
• Mahila panchayat office bearers  
• Survivors of violence who refuse to live in shelter homes |

The field work in Delhi began with a state-level consultation in April 2018. The research team and NGO partners contacted a total of 15 shelter homes for women in distress in the National Capital Region comprising those funded or run by government agencies, NGOs (including faith-based) and private entities. Representatives of five shelter homes attended the consultation, gave their inputs for the research design and shared concerns as well as recommendations. At the meeting, all the shelter home representatives were willing to participate in the research study and share their perspectives, albeit anonymously. Some of them withdrew their initial consent when the research began. Of all shelter homes we contacted, eight participated in the research. They represent a spectrum of specialized, custodial and non-custodial homes in the city.
Shelter homes for women in distress:

- 1 home for survivors of violence
- 2 short-stay homes
- 1 long-term shelter for abandoned women with physical disabilities and mental health issues
- 1 recovery and livelihood shelter home for women.
- Shelter homes for destitute and homeless women:
  - 3 shelter homes for destitute and homeless women.

Most of the shelter homes for women in distress that were funded by the government were diffident about researchers’ access to residents. Throughout the field work, the selection of participants from these shelter homes remained highly contingent upon the shelter home management. These were mostly confined and closed spaces with limited and regulated interactions with people outside.

On the other hand, shelter homes for homeless and destitute women—but also used by women survivors of violence—were open spaces that could easily be accessed by all. These proved to be easier for the research team in terms of access and engagement with survivor residents and became the source of most information.

**Selection of participants** was done purposively to cover as wide a spectrum of survivors who are (a) current or former shelter home residents, (b) who may require or are considering moving into a shelter home and (c) those who refuse to live in shelter homes or did not know about these spaces. Table 8 disaggregates the number of survivor participants included in this research study.

<table>
<thead>
<tr>
<th>Survivor</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Former resident (shelter home for women in distress)</td>
<td>10</td>
</tr>
<tr>
<td>Current resident (shelter home for women in distress)</td>
<td>8</td>
</tr>
<tr>
<td>Former resident (shelter for homeless)</td>
<td>1</td>
</tr>
<tr>
<td>Current resident (shelter for homeless)</td>
<td>6</td>
</tr>
<tr>
<td>Never stayed in a shelter home</td>
<td>3</td>
</tr>
</tbody>
</table>

Only women older than 18 years and not suffering from severe trauma or mental health conditions (as verified by the shelter home staff or counsellor) at the time of the field work were included in the research. Although we recognize the flawed reasoning of 18 years as the point of adulthood and view the boundaries of adolescence and adulthood as part of a fluid continuum, our decision to only include narratives of women older than 18 years reflects our need to sharpen the focus of the research toward a cohort of participants who have similar legal and policy entitlements.

Diversity of the people selected for the in-depth interviews in terms of caste, class and faith was intended to draw a wider representation (see table 11 on p. 45). Efforts were made to include upper-class women who had briefly or permanently left their families after experiences of abuse and/or violence. Staff with Action India, Jagori and Nazariya helped contact survivors via their crisis intervention services. Interviews with shelter home residents took place within the shelter home premises but without the presence of a staff
Two researchers were present at each interview—one asked questions and kept track of the conversation, and the other made observations and took notes. The informants interviewed and group discussions were also conducted at venues that were convenient to participants. Survivors or survivors who were interviewed who had to travel locally to meet the research team were reimbursed for travel expenses.

Because one of the objectives of the research was to **help build research capacities of staff members of participating NGOs**, they were first trained in **qualitative research methodology and ethics**. These trainings stressed upon the core belief that women who had escaped abusive families or circumstances must not be disturbed or judged through an investigative, privacy-violating, intimidating experience in the name of research. All field researchers participated in sessions on **sensitivity, informed consent, minimizing risk and protecting participants’ privacy and confidentiality**. For example, the names of survivors have been changed in this report to protect their identity. However, all pseudonyms retain the community identity of the participant. Guidelines prepared for consent taking and templates created for recording of data and observations during the research were discussed and shared.

The research team formulated **semi-structured field guidelines** for each of these tools, as well as for note taking (by the field researchers) and the informed consent form. Because the research in Delhi is part of a five-state study, the guidelines for each state are similar to maintain uniformity yet distinct to reflect the state’s socio-political contexts, especially issues around violence against women.

The process of formulating these guidelines **was a collaborative and participatory exercise**. In Delhi, for example, the researchers, along with the case workers and activists from the participating NGOs (Action India, Jagori and Nazariya), brainstormed to design the guidelines. **This process was cyclical**—the research teams went back to the drawing board to review and modify the tools after state-level training on research methodology and ethics and the pilot testing of the tools. The tools were reviewed by Renu Addlakha31 and by members of the research advisory committee.

Staff members of the participating NGOs were involved at different stages of the research, especially during the field work, as recruiters, note takers and observers. The research team visited shelter homes to seek permission, talk to their management and staff, observe the premises and then talk with the residents. After the pilot testing was done, the field work took place between April and October 2018. Interviews took place in Hindi and English; translations from Hindi to English were done by the researchers. Interviews and other data were analyzed and categorized, in keeping with the diversity of survivors, their dynamic contexts as well as the themes that emerged from the data.

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31 Renu Addlakha teaches at the Delhi-based Centre for Women’s Development Studies, an autonomous research institute supported by the Indian Council of Social Science Research.
LIMITATIONS

- Shelter homes—especially government funded ones—were apprehensive about the research and wanted prior permission from the requisite government department. The permissions were still pending at the time this report was published, and therefore the “sample” of shelter homes in this research are not fairly representative. For example, government-run statutory and non-statutory custodial homes are an important piece missing from the research.

- Shelter home management were closed to the idea of researchers talking to their respective residents and cited loss of privacy and victimization among their reasons.32

- Access to survivors was rather limited, and the findings are less representative than we wanted them to be. The findings speak of survivors and their environments, especially those from the most vulnerable and marginalized strata who could be contacted by the participating NGOs.

- This analysis does not delve into the financial management of shelter homes.

- The research team could not access data about inter-governmental or organizational responsibilities, especially with regard to budgets, fund disbursal and monitoring and evaluation.

- Much of the facts (years of establishment of homes, for example) were sourced from the public domain, wherever personal interviews were not possible. The veracity of such facts could not be checked.

CHALLENGES

- The 2018 exposés about physical and sexual abuse in shelter homes for girls in Bihar and other states helped lend critical importance to the study, yet turned a barrier of sorts because shelter homes became wary of external interest.

- The unavailability of public and up-to-date facts and information about schemes, shelter homes and so on narrowed the canvass of the study.

- Given the sensitive and fraught relationships between the staff of shelter homes and their residents, it was not easy for survivors living in shelter homes to share their concerns with the researchers.

- Former residents of shelter homes who are in paid employment could afford little time for detailed conversations or second meetings.

32 For a feminist research study, this concern was equally crucial for the researchers. Ethical processes and practices around confidentiality and informed consent were embedded in the tools, guidelines and trainings. All participants, management and staff of shelter homes were informed about them. It turned out that a few shelter home residents opened up to share deeply buried secrets and anecdotes that they had never shared with anyone, not even their counsellors or mentors who had been in long-running conversation with them. This shows how participation in research can have a positive impact, including the feeling of being heard, understood and reclaiming your own story.
CHAPTER III.

OBSERVATIONS AND FINDINGS

The following findings that concern both the survivors of violence as well as shelter home management and staff stem from the interviews and focus group discussions with survivors of violence and key informants as well as observations made during the field work.

To cover the different terrain of findings regarding shelter homes for women in distress, this chapter is divided into two descriptive parts. Section A on challenges with legislation and schemes is an appraisal of three major schemes: the Delhi Women and Children’s Institutions (Licensing) Act, 1956, the Swadhar Greh scheme 2015 (and its revised 2018 guidelines) and the Ujjawala scheme. Section B on findings about survivors and shelter homes presents the primary findings and observations, organized as separate themes and in the chronology of the entry-to-exit experiences of survivors.

A. CHALLENGES WITH THE CURRENT SCHEMES

Various government initiatives and schemes have been designed for women who may find themselves homeless due to violence, as discussed earlier, and without socioeconomic support. These mechanisms are meant to provide temporary accommodation and a range of psychosocial services so that a survivor can use the time to deal with the violence, take control of her life and find an independent and safe living arrangement. However, certain aspects of these initiatives (such as the following) are incongruous with their broader objectives of true empowerment of survivors.

“Certain aspects of these initiatives are incongruous with their broader objectives of true empowerment of survivors.”

Poor allocation of funds

From the 2015 Swadhar Greh guidelines to the 2018 modified guidelines, there have been no revisions in the allocation of funds toward staff salaries and expenditure related to residents (under “other recurring expenditure”). Budgets are not commensurate to the cost of living index.

Low staff salary

The schemes for shelter homes for women in distress have abysmal provisions for staff salaries that do not match the livability index for Delhi. Staff in a government-funded short-stay home in Delhi, for example, incurs out-of-pocket expenditure to compensate for the low salaries. Its warden—who works almost 24 hours each day—is paid 5,000 rupees per month, and the counsellor earns between 5,000 rupees and 7,000 rupees. The shelter’s management explained that they cannot attract experienced professionals nor retain staff because of the poor salaries. This also impacts the motivation of the staff.

33 In this chapter, the term “shelter home” refers to the places intended for women in distress, unless specified as a shelter home for homeless persons.
The salaries of the staff under the Swadhar Greh scheme continue to remain insufficient and far below Delhi’s minimum wage as well as the national minimum wage requirements. The salary of the highest paid staff, the superintendent, falls below Delhi’s stipulated minimum wage of 15,296 rupees per month (in the non-matriculate, supervisory and clerical staff category). The salaries for both full-time counsellors and security guards are the same, at 10,000 rupees.

Table 9. Salaries in the Swadhar Greh scheme

<table>
<thead>
<tr>
<th>Staff positions at Swadhar Greh</th>
<th>Salary, per month (rupees)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resident superintendent</td>
<td>12,000</td>
</tr>
<tr>
<td>Counselor</td>
<td>10,000</td>
</tr>
<tr>
<td>Guard or watchman</td>
<td>10,000</td>
</tr>
<tr>
<td>Office assistant</td>
<td>8,000</td>
</tr>
</tbody>
</table>

**Delhi minimum wages (April 2018)**

<table>
<thead>
<tr>
<th>Education level of supervisory and clerical staff</th>
<th>Salary, per month (rupees)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-matriculate (not passed Class 10)</td>
<td>15,296</td>
</tr>
<tr>
<td>Matriculate but not graduate</td>
<td>16,858</td>
</tr>
<tr>
<td>Graduate and above</td>
<td>18,332</td>
</tr>
</tbody>
</table>


In the revised 2016 provisions of the Ujjawala scheme, the fund allocated toward salaries for the staff of the homes is very low. The salary for a full-time social worker and that for a clinical psychologist, for example, is as low as 6,000 rupees per month.

Table 10. Salaries in the Ujjawala scheme

<table>
<thead>
<tr>
<th>Staff positions at Ujjawala homes</th>
<th>Salary, per month (rupees)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Project director</td>
<td>10,000</td>
</tr>
<tr>
<td>Social worker x 2</td>
<td>6,000 x 2</td>
</tr>
<tr>
<td>Clinical psychologist</td>
<td>6,000</td>
</tr>
<tr>
<td>Clerk-cum-accountant</td>
<td>5,000</td>
</tr>
<tr>
<td>Guard x 2</td>
<td>5,000 x 2</td>
</tr>
<tr>
<td>Doctor (part time)</td>
<td>6,000</td>
</tr>
<tr>
<td>Psychiatrist (part time)</td>
<td>6,000</td>
</tr>
</tbody>
</table>

Meagre budgetary allocations for residents:

In both the Ujjawala scheme (2016) and the Swadhar guidelines of 2015, the allocation toward food expenses per resident was 1,300 rupees per month, which was approximately 43 rupees per day and certainly not commensurate with the current cost of living. This allocation was not revised in the Swadhar guidelines of 2018.

Where residents are required to hand over all their belongings and cash to the superintendent upon entry, there is a provision for “pocket money”. However, this seems to be only a token provision in the scheme because the amount of money allocated per month for a resident is only 100 rupees.
Social welfare approach:

Welfare and rescue remain central to the vision and practice of these schemes. This is evident from the language used. For example, terms such as “inmates” to signify residents and “superintendents” to imply caretakers continue to be used. The Ujjawala scheme specifically uses the term “victim” to signify survivors of trafficking. The residents are imagined as helpless women requiring the State to serve as “protector”, thereby justifying the custodial practices of these homes, in which women are kept under lock and key, supposedly for their own good. In this understanding, the residents are denied their agency and identity as citizens with the right to choose and with dignified access to entitlements.

Non-viable vocational training

The schemes do not effectively address the complex issue of employment and income generation. For example, despite the provision of vocational training in the homes in the Swadhar Greh 2018 scheme, there is no mechanism to guarantee quality of training and employability through the courses offered and the skills learned. Trainings are limited to the traditional and feminine vocations of mehendi (henna) application and papad (poppadum or cracker) making. Women have no or little choice in the skills they can learn. Without a well-envisioned plan of action within the scheme, shelter homes run courses that perpetuate gendered work and fail to equip women with skills that will attract a living wage. The Delhi Women and Children Institution (Licensing) Rules, 1960, for example, states that the agency running the home should provide a room for vocational training but offers no guidelines for its functioning for shelter homes that are not directed by a specific scheme.

Attitude toward trafficked women and sex workers

The livelihood options offered to “rescued” sex workers in shelter homes does not match their earnings in sex work. Many women lose interest in such work and prefer going back to sex work. Problematically, the Ujjawala scheme imagines all sex workers as “victims” who are trafficked and who need to be “rescued” and detained until a court orders their release or they are claimed by the family. Acknowledgment of consenting sex workers and the need to decriminalize sex work are missing from the State’s account of rights and entitlements of sex workers. The Trafficking of Persons (Prevention, Protection and Rehabilitation) Bill, 2018, for instance, continues to frame sex work within morality and sets out to alienate sex workers instead of reintegrating them with the community.

“Without a well-envisioned plan of action within the scheme, shelter homes run courses that perpetuate gendered work and fail to equip women with skills that will attract a living wage.”


Impractical rehabilitation:

Roma Debabrata, President and Founder of Stop Trafficking and Oppression of People (STOP), pointed out an impossible rehabilitation mandate of the Ujjawala scheme:

“'The rehabilitation process depends on how much we are able to engage with the girls. It may take months or more, so they can be counselled, emotionally settled and empowered. If they are restored without taking their trauma, social-economic background and other factors into account, the girls face challenges in their real lives. If they are restored or reunited with their families (which is the best option according to the rule) under directives from the authorities, this can fail because the family refuses to accept them or they do not have employable skills for their further rehabilitation.

When dealing with trafficked survivors, it is important to recognize that they have undergone immense physical, mental and emotional trauma. Their behavior and their body language were forcibly changed with every passing day. They may have also forgotten their language and culture. If they are restored without a proper rehabilitation plan, sometimes they come back to the shelter home with deep psychosocial trauma or many get re-trafficked. Restoration must happen in its spirit, not only by the word; if the child is sent back immediately into the same situation she fled or was lured or abducted from, it will be detrimental for her proper rehabilitation.’

What is most striking about these three schemes is their imagination (or, lack of it) for shelter homes. They continue to be based on a benefactor-beneficiary equation between the State and the survivor and sidestep the framework of human rights that brings dignity and entitlement to the residents of the shelter home.

If only the schemes could conceive of and articulate a more empowering vision of shelter homes could the bar be raised for these spaces. A deeper shift in the definition of these homes is still amiss.

B. CONTEXT OF SURVIVORS AND SHELTER HOMES

“'Women have never been in favor of leaving their homes, in spite of violence. Koi apna ghar nahin chodhna chahta. Ghar toh ghar hi hota hai.” (No one wants to leave their home. One’s home is, after all, one’s home) – Sudha Tiwari, Chairperson, Shakti Shalini

The remainder of this chapter responds to the following aims of the research: documentation of entry-to-exit experiences of residents (current and former) in shelter homes, the state of services and conditions in the shelter homes, mapping of survivors’ entitlement-based links to services and challenges for the staff and management of the shelter homes.
Survivors’ awareness (or lack) of shelters

The popular Hindi terms for a woman’s marital residence—sasural (in-laws’ house) or pati ka ghar (husband’s house)—identify the in-laws or the husband as its owner. The natal family home is called maika, or mother’s house.

Semantically, neither of these two houses are identified as belonging to the woman survivor; in fact, young, unmarried girls have traditionally been told that their real family or home is the marital one. The women we encountered also spoke in these terms. And except for the upper-class graduates we met, the women were not aware of their rights in both homes, especially the legal right to residence in the marital household. Women who access women’s rights organizations, such as Jagori, must be made aware of their legal right to reside in their natal or marital home.

Although the Swadhar Greh scheme specifically directs state governments as well as implementing agencies to raise awareness of the availability of and provisions within shelter homes, there is little that has been done on that account. Even contact addresses and phone numbers of shelters listed on offline and online channels are outdated and/or incorrect. (Random inspections conducted in 26 Swadhar Greh homes across four states by a National Commission for Women-appointed inquiry committee also revealed similar informational anomalies).36

Shortage of shelters

Despite the high rates of violence against women in Delhi and therefore the need for more safe spaces for them, the number of shelter homes for women in distress has not grown proportionally. The few certified shelter homes for women in Delhi operating since the 1960s have had stringent criteria for admission—they would not accept destitute or homeless women because they were designed for women in distress, even though the line between the two could be very thin, if at all. For a woman to be seen in distress, her case must be certified as such by the police or a court. Women with particular disabilities or certain health conditions (physical and mental) are directed to specialized homes, which are also often fully occupied and short on staff (as detailed in the next point).

The ratio of survivors of violence to the number of shelter homes in the National Capital Region continues to be dismal. As the map in figure 1 depicts, not every district has a shelter home for women in distress; even a single home in each district may not be adequate, especially in the largest districts toward the north and west.

Admission issues

Women’s access to shelter homes is mostly determined by strict admission criteria. In state-run or funded shelter homes, admission is not given to women who approach the home directly. They are required to come via a court, the police or a referral organization (such as women’s rights organizations). However, many survivors tend to avoid approaching the police due to fear of further harassment. Only six of our participants had accessed a shelter home via the police.

“We do not know who this woman is, where is she coming from? She could have even murdered someone. So, we cannot let anyone in without some reference.” – A staff member of a short-stay home

Most shelter homes—especially the government-run or funded ones—insist on a daily diary (DD) entry at the nearest police station and a medico-legal certificate (MLC) at the time of admission. Yet, the government guidelines do not require a medical check-up to be done before admission. In the Swadhar Greh 2018 guidelines, the medical check-up is to be done within three days of admission, whereas in the Delhi Women and Children Institution (Licensing) Rules, it is needed within two days of admission.

For many survivors of physical and sexual abuse, the timing and process of a medical check-up can add further trauma, especially when they immediately need a place to move into. A protection officer from Delhi expressed her frustration about the rigid timing of the MLC during admission:

37 While the Swadhar Greh 2018 guidelines clearly state that women can approach the homes on their own or through references, the Delhi Women and Children Institution (Licensing) Rules (1960) state that the homes cannot admit a survivor without the reference of a social welfare agency, the police, a magistrate or any other source recognized by the Social Welfare Board, which is the licensing authority.
“I had a really tough time trying to admit a survivor in a custodial home because they insisted that I get her MLC done first. Even though I was in the same department and I had a court order for her to be immediately admitted into a shelter home. They insisted on all her records and wanted to speak to the investigating officer. They just would not listen to me. I was helpless. The investigating officer who had previously handled her case was not cooperating either. I pleaded with them to at least keep her for the night. They agreed to this only because I am from the department. I got the MLC done the next day.”

There are shelter homes where admission is not conditional upon the MLC and DD entry. So, when survivors who approach them at night or are facing a threat to their life or are in other dire situations, they are not forced into these formalities first. The MLC and DD entry are done within a day after admission, so as to first address her psychological and safety needs.

Another reason cited for denial of admission is the supposed mismatch between survivors and the shelter homes’ criteria for admission related to a woman’s age, physical and intellectual abilities or conditions and so on. For example, the short-stay home in the Nirmal Chhaya complex run by the Department of Women and Child Development specifically denies admission to “women and girls who are suffering from incurable, infectious or communicable diseases or physical disability or mentally retarded or leprosy affected are not eligible for admission.” In this attempt for segregation on the basis of specific physical or mental disabilities and conditions, survivors who are old or disabled but in need of a safe space are out of luck because there are few places in the city designed for them. The places available to them are crowded, unhygienic and, due to the common problem of staff shortage, are unable to accept more women or even provide the care and support they need. Asha Kiran, Delhi’s state-run mental health hospital, is a prime example: It continues to suffer from a host of infrastructural and human resource issues (see more details on p. 74). Due to the specificities of admission criteria, a range of survivors either fail to make it to any shelter home or stay relatively unattended in shelter homes that are beset with a host of their own limitations.

Survivors who access and avail of shelter homes and those who do not

Although state- and NGO-run shelter homes are open to women from across the class and caste divides, they are mostly occupied by women from the disadvantaged strata of society (table 11). Of the three in-depth interview participants who were from middle- and upper-middle-class backgrounds, only one had stayed in a shelter home for women in distress and that, was only a brief stint when her life was in danger. These women and others we met who were employed and from middle- and higher-income backgrounds preferred they pay for their shelter because of the quality of services and the freedom of mobility they got in exchange.

For women from middle- and upper-income households, the hostels for working women are their preferred shelter home. But there are not enough such hostels. According to the 2014 annual report of the Ministry of Women and Child Development, there were ten working women’s hostels in Delhi, of which only three had facilities for differently abled women and none had daycare facilities for children.
Table 11. Profile of survivor participants in the research study

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Assigned name</th>
<th>Age</th>
<th>Religion</th>
<th>Caste</th>
<th>Class</th>
<th>Education</th>
<th>Marital Status</th>
<th>Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mina</td>
<td>26</td>
<td>Hindu</td>
<td>Low income</td>
<td>Studied till Class 10</td>
<td>Separated</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Sania</td>
<td>29</td>
<td>Muslim</td>
<td>Low income</td>
<td>Studied till Class 10</td>
<td>Married</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Tabasum</td>
<td>23</td>
<td>Muslim</td>
<td>High income</td>
<td>BA in English</td>
<td>Separated</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Arshi</td>
<td>29</td>
<td>Hindu</td>
<td>General Mid-income</td>
<td>BA in English literature</td>
<td>Never married</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Novi</td>
<td>19</td>
<td>Hindu</td>
<td>SC/ST Low income</td>
<td>Unschooled</td>
<td>Never married</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Neeta</td>
<td>19</td>
<td>Hindu</td>
<td>No data Low income</td>
<td>Completed school</td>
<td>Separated</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Janvi</td>
<td>21</td>
<td>Hindu</td>
<td>No data Low income</td>
<td>Pursuing BSW from IGNOU</td>
<td>Never married</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Lekshi</td>
<td>35</td>
<td>Hindu</td>
<td>SC/ST Low income</td>
<td>No data</td>
<td>Separated</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Chhavi</td>
<td>60+</td>
<td>Hindu</td>
<td>No data Low income</td>
<td>No data</td>
<td>Widowed</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Srila</td>
<td>31</td>
<td>Hindu</td>
<td>OBC Low income</td>
<td>Pursuing BSW from IGNOU</td>
<td>Separated</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Nina</td>
<td>34</td>
<td>Muslim</td>
<td>Low income</td>
<td>Completed primary education</td>
<td>Never married</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Sanam</td>
<td>26</td>
<td>Hindu</td>
<td>No data Low income</td>
<td>Unschooled</td>
<td>Divorced</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Sarita</td>
<td>60+</td>
<td>Hindu</td>
<td>SC/ST Low income</td>
<td>Unschooled</td>
<td>Abandoned</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Zina</td>
<td>29</td>
<td>Muslim</td>
<td>Low income</td>
<td>Completed school</td>
<td>Abandoned</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Priyam</td>
<td>29</td>
<td>Hindu</td>
<td>General Low income</td>
<td>Unschooled</td>
<td>Separated</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>Bhuvinder</td>
<td>45</td>
<td>Sikh</td>
<td>Low income</td>
<td>Completed primary education</td>
<td>Married</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>Nirmayi</td>
<td>45</td>
<td>Hindu</td>
<td>General Mid-income</td>
<td>MA Sanskrit, and diploma in computer education</td>
<td>Never married</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Vineeta</td>
<td>24</td>
<td>Hindu</td>
<td>General Low income</td>
<td>Completed school</td>
<td>Separated</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>Jeevi</td>
<td>19</td>
<td>Hindu</td>
<td>OBC Low income</td>
<td>BA (discontinued)</td>
<td>Separated</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>Sakshi</td>
<td>50</td>
<td>Hindu</td>
<td>No data Low income</td>
<td>No data</td>
<td>Widowed</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Shabana</td>
<td>45</td>
<td>Muslim</td>
<td>Low income</td>
<td>No data</td>
<td>Married</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td>Khaleda</td>
<td>29</td>
<td>Muslim</td>
<td>Low income</td>
<td>BA political science from IGNOU (discontinued)</td>
<td>Separated</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td>Roopa</td>
<td>35</td>
<td>Hindu</td>
<td>No data Low income</td>
<td>Completed school</td>
<td>Married</td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>
Table 12. Socioeconomic profile of the survivor participants

<table>
<thead>
<tr>
<th>Class</th>
<th>Low income (23)</th>
<th>Middle &amp; upper-middle (2)</th>
<th>High income (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion</td>
<td>Hindu (21)</td>
<td>Muslim (6)</td>
<td>Sikh (1)</td>
</tr>
<tr>
<td>Caste</td>
<td>General</td>
<td>OBC</td>
<td>SC/ST</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

Note: SC=Scheduled Caste; ST=Scheduled Tribes; OBC=Other Backward Classes.

A critical dimension that has not been adequately raised in the public discourse is women's right to property. After all, shelters or safe spaces can only be points for transition toward long-term solutions. Ownership of property is “the single most important factor affecting women’s situation”, yet evidence tells us that women’s actual control over land, if at all, is poor.38

Women continue to find it difficult to even talk about the issue,39 as explained in the following excerpt from an interview with one of the survivors.

**Lifelong Discrimination**

“I don’t feel free. Never. Although I can do what I want, but like I said, my mind is colonized. If I go out after work hours, I can choose to come late...even at 1 a.m. I have created that space for myself after all these years of arguments. But the moment it is 10 p.m., in my head I feel very uncomfortable. I cannot feel free. I am from an upper-class family. My father and brothers own a lot of property. It is all in the name of my brothers or their wives. They think I will move out after marriage, so none of it is in my name. I have thought about if I can ever have a conversation on this. But I just cannot. Because I feel it is weird. I am a non-contributor to my house. I am not a part of the family business. I am not bringing in any money. Not sharing any household work. Not sharing my income. My brother is earning. Emotionally, I am not available to them. They do not even count on me because of our strained relationship. I don’t even feel a right to that property.” – Kirti, 31-year-old postgraduate professional from a wealthy family

38 Prof Bina Agarwal's work on women and land rights.
39 National campaign called #Property for Her. For more information, see Feminism in India, https://feminisminindia.com/2017/07/11/property-for-her-campaign/.
The survivors we met in shelter homes, safe spaces or in other living arrangements comprised married and single women (deserted, abandoned, separated, widowed, divorced or never married) who were with or without children (see table 13).

Table 13. Survivor participants marital status

<table>
<thead>
<tr>
<th>Status</th>
<th>Number of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never married</td>
<td>7</td>
</tr>
<tr>
<td>Married</td>
<td>5</td>
</tr>
<tr>
<td>Abandoned</td>
<td>4</td>
</tr>
<tr>
<td>Separated</td>
<td>9</td>
</tr>
<tr>
<td>Widowed</td>
<td>3</td>
</tr>
</tbody>
</table>

They were trapped in intersecting cycles of structural and domestic violence, including poverty, denial of rights and entitlements by their families as well as by a negligent system that is supposed to offer them urgent redress. Many of the women were migrants to Delhi. For instance, when four survivors who had experienced abuse and/or harassment by their natal family came to Delhi for shelter, they were denied their right to choice regarding education, vocation and/or marriage, had been forced to marry against their wishes or had experienced emotional, physical, financial and/or sexual abuse (including incest). Five women suffered a range of violence and/or harassment within their marital family and left for shelter in Delhi: repeated marital rape, emotional and physical abuse by the husband or in-laws, dowry-related crime, among others. As a result of such violence, all the women had been rendered homeless for a short or indefinite period of time.

Increased reporting of natal family violence

Accounts from the survivor participants as well as the shelter home management or staff suggest that more unmarried women have been speaking out against the harassment and discrimination they endured in their natal family. Of the 28 respondents we spoke with, nine had experienced abuse of some form in their natal family, including child sexual abuse. Parents and elder siblings were described as rejecting young women’s choices to study, work and have relationships or marry and tended to impose restrictions regarding their mobility and freedom. As Sudha Tiwari, Chairperson of Shakti Shalini, explained:

“Now there are more right-to-choice cases. Women are asking for freedom to study, to live separately so as to live on their own terms. And this causes friction in homes. Women seek more independence now. And this is good.”

Sonakshi, a 34-year-old postgraduate student, comes from a high-income family who had harassed her through her younger years:

“My house was like a jail with no freedom of action or thought. Before college, the violence that I faced was more mental. Physical violence came later. If we were walking on the street and I said something to my father, he would hurl abuses without the slightest of provocation. I was around 16 and hearing abuses was tough. If I asked for a pair of jeans, I was yelled at for asking.... I had no choice in anything and it was infuriating. Once I started college, the physical violence began. Once, my father beat me so badly that I was on the floor. He kicked me in the womb area, in the stomach. I was not given food for some time. The servant at home, a Nepali man, would give me food from his share.”
Natal families are mostly the first point of contact for Indian women experiencing violence. However, as daughters, they are often not in a position of power in the gendered structure of the natal family. The powerlessness and isolation experienced by these women is tremendous and cannot be ignored or trivialized. Yet, it has been unrecognized or invalidated for a long time. According to shelter home staff and other stakeholders we talked with, a slow shift is taking place among survivors: they are getting more vocal about the discrimination and violence they endure at the hands of their natal family.

The stigma of shelter homes

“Logon ko lagta hai shelter mein galat kaam karwa rahe hai, toh mere rishtedar aur bhai behen mujhe kehte the ki tu shelter home mein mat reh, woh acchi jagah nahi hai.” (People think that shelter homes make residents do wrong things, so my relatives, brother and sister would tell me to not live in a shelter home because they are infamous.) – Khaleda, 29

Shelter homes have been regarded with suspicion ever since they first appeared. The stigma they carry has prevented many women from even considering them as an option. Classist and casteist attitudes also contribute to this deep-rooted bias: Women who live in these shelters are often from the more marginalized strata. Nari Niketan, for example, one of the oldest shelter homes in Delhi, has the reputation as a place for sex workers. Survivors explained that they and/or their family would not want them to live in a shelter home unless there was a threat to their life or they were unable to care for themselves. Shelter homes are seen as the last resort. For example, Seema left her mother’s house for a shelter home just for a week to escape her husband’s threat to kill her:

“I was staying with my mother after I left my husband. But then he came to my mother’s house and threatened to kill me and my entire family. It was then that my mother told me that I should take the help of Jagori and stay in the shelter home for some time. At least I would be safe there.”

Given the poor living conditions, strict regulations and restrictions on mobility, even many women’s rights organisations do not like to refer their clients to shelters, unless that is the only option available. A staff member of a short stay home shared that women avoid mentioning to their prospective employers that they live in a shelter home for fear of judgement.

Members of the Mahila Panchayat who work across different neighbourhoods of Delhi were unanimous in their observation about the image of shelter homes:

“Women are not willing to go to shelters easily. They feel that if they go to a shelter home it will raise questions about her character. People tend to ask ‘where did you stay for so many days?’”
Shelter homes as ‘safe spaces’

Despite the wider impression of shelter homes as dubious places, all residents of shelter homes - current and former - unequivocally acknowledged their critical role. Especially in instances where a survivor’s safety is in question, the shelter home has proved to be a safe space. They acknowledged that it functions as a key piece in the journey of a survivor who is trapped in an abusive home and is fearful that if she leaves, she may find herself on the streets. These shelter homes were the only spaces for many women who have nowhere else to turn to. Following excerpts from shelter home residents’ accounts underscore the positive role played by shelter homes in their lives:

"Initially I was scared to live in a shelter...on TV I had seen and heard about NGOs, how they keep women...but it was not like that at all. It was like a family. I felt safe. They do not give the address to anyone." - Khaleda, 29 years

"They feed and clothe you, they also train and help you find jobs. Allah ka shukr hai (am thankful to Allah) I came here. I feel safer here than I would with my own family." - Zina, 29 years

"If I think for myself then yes there are difficulties here...but there is peace here, I get my meals on time. So when I consider these things then the difficulties take a back seat. I don’t have any financial reasons for coming here. I am here because I am not safe outside." - Tabassum, 23 years

Activists such as Indu Prakash Singh who have worked with survivors and understand the shortcomings of the shelter home space also agree with the critical importance of these institutions:

"Violence on the streets is so rampant and no one can escape it. So these shelter homes protect them from violence".

Maya Shankar who ran Sangini’s safe space for a number of years adds another perspective to the relevance of shelters:

"Dynamics change when an individual moves out of the house. A shelter space that is secure can be powerful in providing the individual with bargaining and negotiating power...especially with legal backing."
C. ISSUES AFFECTING SHELTER HOMES AND THEIR RESIDENTS

Sheltered or incarcerated? A disempowering experience

In all shelter homes for women in distress that we visited, each resident had to hand over her mobile phone to the staff upon admission. Survivors could either make telephone calls at fixed times and/or with permission from the staff of the home. But the calls were usually supervised by a staff member.

“When speaking once on the phone, I started to cry. And the shelter in-charge taunted me asking, ‘Yahan pe kya tumhe koi maar raha hai ki tumhein itna dukh ho raha hai jo tum ro ke baat kar rahe ho? (Is someone hitting you here that you are so unhappy and crying while talking?) One cannot talk freely on the phone there.” – Mina, 26

Residents in all the shelter homes were not allowed to enter or leave independently. In one home, residents could leave for work but only after receiving permission from the staff. In another shelter, residents were not allowed to leave at all. Coping with trauma within a closed, jail-like environment was not seen as healthy by some survivors, while others came to terms with the restrictions as unavoidable and necessary:

“Jab mein shelter home me aayi thi tab mujhe aisa laga ki mein ek jail se nikal ke doosri jail mein aa gayi hu. Permissions lene mein mujhe badi irritation hoti thi kyunki ghar pe aisa nahi tha. Par thode time baad aadat se ho gayi aur samaj mein aaya ki yeh hamari safety ke liye hi hai.” (When I moved to a shelter home, I felt as if I had moved from one jail to another. It was irritating to seek permissions because it is so unlike one's home. But in time, I got used to it, and I understood that it was for our safety.) – Khaleda, 29

During a group discussion, members of Mahila Panchayat from around Delhi raised the issue of employment-related mobility as a foremost concern for employed women survivors of violence. Shelter homes that do not allow residents to hold jobs perpetuate their dependence on outsiders. Such restrictions made many survivors avoid a shelter home and instead endure abuse or live in a shelter for the homeless because they do not restrict residents’ mobility or communication.

Shelter in exchange for autonomy: Shelter homes tend to emphasize women’s safety as their priority, even if it comes at the cost of residents’ privacy or autonomy. A former caretaker of a shelter home said that she was successful in rehabilitating women through vocational training and jobs by keeping them from developing relationships, both within and outside the home. She narrated an incident in which she had asked a resident to leave the home because she found that the young woman was in a relationship with a man. The caretaker said she felt betrayed by the resident because she hid this aspect of her life from her. Her fear, the former caretaker said, is the possibility of pregnancy or the woman’s escape from the home:

“‘We cannot take care of a pregnant woman here. They have special needs, and we are not equipped for that.”
Within the home, she had ensured that women do not develop relationships with each other. To keep a check, she changed the location of residents’ beds from time to time and ensured that they only slept on their allotted beds.

Reformist attitude toward survivors

“Our mission is to educate, economically empower women, to bring a family together, to give them moral education, to make them more patient. We keep telling the women, ‘Jitna shaant rahogi utna ghar nahi tootega.’” (The more calm you remain, the greater the chances of keeping your home together.) – The founder of an NGO that runs a shelter home for women in Delhi

Certain shelter home staff members referred to residents and survivors as bachhas (children) and used terms such as bechari (victim) or “abnormal” and “mentally disturbed” for women suffering from mental health issues. Women were described as nasamajh (immature) and ziddi (stubborn). Such language conveys paternalistic, patronizing and, in some cases, condescending attitudes. As one staff member we met told us:

“Ye ladkiyan love karke ghar se bhag jaati hain boyfriend ke saath aur phir pakde jaate hain toh police idhar leke aa jaati hain. Par ye kahan rehte hain home mein, hamesha bhaagne ki koshish karte rehte hain. Is liye sab gate lock karke rakhte hain idhar ka.” (These girls fall in love, elope with boys and then they are caught and brought here by the police. But they don’t stay in the home because they are always planning to escape from here. This is why we have to lock the gates here.)

In her long relationship with shelter homes in Delhi, Sunita Thakur, a consultant for Jagori’s violence intervention program, observed that they harbor negative views of women who make their own choices—be it marrying or ending their marriage. Such women are also blamed by the natal family if and when there is conflict in their relationship with the husband and in-laws and could even be left alone to deal with the situation.

Differing approaches to length of stay

The time allotted for rehabilitation of survivors in a shelter home is a dimension that NGO administrators and survivors find unrealistic. Traumatized women are rarely able to become emotionally and economically self-reliant in the short duration expected by the state authorities. Bharti Sharma, Honorary Secretary of Shakti Shalini, explained:

“The government wants to see new admissions and rehabilitations every few months. That’s not possible with these kinds of women. They take time. And these women cannot be sent away so soon. A woman who is a rape survivor or has mental health issues cannot show quick or tangible results. They take time to settle down and then need quite some time to start off again. And the donors also need measurable and specific outcomes.”

------------------------

The difference in approach between the State and the shelter home management and staff came across as a long-standing point of disagreement.

**Insensitive and negligent staff**

Former and current residents told stories of staff members’ disrespectful and humiliating behavior. For example:

> “Ma’am ne mujhe bola thi ki “tumhare ghar mein koi tumhara ilaaj nahi karwaya ki tum itne bimariyon se bhare ho?” (Ma’am asked me, ‘Did no one in your family get you treated, you are full of illnesses.’) At night when my stomach ached, I would not tell the warden because she would say I was lying: Natak karti hai, is ke pet mein dard nahi hai.” (She is acting, she is not in pain.)

This is the experience of Mina, a former resident of a short-stay home, whose health had started to deteriorate because of a kidney-related condition while she lived there. She used to be in pain often. Yet, the shelter home did not help her beyond telling her to drink more water. She remembers the food at the home as non-nutritious. She received medical attention only after she ran away from the shelter home and moved to another one in the city.

When Srila lived in a short-stay home, she felt disrespected and unwanted:

> “Staff ko koi bolne ka tareeka nahin hai. Tu tadaka hai. Parvah nahin karte...Rob jamate the, bas.” (The staff do not know how to talk well. They are rude and insulting. They don’t care.... Would act bossy, that is all.)

**Discrimination within the shelter homes:** According to a current resident, it was the residents’ responsibility to clean the bathroom that was exclusively used by the staff, in addition to the one used by residents.

> “It is like upper-lower caste discrimination here. The staff is the upper caste and the residents the lower one. The higher castes have their own cups to drink water and chai from. We cannot use those cups. They also have their own washroom. We cannot use that washroom. All of us residents have to share one washroom. It is pretty difficult.” – Tabassum, 23

At another shelter home for women in distress, the researchers saw the residents washing tea cups used by the staff.

**No, little and/or delayed funds**

> “The grant from the government barely covers the food expenses.” – A management representative of a shelter home

It could either be the non-availability of funds, the low quantum of funds or even the delayed receipt of funds, but every shelter home this research covered had some funding issue as its primary concern. The government-funded homes had raised these concerns periodically with officials, but to no avail. As the latest Swadhar guidelines indicate, there has been no change in the budget provision for shelter homes.
In Delhi, there were no specific shelter homes designated for survivors of commercial sexual exploitation prior to 2002. STOP was the first NGO to run a pilot project for repatriation and rehabilitation of survivors of commercial sexual exploitation (after the special bench of the Delhi High Court entrusted it with the responsibility). Subsequently, STOP’s care and support home became the basis for the creation of the Ujjawala scheme. The home was the first Ujjawala shelter in Delhi, opening in 2012, but it operated only for six months because of a delay in the release of funds by the state authorities:

“...We shut it and withdrew from the government scheme. After six months, we received our first instalment by court order, and to date, we have not received the second instalment. We had sent all the financial and narrative reports that were required from us. But we still did not receive the payment.” – Roma Debabrata, President and Founder of Stop Trafficking and Oppression of People

The high financial costs (in addition to the risks) involved in the rescue and rehabilitation of trafficked girls and women under the Ujjawala scheme deter organizations from getting involved. The expense incurred also far outstrips the amount sanctioned under the scheme. As well, as seen in the case of STOP, delays in the disbursal of funds to agencies operating within the Ujjawala scheme add to their challenges.

Shakti Shalini, one of Delhi’s oldest NGO-run shelter homes that started as a short-stay home, also experienced a severe funding deficit:

“...In the early years, there was no shortage of funds. We had funds from embassies and corporations. UNIFEM also supported us. We were funded as a short-stay home for many years under a license. But then came a time when the funding stopped. I have heard that funders think that funding a shelter home is like putting money in an andha kuaan (dark well). You cannot see where the money is going. You do not see returns. We had to shut down the shelter home for a few years. We moved the women to the office and then made alternative arrangements for them..... Sometimes there was not even enough money for food or a gas cylinder. We had no money to pay salaries to the staff. Many have worked pro bono, and many of us continue to work pro bono.” – Bharti Sharma, Honorary Secretary of Shakti Shalini

Funds are also cited as the reason by shelter home management for a range of concerns and dysfunctionalities, such as poor living conditions, lack of infrastructure or non-nutritious food. Even after news reports drew attention to the issue of funds, nothing changed.

**Poor delivery and convergence of support services**

Across the shelter homes visited, there was little or no uniformity of operations, service provision or links to entitlements. Among the staff, there is a lack of clarity and sensitivity with respect to availability and quality of services, even in the homes that are funded under the same scheme. Each home has its own pathway for service provision, their own pool of resource persons (if at all) and their own struggles along the way. For example, each shelter home has made its own arrangements for medical help for residents, transport to hospitals, mental health services, vocational training and so on. There is no common or minimum standard for the provision of services for residents. For example, one shelter home used the
services of a visiting therapist to provide the counselling the women needed, while another had to take residents to a mental health NGO.

On the other hand, during a visit to a One-Stop Crisis Center at a leading government hospital in south Delhi, the staff – doctors, nurses and other helpers – did not know of the name One-Stop Crisis Center or even its common abbreviation, OSCC. They continued to call it the “MLC room” of the hospital, in reference to the police medico-legal certificate they provide. The impression given by a reluctant staffer who spoke briefly and anonymously was that the room is meant for rape and sexual assault case examinations. Instead of the promised single-window service for a range of medical and psychosocial support services, the services were available at different locations within the hospital campus.

**Police**

“*Har baar nai chidiya le aate ho* (Each time you bring a new bird).”
– A police officer’s response when a shelter home in-charge introduced a survivor to him at the police station

Data from the NFHS IV indicate that the most common sources of institutional support sought by women experiencing domestic violence are the police (at 4 percent) and religious leaders (at 2 percent). Such few survivors reaching out to the police calls for serious and urgent deliberation on what prevents more from doing so. During the field work, both survivors as well as service providers offered some insights into possible reasons.

For instance, the team at 181 mobile helpline (run by the Delhi Commission of Women) spoke of the lack of cooperation from the police. Although the teams at 181 and the police are supposed to work in coordination, we were told that police officials do not share their reports easily. Their response time to calls is sluggish, even during situations of violence and urgency. They also do not readily lodge police reports and instead rationalize their reluctance:

“*Yeh road hamare thane mein nahin aati, aap doosre thane jayein.* (This road is not part of our jurisdiction, go to another police station.) Or, they will tell survivors of violence to not to report the case because ‘*yeh tumhara gharelu mamla hai*’ (this is your private matter).”

A Delhi Commission for Women-appointed counsellor at a women’s shelter home said that many police officials perceive the existence of shelter homes as the reason why more women now leave their family. To avoid registering cases, they tend to refer them to the Special Police Unit for Women and Children in Delhi, which, according to the counsellor, rarely leads to a police report.

Sudha Tiwari, the Chairperson of Shakti Shalini, described the shifts she has observed during her decades of experience with the police in Delhi:

“The police used to be pretty insensitive, make sexist comments. We were made to wait endlessly. I remember having stayed a night at the

police station just to file [a police report]. They would say, ‘Madam, aap ghar bigadne wali ho’ (Madam, you break families).... The constable would behave like a judge and pass judgments about everyone. And the police station was the court. We would do a lot of their work, such as talking to the girl, writing her case, contacting the family. Things are better now…but the system can still be corrupt and difficult.”

A staff member of a shelter home reported that the police do not always get a proper examination of a medico-legal case before bringing women to the shelter, even in cases in which a woman is obviously unwell. Instead, the police officials try to pass on their work to the shelter home staff, such as finding a woman’s address.

**Protection officers:**

“ The [Protection of Women from Domestic Violence Act ] has made it easy for women who are facing abuse to assert their right to residence. There have been cases where a woman who had been thrown out of her marital home was sent back to the same home by the court within two days. So, more than accessing shelter homes, we generally try to get her claim on her marital home.” – Protection officer, Delhi

Under the Protection of Women from Domestic Violence Act, the role of the protection officer is a significant link between the survivor and a gamut of services she requires. However, the small number of protection officers in Delhi can be a cause of concern for the survivor as well as the officers who may find themselves juggling between many cases. As of November 2018, there were 18 protection officers for all of Delhi’s 11 districts. Many of them are drawn from the government’s cadre and are thus partly or fully employed in other roles. The additional charge of being a protection officer makes them overworked and underpaid, which can affect their motivation in the role. Additionally, the task of enabling survivors’ access to justice is complicated when dealing with the police. As a senior protection officer explained:

“ For the police, a [domestic violence] case is an everyday, private affair. They do not take it seriously. Many times we are told to go to the Women’s Cell because they call it a ‘ghar ka mamlaa’ [private matter]. They don’t want to consider it under their purview unless there is an order from the court, in which case it is easy to deal with the police. At times, they tell me in irritation that women keep calling them every day. I have to tell them that they call every day because they obviously have a problem at home and need your help.”

**Legal aid**

Although there is a large network of free legal aid that covers the six court complexes that span all districts in Delhi via clinics, judicial officers, advocates and paralegals, it seems unable to meet the demands of women survivors of violence. Our interviews with survivors, members of the 181 hotline team at the Delhi Commission of Women and the Mahila Panchayat network revealed a disappointing picture of the state-provided legal assistance.
On the condition of anonymity, a senior human rights lawyer flagged some problematic and common concerns:

“...The legal aid bodies take in young lawyers with no experience. There is no one to guide them. So, they are unable to do a good job with the cases. They are supposed to be paid for their paper work after the case is over. The young lawyer is expected to pay out of his or her pocket and she or he has little money. So, these lawyers ask survivors for money. This is a usual practice. Some of the lawyers also want to make more money, so they even ask for bribes or join hands with the accused. They may ask a survivor to give them a cut after she wins her maintenance case, for example."

Lawyers at women’s rights organizations explained that survivors are not briefed in detail about the procedures involved in filing a case. Unless the case is referred and supported by a women’s rights organization, the legal aid clinics’ response can be mechanical.

**The counselling muddle:**

“...These women are not counselled in a way that equips them to handle their distress. You might resolve their domestic dispute and either send them back home or to a new environment. But what if they face violence again? And this time they are in a heightened state of distress because they feel like they have exhausted all possible mechanisms. As feminists, we talk about feminist choices, but have we been able to make the survivor understand what a feminist choice is? Am I negotiating my new relationship in the same way I was negotiating my old relationship?” – Suroor Mander, advocate, Delhi High Court

Thanks to the Protection of Women from Domestic Violence Act and the Protection of Children from Sexual Offences, counselling has come to be seen as an essential practice within the crisis intervention terrain managed by the State, NGOs and private entities. Different forms of counselling—legal, emotional, mediational and feminist—are offered to survivors by different actors, such as shelter homes, the Delhi State Legal Services Authority, the police, family courts and women’s rights and feminist NGOs, in addition to private practitioners. In cases of domestic violence, counselling is mandated for the survivor by the court so that she understands the legal implications. In shelter homes, the focus is on emotional and psychosocial support. However, there does not seem to be a common definition and understanding of what the term “counselling” refers to or what the appropriate conceptual approach and practice should be. Counsellors are not trained in a uniform and certified process. And there have been no known attempts to understand how the various forms of counselling are helping or harming survivors.

As is well known in the women’s rights crisis intervention circles, women are told to compromise in the name of counselling. This view was corroborated during field work by staff of women’s rights NGOs, who told us that shelter homes and family courts provide counselling to the family and the survivor in order to bring them together—disregarding the woman’s safety, needs or right to choice.
Speaking from experience, Bharti Sharma, Honorary Secretary of Shakti Shalini, spoke of an issue faced by many shelter homes that has sometimes strained the encounters between referral organizations and shelter homes:

“...some referring women’s organizations wash their hands of survivors, while others interfere more than required in the counselling of the resident.... It leads to confusion for the survivor. In many cases, the survivor ‘plays’ both counsellors, making the process ineffective. At Shakti Shalini, it is now mandated that a resident will receive counselling only from there. The referring organization can meet the survivor in our office. And in case there are any issues with a case, then the referring organization needs to inform our counsellor and not take matters into their own hands. The staff has been instructed to not speak to the residents about their personal lives so that they do not end up advising or suggesting actions to the residents that might interfere with the counselling process. This is all a part of our code of ethics.”

Lack of communication and resource sharing between shelters

The absence of engagement and collaborative solidarity within the shelter home community of Delhi is not just disadvantageous for these homes but also to the survivors, who depend on them during a difficult period of their life. As Sudha Tiwari, Chairperson for Shakti Shalini, spelled out:

“ There was a time when we were being funded by the Social Welfare Board. There used to be a meeting every few months where other shelter homes that were funded by them would be sitting across the table. They were good times. We would all meet and freely talk. There was lot of communication and coordination between shelter homes. No competition. And women and their children benefited the most. Not anymore. Now we hardly know what the other is doing. There is no interaction except some referrals sometimes, but even that is a sore point. When I call up a shelter home, they get suspicious about why I am sending a woman away. We once had a case where the girl needed oxygen every few hours and better medical attention than we could give her. So, we requested a shelter home to keep her, but they sent her back. There are ego issues between shelters. I have also received calls from shelter homes asking us to send a few girls to their shelter because they need to show new admissions or higher numbers to their funders.”

Another dynamic that harms both the shelter homes and the survivors is the disconnect between shelter homes for women in distress and the shelter homes for homeless and destitute women—they work as if in isolation of each other. As an illustration of the concerns this disconnection causes, we found that a caretaker at a shelter for homeless women (who freely offers her counsel to the residents) did not know of the concept of marital rape and was surprised to learn that non-consensual sex within a marriage could be seen as a crime. She had never heard of 181, the Delhi Commission of Women’s mobile helpline, despite having worked at the women’s shelter for more than a decade.
Figure 2. The many hurdles a survivor living in a shelter experiences regarding entitlements

<table>
<thead>
<tr>
<th>ADMISSION</th>
<th>FOR SURVIVORS W/O ADHAAR</th>
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<tbody>
<tr>
<td>No admission without court order/police intimation.</td>
<td>Pillar-to-post procedures + delays to get Adhaar; insensitive, public interrogation; govt officials' insistence on husband's name in broken marriages; woman forced to add abuser-father's name on document</td>
</tr>
<tr>
<td>Survivors – employed and elderly women, those with physical/mental conditions - turned away w/o alternatives; weak inter-shelter linkages/communication</td>
<td></td>
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<table>
<thead>
<tr>
<th>EMPLOYMENT</th>
<th>POLICE</th>
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<tr>
<td>Stigma about shelter homes impacts survivors; they avoid informing prospective employers about their accommodation</td>
<td>Refusal to note survivors' presence in shelters; buck passing to other jurisdiction; pressurize shelter home staff to make survivor meet the accused; disregard survivors' choice and consent</td>
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<tr>
<th>LIVELIHOOD TRAININGS</th>
<th>JUDICIAL AID</th>
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<tbody>
<tr>
<td>Unviable vocations without living wage; survivors without school/college certificates are ineligible for many trainings</td>
<td>No fast-track process; cases outlast survivors' shelter home stay</td>
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<thead>
<tr>
<th>SURVIVORS WITH CHILDREN</th>
<th>MENTAL HEALTH CARE/SERVICES</th>
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<tbody>
<tr>
<td>No feasible, quality, public childcare</td>
<td>Lack of empathy by shelter staff; irregular follow-ups for treatment; long queues and poor practice of confidentiality at IHBAS</td>
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<tr>
<td>Childcare as major hurdle in employment of survivors with children</td>
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<tr>
<td>Anganwadi timings (till 12.30 pm) are unsuitable</td>
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<tr>
<th>CHALLENGES AT GOVERNMENT HOSPITAL</th>
<th>ONE STOP CRISIS CENTRES</th>
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<tbody>
<tr>
<td>In unwed pregnancy case, asked for husband's name</td>
<td>No overnight stay; Duty officer of OSCC unaware of survivors' right to free medical treatment; MLC conducted without privacy and survivors' consent</td>
</tr>
<tr>
<td>No privacy for rape survivor; no confidentiality during police visits</td>
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| Mental health care/services challenges                                   |
|-------------------------------------------------------------------------|-------------------------|
| Lack of empathy by shelter staff; irregular follow-ups for treatment; long queues and poor practice of confidentiality at IHBAS |

| Employment challenges                                                    |
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| Stigma about shelter homes impacts survivors; they avoid informing prospective employers about their accommodation |

| Police challenges                                                         |
|-------------------------------------------------------------------------|-------------------------|
| Refusal to note survivors' presence in shelters; buck passing to other jurisdiction; pressurize shelter home staff to make survivor meet the accused; disregard survivors' choice and consent |

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Reintegration is a complex, difficult and intensive practice. Shelter homes are not always able to achieve true reintegration of a survivor with her family and community because of time and human resource constraints. Yet, in their attempt to showcase successful reintegration, shelters can push women even if they are not ready. On the other hand, survivors who are eager to return home can sometimes wrongly assume that they and their partner and/or family are ready to accept them. A caretaker of a shelter home cited examples of residents who had gone back to their family but returned soon after due to continued violence. There were others, such as 33-year-old Lekshi, who kept returning to a shelter home whenever she experienced abuse:

"Mujhe pareshan karta tha (husband) toh mein uthke chali jaati thi shelter home. Wahan mujhe mana nahi karte the, mujhe ya mere bachchon ko bhi (He would trouble me so I would get up and leave. They [shelter home] did not refuse entry to me or my children)."

We learned that in court-mandated shelter home stays, the survivor is asked to move out when she starts receiving some financial aid or compensation. It is expected that because the survivor has the wherewithal to support herself financially, she should not occupy a space in the shelter. Such an approach disregards her emotional readiness, capability and/or the adequacy of the money required for independent living.

Rehabilitation (often loosely used within the shelter home circles to mean reintegration) practices within some shelter homes are based on a traditional and gendered bouquet of vocations. These may be suitable for illiterate and semi-literate women but do not help them learn or push their horizon conceptually. And they offer meagre, non-sustainable and erratic incomes. In the name of rehabilitation, some shelter homes hire ex-residents as “interns” (for the same workload as other employees) and pay them a paltry stipend.

Activist Indu Prakash Singh highlighted two concerns for the financial rehabilitation of survivors: minimum literacy and a place to stay. Offering vocational skills without basic literacy or minimum education does not go a long way for women who could not go to or finish school. As she explained:

"Even the skill mission has educational requirements...at least an eighth-class pass. Even to be a driver, you need to have passed Class 10. But many women might not even have gone to school. Our skilling programs need to have provisions to include this group. At the Anugriha shelter, many women would train at and work for TAJ Sats, the catering service for flights. They were on the payroll and had bank accounts. But when the shelter closed, they were on the road again and they lost their jobs. With the shelter gone, they had no place to bathe or get ready for work."

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42 In 2015, when a team from the Delhi Commission of Women spent a night at the Nari Niketan (one of the oldest shelter homes in the city), they found 30 women and girls who knew their address and wanted to relocate but had not been released for years. See DNA India, 22 Aug. 2015, www.dnaindia.com/india/report-dcw-chief-swati-maliwal-conducts-surge-surprise-inspections-at-nari-niketan-calls-it-living-hell-2117414.
No or poor follow-up after reintegration and rehabilitation:

“Earlier, women wanted a shelter home for a short period, which they would use to resolve and patch up with their families and then go back to them. That is not necessarily the case now—women may want it for a longer period to make alternative living arrangements for themselves, away from the family.” — Sunita Thakur, Jagori’s Violence Intervention program

A stint in a shelter home does not put a survivor’s life on a track to recovery. Chances are, after she leaves its safe confines, she may continue to face difficulties, feel maladjusted or be more vulnerable. This is why a period of continued support for former residents, especially follow-up services, are necessary. A former manager of a short-stay home acknowledged that the facility she was associated with, as well as most other shelter homes in Delhi, do not follow up with former residents once they leave and neither do the state agencies involved in her case. This is largely due to a shortage of resources, especially staff who could maintain periodic contact and follow-up. Suroor Mander, an advocate with the Delhi High Court, also underscored this critical lacuna:

“The court will say that they cannot stretch their protection officers to also do follow-ups. That is the biggest gap. As a lawyer, there is only that much I can do. The state needs to develop a mechanism of follow-up for the next few months. Because many times these women just disappear. And as a lawyer, when you intervene in someone’s case at times, you feel guilty that you have no idea where this woman has gone.”

MONITORING AND EVALUATION

To keep institutions transparent and accountable, monitoring and evaluation offer vital checks and balances. Yet, this objective is not always achieved. The process and attitude of monitoring and evaluation (conducted by state authorities) is a source of concern for shelter homes. According to a senior manager from an NGO-run shelter home:

“…the relationship [with the state functionaries] turned sour because our ideologies clashed, our working styles did not match. Their inspectors would meet our girls privately and say things like, ‘This is not the right place for a Muslim’ to our Muslim residents. There were many other issues. There were good officers, too.”

Roma Debabrata, STOP President and Founder, also expressed concerns regarding the conduct of the state monitors:

“Based on the recent observation, all monitoring authorities should have a more rights-based approach than only a welfare-oriented approach. The monitoring process should be conducted keeping in mind the privacy, dignity and safety of the residents.... It is important to remember that the girls are in a recovery process, and so the agencies must understand the fragility of the situation, instead of putting them in difficult and uncomfortable conversations and situations.”

We also learned that a short-stay home had conducted its own audits so as to examine its performance. Although useful, such exercises may miss out on an independent view from external experts who may offer a fresh and more “objective” lens.

D. THE MORE VULNERABLE-AND RESILIENT-SURVIVORS

One of the goals that this research study had set for itself was to intervene in the typical representation of survivors, especially those who had lived or are living in shelter homes. The reason for doing so is because often they are seen as victims, beneficiaries and/or deviants—all images that evoke pity and suspicion. Because such labels do not do justice to the complex undercurrents of their lives and the structural violence they live through, it is our attempt to show and tell a more complete picture with its many shades. The following portraits thus are intended to illustrate that survivors’ realities transcend their stereotypical portrayal.

The other motivation behind drawing these brief sketches of certain women is to feature identities that have historically been excluded and oppressed. This section concentrates on specific cases, their ongoing battles and strains, with the overriding question: How are we to address their particular needs within a structure or system that excludes them or grapples with their inclusion?

Lesbian, bisexual and transwomen individuals

Across the management and funding spectrum of shelter homes, the focus has been on cis-female and heterosexual survivors of violence. Although Section 377 of the India Penal Code on homosexuality was recently struck down by the Supreme Court (in September 2018), the civil identity, rights and concerns of queer people have yet to be acknowledged. In supposedly cosmopolitan spaces in Delhi, “coming out” or being outed can result in an array of violations and violence, such as rejection by the family, house arrest or other threats. The helpline of the Delhi-based Nazariya (see p. 27) also receives calls from outside Delhi, mostly from LBT individuals experiencing violence within their family. A less-cited reason in the case of LBT individuals is intimate partner violence.

Shelter homes or safe spaces are therefore often needed by an LBT person during such circumstances. Our conversations with staff members of two shelter homes, however, reflected discomfort about girls and women in same-sex relationships. We found a Delhi-based shelter home offering accommodation to a lesbian couple only for a few nights; they were concerned that keeping a couple in a home for single women flouts their rules. Also, the couple’s presence may impact the dynamics among the residents, especially because one of the women dressed and carried himself like a man. Given the pervasive homophobia and shaming of alternate sexuality, it remains to be seen if LBT people and straight women can feel comfortable with each other.
Ritambhara Mehta, Co-director of Nazariya, believes that LBT individuals should be able to access shelter homes for women, despite their restrictions, which could be non-negotiable. As she explained:

“ We got involved in a case from Uttar Pradesh, where two young women liked each other and wanted to be together. The families were violent towards them and one of them had been locked up in the house. Her partner, X, contacted and met the 181 people but refused to go back home. 181 suggested she move to a shelter. X refused because they would take her phone away, and she wanted to be in touch with her partner, who was locked up by her family. X preferred a hotel, but 181 refused to take her to the hotel because they could not guarantee her security there. After a debate that lasted two to three hours, where both 181 and X did not relent to each other’s preference, she was dropped back home. The negotiation with the family lasted many hours, and things calmed down somewhat, but the debate about staying at a shelter home continued.”

The following account of Arshi describes the multiple struggles that the community faces. To see these struggles only within the frame of sexuality is deductive and misleading. The curtailment of this adult woman’s ‘right to choice’ spans her education, employment, forced marriage and lack of mobility and privacy, effectively crushing her aspirations and identity.

Given the Supreme Court’s verdict in Section 377 that decriminalized homosexuality, there may be more individuals coming out in the future who will need shelter. Their exclusion from shelter homes—by commission or omission—remains an unacknowledged reality. Delhi continues to provide few spaces where queer women escaping threats and violence from their family can seek emergency shelter. This is especially because it is not just shelter they seek but a judgment-free environment.
Case study 1. Living in and out of the closet

Arshi secretly left home when she was around 22 years of age, about six months after she was sure of her sexuality as a lesbian. “I decided by then that I’ll leave because I couldn’t bear the thought of getting married. And I was terrified of marriage. I was dead sure that if my parents found out they would lynch me or kill me...maar dalengei nahi toh shadi kara denge, agar mujhe pakad lenge toh (they will kill me, if not marry me, when they catch hold of me). If married, I knew I would either die or murder the person I am married to.”

Arshi was sexually abused as child and subjected to gender-based discriminations, which led to her growing distant from her family and their conservative worldview. Once she crossed her teens, her family’s focus was her marriage and motherhood, prospects that did not fit her scheme of things: “Various aspects of my life would be connected to marriage...if you are fat, you should lose weight, else how will you get married? If you don’t study, how would you get a good match? If you don’t cook, then how will you feed the family?”

Things worsened when her family discouraged her from making friends. Her parents had issues with the caste and class of her friends. Until she ran away from home and met her best friend, she had no friends at all. Her rich family was unhappy that she chose to study literature because they were suspicious of books and their influence on her. Arshi was not allowed to work, except in the family’s utensil-manufacturing factory, which was of no interest to her. “They said I didn’t need to earn as they are providing for me and can give me money.”

To escape the stifling environment, Arshi ran away from home so that she could read, work, have friends, relations, leisure and mobility. She had doubts if women’s rights organizations would understand and support her. She also had no faith in shelter homes for (heterosexual) women because of rampant homophobia. She reached out to Sangini, the Delhi-based LBT group. Sangini kept Arshi safe, gave her food, shelter, emotional support and counselling for the few months she lived in their safe space. Yet, it was like being in house arrest because her family members were out looking for her.

After she left home, Arshi’s family immediately involved the police, even though she is an adult and had left behind a letter stating that she was moving by choice to a safe place. A police constable asked a neighbor about her whereabouts and told her that Arshi had run away with someone. The policeman’s irresponsible words created further stigma for Arshi and her family. Arshi’s brother had her followed by two men, traced her calls and came to know about her girlfriend and Sangini. As a result, her family threatened Sangini and filed a civil case against one of its founders.

Eventually, Arshi moved to another city for one year to be with her then partner. When the situation calmed, Arshi moved back to her parents for some time, and they grudgingly accepted her choices.

Today, Arshi lives by herself, is employed with work that interests her, has a circle of friends and an identity she has carved out for herself. If it was not for Sangini, Arshi thinks that she would not have been able to break out of the bonds constricting all females who are born or married into her family.
The excluded transgender

“Since there are no shelters for them in the city, they must ‘become men’ to avail of night shelters.”

As one of the most excluded communities who survive in the socio-cultural margins in India, hijras and kinnars, or transgender women, suffer multiple vulnerabilities and indignities. Transgender women have managed to claim a sliver of visibility and space because of the historical role they have appropriated in ritual-related begging. Harassment of transgender women in public spaces and by service providers, such as the police, and a general phobia of and derision toward them is an open secret. What remains hidden to the mainstream is the violence and abuse they go through at the hands of their families and within their adopted kinnar communities. Intimate partner violence, sexual assault and rape within the community is common. Sex work practiced by many transgender women also increases their exposure to violence and health risks. Despite all this, transgender persons remain untouched by the architecture of services offered by shelter homes and the stakeholders they are aligned with.

The Transgender Persons (Protection of Rights) Bill that was passed in December 2018 actually violates the rights of the community, such as self-identification, criminalizes traditional begging and fails to address gaps, such as health care and opportunities in education and livelihood.

The following case study offers a glimpse of their extremely harsh lives and the denial of their fundamental rights as citizens, as well as an exceptional shelter home that opened its doors to one of them.

44The Centre for Equity Studies, India Exclusion Report 2016, p. 278.
Case study 2. Nina, the forsaken one

Feroze was the youngest son of a poor tailor and homemaker mother in Kanpur, Uttar Pradesh. Like most children, Feroze enjoyed friends and school and knew nothing about sexual abuse. After he was regularly abused sexually by some older boys in his neighborhood, his life changed forever.

Today, Feroze, now known as Nina, sees that abuse as the start of his journey toward becoming a kinnar, or transgender woman: “Kheech ke le jaate the, aur mein kisiko nahi bol paati thii. Three to four saal baad jab pata chala toh papa ne report likhwaye. Par kyonke woh rishtedaar the, toh baat dab tgayi.” (They would drag me away, and I would not be able to tell anyone. Three to four years later, when my father came to know, he filed a report with the police. But they were our relatives, so the matter was buried.)

Taunted by his family for his feminine demeanor, young Feroze moved to Mumbai and worked as a tailor briefly, and then walked the path she had been pushed into by the boys in the neighborhood: wahi sab achha lagne laga (all that felt good), as Nina puts it. She left her family at age 24 to join the kinnar community, which was the only space where she felt she belonged. Her family disowned her because Nina earned a living by singing, dancing and sex work. At the time of the interview with her, it had been 11 years since she last saw her family.

She left home in search of a new family and community. What followed was years of sexual and physical abuse, frequent fights and violence over money in exploitive and abusive relationships. The social isolation has had its toll on Nina: “Jo kinnar saamaj mein aa jaate hai woh kahin nahi jaa sakte hain uske baad…koi naam nahi hota hai, bheed se alag hote hote woh… Bandishe aise hain ki unke hi marzi se chaalna padhta hai. Kahin bahar mat jao, jao toh kisike saath jao.” (Those who join the transgender community once can never go elsewhere…. You lose your name, you are the outlier of the crowd…. The restrictions are such that you only have to follow their wish. You cannot go out, if you do, then take someone along). “Kinnar samaaj mein toh shoshan hota hi rehta hai. Pyaar ke liye toh tadapte rehte hain... Shoshan baddh jaata hain kinnaro mein aake.” (Exploitation is a regular part of the transgender community…. There is more exploitation among the transgenders.)

Nina reached the shelter home (where we met her) through the hospital where she was recuperating after a road accident (she was running from a man chasing her at night). At the shelter, she had nearly recovered from the injury and finally started her HIV treatment. Nina has successfully completed an English-speaking livelihood course run by the shelter home and hopes to find employment. She also manages to earn a stipend for each trip she makes to the hospital as a patient attendant.

Nina is appreciative that there exists a women’s shelter home in Delhi that accepts a kinnar person, offers alternative livelihood options and treats her with respect. Her dream is to start life on a fresh note and reunite with her siblings.
Differently abled women

By conservative estimates, there are around 9.3 million women with disabilities in India.\(^{45}\) To be a woman, differently abled and poor can mean intersecting layers of neglect, violence and discrimination across private and public spaces. The differently abled woman’s physical dependence on others for everyday basic needs, access, mobility, finances and so on implies more scope for vulnerabilities and abuse.

Because persons born with certain serious disabilities need lifelong care, they need specialized institutions that can house them for life. When differently abled survivors of violence reach non-specialized shelter homes, it is a mismatched service for an already-stretched organization. This is why shelter homes deny admission to women with disabilities and why we only found one resident with disabilities in a shelter home.

The following case study is an illustration of this mismatch and the distressing vacuum in services for this group of women in Delhi.

Case study 3. Our vision for the differently abled?

Novi hails from a working-class family in Kanpur, where she lived with her three brothers and a sister-in-law after both her parents passed away. After having endured frequent sexual abuse by one of her brothers, Novi, who is nearly blind, finally managed to escape. She ran away from home without a destination in mind and boarded a train that dropped her at the Nizamuddin station in New Delhi. Because she did not know anyone in the city, an aged man at the railway station started to lure her with the prospects of food and work. Novi was saved by a group of bystanders, who alerted the police.

The man was arrested and jailed (the case is ongoing at the Saket district courts in Delhi). Novi was first taken to the Child Welfare Committee and then moved to a children’s home. She lived there for a year or so and then was moved to a shelter home in Kanpur. The frequent moves were not easy on her—she would barely settle down emotionally in one space and get friendly with other residents when she was moved again. For a reason that Novi is unaware of, she was again shifted, back to Delhi to another children’s home. Here, the management decided to invest time and effort in Novi’s health—a surgical operation partially restored her vision in one eye.

When she turned 18, Novi could no longer stay in a children’s home. In 2018, she was moved to a shelter home for women in Delhi. The staff there (at the time of this research) struggles with helping her access schooling because she has no identity documents. This also hampers her access to other government services. Due to her partial vision, the vocational courses at the shelter home (beauty culture, computer operations and stitching) are all unsuitable for her.

In the past few years, Novi expressed interest in returning to her siblings. But they refused to speak with her or take telephone calls or other communication from the shelter home. The management of the facility feel helpless for Novi. They cannot apply for her social security entitlements because she has no identity documents. As a result, they have had to invest much time in dealing with state officials and paperwork to get her documents. A counsellor at the facility noted, “There should be a single-window or fast-track facility for survivors like Novi. But we get appointments with the authorities after two or three months...then, the staff is openly judgmental. For example, one of our residents was told that shelter homes are not good places, “wahan toh galat kaam hota hai” (they do some wrong or sinful things there). Now this further traumatizes the woman who has anyway undergone much.”

At the time of the interview, Novi had lived in the shelter home for about six months and was finally starting to like it. Having legal documents would enable the facility to transfer her to the Blind Relief Association in Delhi, which will be her fifth move in a few years. This itinerant life of Novi’s, with repetitive dislocations, points to a negligent system that is failing to provide for young and highly vulnerable women like her.
Older women and widows

Age-related physical and cognitive frailties and disabilities, decreased mobility, social isolation and financial dependence on the family make older persons vulnerable to abuse in many ways. Older women, especially widows, are more susceptible to violence because of their weak bargaining power within family and community structures.46

Older women are ineligible for admission to shelter homes for women in distress, which cap their age limit at 45 years. They are instead directed to state-run, old-age homes that are known to suffer from a plethora of infrastructure, funding, human resource and service-related issues. News reports have told of elderly women fetching water for themselves over difficult distance, non-segregated spaces for female and male residents, lack of hygiene and medical care, among other derelictions.47 Two government-run or supported non-statutory, residential old-age homes in the Bindapur and Lampur areas of Delhi fit that description. They are supposed to accommodate 50 and 25 persons, respectively, which isn’t even a fraction of the senior citizens in need of care and support.48 Their locations in the outer districts of the city pose access-related difficulties, especially regarding hospitals. For example, the Institute of Human Behaviour and Allied Sciences (IHBAS), which is the state-run mental health hospital, is 38 km from the Bindapur old-age home.

In Delhi, Ashray Adhikar Abhiyan (AAA) has focused on elderly homeless persons. After AAA took over the management of two (mixed-gender) night shelters of the Municipal Corporation of Delhi, they made elderly-friendly changes, such as separate queues for older persons, a waiver of the user fee, links with service providers such as IHBAS and Sahara at the Jama Masjid shelter, access to their community kitchen and so on. In 2004, AAA helped its elderly residents form a self-help collective called Varishtha Nagrik Manch (Senior Citizens’ Collective) that leapfrogged into a vibrant advocacy and support group for elderly homeless persons in Delhi. A report by AAA on the work of the Varishtha Nagrik Manch briefly mentions older women:

“ A separate group or collective of elderly homeless women took shape. The homeless women on the streets would conduct their own meetings...seek solutions to their own issues and problems collectively. In the meetings, the women members voiced their concerns over police brutality, state officials and food. Many women volunteers emerged from the process and formed a cadre of attendants for female hospitalized cases and caretakers at shelters for women and children. An elderly woman from that area was selected as the convener of this collective. ”

Of the three elderly women we met during the field work, two lived in shelter homes for the homeless, thanks to the flexible age-related admission criterion of these facilities. One of the women, semi-blind Chavi, was rescued by the outreach team of the shelter home, while Amma reached the shelter home after escaping persistent physical violence by her son, including a threat to her life. The third woman, Sarita, had been abandoned by her husband

48 Under chapter III of the Parents and Senior Citizens Act, 2007, the state government is required to establish and maintain at least one old age home in each district. As per the website of the Delhi government, the Department of Social Welfare has so far only taken possession of land, in such places as Chittaranjan Park, Rohini, Kanti Nagar, Paschim Nagar, Krishna Nagar, Wazirpur and Chattarpur, and was doing so in a few other localities of the city.
Case study 4. The same old issue

Sarita lived in a tiny, dimly lit room without windows and only a shutter for a door. The room did not have a washroom. It was part of a house which, she told us, was much bigger. The ground floor has two rooms, including the one in which she lived and another where her son ran a shop. On the first floor, her son lived with his family.

“Bete ke paas sab hai—latrine bathroom, pani ki motor. Fridge bhi hai, cooler, pankha, sab kuchh. Par mere ko istmaal karne nahi deta hai. Beta, bahu dekhta bhi nahi mere taraf.” (My son has everything—toilet, bathroom, a pump for water. A fridge, cooler, fan, everything. But he does not allow me to use all this. My son and daughter-in-law do not even look at me.)

Sarita had built the house from the money she earned as a seasonal construction worker in Delhi.

Sarita was around 65 years old at the time of our meeting. Born in Rajasthan, she grew up in Delhi and moved back to Rajasthan after her marriage.

The violence started early in her marriage. With moist eyes, she said, “He used to find any excuse to hit me. Bolti thi tab bhi marta tha, nahi bolti thi tab bhi marta tha (He would hit me if I spoke, and hit me if I did not.) Delivery ke 8 din baad woh mujhe kaam pe jaane ko bole. Bhari cement ki bori leke mujhe kaam pe jaana padha. Toh aise mein mere sharir ka kya rahega? Khaane peene ki koi vyavastha nahi hoti thi.” (Eight days after the delivery of my child, he asked me to return to work. I had to carry sacks full of cement. What will become of my body in such a condition? There was no arrangement for food or water.)

After the birth of each of her 12 children, Sarita continued as a construction worker in Delhi while her husband worked on their farm in Rajasthan. When she reached a stage where she was no longer able to perform heavy manual labor, she went back to Rajasthan. But her husband barred her from the house and left her at her brothers’ place. Sarita found her way back to Delhi, where her son and his family were living in the house that she had built. Her son refused to support her.

Sarita stayed with her mother for some time but was asked to leave by her brother’s wife. Her sister was sympathetic toward her situation, but she was experiencing violence in her own marital family.

Sarita added: “Mere pitaji ne bhi mujhe nikal diya. Mein gayi thi unke pas jab mere paas chaar ladki thi. Mera baap bola ki tuh kyun aaye hain. Mein boli ki mein kahan jaoon in ladkiyon ke saath. Mera koi nahi hai jo mujhe rehne dega. Par woh nahi maane aur humein nikal diya.” (My father turned me out. I reached out to him when I had four and children (see case study 4). She did not want to live in a shelter home but wanted to claim her right to residence in her own house from which she had been thrown out. Two of the three women owned a house but had no control over it. Both of them had reported severe physical and emotional abuse and destitution.
daughter. My father asked me why I had come to him. Where else do I go with four daughters, I asked him. I have no one who would let me stay. But he did not agree and did not let us stay with him.

“Tab koi sahara nahi tha. Kuch din aise hi doosro ke aangan mein… Delhi mein bhi aur gaon mein bhi. Aise bohot din guzaare.”

(I had no support then. Those were days when I had no place to stay, I would just go to other peoples’ yards…in Delhi and the village. I spent many days like that.)

Sarita sought the intervention of a women’s rights NGO working in the community, but her son refused to listen. On their suggestion, she went to the police two years previously. The police intervened, forcing her son to give her a small room next to his shop. He continued to harass her, however, by cutting off the electricity supply and abusing her verbally and physically. Once, he even locked her inside the room for three days. “Mere paas bathroom nahi hai, bahar chal ke jaana padhta hai…ekbar mera pet kharab tha toh kapda hi bigad gaya. Phir mein bhai ke ghar jaake nahan ke aayi.” (I do not have a bathroom, I walk to the public bathroom…once when my stomach was upset, I soiled my clothes. Then I had to go to my brother’s to take a bath.)

With the help of the NGO, Sarita filed for harassment and divorce. As a result, her husband spent ten days in jail, and all her children turned against her. They even prevented her from turning up at the court on the final day of the hearing. Due to her absence from the court, she thinks she could not refute the judgment that asked her husband to give her a paltry alimony of 15,000 rupees and a sum of 1,000 rupees as monthly maintenance. The judgment was silent on her right to residence and property, which made Sarita feel cheated: “Mujhe rehne ka jagah chahiye aur ek bigha zameen chahiye ta ki mein kama ke khaoon. Itni zameen hai, plot hai, phir yeh ghar maine apne paise se banaye hai. Phir bhi koi haq nahi hai mera?” (I need a place to live and a bigha of land so I can earn and eat. There is land, the plot and the house that I constructed with my money. I still have no right over it?)

Sarita survives with hope, despite the neglect from the family and the state machinery: “Mujhe meri kahani sabke paas pahunchani hai. Agar sab sune toh shayad mera kuchh ho payega.” (I want to share my story with everyone. If everyone comes to know it, maybe I get justice.)
Women with children

For the sake of their children’s education and well-being, women are known to endure more violence by continuing to stay with abusive husbands and compromising their own safety and dignity. Young mothers who manage to walk away from abusive husbands or in-laws have a critical concern about shelter homes: their separation from their children, especially sons. Although the Swadhar guidelines have been revised to increase the age to which boys can reside in the home (from 8 years to 12 years), for many mothers, the eventual separation from their sons remains unacceptable and becomes a reason to avoid a shelter home. For women who stay in a shelter home and agree to send their children to children’s homes, the arrangements are not easy. Meeting the children often is not possible, and there are no regular follow-up mechanisms to see how their children are coping.

The Child Welfare Committee does not accept children younger than 7 years in its facilities. Most shelter homes do not have a crèche, and quality, public childcare is non-existent (aanganwadis operate only till around noon). Employed women with young children struggle with childcare. Lack of childcare is a major reason why many women avoid employment.

During a focus group discussion, a member of the Mahila Panchayat described the concerns of women who approach them for help:

“Children are a big reason why women do not go to a shelter home. Boys above 10 or 12 are not accepted in many shelters. School-going children need the mother and she does not want to relocate or un-school them. Their education can be impeded if she moves to a shelter. There are shelters that do not accept women with children.”

For women who choose to move to a shelter home with their children, the experience can be doubly challenging. Srila, for example, recalled how no one helped her care for her daughter when she was ill:

“The problem was that the medicines I had given her were not working, so I wanted a doctor to see her. But the staff asked me to bring the fever down with a cold sponge. ... The staff did not help, nor did they call a doctor. They said, ‘Tum ma ho tum hi dekhogi.’” (You are her mother, you have to care for her.)

For Tabassum, another shelter home resident, the issue was that the strict rules for adult residents were also applied to her 4-year-old daughter:

“There are timings for meals so my daughter cannot be hungry between lunch and dinner.... Then, there is very little milk for her. It is not enough for a growing child, even though I give her my share. Even if I need an extra tomato for my child, it is not allowed. There are no toys, no play area for kids.”

The following account shows how crucial childcare is for any real attempt to rehabilitate women.

49 Boys who are 12 years or older are sent to homes run by the Child Welfare Committee, as per the Juvenile Justice (Care and Protection) Act, 2000.
Case study 5. Childcare: The missing piece

A few months after Zina, a 29-year-old survivor with a young son, moved into a shelter home, she joined their housekeeping training. Soon after, she found a job as a housekeeper with an upper-middle-class family. It was a live-in job that paid her 10,000 rupees. Initially, her son stayed at her husband’s home, where his daughter (from an earlier marriage) took care of the boy. When the daughter died after a spell of illness, Zina brought her son to her employer’s house so that the two of them could be together. This arrangement did not suit her employer, and Zina was fired.

Back at the shelter home, the staff helped find Zina another job. This time, she worked as a caregiver in a hospital. Because the hospital was far from the shelter home, Zina moved out with her son and into a shared room. From her salary of 8,000 rupees, Zina had to pay 1,500 rupees as her share for the rent of 3,000 rupees. The woman she shared with also offered to look after her child. It seemed to Zina that her life was finally going to turn a corner toward independent living.

But it did not work out as she had imagined. Within a fortnight, Zina’s son started complaining about the woman. He did not eat well and started feeling unwell. Zina could not afford to hire a caregiver for the child, given her meagre income. Fearing her son’s safety and left with no choice, she had to quit her job.

She and her son returned to the shelter home, where he soon settled into the staff-run crèche, and Zina went back to job hunting. At the time of the interview, Zina was grateful to the shelter home for their help with childcare, yet anxious about long-term solutions. She imagined being an employed, independent mother and raising her son in a small home so that someday he could bring his school friends home and not feel embarrassed about his residential address.
Women living with mental health issues face a distinct set of difficulties with childcare. For example, halfway homes in Delhi do not allow children to be with their mothers. Thus, many women refuse to be admitted into these homes. Because the police are duty-bound to drop them in a shelter home, they leave women living with mental illness at any home that even half-heartedly agrees to keep them, thereby triggering another tangent of care and treatment challenges for both the women and their children.

**Women with mental health issues**

The National Mental Health Policy (2014) acknowledges that women are at greater risk of mental disorders because of the miscellany of discrimination, abuse and violence they face from childhood. Yet, statistics on the levels of mental health, illness, awareness and service provision in India are distressing. According to a recent global study by *The Lancet,*\(^{50}\) four out of ten women who commit suicide globally are from India, and most are younger than 40 years. As per a mental health survey conducted by the National Institute of Mental Health and Neuro Sciences in 2015–2016, only about one in ten individuals with mental health disorders received evidence-based care and treatment in India.\(^{51}\)

Mental health and abandonment are conjoined, particularly in the case of women. Some women are abandoned after they develop mental illness, while others develop mental health issues after they are abandoned. Mentally ill women are seen as unproductive liabilities for their family and household, as well as a source of stigma. In the absence of accessible care facilities for the mentally ill, it becomes hard for families to cope with the care and attention required. In a sense, the family is a victim of the State’s neglect, and together they punish the person who is mentally ill. There is widespread concern that the Mental Healthcare Act, 2017, which allows involuntary institutionalization of persons with mental illness under specific circumstances could be misused by families to abandon women.

In the National Capital Region, one of the key issues that afflict the management of shelter homes is the lack of accountability for roles and division of work. The following news report is a typical example of the finger pointing and buck passing between agencies.

Our visits to a few shelter homes for women in distress and for homeless women validate the wide prevalence of mental health conditions and disorders among survivors. These women require specialized care and treatment but access to treatment is difficult. IHBAS is Delhi’s only mental health facility of its kind that provides specialized care, hospitalization and treatment. Even its periodic health camps and street clinics are insufficient to cater to the excessive demand. The provision of more halfway homes has somewhat addressed this issue because patients with a place of residence do not need admission at the hospital.

For female survivors of violence living with mental health issues, admission to a shelter home is the first and foremost concern. Shelter homes for women in distress mostly avoid admitting persons with obvious mental health issues because it is expected that they live in homes for the “mentally challenged and disturbed”, such as Asha Kiran. At such a specialized, long-stay home for destitute survivors with mental illness, admission is strictly through the police or a court, further limiting the number of women who can access it.

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\(^{50}\) Anuradha Mascarenhas (2018), ‘Four of 10 women who commit suicide in world are from India, most are under 40: Study’, The Indian Express, 13 Sep., https://indianexpress.com/article/india/four-of-10-women-who-commit-suicide-in-world-are-from-india-most-are-under-40-5353503/.

As well, these institutions have been bursting at their seams and continue to be acutely understaffed. Although Asha Kiran has a capacity of 500, it is home to 1,000 residents. In early 2017, the death of 11 residents at Asha Kiran within a short span of two months drew attention to its abysmal conditions. The home is severely understaffed: It requires around 600 staff members, but only 241 posts have been filled.\(^5\)

Homeless shelters have provided accommodation to many such survivors. Yet again, due to the funding and staff-related limitations and challenges of homes for homeless persons, survivors’ access to quality medical care remains wanting.

From the shelter homes’ perspective, they find it difficult to manage timely treatment for their residents because of the physical distance to IHBAS and due to the scarcity of already-overburdened staff. As a staff member of a short-stay home explained:

“Generally, we get support from IHBAS, but the shelter home has to organize their own attendants. Visits to any hospital are as general patients, and no preference is given to patients from shelter homes. It is very time consuming for the staff.”

In the few shelter homes we visited, many survivors of violence with mental health conditions lacked support for follow-up visits and consistent treatment. For example, Nirmayi—the only postgraduate resident survivor we met—could not keep up with her treatment. The caretakers at the shelter for homeless women where she lived did not know or understand her condition, although they admitted her to IHBAS, where she spent a month. The staff of the shelter home also seemed callous about the mental condition of other survivors. Despite our persistent request that we would not interview residents with mental health conditions, the caretakers at a couple of shelter homes arranged for such residents to meet us for interviews.

The research team also witnessed insensitivity toward mental health ailments and mentally ill women. In a well-established shelter home in Delhi, for instance, the researchers observed the staff exhibiting and mocking the condition of a resident. The following is a verbatim excerpt from that incident:

**Staff member (to the resident):** “Andar aa ekbar. Hahn, kya bol rahi thi, didi ko bata?” (Come inside once. Yes, what were you saying? Can you tell Didi (researcher?)

**Resident:** “Mujhe ghar jana hai.” (I want to go home.)

**Staff member:** “Kahan hain tera ghar?” (Where is your home?)

[The resident is unable to answer this question and speaks incoherently. She seems intimidated and responds in Bengali, saying that the staff should call up her family and ask them for her address.]

**Staff member (mockingly, to the supervisor):** “Aap ke ghar bhej doon is ko?” (Shall I send her to your house?)

**Supervisor:** “Arre nahi, pagal hai kya tu?” (Oh no, are you crazy?)

**Staff member (speaking to the resident):** “Accha ab ja tu, bhej denge tujhe ghar.” (Okay, now you leave. Will send you home.)

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At another shelter home for destitute women living with mental illness, a staff member attributed special powers to the women living with moderate and severe mental health conditions, such as schizophrenia, bipolar disorders, hallucinations and physical disabilities:

“Miracles happen here because these women are pure and innocent, so their prayers are answered by God.”

Such portrayal of persons living with disabilities deepens the patriarchal association of purity and innocence with those who are not sexually active. Without the residents’ knowledge and consent, they are represented in a way that perhaps makes them more acceptable to the public. This takes away from their actual poignant accounts of trauma, neglect and dire needs.

We found such violations of representations at another NGO that works for people who are mentally ill and destitute. Their website has disturbing photographs of the residents and non-residents who use their outpatient services—their faces are visible, and more troubling, some peoples’ dismembered bodies have been photographed and exhibited on the site. Other service providers, such as the police, also belittle survivors’ psychological well-being. As a staff member in a shelter home explained:

“The police still do not understand trauma and its impact. There is a difference between trauma and mental health conditions. It took us time to understand these differences, too. Many cases require medical treatment, and if the police do not inform us about the case, it becomes very difficult for the survivor and us. And there are many cases like that. Even now, some police personnel do not tell us the whole case. They can even tutor women that they should not tell us their stories.”

In 2010, a technical committee estimated that “nearly 12,000 to 15,000 people need residential rehabilitation facilities in Delhi”. In 2017, Delhi got its first halfway cum long-stay home for 40 people in the IHBAS campus. According to Dr. Nimesh Desai, Director of IHBAS, Delhi needs at least 50 such halfway homes. This is an urgent concern because reintegration with families remains challenging. Deep gender bias is one among many reasons why reintegration rates are extremely poor. As the Asha Kiran’s records (table 14) show, few women are accepted back by their families.

Table 14. Reintegration of residents (of the Asha Kiran shelter home) with their families

<table>
<thead>
<tr>
<th>Year</th>
<th>Reintegration (men)</th>
<th>Reintegration (women)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016-17</td>
<td>28</td>
<td>8</td>
</tr>
<tr>
<td>2017-18</td>
<td>12</td>
<td>3</td>
</tr>
</tbody>
</table>


Either due to the survivor’s missing identity documents and/or the ignorance of the shelter home staff regarding social benefits for persons with mental illnesses (such as the Financial Assistance to Persons with Special Needs Act, 2009), survivors stay bereft of any financial assistance from the Government, even though they are entitled to it.

The following case study illustrates the cross-cutting nature of difficulties faced by survivors and shelter homes when dealing with women with mental health issues, pointing to the need for interventions at multiple levels.

Case study 6. Ruhi’s story

Ruhi is an educated, English-speaking, Delhi-born and bred woman from a well-to-do family. After both her parents passed away, the property was divided in half between her and her Australia-based brother. Because she was the only one staying in the family house, her brother suggested she sell it and they divide the money equally. After the bungalow was sold and she got her share, she lived in a rented flat and, over time, exhausted all the funds. Unable to pay the rent, she moved to a working women’s hostel in Delhi.

The working women’s hostel did not allow her to stay for long. Ruhi had started becoming delusional and that made her turn physically violent toward others. She imagined that her property was snatched away or her money was being stolen. Soon, she was transferred to another home and has since shuttled between various shelter homes, each refusing to take responsibility for her.

Ruhi had spent time at a mental health facility but was discharged without a diagnosis or medical record. This made it difficult for shelter homes to get her treated. Ruhi had also accused a male staffer of a shelter home (where she had stayed earlier) of rape, and filed a case against the facility. The case was being heard in a court in Delhi at the time of the research. Ruhi had also lodged a police report against another shelter home where she had stayed—for a case of robbery of her laptop and 200,000 rupees. The charge was denied by the counsellor of the home, who contended that Ruhi had fabricated the case as part of her delusory behavior. Her threats to file cases, especially of rape and sexual harassment against male staffers, had made shelter homes in Delhi wary of admitting her.

We first heard about Ruhi from the counsellor of the home she was living in. Ruhi had picked fights with residents and had also hit some of them, including a pregnant woman. The shelter was planning to ask Ruhi to move out, although no other shelter home wanted to admit her.

Unlike the usual profile of poor women who live in shelter homes, Ruhi stands out. Her upper-class background and fluent English give her social clout, access in police stations and even the courts but not the medical aid that she so urgently requires. According to a counsellor, IHBAS does not admit patients without a court order, and none of the homes wanted to take the responsibility of legal rigmaroles to procure the order.

Ruhi continues to spend her time between courts, police stations and shelter homes—all places where she is being avoided.
E. CONCERNS REGARDING SHELTER HOME STAFF

Poor remuneration for staff

As noted earlier, government-run or funded shelter homes pay rather low salaries to their staff. The situation can be worse for shelter homes that are not operated with any state scheme funding. A short-stay home in Delhi, for example, is not only unable to pay their staff reasonable salaries but struggles to pay them on time. The perpetual constraint of funds leads to high attrition as well as lack of motivation, poor performance and stress among staff. Both the counsellor and lawyer employed in one shelter home we visited were looking for other jobs because their salaries had not been paid for some time. Poor salaries also make it difficult for shelter homes to attract skilled professionals.

Problematic perspectives

From our conversations with shelter home caretakers, counsellors and wardens, it seemed that many of the shelter homes lacked a rights-based understanding of their role and an empathetic approach for survivors of violence. For example, while talking about women or girls who “ran away” with a partner or boyfriend and then moved to the shelter home, a staff member said:

“Hum unko samjhaate hain ke, kyun bhaagi? Ghar wapas jaane ke liye bolte hain unko. Par woh samajhna nahi chahti hain. Yahi ladkiyan zyada bhagti hain humare shelter se. Unka dimag alag type ki hai.” (We ask them why they ran away? And try to convince them to go back home. But they do not understand. These are the girls who try to run away from the shelter, too. Their mind works differently.)

Their lack of political perspective on issues of violence against women also impacts staff members’ abilities to grapple with and respond to demanding situations in their challenging work environment.

Inadequate (specialized) human resources

All shelter homes visited by the research team either fell short of staff and/or did not have regular and/or easy access to specialized human resources, such as mental health professionals. With such absence, regular staff members have to take on sundry responsibilities that take them away from their core role and expertise. For example, in some homes, counsellors and caregivers interchange roles whenever required. Staff shortage also leaves staff members performing many roles at the same time, which is not favorable for the residents.

Untrained, former residents as employees

Perhaps to help resident survivors get gainfully employed or occupied, shelter homes tend to hire their services. However, without formal training and systematic guidance, the work of caring for other survivors can be exacting and confusing. Jahnvi, for example, worked as the night caregiver in a shelter home. She was also tasked to speak to survivors who approach the shelter at night. Jahnvi explained that she found the task daunting at times, unable to respond to a survivor in situations when she is visibly shaken and requires greater help. Jahnvi had not received any training for her role, and her understanding of her responsibilities was mostly arrived at through observations and informal discussions with staff members.
Another fallout of employing a resident as a staff member can be the fostering of unequal power dynamics between her and the residents. This concern stems from experiences shared by residents about the bullying of newer residents by the older ones. A former resident of a shelter home expressed how friction between staff members and senior residents led to bullying of newer residents:

“The staff spoke more to the women who had been around for a while. They were dominating.... They would get other residents into trouble by complaining to the staff about them, saying that these girls are not working.”

F. MODEL PRACTICES

“If I knew that a place like this exists, I would have never married.” – Zina, 29, resident of a shelter home

For Zina, the shelter home she lives in is a substitute for marriage. It is her place for warmth, care and personal growth—what a tribute to the minds and hands that run the shelter home.

It is not easy to find a shelter home where practice catches up with vision. We found such a place in Delhi (like the one where Zina lives with her child), where the management and staff have a progressive and rights-based understanding of empowerment. At this shelter, the term “rehabilitation” refers to physical and mental health, and livelihood opportunities are integrated with consistent psychosocial care and counselling, child care and even basic literacy (learning to read the numbers of local buses). The vision of one such home has translated into model work. The following are examples of what the research team found to be exemplary at this particular facility:

• It caters to a range of survivors from different age groups, abilities and circumstances, yet manages to provide specialized care to each. Instead of turning away survivors of violence who were left at their doorstep by the police or spotted by their own community outreach members on the streets, the shelter home learned to widen its own scope of work and capacities.

• Its management and staff have a holistic understanding of recovery that includes mental health. Their recovery program looks into such aspects as survivors’ social relationships, independence, life skills, behavior with their children, among other issues. The shelter home has linked with a psychotherapist and psychiatrist, who visit survivors every month for treatment and therapy. The residents can also avail of free visits to the outpatient department of their clinics.

• To help survivors stand on their own financial feet, the shelter runs (unlike many other shelter homes) non-traditional livelihood programs. And because they recognize that many women are unable to seek full-time, better-paying jobs due to lack of childcare options, the shelter provides a crèche. This is a win-win for residents of the shelter home, who in return help staff members run these facilities and stay meaningfully engaged.
• It undertook another initiative to ease the childcare concern of survivors by negotiating with the members of the Child Welfare Committee in their jurisdiction. They asked the Committee to consider the harsh and dynamic circumstances of certain employed survivors and, therefore, allow their children short-term care (instead of long-term admission) in childcare institutions or offer a relaxation in their admission criteria for younger children who have no access to community-based care.

• Given the lack of public health care facilities as well as the difficulties of underfunded, understaffed shelter homes and their overworked staff, this shelter home offers an honorarium to residents who are able to or interested in working as attendants to co-residents who need hospitalized care or frequent visits to hospitals.

• The shelter home organized a legal literacy workshop inhouse for its residents and staff. It values knowledge of human and women’s rights, the law, legal pathways and redress as necessary for both residents and staff.

• It experiments with bringing remunerative piecemeal work for women within the shelter, weaving its independent living efforts with life skills. The case of Priyam and Sanam (described below) who are former residents of this shelter home, is a success story of recovery from trauma to financial independence.

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**Case study 6. From trauma to independence**

After their abusive marriages made them escape to Delhi, Priyam and Sanam found their way to the shelter home. With much effort and care on the part of the shelter home over a period of time, they could both recover their emotional strength to start afresh. They were ready to work and ready to live independently. The staff found them both suitable jobs after a background check on their respective employers and conducted a visit to the room they had shortlisted to live together. The staff negotiated with the property brokers about the advance, contract and facilities. (If their resident chooses to work as a domestic worker, for example, the shelter staff discusses with the employer issues, such as the number of leave days she can claim). Only after this legwork, did the women shift to their new residence.

Follow-ups are a regular activity, both with the survivor and the employer. Initially these are weekly but as things settle, they are done every month. Both Priyam and Sanam are in touch with the staff and residents of the shelter home they lived in earlier and meet them as often as possible.
There are many narratives and findings that are missing from this report—of survivors who do not report the violence they live with. The absence points to women’s distrust of the system and their fear of the vulnerable circumstances that compel them to carry on.

Nonetheless, the absence is a finding in itself. It tells us how cultural notions of women’s roles, patriarchal beliefs about the good or bad woman, social reproduction, unpaid care work, curbs around women’s mobility, employment and economic survival, access to education or health, legislation (or its weak implementation) spark and/or sustain violence against women. This range of subtle or conspicuous violence cannot be relegated to the private or familial space. It validates the position that, at its roots, violence against women emerges from our social and economic structures and the sharp power imbalance it engenders between men and women.
CHAPTER IV.

WALKING THE TALK

As described in the introduction, the final goal of this action research has been to make itself sustainable via action on its findings and toward its recommendations. To create a meaningful afterlife for this exercise, the research partners in Delhi helped create opportunities of engagement—between shelter homes and women’s organizations, between shelter homes and safe spaces, between the skilled and skill seekers, and between communities and residents. Even as this shall continue after the research is formally concluded, the teams have been successful in taking a few, small steps toward “actioning” the research. The following is a brief listing of these steps.

1. Engagement with and mobilization of shelter homes. A Delhi-level consultation (12 April 2018) was organized by Action India, Jagori and Nazariya to inform shelter homes about the action research study, invite their participation and inputs, including for alliance-building with individuals and organizations interested in re-imagining shelter homes as spaces of rights, justice and empowerment.

2. Self-care and burnout prevention workshop for shelter home staff. Because the health and motivation of the caregivers of survivors of violence is much neglected, this research team made a small beginning in this direction. Nazariya (a member of the LCN network and the Delhi research team) invited two Delhi-based shelter homes to participate in an interactive, three-day workshop (18–20 July 2018) to identify and document the self-care and burnout prevention needs of caseworkers, human rights defenders and activists. Each shelter home sent their counsellor to the workshop. The participants learned how to gauge their stress levels and to identify particular stressors in relation to their work on gender-based violence, and they practiced simple stress management and burnout-prevention techniques. This was the first such workshop attended by the counsellors.

3. Advocacy among women’s groups and shelter homes. Members of the Delhi research team raised the issue of the importance of independent research to explore the circumstances of survivors of violence living in shelter homes for women. This was done at a meeting in the aftermath of the news about
physical and sexual abuse in certain shelter homes (in Bihar and Uttar Pradesh) by
the All India Women’s Conference (7 August 2018). The participants included women’s
rights activists and organizations working with women and children on the issue of
safety of women and girls. The meeting called for regular social audits of shelter homes
and the inclusion of external experts in those audits and noted inputs for a charter of
demands to be presented to the government of Delhi.

4. **Inputs for the social audit of shelter homes (for women and girls) in Delhi.**
   Representatives from Jagori and the Delhi research team met Swati Maliwal, the Chair
   of the Delhi Commission of Women (21 August 2018) to suggest a more inclusive team
   of women’s rights groups for the social audits that the Commission was to conduct in
   Delhi. Subsequently, a representative of the Delhi research team also provided inputs
   for the design of the social audit and its tools.

5. **Inputs for the national audit of Swadhar Grehs.** Two advisers and
   the principal investigator of the Delhi research team made substantive
   contributions toward the formation of guidelines and tools for the national
   audit of more than 500 Swadhar Grehs in India. This was done in response
   to the call for inputs by the National Commission of Women, the agency
   conducting the audits.

6. **Advocacy in the media.** A member
   of the Delhi research team wrote
   an analytical article for The Wire on the caveats and concerns around the spate of
   simultaneous social audits being conducted by various state agencies.

7. **Assistance for a runaway, lesbian couple under threat.** During
   the research, the Delhi research team
   was contacted by a human rights
   organization to seek a safe space for two
   young women in a same-sex relationship
   who urgently needed shelter in Delhi.

   The Delhi team contacted two shelter
   homes and were able to secure them
   a place in a shelter home for a few
   nights. However, the management
   of the shelter home found it difficult
   to accommodate a couple in a single
   women’s shelter. This experience
   offered the research team more insights
   into the issues of lesbian women and the
   challenges of shelter homes for women.

   The team also called for a meeting (20 October 2018) with the Delhi-based human
   rights groups Saheli and Dhanak to understand the accommodation needs of same-sex
(female) couples experiencing violence. They decided to organize a larger consultation to raise the issue with shelter homes and other safe spaces in the city and thus deepen and sensitize the collective understanding of “women” and sexuality.

8. **Training for shelter home staff** During the Delhi research team’s mobilization among shelter homes for greater engagement with issues of gender and sexuality, a shelter home for women requested a perspective-building training for its staff members. Nazariya staff members thus conducted a day-long training on 22 December 2018 for 28 staff members. The training offered an understanding of gender beyond the binary and the impact of sexuality and gender on individuals within family and workspaces. Participants discussed the issues they face in their workspaces concerning gender and sexuality, such as lack of shelter homes for transmen, shelter home policy on same-sex couples, sexual relationships between people living in shelter homes and so on. The workshop ended with a consensus on the need for more spaces within shelter homes to address issues of gender and sexuality.
CHAPTER V.

SUMMARY AND RECOMMENDATIONS: RAISING THE BAR

“The State shall, within the limits of its economic capacity and development, make effective provision for securing the right to work, to education and to public assistance in cases of unemployment, old age, sickness and disablement, and in other cases of undeserved want.” – Article 41 of the Indian Constitution

It is the spirit of rights-based provisions for citizens in difficult circumstances, such as in Article 41, that guides the recommendations made in this study. The recommendations that follow emerged out of the limited field work in Delhi, which involved talking to individuals who were either directly affected by violence as survivors or who occupy a direct or indirect role in the service provision chain of the redress mechanism for violence against women and girls. Observations at shelter homes visited as well as secondary research and knowledge were important resources.

The following summarizes the central reflections of our findings and follows each with recommendations.

Semantics and perspectives

As institutions that are designed to protect women from violence, shelter homes can be complicit in acts of discrimination toward those who defy the binary of gender, for example, by denying them admission. Gender-queer women and transwomen are not always part of their conception of women survivors of violence.

• Organize periodic consultations and workshops for shelter home staff and management on the issue of heteronormativity and sexuality to create a deeper understanding of the issue and to mitigate any prejudice against the LBT community.

The language used by staff members of shelter homes and other state functionaries for survivors reflects regressive notions and attitudes. For example, they refer to survivors as “inmates” and “beneficiaries” who live off “welfare” schemes, not residents who are citizens with rights and entitlements. Given the position occupied by shelter homes within the redress ecosystem of violence against women, they influence the discourse around survivors.

• Make a shift in the welfare semantics and articulation of service providers to lend an air of rights and empowerment to the philosophy and practice within shelter homes.
Preventive mechanisms

Girls and women are unaware of their legal rights to their natal or marital residence as well as access to shelter homes. And there is a pervasive cultural acceptance of violence against women and girls, which perpetuates its continuation. Addressing both these conditions is a fundamental prevention mechanism that, if neglected, can negate the best of the redress strategies.

- Conduct mass awareness campaigns on women’s right to violence-free homes and the protections they are entitled to under law (such as within the Protection of Women from Domestic Violence Act, 2005 and access to shelter homes).

Evidence from the field work indicates that men—as fathers, husbands, brothers and/or partners—act out their belief in power and control over girls and women. For a sustainable solution, a paradigm shift on violence against women is needed; boys and men need to be educated about the ideas and norms around masculinity and gender.

- Integrate an understanding of gender and patriarchy and their harmful manifestations and implications in the lives of men and women via educational curriculum and public campaigns.

There is need for a stronger support system for women survivors of violence at the community level to mitigate the scale of violence or abuse and build resources that could take the load off shelter homes. After all, shelter homes can only offer provisionary solutions to a complex issue.

- Leverage existing grass-roots and community collectives—such as the Mahila Panchayat network—to prevent violence against women by dedicating greater resources for regular training of their members.

Budgets

Funding and resource constraints are the most common and the most critical gap for shelter homes in Delhi. Funds are integral to infrastructure, services and even hiring and retaining professional staff. Yet, even state-funded schemes for shelter homes have rather small budgets that are not in tandem with the cost of living.

- Enhance allocations, demand utilization of the Nirbhaya funds54 and monitor use of the funds. Disbursal of regular and timely funds and removal of administrative bottlenecks should ease the concerns around the utilization of the funds.

54 A corpus announced by Government of India in 2013 to support initiatives for protection and safety of women and girls in India.
Number and infrastructure of shelter homes

The total number of government-run or funded shelter homes for women in Delhi is inadequate, especially in the larger or more populated districts. The spatial distribution of homes across Delhi is skewed toward East and Central Delhi. News reports reveal that state-run homes, such as those in the Nirmal Chhaya complex, are constantly overcrowded and in poor condition.

- Conduct a needs assessment exercise prior to creation of more and specialized shelters that cater to the most underserved categories of women survivors.
- The location and number of shelter homes should be based upon density of population and accessibility for women.
- Increase the capacities of existing shelter homes, such as the Swadhar Grehs, from 30 to 50 residents to optimize utilization.
- Mandate crèche or nurseries in shelter homes because lack of childcare is a major hurdle in the rehabilitation of survivors with dependent children.

Integrated service provision

For survivors, access to rights and justice is often mediated through or contingent upon the shelter home staff. Persons living in (and working in) shelter homes for destitute and homeless women do not have knowledge or access to the redress architecture for violence against women, such as the 181 helpline. Therefore, links and interaction between state agencies, different types of shelter homes and other service providers is essential and non-negotiable.

- Activate a seamless and fast-track chain of service and entitlement provision so as to improve survivors’ access to entitlements and services via multi-agency coordination.
- Reach out to survivors living in shelter homes for destitute or homeless persons via the service provision architecture for women in distress.
- Run large-scale awareness campaigns about the existence of shelters (in schools, hospitals, police stations, among others), with an updated list of shelter homes that should be easily available online and offline.
- Conduct ongoing and interactive dialogues between women survivors of violence with stakeholders and service providers for a two-way process of knowledge sharing. Just as policy has an impact on survivors’ lives, the lived experiences of survivors should also reflect in policy.
Mental health care
The overburdened public health care system in Delhi lacks an intersectoral understanding of violence and health. As well, the difficulties of accessing timely and quality mental care—physical distance to the facility, long queues, delayed consultations, to name a few—discourage survivors and their caregivers at shelter homes from seeking help. Although the National Policy for Women (2016) mentions screening, care and treatment of or for mental health among women at the primary health level, it needs to be implemented promptly and uniformly. Confidentiality and dignity for the survivor must always be seen as non-negotiable.

- Initiate systemic and quick links and pathways to mental health treatment, including counselling and life skills training, for women survivors of violence.

Empowering survivors
Shelter homes must raise their bar—from providing for survivors’ needs (shelter, food and so on) to addressing their “wants” (self-esteem, confidence and so on). Evidence from the research reveals that the time that survivors spend in shelter homes can be secluding and disorienting, thereby aggravating their trauma. This experience can be altered if shelter homes harness the survivors’ time as an opportunity to facilitate learning and exposure.

- Consult with shelter home residents on shelter home practices and reflect their voice and choices in the systems, to the degree possible.
- Institutionalize life skills and perspective building as part of the shelter home’s bouquet of services. Optimize survivors’ time at shelter homes with literacy classes and workshops on legal rights, gender and patriarchy, healing and other relevant issues that build or enhance their perspectives and life skills.

Monitoring and evaluation
The management and staff of shelter homes are wary of monitoring and evaluation exercises because of their impact on survivors. These need to be regular, broader in scope and transparent so that the implementation of recommendations can be done in a spirit of collaboration with all stakeholders.

- Make regular visits by state-appointed monitors from the state- and district-level committees mandatory.
- Specify in the monitoring and evaluation guidelines the inclusion of external specialists, such as representatives of women’s right groups, academics and activists, among others.
- Develop a more comprehensive monitoring guideline that moves beyond infrastructural aspects to include, for example, experiences of survivors and staff.
- Make reports of monitoring and evaluation committees available in the public domain for greater engagement with and inputs from stakeholders.
Legal aid

Without a uniform understanding and practice of women’s rights, a large community of paralegals associated with various institutions and organizations (such as NGOs, women’s networks, the police and community groups) struggle to facilitate timely legal aid and survivors’ access to justice.

- Standardize paralegal approach and service via accredited training by women’s groups.
- Create a national resource directory of paralegals to increase their accessibility to survivors.

Mobilization and advocacy

- Conduct periodic workshops for sensitization, perspective capacity building of stakeholders (lawyers, doctors, protection officers, counsellors and so on) on making service provision and operations empathetic and effective, instilling a greater sense of accountability and enabling dialogue and discussion among them.
- Encourage alliances at the state level of women’s groups and shelter homes and create a network of representatives from a range of shelter homes, activists, feminists and women’s rights organizations to share knowledge and resources and for advocacy.

Rehabilitation of survivors

The vocational courses offered in shelter homes continue to stereotype “female” work. Employment needs to be seen not just as a source of livelihood but as a window to personal growth and meaning that pays better. Training in marketable skills is a necessary but missing component in the process of rehabilitation.

- Re-think vocations for women to include non-traditional skills that attract higher salaries, provide better exposure and promise greater financial security.

Key informants in the study highlighted their concern about the lack of follow-up after the reintegration and rehabilitation of survivors. Emotional support and counselling during phases of transition are necessary because survivors may be returning to spaces that were the source of violence.

- Institutionalize post-shelter home stay follow-ups as a mandatory part of the continuum of counselling offered during residency in a shelter home.
Social protection

Rehabilitation of women survivors of violence cannot be sustained without adequate social protections for a sub-set among them who are particularly vulnerable, such as older persons and people with disabilities.

- Introduce universal pensions (equivalent to at least half the prevailing minimum wage) for older persons, single women-headed households and people with disabilities.
- Introduce maternity benefits (equivalent to six months’ minimum wages, for some parity with women in the formal sector) for all women in informal work.
- Replicate the National Employment Guarantee Scheme for the urban poor via a massive housing, water and sanitation program or the care economy, including community childcare for children, people with disabilities and older persons.

Housing rights for women

Even as we advocate for more, better-equipped and specialized shelter homes, ultimately, they are temporary measures. The best form of redress for women survivors of violence is safe and secure housing. The central government’s scheme to provide Housing for All by 2020 must reflect cognizance of the United Nations’ standards regarding security of tenure, access to essential services, location, accessibility, affordability, habitability and cultural appropriateness.

- Ensure housing for underprivileged women, especially single mothers, senior citizens and women living with disabilities.

Perspective and capacity building of shelter home staff

The field work offered ample proof that the staff and even the management of shelter homes carry retrograde and, at times, misogynist ideas about women and support patriarchal understanding of discrimination, sexuality, (arranged) marriages and so on.

- Conduct human rights’ trainings (that include subjects on gender, patriarchy, caste, faith and sexuality) for staff members to ensure sensitivity in their relations with residents, and address any judgment and/or prejudice.
- Support staff members through training on self-care and burnout prevention.

ANNEX 1.
CONSENT FORM FOR IN-DEPTH INTERVIEW PARTICIPANT

WOMEN'S EXPERIENCES OF SHELTER HOMES
A FIVE-STATE ACTION RESEARCH STUDY
Consent Form (IDI)

INTRODUCTION
Hello. My name is ______. I live in _____ (town/city). Currently, I am playing the role of a researcher on behalf of _____ an organization which works on the issue of _________________ (Feel free to share more about yourself). This is my colleague (introduce note taker).

PURPOSE OF THE RESEARCH
We are conducting this study among survivors6 of violence who have lived or are living in shelter homes; as well as with survivors who have chosen to not go to one. We shall focus on the issues and concerns of survivors and find ways to improve their lives. To make these improvements, we must first be able to understand the violence and the range of issues faced by them such as their dignity, health, employment, finances and so on. So we are talking to survivors in five states in the country to understand what they have faced and what they would like to be addressed. We will use these responses to demand better living conditions, employment, medical benefits, access to education for girls and children and all the other benefits that survivors of violence deserve as citizens.

WHAT WILL HAPPEN TO THE RESULTS OF THE RESEARCH STUDY?
The results of the research will first be used to write a report. The report will then be used for advocacy with the government to demand better living conditions and a range of rights for women/persons such as yourself/survivors.

YOUR PARTICIPATION AND THE INTERVIEW
We are inviting you to participate in this research because we believe that your responses will help improve awareness about issues related to individuals who have lived/are living in shelter homes. If you agree to participate you will be asked about difficulties and violence you/survivors of violence face before living in a shelter home, during your/their stay there or after you/they move out of shelter homes (Note to Researcher: Please select and read out the appropriate category). Your opinion will also be sought on what you know about shelter homes such as the conditions there, support, and services provided. We will talk with you in private at a location where you are comfortable and we can be alone. The interview itself may take approximately an hour and a half. However, if we are unable to complete the conversation, we may request you for another meeting.

6 The term ‘survivor’ stands for individuals assigned female at birth as well as transwomen who have all have faced some form of violence that either led them to live in a shelter home or faced homelessness.
CONFIDENTIALITY

All the information gathered via research will be used only and exclusively for the purpose of this research and will not be shared with anyone. Your name or any other identifying factors will not appear in the final report or be disclosed to anyone other than the research team. If you agree we will audio tape this interview so that we do not miss out anything you say. This recording will be destroyed after the notes are typed.

VOLUNTARINESS AND RIGHTS

Your participation in this research is completely voluntary. If you decide not to participate, you can let us know and we will not include any part of this conversation in our report. If you agree to participate in this research, you are still free to end your participation at any time and skip any questions during the interview.

RISKS AND DISCOMFORT, IF ANY

Although we do not foresee any risks because we shall keep this conversation strictly between us and you, if you are concerned about any potential risks, please do share those with us so we can find a way to avoid or minimize it.

BENEFITS

There are no direct benefits for participating in this research but hopefully there would be many indirect advantages. Your participation in this research can help improve the lives of the many residents who currently/may live in shelter homes. We can however offer to support you with counseling or other such services you may need, through an NGO based in your town/city.

CONTACT INFORMATION

I, as a field researcher, am willing to answer any questions you may have concerning this research study. If you need more information on the project, need to express concerns, complaints or know the rights of research participants, please contact at this phone number:

Do you have any questions? (If yes, note the questions) □ Yes □ No
Are you willing to participate in the research? □ Yes □ No
If not, terminate the research with the participant

If agreed to participate,

Date Name of Respondent

Signature/thumb impression of the respondent

57 The word ‘resident’ refers to those who are living in a shelter home
Instructions to interviewer:

( ) If the individual has agreed to participate, but does not want the interaction to be audio-recorded, then check mark.

Please ask the respondent if she wants a copy of the signed consent form. If yes, please give her a duly signed copy.

Interviewer’s statement: I, the undersigned, have explained to the participant in a language she understands the procedures to be followed in the research and the risks and benefits involved.

Name of field researcher Name of principal researcher

Signature of field researcher Signature of principal researcher

Date
ANNEX 2.
WOMEN’S EXPERIENCES OF SHELTER HOMES
A FIVE-STATE ACTION RESEARCH STUDY
DRAFT SURVIVORS™ INTERVIEW GUIDE

(Use for women who are currently living in/have lived in shelter homes/did not go to a shelter home)

NOTE FOR INTERVIEWER:

- This guide acts as a reminder so you can cover all important topics. Use what is applicable.
- The questions are a suggested checklist you may change, add, or delete questions as long as they cover the range of our enquiry.
- You may change the suggested order in which the questions are listed, depending upon the conversation and the situation. Yet, it is best if the interview feels like a friendly chat with a ‘natural’ flow.
- The participants may be experiencing trauma and difficulties, so we need to be careful with our questioning.
- You may adjust the language according to the respondent’s education and age.
- THIS IS NOT A SURVEY but an interview which needs longer responses with details.
- The interview must start ONLY AFTER the respondent has given you consent-or agreed to participate in the interview.
- All interviews must be held in PRIVACY, one-on-one between the researcher and her respondent.
- Tell the respondent that you will come back at a later stage to share the findings of the study.

Details of Interview

Name of Interviewer:      Name of Note-taker:

Place of Interview:

Time of starting interview:      Time of ending interview:

58 The term ‘survivor’ stands for individuals assigned female at birth as well as transwomen who have all have faced some form of violence that either led them to live in a shelter home or faced homelessness.
A. Personal details (including gender, caste, class, bank account and assets, if any).  
(Note: If the survivor hasn’t lived in a shelter home, please skip the following sections and proceed to section J, at the end of this questionnaire, on experiences of survivors who have not lived in shelter homes)

B. Details of shelter home

C. Experiences of homeless survivors of violence

(NOTE: You may again want to remind the respondent that her name will NOT be used in this exercise and her words kept most confidential, so it would be helpful if she spoke freely.)

What brought them to the shelter home?

Experiences of early weeks/months at shelter home

Life at the shelter home:
For example:
A typical day
Infrastructure
Meals and nutrition
Clothing

Staff and the services they provide/facilitate:
For example:
Medical facilities
Legal services
Counselling
Education/skill development etc.

Visits by officials and NGO members

D. Experiences within the shelter home
For example:
• Interaction/relationship with other residents
• Interaction/relationship with staff
• Were there challenges/struggles?
• Any mechanism of grievance redress/Whom did they speak with if they had issues?

E. Contact with family
For example:
• Do residents meet their family/friends/relatives while at the home
• How is contact established with the family if at all/involvement of the shelter home in this
• Safety concerns if any and how are they addressed?
• How are decisions around leaving the shelter home taken/experiences
F. Children

For example:

• Are children allowed to stay with mothers/till what age
• Issues faced by /concerns if any of mothers

G. Miscellaneous

For example:

• Reasons for not accessing a shelter home
• Do they know about/heard any stories about shelter homes
• General knowledge and perceptions around shelter homes

H. Experiences of survivors who have chosen not to/refused to/could not go to a shelter home

NOTE: Please thank the participant at the end of each of the interview/s. Remember to tell them that this was a very important contribution made by her.
### ANNEX 3.
**DIRECTORY OF SHELTER HOMES FOR WOMEN IN DELHI**

<table>
<thead>
<tr>
<th>Sl.</th>
<th>Name</th>
<th>Survivor/category</th>
<th>Organization</th>
<th>Address</th>
<th>Contact</th>
<th>Capacity</th>
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<tbody>
<tr>
<td>1</td>
<td>Atulya Home for Women</td>
<td></td>
<td>New Generation Trust</td>
<td>Atulya Home for Women, E- 36, Paryavaran Complex, Neb Sarai, New Delhi 110030</td>
<td>29531804</td>
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<td>2</td>
<td>Bapnu Ghar</td>
<td>Women (aged 8–60) who have been rendered homeless</td>
<td>All India Women’s Conference</td>
<td>Bapnu Ghar, 6, Bhagvan Das Road, Aaga Khan Hall, New Delhi- 110001</td>
<td>23381377 23070834 858</td>
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<td>3</td>
<td>Shantidham</td>
<td>Survivors living with mental health issues</td>
<td>Sisters of the Destitute</td>
<td>Shantidham, Home for the Destitute Women, Khera Khurd, New Delhi- 110082</td>
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<td>Homes in Nirmal Chhaya Complex</td>
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<td>Short-stay home</td>
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<td>Jivodaya Ashralayam</td>
<td>Survivors living with mental health issues</td>
<td>Sisters of the Destitute</td>
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<td>9999704137 9958957430</td>
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<td>6</td>
<td>Mahila Samman Aashiyana</td>
<td>For women requiring medical attention and shelter</td>
<td>Centre for Equity Studies</td>
<td>Kabir Basti, Near Sabji Mandi Police Station, Malka Ganj, New Delhi 110007</td>
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<td>7</td>
<td>Matritava Chhaya</td>
<td>Home for pregnant and lactating women</td>
<td>YWCA and DWCD</td>
<td>Community Center, A- Block, Jahangirpuri, Delhi Community Center, Chander Shekhar Azad Colony, Sarai Rohilla</td>
<td>9971802146 9971802415 27633148 9971802146 9971802415 23694147</td>
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<td>8</td>
<td>Rahab Centre for Hope</td>
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<td>Rehab Centre for Hope</td>
<td>Rehab Centre for Hope, H.No. 15, Block No.F, Street No. 1A, Qutub Vihar, Phase- 1, Near Koyla Dairy, New Delhi- 110071</td>
<td>9560033780 9818098178</td>
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<td>9</td>
<td>Rajkumari Amrit Kaur Shelter Home</td>
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<td>YWCA</td>
<td>Rajkumari Amrit Kaur Shelter Home, Ashoka</td>
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<td>Shakti Shalini</td>
<td>Women (aged 18–45) who have been rendered homeless</td>
<td>Shakti Shalini</td>
<td>6/30- B, Lower Ground Floor, Kargil Park Lane, Jangpura- B, New Delhi- 110014 (organization address)</td>
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