IN SEARCH OF A

DIGNITY RESTORING

SAFE SPACE
AN ACTION RESEARCH STUDY ON
EXPERIENCES OF WOMEN SURVIVORS OF VIOLENCE
IN SHELTER HOMES–TAMILNADU

“By speaking out against Domestic Violence,
we can challenge attitudes towards such violence and show that
it is a crime, a human rights violation of women and is unacceptable.”

Ekta Resource Centre for women, Madurai
On behalf of Lamlynti-ChittaraNeralu,
a national network for shelter homes in India

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ACKNOWLEDGEMENTS

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Bimla Chandrasekar
Director, Ekta
March, 2019
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PREFACE

Violence against women is a grave violation of women’s human rights and is rooted in the gender biased discrimination and patriarchal social norms that normalises such violence. Women survivors of violence often find themselves at a crossroads, not knowing where to go and what to do. Finding a place to stay becomes the most urgent need, and the shelter home for women was created to address this need by providing them with temporary shelter.

Women’s rights organizations and feminist groups recognized the need to critically reflect on the state of shelter homes and to consolidate their learning and experiences for use as an advocacy tool. This coming together led to the genesis of an informal, national network on shelter homes in 2016: Lam-lynti Chittara Nerallu, meaning ‘to lead the way under the vista of stars’. The name is derived from three different 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.

The network aimed to re-imagine shelter homes as open, positive spaces that ensure a rights-based, dignity-restoring support system for survivors of violence. Its main objectives have been to: a) review the conceptual underpinning of shelter homes for women; b) produce evidence-based knowledge on the operational conditions of and services by shelter homes (including challenges and best practices); and c) demand accountability of the state via evidence-based advocacy and outreach for optimal functioning of women’s shelter homes.

In keeping with these objectives, this action-oriented research is an attempt to produce evidence and simultaneously act on the evidence via action among shelter homes, communities and women’s groups. During the process of data collection and reflection on the findings, it became evident how necessary it was to continue this engagement.

Although aspired, we could not cover many shelter homes in the State and listen to the critical voices of women survivors of violence in those spaces. We are hopeful to continue our interactions with the survivors and strengthen our linkages with the shelters in the course of our future work.
CHAPTER I. INTRODUCTION AND CONTEXT

“Violence against women is perhaps the most shameful human rights violation. And it is perhaps the most pervasive. It knows no boundaries of geography, culture or wealth. As long as it continues, we cannot claim to be making real progress towards equality, development, and peace.” - Kofi Annan, former Secretary-General of the United Nations

Violence against women occurs throughout the life cycle of women; starting from pre-birth to death. It happens both in public and private spheres. It has many forms which range from domestic or intimate partner violence to sexual harassment in the workplace, trafficking, sexual violence and gender-related killing. Such violence in relationships occurs when a person feels entitled to power and control over the partner.

Women’s vulnerability to violence is increased by the socially constructed and assigned roles and responsibilities of women and men. Unequal access and control over resources of women, perpetuated by the patriarchal social norms, further marginalises them. The objectification of women in media and the projection that women invite violence through their dress style or from not abiding by the set social norms encourages and is used to justify violence against women. Domestic responsibilities, familial pressures, dowry, domestic violence, partner abuse, infertility, sexual abuse, harassment, lack of social support and social tensions altogether have a strong impact on the marginalized status of the women.

Violence is largely unspoken

Patriarchal social norms are very strong in Indian societies. Women are seen as the protector of family honour and are supposed to tolerate sufferings for the wellbeing of the family. Low self-esteem and lack of social and economic support forces them to remain silent about the violence they endure. Studies also reveal that women do not disclose their experiences of violence to their family members or friends as they try their best to maintain the family image and often pray to God for redressal.

The suffering women feel that they are at greater risk of violence from the abusers if they seek help from outside. This is compounded by the fear of facing discrimination and stigmatization from the community and the risk of losing custody of their children. Leaving one's home is seen as shameful and a woman who walks out of abusive relationship is often
blamed for doing so. Lesbian, bisexual, transgender and queer women who are abused by partners isolate themselves in an effort to keep their relationship secret or avoid social stigma.

The National Family Health Survey (NFHS–III) reveals that two out of three women who have ever experienced violence have never told anyone about the violence. Only one in four women had ever sought help to end the violence. The majority of women continue to live in marital home and endure abusive behaviour 85 percent of married women who have experienced only sexual violence in marital relationship have never told anyone about the violence, and only 8 percent have ever sought help. The major source of help sought was from their natal family, followed by marital family and neighbours. Among those victims of marital violence who sought help, only about 2 percent sought help from police and 1 percent from lawyers.

Social vulnerability, violence and homelessness

Socially marginalized women (such as dalits and minorities) fear the hostile attitude of the police, and other service providers. The low economic status is a great challenge for women to escape from the violent environment and the abuser as they financially depend on the abuser. Economic control and abuse by partners further hinder women from accessing support. Lack of awareness about their rights and limited access to information about support services and options available to them if they choose to leave a violent situation is yet another challenge for women.

Forced sex work and labour trafficking of women is another complicated phenomenon. Women in distress become easy prey to traffickers, who lure vulnerable women into crime networks through deceit and false promises and subsequently force them into sex work.

The situation of women with mental illness remains a real concern, and this becomes the ground for separation and divorce. Women with disabilities and older women fear fleeing from abusive families and partners and avoid seeking help due to fear of loss of basic care and financial means. The humiliation faced by women living outside of patriarchal family structures deters women from seeking institutional services in case even if they are in violent circumstances.
The impact of violence ranges from immediate- to long-term physical, sexual and mental health consequences for women and girls, and can often lead to death. Violence negatively affects women’s general well-being and prevents them from fully participating in society. Violence not only has long-lasting consequences on women but also their families, the community and the country at large, with often unquantified and unrecognized social, health, and economic costs to all. In these and many other contexts, women tend not to seek shelter until they have exhausted all other options.

There is a close link between violence and homelessness. Women fleeing domestic violence, abusive family situations become homeless. Homeless women living on the street and public places are more vulnerable to violence. Women with mental illness or stigmatised diseases like HIV infection are often thrown out of their houses. Each of the above factors multiplies the intensity of violence and vulnerability of the women concerned.

The worst impact of the intersecting systems of the gendered power relationships that makes women vulnerable to violence is seen among women who are marginalised in terms of cast, class and their gender identities.

**Homelessness and access to shelters**

Women usually make the decision to leave their home when the violence escalates and the need to protect their children intensifies. It is extremely difficult for single women to find a house as they face violence and discrimination from landlords. Women’s vulnerability is a complex issue and their shelter need also varies.

There are few facilities to meet the diverse needs of specific groups of women, like women having physical and cognitive disabilities, unwed mothers, multiple forms of violence, repeat victims of violence, and migrants from other states etc.

Shortages of support services and assistance in remote and rural areas which is within their reach and lack of anonymity and confidentiality while attempting to seek services also restrict survivors of violence to remain stay in the violent environment.

Recognising the graveness of the issue of violence against women and the need to address it effectively, many national and international instruments have been developed. The Indian Constitution guarantees the equality of women and men, and has empowered the State to take special temporary measures like reservations to achieve equality. India has also ratified...
International Conventions and Human Rights Treaties, key among them are the ratification of the Convention on Elimination of All forms of Discrimination Against Women (CEDAW) in 1993, the UN Declaration on Elimination of Violence Against Women, the Beijing Declaration and the Platform for Action in 1995, and now the Sustainable Development Goals (SDG). The SDGs have mainstreamed gender concerns in all 17 goals and have a defined goal to focus on gender equality and women empowerment. Despite all these initiatives, violence against women continues. The gap between the de jure equality and de facto equality remains a huge concern.

**Violence against Women in Tamilnadu**

The National Family Health Survey – III (2005 – 2006) for the first time documented the widespread spousal violence and culture of silence observed by victims and survivors. The following statistics reflect the high levels of violence and different forms of against women in Tamil Nadu (TN).

**Table 1. Violence within marriage in Tamilnadu**

<table>
<thead>
<tr>
<th>State</th>
<th>Emotional Violence</th>
<th>Physical Violence</th>
<th>Sexual Violence</th>
<th>Physical or Sexual Violence</th>
<th>Physical/ Emotional / Sexual Violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamil Nadu</td>
<td>16.8 %</td>
<td>41.9 %</td>
<td>3.2 %</td>
<td>41.9 %</td>
<td>44.1 %</td>
</tr>
<tr>
<td>India</td>
<td>15.8 %</td>
<td>35.1 %</td>
<td>10.0 %</td>
<td>37.2 %</td>
<td>39.7 %</td>
</tr>
</tbody>
</table>

In Tamil Nadu, 44.1 percent of married women are victims of some form of physical or sexual or Emotional violence by their husbands, which is higher than the national average of 39.7 percent. The percentage of violence is the highest among the less educated (52.9 percent) who having no schooling and 52.3 percent amongst women having less than 5 years of schooling. The prevalence is least amongst women (24.6 percent) who have completed 10 years of schooling.

**Table 2. The NFHS IV (2015 – 2016) data reveals the following:**

<table>
<thead>
<tr>
<th></th>
<th>Spousal violence</th>
<th>Experienced violence during their pregnancy</th>
<th>Aged 15-19 years were already mothers or pregnant at the time of the survey</th>
<th>Aged 20-24 years were married before the age 18 before the age 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban</td>
<td>37.2</td>
<td>5</td>
<td>3.6</td>
<td>17.5</td>
</tr>
<tr>
<td>Rural</td>
<td>40.6</td>
<td>7.5</td>
<td>6.3</td>
<td>31.5</td>
</tr>
</tbody>
</table>

The data shows that many women in rural Tamil Nadu suffer violence and harassment at the hands of their families. There is a dire need for shelter for abused women who otherwise receive no support. However, short stay homes are mostly located in urban areas.
When comparing the intensity of violence women experience in private domain, the data shows a marginal decline (from 44.1 to 40.6 percent). In both the NFHS III&IV, domestic violence is defined to include violence by spouses as well as other household members. However, it should be noted that spousal violence is the most common form of violence experienced by women. For measuring domestic violence, the NFHS IV follows the same methodology as followed in NFHS III. Apart from the new form of domestic violence, that is violence during any pregnancy is included in NFHS IV. (OXFAM India Report – Measurement of Domestic Violence in NFHS Surveys and some evidence)

Table 3. Cases of crime against women registered in Tamil Nadu during the years 1999 – 2016

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Assault (Rape)</td>
<td>430</td>
<td>538</td>
<td>432</td>
<td>501</td>
<td>557</td>
<td>618</td>
<td>571</td>
<td>457</td>
<td>523</td>
</tr>
<tr>
<td>Molestation</td>
<td>1959</td>
<td>1948</td>
<td>1773</td>
<td>1866</td>
<td>2022</td>
<td>1861</td>
<td>1764</td>
<td>1179</td>
<td>1540</td>
</tr>
<tr>
<td>Kidnapping and abduction</td>
<td>1000</td>
<td>805</td>
<td>659</td>
<td>720</td>
<td>632</td>
<td>692</td>
<td>783</td>
<td>618</td>
<td>1097</td>
</tr>
<tr>
<td>Sexual Harassment</td>
<td>1316</td>
<td>2167</td>
<td>1012</td>
<td>1766</td>
<td>881</td>
<td>1081</td>
<td>665</td>
<td>852</td>
<td>875</td>
</tr>
<tr>
<td>Dowry Death (Sec 304B of IPC)</td>
<td>197</td>
<td>191</td>
<td>194</td>
<td>247</td>
<td>220</td>
<td>225</td>
<td>215</td>
<td>187</td>
<td>208</td>
</tr>
<tr>
<td>Cruelty by Husband and Relatives (Sec 498A IPC)</td>
<td>620</td>
<td>837</td>
<td>815</td>
<td>966</td>
<td>1565</td>
<td>1437</td>
<td>1650</td>
<td>1248</td>
<td>1976</td>
</tr>
<tr>
<td>Dowry Prohibition Act</td>
<td>226</td>
<td>287</td>
<td>41</td>
<td>219</td>
<td>175</td>
<td>294</td>
<td>193</td>
<td>81</td>
<td>316</td>
</tr>
<tr>
<td>Immoral Traffic Prevention Act</td>
<td>6462</td>
<td>6950</td>
<td>5232</td>
<td>3530</td>
<td>2839</td>
<td>3022</td>
<td>2777</td>
<td>1732</td>
<td>1199</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>12670</td>
<td>13732</td>
<td>10111</td>
<td>9798</td>
<td>8888</td>
<td>9332</td>
<td>8648</td>
<td>6489</td>
<td>7811</td>
</tr>
</tbody>
</table>

Source: NCRB reports for the years 1999 to 2016.
The above table reveals the crime against women both in public and private domains. The cases of ‘dowry death’, ‘cruelty by husband and relatives’ and cases registered under ‘the Dowry Prohibition Act’ are seen as crimes against women in matrimonial relationship (private) and cruelty by husband and his relatives’ accounted for the highest number. The incidences of other crimes are categorized as crime against women in public domain, ‘molestation’, ‘kidnapping and abduction, and ‘immoral traffic’ are the highest in number. Till 2006, when it was 25 percent of registered cases, cases registered under ‘Immoral Traffic (Prevention) Act constitutes the largest percentage of all forms of crimes against women, whereas it was almost 50 percent in 2000.

Regarding the crime in matrimonial relationship, the incidence of cases registered under ‘cruelty by husband and his relatives’ in Tamil Nadu, there is a striking hike of 135 percent in the year 2009 when compared with 1999 and the hike was 219 percent in 2007 over 1999. The data shows a marginal decline of 11 percent in 2009 over the previous year 2008. Significant shifts in trend are observed during the years 2004, 2006 and 2009 and again shows upward trend since 2009. The number of incidents is almost tripled in the year 2015 when compared with 1999.

In cases of registered crime, the spike in recorded rape in 2013 may be because the police became sensitive after the Nirbhaya case, Delhi rape of 16 December 2012. After that it has gone down again. This shows the degree to which violence is normalised and under-recorded. The police are complicit because they bring in their bias into recording and often explicitly or implicitly discourage women from reporting incidents of rape.
CHAPTER II: POLICY RESPONSES
(Both National and State)

Short Stay Homes

In order to help vulnerable women and children in difficult situations, the Indian government established and funded different types of shelter homes. The Scheme of the Short Stay Homes (SSH) for Women and Girls launched in 1969 was designed to provide temporary shelter to 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. The scheme provides a package of services to the respondent, such as: medical care, psychiatric treatment, case work services, occupational therapy, educational-cum-vocational training, recreation facilities and rehabilitation. The scheme is executed through non-governmental organizations (NGOs) in different parts of the country; these NGOs receive grants from the Government of India. The purpose of the Short Stay Home is to help women from ages 15 to 45 years rehabilitate themselves within a short period of time – from 6 months to 3 years. The Government had sanctioned 361 Homes under this scheme up to the end of Eighth Five Year Plan (1992 – 1997). The Department of Women & Child Development however could provide details of 358 homes, of which only 287 are in operation as 74 have been closed due to various reasons.

Vigilance Institutions

Vigilance Institutions established under the provision of Sec 21 of Immoral Traffic (Prevention) Act provide care and protection, educational, vocational trainings, and personal development programmes, including awareness on health care.

As of now, the Government of Tamil Nadu maintains five Government Vigilance / Protective Homes in Chennai, Madurai, Salem, Coimbatore and Trichy under the Immoral Trafficking Prevention Act, for the rehabilitation of women victims of trafficking. Women and girls are given admission as per the order issued by the court under various provision of the ITP Act. In these homes, basic services like stay, medical care, counseling and vocational skill training are provided as part of rehabilitative measures.
Vigilance/ Protective homes accommodate women and girls as per the order issued by the court under various provision of the Immoral Traffic (Prevention) Act, 1956. In these homes, basic services like care, medical treatment and counseling are provided to them as part of rehabilitative measure. In addition, different vocational training is imparted to the victim according to their interest in order to develop their skill and to empower them.

**Rescue Shelters**

Rescue shelters were established for the purpose of providing custodial care and protection to those who are rescued from commercial sex work, charged for offences under the Immoral Traffic (Prevention) Act, and whose cases are under trial in the court. Women from 18-25 years of age are admitted till the enquiry is completed before the court. These shelters are functioning along with the Vigilance / Protection Home.

**Short Stay Home (run by NGO) under ITP Act**

‘Abaya Nilayam’, a non-governmental organization based in Chennai, has been recognised for providing care and protection to those women and girls who are living in vulnerable situation and are likely to fall victim to sexual abuse. Admission to Abaya Nilayam and St. Xavier Rescue Shelter, Adaikalapuram shall be made directly by the NGO.

**Unwed Mothers’ Home**

Unwed girls and women who are pregnant, particularly those who are teenagers, are typically either abandoned or subjected to contemptuous neglect and ill treatment. To protect the interest of such women and girls there are two “unwed mothers’ homes” in TN. One home is in Chennai and functions within the premises of Government Vigilance Home. The other home is run by the St. Joseph’s Charity Institute at Adaikalapuram, Tuticorin District. Unmarried young women who are orphans or deserted by their family, or girls with problems at home, are given shelter. The Institution makes all efforts to get them married to suitable grooms. All expenses are met by the institution. Married women and grown up women who are deserted or harassed by husbands are sheltered in this Home. Helpless widows are also admitted here. There are currently 10 women sheltered there.

**Government service home**

Service Homes are run by the Government to provide care and protection to women and deserted widows, handicapped women and girls rescued from child marriages and neglected
by their families who are economically and socially backward by giving them education and vocational training.

In Tamil Nadu, there are 9 Government Service Homes, located in Chennai, Salem, Cuddalore, Thanjaavur, Tirunelveli, Sivagangai, Krishnagiri, Madurai and Perambalur. Women who have discontinued their studies due to various reasons are encouraged to stay along with their children and pursue their schooling in the same place.

**Shelter for Homeless Urban Poor**

A. Initiative in Chennai

The largest majority of Urban Homeless people sleep on pavements and sidewalks, under ledges of shops and homes, in market corridors, at bus-stands and railways station, and outside places of worship. They live in constant fear of danger to their lives from rash and drunken drivers and hooligans. In some cities, it was noticed that there seem to be a clear preference among single women to live in shrines, families on pavements, and children in bus stands and railway stations.

The Corporation of Chennai is a pioneer in the Shelter for Homeless programme as it started the first Shelter for the homeless in the year 1992. The entire Public Health Department committed to rehabilitating the homeless and mentally ill residing in the streets of Chennai. About 727 homeless people were rescued from the streets, brought to the Communicable Diseases Hospital and treated for their ailments. They were provided with nutritious food and shelter. In consultation with psychiatrists, they were referred either to the Institute of Mental Health for further treatment after obtaining a Magistrate’s order, and about 167 persons were reunited with their families across the state.

According to a Supreme Court order in 2010, every city should have one shelter home per one lakh people. But Chennai, which has a population of more than 8 million people, has only 47 functional shelter homes. These centers are run by the NGOs with financial support from the Chennai Corporation.
B. Madurai City

Madurai Corporation, Tamil Nadu has opened 9 shelters for homeless people and five homes are yet to be started. Each shelter can accommodate 25 men and women. Mostly elderly people deserted by their families take refuge in these shelter homes run by the Corporation.

Swadhar

The Swadhar Scheme for women in difficult circumstances, developed by the Ministry of Women & Child Development, aims to provide shelter and assistance to marginalized women in crisis, particularly women who are marginalized and tend not to have access to familial support (e.g. widows, former prisoners, survivors of natural disasters, trafficking, sexual crimes, terrorist/extremist violence, women with non-psychiatric mental health issues, women living with HIV and AIDS, and other women in difficult circumstances).

Non-governmental organizations receive support from to run the Swadhar Scheme. They are monitored at the district, state, and central levels and receive a range of assistance, including support for construction of buildings, payment of rent for accommodation, staff salaries, other recurring and non-recurring expenditures, lease charges and bills for toll-free phone lines.

SwadharGreh

The Ministry of Women and Child Development had previously administered two schemes, the Swadhar and Short Stay Home schemes, providing shelter and other assistance to women in difficult circumstances.

An evaluation was carried out in 2007 to assess the performance of both the schemes. While citing the effectiveness and positive impact of measures adopted under the schemes for counselling and rehabilitation found that the profile and category of residents, admission procedure, and counselling, quality of service, vocational training, rehabilitation and follow up procedure are almost similar in both the schemes. It, therefore, recommended merger of these two schemes for better functioning and outcomes with lesser administrative burdens and procedures. It also recommended that the new scheme should focus on establishing one such shelter home in each district.
Thus, the Government of India has introduced ‘Swadhar Greh’ in 2016 by merging two schemes namely, ‘Swadhar’ and ‘Short Stay Homes’. At present, 40 SwadharGreh are functioning in the Tamil Nadu and each Centre is catering to the needs of 30 women. The scheme is implemented through Non-Governmental Organizations.

Swadhar Greh facilities could also be availed by the children accompanying women in the above categories. Girls up to the age 18 years and boys up to the age of 8 years would be allowed to stay with their mothers. (Boys above 8 years of age need to be shifted to the Children Home run under JJ Act/ICPS)

Table 4. Budget released under Swadhar / Swadhar Greh Scheme for Tamil Nadu during the last three years:

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<tbody>
<tr>
<td>2014-2015</td>
<td>38.53 lakhs</td>
<td>12.48 lakhs</td>
<td>247.22 lakhs</td>
<td>280.07 lakhs</td>
</tr>
</tbody>
</table>


UJJAWALA

To address the issue of trafficking of women and children for commercial sexual exploitation UJJWALA scheme was introduced by the Government of India on 21st February 2014 by the Ministry of women and child Development.

This scheme is a Comprehensive scheme for Prevention of trafficking, rescue, rehabilitation and reintegration of victims of trafficking for commercial sexual exploitation. There are 8 NGOs implementing this scheme in Tamil Nadu. The financial requirement is shared between the Centre, State, and the implementing NGOs at the ratio of 60:30:10.

The women in the age group of 25 to 35 and their children are supposed to get all the benefits only for a period of 12 month and after that they will get the facilities of accommodation only and arrange all their expenses from their own resources. Monitoring of the scheme is done at the district level and at the state level.
Tamil Nadu Transgender welfare board

In Tamil Nadu, a Welfare Board for the transgender individuals to address their grievances and to mainstream them into all walks of social life. The Tamil Nadu Third Gender Welfare Board consists of 11 Official Members including the Minister for Social Welfare and Nutritious Noon Meal Programme as its Chairperson and 9 Non-Official Members (transgender individuals).

Documents like Birth Certificates, Educational Certificates, Community Certificate and other essential Identity Card etc., and housing facilities are provided through convergences with other departments.

Sakhi (One Stop Centre)

The One Stop Centre (OSC) is meant to provide support to women facing physical, sexual, emotional, psychological or economic abuse. A dedicated team is positioned to provide various services such as temporary shelter, psychosocial support, free legal aid, police assistance and counselling. Of the 32, only 6 OSC has been set up in Tamil Nadu. (Chennai, Kancheepuram, Coimbatore, Trichy, Salem and Madurai). The one in Tambaram, Chennai opened in January 2017 and has since been renovated. It has so far handled 100 cases, most of which are cases of domestic violence.

Women Helpline

In Tamil Nadu the Women Helpline Service – 1091 was launched the year 2000 by the Government of Tamil Nadu with an objective of providing round the clock services to women in distress. Subsequently on 10th December, 2018, the Tamil Nadu Government
launched a 24-hour toll free helpline, number 181, for women facing domestic violence and sexual harassment. Women will get assistance ranging from police help, legal aid or medical services including ambulance. It is available round-the-clock on all days of the week and women can also get information about the welfare schemes aimed at their benefit.

**Family Counselling Centers**

In Tamil Nadu, the Family Counseling Centres (FCC) are run by the NGOs or social institutions with aid either by the Central or the state governments.

The State government is assisting 6 Family Counselling Centers (Chennai, Tiruvallur, Villupuram, Thiruvarur, Tirunelveli and Sivagangai) run by the Non-Government Organization through the Tamil Nadu Social Welfare Board *(Source: Tamil Nadu government Social Welfare Policy note 2018 – 2019)*

In the year 2017-2018, 61 FCCs in Tamil Nadu were sanctioned by the central government. During 2017-2018, a sum of 195.20 lakh was sanctioned to Family Counseling Centres.

The main aim of the Family Counseling Centre is to provide counseling and to preserve the basic social unit of a family. It helps women who approach the centre, to redress their grievances relating to dowry harassment, marital maladjustment, cases of alcoholism and counseling to AIDS victims by giving suitable and appropriate guidance.

*“The FCC run by the Women’s Indian Association (WIA) is functioning since 1980 in Chennai. It has two women counselors from the Social Welfare Board and the Legal Aid Board has deputed a woman lawyer to visit every Saturday or when situation demands.”*  

**Victims Relief Fund for vulnerable women**

The vulnerable women rescued from trafficking are provided with financial assistance of Rs.10,000 for rehabilitation under the scheme of ‘Victims Relief Fund’. So far, 278 victims have benefited under this scheme from 2012 to 31.03.2018. *(Source: Social welfare And Nutritious Meal Programme Department, Policy note 2018 - 2019)*
Special Cell for Women

TISS. In 2017, the Tata Institute for Social Science (TISS, Mumbai) signed an MoU with the National Commission for Women to establish special cells for women in Tamil Nadu. The special cell consists of 2 trained social workers and the objective of this cell is to offer counselling referral to medical, psychiatric, and educational services to women and children with police assistance. The special cell will play a role of liaison agency between police and organizations for women and children.

In Tamil Nadu, there are five special cells in Chennai city (Thousand Light, AWPS), Salem City (Sooramangalam, AWPS) Madurai City (Thallakulam, AWPS), Tirunelveli City (Palayamkottai, AWPS), and Villupuram (AWPS).
### CHAPTER III: EVOLUTION OF SHELTER HOMES IN TAMIL NADU

Table 5. TIMELINE AT A GLANCE

<table>
<thead>
<tr>
<th>Year</th>
<th>Shelter Care facilities in Tamil Nadu</th>
</tr>
</thead>
<tbody>
<tr>
<td>1930</td>
<td><strong>The government vigilance home:</strong> This was run by the Directorate of Social Defense was set up in 1930 during the British rule. From 1948, the T.N. government has been running it. Women convicted by the court under the Immoral Traffic Prevention Act (ITPA) are detained in this institution.</td>
</tr>
</tbody>
</table>
| 1931 | **Avvai Home and Orphanage:** Dr. Muthulakshmi Reddy, the eminent medical practitioner, social reformer and the first female legislator of India started the **Avvai Home and Orphanage** in 1931 to protect and educate the orphan girls, deserted women irrespective of caste, creed or social status.  
- Her sole objective was to provide empowerment and economic independence to poor girls and women and ultimately to be trained to lead a normal life with dignity and self-respect.  
- It was started when three teenage girls from Namakkal who came to her seeking shelter. These girls were from devadasi community. |
| 1945 | **The Service Home at Gandhigram:** Dr. Soundram Ramachandra started a home for the rehabilitation of women in distress in 1945 at Adayar in Madras. This home was intended for helping destitute women to re-establish themselves and to lead a respectable life.  
- It was transferred to Gandhigram in 1947. In 1949 there were 10 inmates and in 1951 the number increased to 40. It was run by Kasturba Gandhi Memorial Trust with Government aid. It was also called Sevikashram. The strength of the Home on 31 March 1956 was 86. Education was imparted, and all the students were taught and trained for E.S.L.C. Examination. Spinning was the main craft in the home. The total strength of the home was increased to 93 in 1956-57, out of which 60 inmates were paid a stipend of Rs. 35 and 9 inmates were paid a monthly stipend of Rs. 25. |
The Industrial section started functioning from April 1, 1959 with 3 units’ namely weaving, tailoring and leather work. In the industrial section trainees were taught cutting, tailoring, weaving, doll making and fancy leather work.

During 1958-59 out of 88 inmates, 22 were sent for midwifery training, 15 for teachers training, 11 for Grama sevikas training 13 were employed as attendants, 5 as wardens, 3 as Ambarchakra instructor, one employed in small scale industry, 2 were married and 16 were discharged due to family reasons.

1948

Service Home at Tambaram, Madras: This was the first Service Home run by the Department of Women’s Welfare. The home had a sanctioned strength of 150 inmates and 75 children. Destitute widows and deserted wives with or without children were admitted into the home after careful investigation by the field staff. Their stay in the home was restricted to 3 years and may be discharged earlier if they were suitably rehabilitated.

On March 31, 1952, there were 131 persons at the home, including 55 deserted wives, 45 widows, and 27 destitute widows and 4 children. Government had accorded an expenditure of Rs. 25 per adult and Rs. 15 per child. The inmates were provided from this amount a balanced diet consisting of milk, vegetables, and cereals in addition to rice. They were also supplied with oil, soap and other provisions. The children were provided with a small quantity of ghee in the meals for two days in week. A part time lady doctor provided medical care and advice. A physiotherapist was appointed to take care of the physically handicapped women and children.

1954

The Awai Ashram at Sivasailam located on the right bank of the river Karuna, a tributary to the Tamiraparani was started on September 18, 1954 with the prime object of rehabilitating destitute women and children.” They were given education up to E.S.L.C. In addition, they were trained in spinning, tailoring and doll making. The inmates received from the government a stipend of Rs. 25 per month.

- The total strength of the house was increased to 42 on December 31, 1959. Spinning was made compulsory to all the inmates.
- Nineteen inmates of the ashram were rehabilitated during the year 1958-
59. Nine candidates were made as craft Instructors, two as teachers, two as midwives, one as grama sevika, and one was sent for other service and four were discharged for private reasons.

- The Home proved as an effective step towards women’s liberation from their age long seclusion and oppression in the society. They offered protection to destitute women and helped them rebuild their life once again. Accommodation, food, education and vocational training offered to the inmates created confidence in them to come up in life. Ill-treatment and ignorance in which they were steeped for centuries together was rendered meaningless.

- Awareness of entitlements which once appeared as a distant dream on the part of women became a reality in their life. Altogether the service homes took the uncared womenfolk at the threshold of progress in their material life and earned them recognition in society.

**1955**

**AbhayaNilayam** founded in 1955 is a short stay home for distressed women cum poor girls. This is registered under the auspices of The Madras Vigilance Association and registered under the Societies Registration Act. Abhaya Nilayam, which means home for protection (“protective home”), admits any girl above 18 years who is stranded in the city, or a destitute without any restriction of caste, creed or any preconditions at any part of the day or night. After admission, the staff contacts either their guardians or parents to restore them back to their families. If they are untraceable, or their family is unable to take them back AbhayaNilayam tries to rehabilitate them in other ways.

**1956**

**Community Service or Welfare Centres**: This was mainly meant for creating an opportunity to develop their homes, their health, culture, education and above all their economy.

- These centres were attended in leisure hours, more often in the afternoons when the womenfolk were free to come out of their homes and participate in the centre's 104 types of activities offered.

- The main aim of these centres, were to inform the women about the community centre in their areas, clear the doubts of the members, regarding Government measures to explain policies of Government and how they could co-operate, make themselves useful to their members in
many ways by helping them to admit children into school, admitting the sick in hospitals, giving help during confinement and securing jobs if possible, investigate cases of desertion and helplessness and to take measures to send them to service homes run by this department and to discover indirectly to what extent the women have benefited by attending the centres.

1958

**Government Protective Rescue Home, Tiruchirappalli** The Government opened a Rescue Home at Tiruchirappalli. It functioned on the model of Stri Sadana Rescue Home. The sanctioned strength of the Home was 100. There were 97 inmates and 8 children during 1974.

- The inmates were given education up to eighth standard in a special middle school established in the campus. Adult education was conducted to the over elderly. A well-balanced and nutritious food prescribed by the Indian Council of Medical Research was provided to the inmates. They were supplied with khadi clothing and bedding according to the scale prescribed in the Suppression of Immoral Traffic in Women and Girls (Tamil Nadu) Rules 1958. The inmates attending outside institutions like high school and professional training were supplied with extra set of clothing consisting of two sarees and two blouses."

  - The Government has started a dispensary with a part time lady visiting doctor in charge of it and under her there was a compounder and a nurse. Minor ailments were treated here and serious ones in other bigger hospitals. The inmates were kept under the perfect system of discipline. They spent their leisure time in music, drama and games. Talks by qualified instructress on subjects like normal health were arranged periodically. Moral instruction was also imparted to the inmates.

The Government Stri Sadana Special School which is a recognized higher elementary school under the Tamil Nadu Educational Rules with VIII standard served the educational needs of the inmates. Besides, general education, vocational training in weaving, tailoring, mat weaving, embroidery, needle work and fancy handwork were given to them. The rehabilitated girls were either sent with their parents or sent for jobs but in some cases the homes conducted marriages also.
ASHI was established in the year 1928 as a voluntary organization with its branches spread in various States. The Association works as the Indian Branch of the International Abolitionist Federation. The Tamil Nadu Chapter was started in Chennai in 1959 and Madurai Branch of ASHI was established in the year 1979 under the leadership of Madurai Institute of Social Sciences. Of the various challenges to social health, ASHI’s main focus falls on some of the most important and most common social health problems like prostitution, sexually transmitted diseases, sexual promiscuity, unwed motherhood, marital maladjustment, disorganised and broken families, substance abuse etc., which are very prevalent in our society and ASHI Madurai branch carried out consistent programmes to create social awareness about STDs and AIDS.

1962–63 Service Home at Cuddalore There was a steady increase for admission from destitute women all over the State. So a Service Home was started at Cuddalore in South Arcot District during 1962-63. The sanctioned strength of the home was 50 adult women and 25 children. The age group of the children should not be above 5 years in case of boys and 7 years in case of girls. A lady doctor was appointed to take care of the health condition of the inmates. As the home was conducted on community lines all the works in the home was done by the inmates in groups.

The main activities of the service home was to educate the destitutes, deserted wives, widows in the age group of 18 to 30 years and prepare them for E.S.L.C Government Public Examinations. In 1963 twelve inmates were sent for the Technical Examination in Tailoring and Dress making (Lower Grade). The inmates who had passed the E.S.L.C. Examination were sent for Teachers' Training. Secretarial courses in typewriting and shorthand were started during 1969-70. A tailoring unit was started during 1970-71. Inmates were given training in typewriting and shorthand also. Side by side the land at a cost of R.0.16 lakh at Vilvarayanathan village was purchased for the construction of building for the Service Home.

1964 Service Home at Thanjavur: The Service Home at Thanjavur was opened in the year 1964. The sanctioned strength of this home was 50 inmates and 25 children. The inmates admitted in this home were between 18 to 30 years. The Director of Women's Welfare Department had proposed to the
government that the candidates who have failed in the E.S.L.C examination should be retained in the Service Homes for a further period of one year to appear for the examination. The proposal was magnanimously accepted by the government from the academic year 1967-68. Secretarial course in typewriting and shorthand was started during the year 1969-70. Training was imparted to the inmates in Typewriting and shorthand for about one year. In the year 1976, 21 inmates passed the Typewriting Lower Grade examination. Other works like arts and crafts, needlework, dress making, embroidery were also taught. Out of 8 candidates 3 passed in needlework and dress making and out of 7 candidates 3 passed the embroidery examination.

1969

**Short Stay Home:** The scheme of Short Stay Homes for women and girls was introduced in 1969 and was operating in almost all the states and Union Territories. Short Stay Homes (SSH) provide temporary shelter to women and girls, facing family problems, violence at home and social discriminations. A package of facilities like medical care, psychiatric treatment, case work services, occupational therapy, educational –cum-vocational training etc are made part of this scheme. The effort of the Short Stay Home is to help these women to rehabilitate themselves within a short period of time, extending from 6 months to 3 years.

1974

**Vigilance Rescue Shelters or Vigilance Reception Centres** This centre was a short stay institution intended for receiving girls and women who were under trial under Immoral Traffic in Women and Girls Act. There were seven such rescue shelters in Tamil Nadu during 1974. They were at Madurai, Salem, Coimbatore, Thiruchirapali and Vellore.

**Stri Sadhana Rescue Home, Madras.** It is a long stay training home. It received minor victims below 18 years of age, rescued from brothels by the police under section 6(1) and committed to its custody by courts under section 6(2) of the said act for periods ranging from two to seven years. Besides that, it also admitted deserving young girls who had moral danger.

**The Vigilance Rescue Home, Madras** It received women under 30 years of age convicted for street solicitation and prostitution and committed to
its custody by courts for a period of two to five years, under the amended section 12 (i) of the Madras Suppression of Immoral Traffic Act. It made provision for the three R’s Viz Reception, Reformation and Rehabilitation of its beneficiaries. It comprised character moulding, training in arts and vocations like spinning, weaving, tailoring, and embroidery.

**Unmarried Mothers Home** was intended for unmarried mothers and women with illegitimate pregnancies. These institutions were housed in the campus of the Government Vigilance Home and StriSadana Home.

1976  
**Arulagam** was established in 1976 by Mrs. Margaret Harris to help the young women, who are rejected, abused, with disabilities and sickness, with no possibility of having a basic life and security, those women who have no support from their family members inclusive of all faiths. The Arulagam is a life-affirming place brimming with compassion and love. The inmates here receive clinic, emotional and spiritual care.

1981  
**The government protective home** was started in 1981 and covers the Coimbatore and Yelagiri jurisdictions. It was earlier functioning as a Rescue Home under the Revenue department. The building consists of 2 office rooms, a hall, a TV room, a room where the inmates sleep and the kitchen area.

1982  
**Vasuki SevaNilayam**, a Short Stay Home for Women, a project of ASHI, Madurai Branch was started in the year 1982, with the aid of Ministry of Welfare. It has been started with the view of giving a hope in the life for the victimised women and young girls like destitute, orphans, deserted, unwed mothers by providing shelter protection and rehabilitation services, which include both social and economic services; making the women self-reliant and self-supportive by providing various vocational training, educational support and professional counselling services, legal guidance and medical care. The beneficiaries included women and young girls from 15 to 45 years old – exploited, deserted, destitute, thrown out and victimised women, who are victims of situational crisis, sexual violence, victims of domestic violence, dowry harassment, poverty, women who do not have a protected home for a secure life, etc. It has rehabilitated thousands of women and young girls.

Till 2014, the Vasuki Seva Nilayam was functioning with the financial
assistance of the Central Social Welfare Board and the support was abruptly stopped since then.

**Family Counselling Centres supported by the Government of India:** In order to help couples with strained relations, marital discord and to provide the warring factions of the family a platform to discuss their problems and to find solutions, the scheme of Family Counselling Centres (FCCs) was launched.

**2001 – 02**

**Swadhar Greh:** The Ministry of Women and Child Development had been previously administering two schemes, the Swadhar and Short Stay Home schemes, providing shelter and other assistance to women in difficult circumstances.

An evaluation in 2007 to assess the performance of both the schemes. While citing the effectiveness and positive impact of measures adopted under the schemes for counseling and rehabilitation found that the profile and category of residents, admission procedure, and counseling, quality of service, vocational training, rehabilitation and follow up procedure are almost similar in both the schemes. It, therefore, recommended merger of these two schemes for better functioning and outcomes with lesser administrative burdens and procedures. It also recommended that the new scheme should focus on establishing one such shelter home in each district.

Thus, the Government of India has introduced ‘Swadhar Greh’ in 2016 by merging two schemes namely, ‘Swadhar’ and ‘Short Stay Homes’. At present, 38 Swadhar Greh are functioning in the Tamil Nadu and each Centre is catering to the needs of 30 women. The scheme is implemented through Non-Governmental Organizations with a sharing and NON- Governmental Organizations.

Swadhar Greh facilities could also be availed by the children accompanying women in the above categories. Girls up to the age 18 years and boys up to the age of 18 years would be allowed to stay in the Swadhar Greh with their mothers. (Boys of more than 8 years of age need to be shifted to the Children Home run under JJ Act/ICPS)
2011-
2012

Integrated Complex of Special Homes for Senior Citizens and Destitute Children: The scheme ensures that the elders and destitute children are provided with better quality care and protection in order to reduce their vulnerabilities thereby creating an opportunity to live in a safe environment.

2014

UJJWALA SCHEME: To address the issue of trafficking of women and children for commercial sexual exploitation UJJWALA scheme was introduced by the Government of India on 21st February 2014, by the Ministry of women and child Development.

This scheme is a Comprehensive scheme for Prevention of trafficking, rescue, rehabilitation and reintegration of victims of trafficking for commercial sexual exploitation. There are 8 NGOs implementing this scheme in the State. The financial requirement is shared between the Centre, State, and the implementing NGOs at the ratio of 60:30:10.

The women in the age group of 25 to 35 and their children will get all the benefits only for a period of 12 month and after that they will get the facilities of accommodation only and arrange all their expenses from their own resources. Monitoring of the scheme is done at the district level and at the state level.

2017

The One Stop Centre (OSC): As a pilot project, the first one stop centre for Tamil Nadu is functioning in Chennai since January 2017. This centre provides assistance to women affected by violence, both in private and public spaces under one roof by facilitating immediate, emergency non-emergency access to a range of services including medical, legal, psychological and counseling support.

Alternative Spaces / Feminist Spaces: Most often, women survivors of violence seek support and shelter from their respective affiliated religious institutions. The women groups from time to time open their homes and office spaces to accommodate women survivors of violence.
CHAPTER IV: METHODOLOGY

01. FEMINIST RESEARCH

The research study has applied feminist perspective and methods and has focussed on the experiences of women in their natural social settings. The aim was to enable women to speak out, raise their consciousness and empower them to take charge of their lives. The methods adopted were meant to bring out the dominant patriarchal social norms and the hierarchies that made them experience violence and had pushed women to the periphery. Research tools were developed by the central research team and training was conducted in January 2018 in VISHTHAR Bangalore. The following tools were presented and critically examined and finalised.

- Questionnaires for the in-depth interviews (IDI) with residents, ex-residents and women who are on the verge of violence but hesitant to seek shelter services
- Key informant interviews (KII) with the shelter home warden / superintendents, counsellors and directors
- Focus group discussions (FGD) with ex-residents and present residents of shelter services, counsellors from the family counselling units, lawyers, academicians and directors of NGOs.

Consent forms, ethical guidelines (taking consent, ensuring privacy and confidentiality), a short note on feminist research, do’s and don’ts of research were also discussed and finalized. Following the research training, the research team collected information about shelter homes in the state and started building rapport and initial conversation with shelters and key persons regarding the study process. The timeline for the study also was finalized.

As a part of secondary data, Right to Information was filed seeking information on the different types of shelter homes, budget allocation, staffing and number of beneficiaries in Tamil Nadu. We received only the list of the Government Service Homes, Family Counselling Centres and the one stop crises centre. The team had several rounds of discussions to finalize the districts and the shelter homes for the visits.
12 districts were identified for this study: Chennai, Madurai, Dindigul, Theni, Virudhunagar, Pudukottai, Sivagangai, Cuddalore, Trichy, Kanyakumari, Tuticorin and Tirunelveli. 21 organizations were approached but the research team attained permission and conducted the in-depth interviews in only 19 organizations. With some institutions, only KIIIs or FGDs were done.

**02. LIST OF PARTICIPATING ORGANIZATIONS / SHELTER HOMES**

**Table 6.**

<table>
<thead>
<tr>
<th>S.No</th>
<th>Shelter Home Run By</th>
<th>District</th>
<th>Funding Source</th>
<th>Type of Home</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Holy Cross, Home for Women – Provides care and protection for the women survivors of violence</td>
<td>Madurai</td>
<td>Self-Funded</td>
<td>Short Stay Home Registration process not yet over</td>
</tr>
<tr>
<td>4</td>
<td>Maitri Society - Swadhar Home, Works for the welfare of the rural people particularly women and children</td>
<td>Theni</td>
<td>Govt. Funded</td>
<td>Swadhar Greh</td>
</tr>
<tr>
<td>5</td>
<td>St. Patrik, Home for Women, Provides care and protection for the women survivors of violence</td>
<td>Madurai</td>
<td>Self-Funded</td>
<td>Short Stay Home Registration process not yet over</td>
</tr>
<tr>
<td>6</td>
<td>New Creation, Home for Women, works with the survivors of violence</td>
<td>Madurai</td>
<td>Self-Funded</td>
<td>Short Stay Home Registration process not yet over</td>
</tr>
<tr>
<td>7</td>
<td>Arulagam - Short Stay Home, Works for the survivors of violence</td>
<td>Madurai</td>
<td>Govt. Funded</td>
<td>Short Stay Home</td>
</tr>
<tr>
<td>8</td>
<td>MNTN – Short Stay Home/Has an Old Age Home, Uncared and Abandoned Children’s home and Child Care centres. They also work in Drug Addiction</td>
<td>Cuddalore</td>
<td>Govt. Funded</td>
<td>Swadhar Greh</td>
</tr>
<tr>
<td>No.</td>
<td>Organization</td>
<td>Location</td>
<td>Funding</td>
<td>Type of Care</td>
</tr>
<tr>
<td>-----</td>
<td>--------------</td>
<td>----------</td>
<td>---------</td>
<td>--------------</td>
</tr>
<tr>
<td>9</td>
<td>CREED – Swadhar Home, FCC, Rajiv Gandhi Creche Programme, Old Age Home, Micro finance</td>
<td>Cuddalore</td>
<td>Govt. Funded</td>
<td>Swadhar Greh</td>
</tr>
<tr>
<td>10</td>
<td>Sangamam – Home for Women (Now Closed. A programme unit of TN Women’s Collective, Chennai. Working for the empowerment of women</td>
<td>Chennai</td>
<td>Self-Funded</td>
<td>Home for Women (Stay for longer period up to 5 years)</td>
</tr>
<tr>
<td>11</td>
<td>SIGA - Shelter for the Urban Homeless Women / Empowerment of women and children</td>
<td>Chennai</td>
<td>Govt. Funded</td>
<td>Shelter for the Urban Homeless Women</td>
</tr>
<tr>
<td>12</td>
<td>Sahothari - Short Stay Home. A project of YWCA, Chennai that provides family counseling, legal assistance and referral services, vocational training and rehabilitation services.</td>
<td>Chennai</td>
<td>Govt. Funded</td>
<td>Short Stay Home, FCC</td>
</tr>
<tr>
<td>13</td>
<td>Home for the Mentally ill – MS Chellamuthu Trust, Works with Mental Illness and Mentally disabled people</td>
<td>Madurai</td>
<td>Govt. Funded</td>
<td>Home for the Mentally Ill (Can stay life-long)</td>
</tr>
<tr>
<td>14</td>
<td>Hospice Home - Dindigul, Serve the terminally ill HIV and AIDS people</td>
<td>Dindigul</td>
<td>Self-Funded</td>
<td>Home for the HIV Infected (Can stay life-long)</td>
</tr>
<tr>
<td>15</td>
<td>Manitham Trust – Works for the empowerment of Muslim Women</td>
<td>Dindigul</td>
<td>Self-Funded</td>
<td>Works for Muslim Women</td>
</tr>
<tr>
<td>16</td>
<td>RUSS Foundation, Working with women &amp; children with focus on prevention of HIV/AIDS.Female Sex Workers are given special focus.</td>
<td>Madurai</td>
<td>Self-Funded</td>
<td>HIV prevention among Female Sex Workers</td>
</tr>
<tr>
<td>17</td>
<td>IRCDS – Works with women and children.</td>
<td>Sivagangi</td>
<td>Govt. Funded</td>
<td>Integrated complex of special home for senior citizens and destitute children</td>
</tr>
<tr>
<td>18</td>
<td>TMSSS (Sontham)- Works for the upliftment of women and children. They also work in drug addiction.</td>
<td>Trichy</td>
<td>Govt. Funded</td>
<td>Swadhar Greh</td>
</tr>
<tr>
<td>19</td>
<td>Special Shelter home run by ex-superintendent of a shelter home</td>
<td>Madurai</td>
<td>Self-Funded</td>
<td>Special Shelter</td>
</tr>
</tbody>
</table>
03. TYPES OF HOME VISITED

Table 7.

<table>
<thead>
<tr>
<th>S.No</th>
<th>Types of Home</th>
<th>No. of home visited</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Swadhar Greh</td>
<td>6</td>
</tr>
<tr>
<td>2</td>
<td>Short Stay Home</td>
<td>6</td>
</tr>
<tr>
<td>3</td>
<td>Integrated Home</td>
<td>2</td>
</tr>
<tr>
<td>4</td>
<td>Home for the mentally ill</td>
<td>1</td>
</tr>
<tr>
<td>5</td>
<td>home for HIV infected</td>
<td>1</td>
</tr>
<tr>
<td>6</td>
<td>Day care shelter for the HIV infected</td>
<td>1</td>
</tr>
<tr>
<td>7</td>
<td>Shelter for the Urban Homeless</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>Special Shelter home</td>
<td>1</td>
</tr>
</tbody>
</table>

The special shelter home referred above is the home, which was closed and the superintendent of the shelter home took the initiative and provided shelter to needy women. The superintendent was a retired teacher. She supports the shelter through her pension, and the inmates who are able to work also contribute for the running of the home. The respondents are also confident to continue running this shelter home. She also helps three respondents to continue their collegiate education.

04. DATA COLLECTION AND SAMPLING

The data for the study was collected through both primary and secondary sources. Primary data was collected through the semi-structured questionnaire designed in the research training held in Bangalore with some modifications.

**Primary data** was collected by carrying out In-Depth Interview (IDI) with 35 women. Of them 27 are currently the residents of shelter homes, 4 are ex-residents and 4 are presently experiencing violence but are hesitant to seek shelter services. Separate interviews were held with each of the above groups of women.

**Key Informant Interviews (KII)** – a total of 12 KIIs were conducted with the functionaries like: warden / Superintendent / Director / Counsellor.

**Focus Group Discussions (FGD)** - a total of 9 FGDs were held with residents of shelter homes, ex-residents of shelter homes, counsellors of Family Counselling Centres funded by
the Government Social Welfare Board, women’s rights activists and religious minority
groups (Muslim women). Special meetings were held with Muslim women group focusing on
the specific issues faced by them and also their hesitancy to share with women from other
communities and also to avail the institutional care services.

Table 8.

<table>
<thead>
<tr>
<th>Research Activity</th>
<th>No. of Respondents</th>
<th>Details of the Respondents</th>
</tr>
</thead>
</table>
| In-Depth Interviews (IDI)                  | 35                 | • 27 current residents of shelter homes  
                                                        • 4 ex-residents  
                                                        • 4 vulnerable women not seeking  
                                                        shelter services.                                           |
| Key Informant Interviews(KII)              | 12                 | • Superintendent and warden of Swadhar Greh  
                                                        • Shelter Home Superintendents  
                                                        • Chief functionary of Short Stay Homes                        |
| Focus Group Discussions (FGD)              | 9                  | • Counsellors from the family  
                                                        Counselling Centres.  
                                                        • Advocates  
                                                        • Muslim Women                                           |
| Round Table Discussion                     |                    | • NGOs, Family counsellors, Protection Officers (PWDVA) Lawyers, Academicians         |
| Peer Review of the Study findings          | Madurai            | • Shelter Home representatives, Family counsellors, Protection Officers (PWDVA) Lawyers, Academicians |
| Peer Review of the Study findings          | Chennai            | • Shelter Home representatives, Family counsellors, Protection Officers (PWDVA) Lawyers, Academicians |

05. DESK REVIEW AND SECONDARY DATA

Reviewed the policy note for social welfare for different periods and performance budget.
Different central and state level schemes launched to address different shelter services, its
background, objectives; the components of scheme and pattern of assistance were studied to
understand whether the present services really met the objectives of the scheme.
Secondary Data was collected from the news-papers and the reports and studies done by NGOs and the academic institutions. The National Family Health Survey, Crime against women data (state level) for different periods were collected, analysed and interpreted with the findings.

**06. LIMITATIONS/CHALLENGES**

- Getting permission from the state authorities and the NGO directors to visit the shelter homes was difficult. In-spite of our many attempts, we were not able to get the permission to visit the government run homes.
- We had to make several visits to a shelter home to complete our questionnaire.
- The research team also found it difficult to gain the confidence of the respondents, in two instances the interview was stopped half way as the respondent was not willing to continue.
- It was not possible to meet the survivors individually in private, and the presence of the shelter home staff during the interviews restricted the respondents to speak out their mind openly. This happened in nearly 15% of individual interviews.
- There was turnover of staff engaged in this research study. It was difficult and time consuming to orient the new staff about the whole process.
CHAPTER V: OBSERVATIONS AND FINDINGS

A. PROFILE OF THE RESPONDENTS: (The names have been masked)

01. Age of the Respondents:

Most of the respondents were below 35 years of age. 10 respondents were in the age group 18 to 25 and 16 were in the age group 26 to 45 and 8 were in the age group 46 to 60 years of age. One of the respondents was below 18 years.

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“Though the admission procedure stipulates the age of admission as 18 years and above, this 16-year-old girl was admitted on a humanitarian ground as she was at her 5th month of pregnancy and termination of pregnancy was ruled out.”

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“Mariswari was studying 10th class. She fell in love and got into a relationship with a young man from the neighbourhood. Missing periods for a couple of months was not a worry for her as she used to have irregular periods. She had also no knowledge about pregnancy. Only when she started vomiting, her mother questioned her and took her to the hospital. Her pregnancy was confirmed. She was in the 5th month of her pregnancy. Her parents scolded and wanted to terminate the pregnancy, but the doctor refused to do so as the risk to her life was too high. Her father was very angry and refused to keep her at home. He even wanted to kill her to protect the family honour. But her mother, after the initial reaction, was sympathetic and tried to protect her daughter. Through the help of a neighbour, she sought the help of a shelter care institution. Though Mariswari was below the prescribed age for admission, the shelter care institution, on compassionate ground accommodated her and counselling her to continue education after delivery. No legal action could be initiated against the young man as he lost his life in a road accident.”

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02. Education:
Out of the 35 respondents, one respondent was doing her post-graduation studies, 4 have completed under Graduation and one respondent was doing her II B.A. 2 women had diplomas in nursing. One woman had completed XII std and 13 women had studied up to X std. 14 women had no schooling.

In most of the centres visited, the respondents were encouraged and supported to continue their education and skill trainings. In two homes, the respondents were sent to colleges and in 5 homes the interested respondents were sent for skill training. In other places they were given in house skill training like tailoring, weaving, bag making and in the making of palmyrah products. It was also observed that in a family if the mother is not supportive of education, the father supports the daughter in continuing education.

Voice of a respondent
“The Counsellors helped me in designing my academic career. I was mentally prepared to do a Nursing Course after schooling. But the Counsellor assessed that I have less aptitude for that course and guided me to do any bachelor's degree course in a college. I stayed in the Shelter Home for two years. All my educational expenses were met by the Shelter Home. I successfully completed my graduation and now working in a reputed company.”
“Geetha was doing her II UG Course in a local college. She was forced by her mother to marry her maternal uncle who was much older to her. Geetha was not ready for marriage and was determined to complete her education. She fought with her mother but in vain. She then approached her father with tears. The father was not in favour of this marriage as he had some issues with his in-laws. So, he promised Geetha to help her to escape the marriage. He enquired about shelter for young girls in many places and then came to know about the shelter home. One day in the pretext of shopping, both the father and the daughter left home and arrived at the shelter home. She was residing at the shelter home and continuing her education. The father visits her from time to time.”

03. Religion and Caste of the Respondents

Of the respondents, 22 were Hindus, 3 Muslims, 9 follow Christian faith and 1 respondent firmly said that she was an atheist.

Of the 35 respondents 24 were from the Scheduled Caste, 1 is from Scheduled Tribe and 10 women were from the Backward Community. All the interviewed survivors were from socially and economically background families. Occupation wise 12 were daily wage earners; 3 women had worked in cotton mills; 5 women were in to tailoring; 11 women had not gone for any work and 4 young women were students.
04. Forms of Violence faced by the Respondents

As discussed above, incidents of molestation, trafficking, murder and domestic violence have escalated in present times. The current study indicates a trend where women residing in shelter homes are direct or indirect survivors of violence in some form or the other. The background context of violence for residents of shelter homes fall mainly under the following categories:

- Domestic Violence (Intimate partner violence: Physical / Verbal / Mental / Economic)
- Trafficking and forced into sex work
- Sexual abuse at work place
- Abandoned by husband / son / relatives
- Special case of an unwed mother (16 years)
- Girl child aversion (2nd child also being a girl)
05. Marital Status

Of the 35 individual women interviewed in the study, 29 were married and 6 were never married. Of the married, 3 were widows, 6 women were abandoned by the husband / family. The women who were brought by the police and their cases were in the court were unwilling to share information on their current marital status. However, most of the respondents were of the view that marriage is the ultimate goal of a woman!

Vulnerability of women within Marriage

“Mari is from a poverty stricken dalit family. She was given in marriage at a very young age to a dalit man. She has two children; one boy aged 10 and a girl aged 2 years. After the birth of the girl child, the husband who was working as a coolie stopped coming to the house. Mari searched for him through his relatives but in vain. She worked as a construction worker earning Rs.300/- per day. As days went by, she got into a relationship with a non-dalit man. He promised to marry her. Mari became pregnant. When the man came to know her pregnancy, he compelled her to abort the child, but she refused. Mari went after him for a month pleading him to marry her but in vain. Finally, she decided to lodge a police complaint. The police did not listen to her rather used abusive words to keep her away from the police station. She then approached the village chief for help. With great difficulty the complaint was lodged, the man was arrested and put in jail. Mari feels happy about his imprisonment.”

(Case Study – 3)

“Vasuki is now 50 years old. She is from a poverty-stricken family and was given in marriage to an alcoholic man. She never thought that his being an alcoholic could be an issue as she had seen her father after consuming alcohol would silently eat and sleep. The family had no problem with him except for the finance part. But after one month of marriage, she realized about his violent behaviour as a way of life. He did not give money for expenses, so she had to continuously work to maintain the family. At the same time, he was suspicious about her and often shouted that she was getting money through illicit relationship with some other men. One day, while he was beating, she confronted her by catching on to his hand..."
tightly and he could not move his hand. Immediately he became normal and went away and slept. But from the next day, he started torturing the children. From 8 pm to 11 pm, like TV serials, children’s yelling can be heard all along. That specific day, her 12-year-old girl was his victim. He beat her and forcefully pushed her away. She fell on the steps and fainted. Her head was bleeding heavily. “I took her to the hospital. Her son 13 years old was also with her. It was 11 pm at night. We slept in the hospital. Though my children were sleeping, I could not sleep. We came home in the morning. After breakfast, I talked to my children and we decided to die. In the afternoon after lunch, I opened the bottle that had chemical for killing rats; poured it into 3 tumblers and said; now take one and drink. At once, my son said ‘Please ma don’t drink and started to cry. Let us not die ma.’ My daughter also said in chorus and immediately she pushed the 3 tumblers down.

She thought this was a signal for a new life. The three of them decided to leave their home and go to the railway station nearby and catch the train that comes there and decide later where to go. I talked to the staff from the NGO that had a shelter home. With her support I reached Chennai and from then on it was new life to us. I work and earn my living. No more sounds, yelling and crying. Now my children are educated and are earning.”

**Vulnerability of Women with Disability**

**Deepa** is 30 years old. She was the only child of her parents, who were farmers. In her childhood, she got affected by polio. When she was 15 years old, during a temple visit, she lost both her parents in an accident. Thereafter, she became dependent on her uncle and aunt. She completed her schooling and wanted to go for college education. Her uncle refused to do so and said it was impossible for him to spend money on her education any more. He took initiative to marry her off to an older person. To escape from the marriage, she ran away in a train and landed in Madurai. She was caught by the police, who after various enquiries sent her to the Vigilance Home in Madurai. She stayed there for three years. It was a torturous life in the vigilance home. She had to weave mats, which was a difficult task for her because of her partial disability. She used to have severe pain in her legs and also get swelling. She was advised to apply for the pension for the handicapped people and also for the shoes. But there was no support and guidance to do so. After completing her term at the vigilance home, she was sent to work in a house, who promised to take care of her. After a while, when the family was moving to a foreign destination, they arranged for her stay at a shelter home in the
nearby district. She worked as a cook for a short period for Rs.200/- per month. From there with the help of one of the visitors, she was referred to a Swadhar Greh in a nearby district.

“After 3 months of my coming to this new place, I was sent to a course on garment making. Now I am earning Rs.1000/- to 1,500/- per month. I feel good and proud about myself.”

“After so much of struggle and pain, both mentally and physically, I am happy to think that I have got my rightful space here. We were not treated with dignity in all the homes. In vigilance home they treated me as a burden. In another home, they gave Rs.200/- for a month for working as a cook. Here, I stay and earn money. Now I can use this money for my personal needs. I am so happy as though I have wings to fly.”

(Case Study – 6)

Vulnerability of women with HIV

“Roselyn comes from a small agricultural family. She was married but the couple had no children. There was a small piece of land in her husband’s name. Her husband had HIV infection, and the land was the only livelihood resource for the family. Her husband transferred the title of the property to her name before dying. After the death of her husband, it was hard for her to live independently. She sold her land and handed over the amount accrued to her younger sister who promised to take care of her till the end of her life. After a few months, she fell sick and doctor diagnosed her with HIV infection. The sister’s family disowned her out once they came to know about her HIV infection. She felt helpless and even attempted to end her life. At that time, she happened to meet a health worker, who gave information about the shelter care services available to such victims. Thus, she became the residents that care for the HIV/ AIDS affected. She is yet to recover from the shock that she was thrown out by her sister’s family, who had gained monetarily from her. She also feels that the information about such care homes should be popularised for easy access to victims like her.”

06. Assets and property ownership

In Tamil Nadu, the practice of dowry is very prevalent. Giving gold and silver jewellery to women during marriage is very common across all income groups. In some cases, a share in the immovable property like the land and house is also given along with cash and other luxury items depending on the economic condition of the family.
Of the 35 women interviewed, 8 women had gold jewellery either given during marriage or possessed after marriage from their own earnings. (Jewellery like chains, bangles, rings, ear rings) One of the residents had jewellery and a house given to her by the parents during her marriage. However, most of the residents shared that they were coerced, tricked, or forced to forgo their money, jewellery or assets by their spouses and their families. “Give the money or I will take the child” and “Sign in the paper or I will kill your family and myself” were some of the threats and coercive messages shared by the respondents.

“The research team also inferred that 15 of the respondents now in shelter homes expressed their desire to live independently once they move out of the Swadhar Greh. They urged the team to advocate with the State for giving them low-cost housing on a priority basis.”

**Case Study - 7**

**Kalki** is from a middle-income agricultural family. She was given in marriage to a driver. During her marriage, she was given 15 sovereigns of jewellery and a house. The initial days of marriage went on smoothly. When her son, was 5 years old, a man came and shouted; asking everybody to quit the house immediately since the house was already sold and the time they had requested to vacate the house was over. Only then did she realize that her house was sold by her husband and his family members without her knowledge. This incident created tension in the relationship which ended in separation. She had nowhere to go, thus became a beneficiary of Swadhar greh and is trying to rebuild her life.”

The research team also inferred that 15 of the respondents now in shelter homes expressed their desire to live independently once they move out of the Swadhar Greh. They urged the team to advocate with the State for giving them low-cost housing on a priority basis.

**07. Infra structure and Facilities**

**a. Building/Accommodation:**

In 11 shelter homes, the infrastructure was owned by the NGOs and the rest 8 shelters were functioning in rented building. Except 2 shelters all the other shelters had dormitory accommodation. In the other two shelters, small separate houses in cluster shared by 4 to 5 women. In 5 shelter homes there were no common areas. In 10 shelter homes, separate rooms were allotted for superintendent / warden / counsellors;
in other places they had to share the space with the respondents. In 5 shelter homes, the building was in bad condition, switch boards, fans were not working, cracks were found in the floor and whitewashing was not done for many years, there was even no door for the toilet that was used by the warden. Of the 19 organizations visited, one organization had day care facility for the HIV infected women and another organization working with Muslim women, was using the office space for counselling and other referral services.

b. Food and basic necessities:
Food is regularly provided in all the shelter homes. Quantity was not an issue, but age appropriate quality of food was expressed as a matter of concern. Special food is supplied during festivals like Diwali, Christmas, New Year, and Pongal. Bathing and washing soap, oil, clothing, bed sheets, towel and other necessities are provided. Clothes were provided to respondents on need.

c. Counselling and other referral services:
In all the shelter homes, there were counsellors but most of them were not trained in counselling skills or women’s rights. It was shared that the primary focus of the counselling was to resettle them with the family. Out of the 35 women interviewed, 20 women had contact with their family.

d. Timings at the shelters:
All the shelter homes follow strict timings; when to wake up, cleaning, cooking, breakfast, lunch, dinner and sleeping.

Work is allotted, like cleaning, cooking, gardening etc. There was no complaint on doing day to day activities; they said “we do work at home and here too”. But with regard to timings, some had reservations as they were not used to follow timings in their houses. Care and concern for the sick, elderly and pregnant women was often expressed.

There was no compulsion for the respondents to follow a particular religious prayer, they were allowed to offer their prayers according to their own faith. In 4 shelters indoor games were available.
e. **Recreation facilities:**

In 6 shelter homes indoor games were available, and also the respondents were encouraged to play outdoor games.

TV was available in all the shelter homes and there was specific time for viewing programmes. In 1 shelter home the TV was under repair for about two months. Only in 2 shelter homes, local language news-paper was available for the respondents.

The inmates were taken on outing in some places on a quarterly basis and in some other places twice a year. In the home for the mentally ill, in addition to the outing daily yoga sessions were held to enhance their coping skill.

f. **Children of the residents:**

In all the shelter homes except the mentally ill and the Auspice home; children are allowed to stay with their mothers till the age of five. Then they are admitted to children’s homes, where their education is taken care of. During the holidays, these children visit their mothers in these homes and stay with them till their school reopens. It is a gala time for all the respondents. In all the shelter homes the special needs of the children are taken care of. In 2 shelter homes, children up to the age of five are sent to the Anganwadi centres.

**Voice of a respondent**

*My son is 13 years old and hence he cannot stay with me. It is very difficult for me to eat and sleep. Whenever he comes to see me, he cries. I need a place where I can stay with my son.”*

08. **Education and Vocational Skill Training**

In all the shelter homes the young respondents were encouraged to continue their education and prepare for government exams. In 17 shelter homes some skill training like computer and tailoring was provided. one shelter home had weaving units, 2 Shelter homes were making products out of jute and palm products, 2 shelter homes were making organic food items and the respondents also joined hands with the other employees in making the products. They were paid wages for the work that they had done.
09. Health care and Legal aid

First aid treatment is available. All the 15 shelter homes had tie up with the nearest health centres for the basic health care. The Director in one of the shelter homes shared that when women come in pregnant condition, there was difficulty in sending staff as accompanier with them to the hospital for treatment; post-delivery care was expressed as a concern.

In all shelter homes, there was some link up through which lawyers visit periodically. Most of the respondents were not aware about their legal rights and the laws to protect women.

10. Rehabilitation and Follow-up

All the shelter homes try their best to reunite the respondents with their respective families. If that doesn’t happen, based on their need assessment done through counselling, the respondents are encouraged to continue their education or vocational skill trainings.

In all the shelter homes visited, the flexibility is given to women to return back if they experience violence once they unite with their families. The shelter home staffs follow up with the women to see if they are safe.

In the case of a young woman who was trafficked from another state was given lesson in Tamil. When the judge had asked her where she would like to go, she expressed her desire to go with the NGO director, whom she adored and considering her interest, the judge passed order for her to stay with the NGO.

Shelter Home run by the women’s rights organizations had given priority to sensitizing women on their rights. The incoming and outgoing of women was flexible. They could come when they have problems, stay for a few days and go back when they feel revitalized. They were also given exposure and trainings through the various campaign and networking activities to prevent violence against women and girls in the state. They are part of the special day events like women’s day and the 16 days of activism on violence against women and girls. Many women have been placed in NGOs as field staff and also if they have no education, suitable placements are found for them (Tailoring / Cook / Small tea shop).
“Kasi is a 23-year-old deaf and dumb woman. She had delivered a female baby and there was no one to take care of her. The baby and the mother were sent to the Child Welfare Committee. From there she was referred to a shelter home. Now the girl is 3 years old. She has no family but has a distant relative brother. He was also not willing to help.

In the shelter home, the management on seeing her being so active sent her to six-month training on Ayurveda treatment. Since she had studied up to IX std, she could study well and the hospital where she was taking the course was highly impressed on her. They have promised to give her employment once she completes the course. Regaining confidence now, Kasi has decided not to give the child for adoption but to raise her on her own. The shelter home is all along with her till now.”

11. Access to Shelter Home

It was observed that, of the 35 respondents 11 women had come to the shelter home through the police, 9 through their relatives and family members, 5 through their friends, 6 through public and 4 women though vulnerable were not willing to go to the shelter home.

Most of the shelter homes were in areas where it could be accessed. Despite, the stipulated numbers, directors of the shelter homes interviewed informed that they were not able to say “NO” when a survivor of violence approaches, therefore, the number of respondents goes up.

Admission to women from other states who do not speak Tamil was seen as a problem. The shelter homes expressed their difficulty in interacting with them.

In all the 19 shelter homes, the duration of stay was a real concern. Most of the respondents stay for 6 months and above. In the home for the mentally ill, they can stay longer. (Need Based). The NGOs run with self-funds are very strict in the duration of stay. Once their stipulated period is over, the survivors are forced to leave the home in spite of their problems being addressed and they return to their vulnerable position or even worse form of distress.

Sivagangai was one of the districts visited. Where there was no Swadhar Home. The women were referred to the private run institutions and to the integrated complex of special homes for senior citizens and destitute children.
Since Government did not have the reception centre in some districts women who were arrested were also brought to the Shelter Homes and resided with the other women. Similarly, children below 18 who were accused in criminal case were also brought to this Shelter Home.

Except the shelter home for mental illness other homes do not take respondents with mental or physical illness.

Vulnerability of Older Women

“Saheed is 59 years old, she had no schooling. She was given in marriage in a young age. Within 3 months of marriage, her husband came near her and said into her face that “he is going for a Talak”. Till today, Saheed doesn’t know the reason. She shares that she is tall, fair and good looking with very soft nature, then what went wrong. Now she lives with her parents. Her husband’s house is just a few houses away. She comments: “If a man dies, one can accept it as an incident, but when a man just walks past with another woman rejecting the woman he was married to; it is a severe pain that can never be explained and digested till death.”

12. Challenges at the Shelter Home

The shelter home has to admit women only above 18 years but when young adolescent girls come in vulnerable situations like pregnancy; they do admit them under their own risk. “Unwed pregnant girls fear for their life and come to us seeking shelter and help. Under age or over age... we have to support them.”

The stipulated number of 30 members cannot be maintained every time. The number at times doubles to 50 to 60. In these situations, the management takes the risk of admitting these vulnerable women.

When the men come to know that their wife or relatives have come to the shelter home, they come and threaten the shelter home staff to send the women with them. In one shelter home, a case was filed on the director that she is holding his wife illegally in the shelter home premises.
The shelter homes funded by the government said that the grants are not received regularly. In one shelter home it was shared that they have not received the funds for four years.

“We have not received the grant for the past 4 years, but the women survivors of violence keep coming to us in helpless condition. How can we say NO to them?”

13. General Information

Of the 35 women interviewed 12 had bank accounts opened in their name, but only 2 had the bank passbook in their hands when they came to the shelter homes. 17 women had ration cards with them. And 12 had Aadhar Cards with them.

In the integrated complex of special homes for senior citizens and destitute children, it was found that old aged people felt happy since they were connected to the children; looking after them study, play, eat and sleep.

Shelter Homes in Tamil Nadu:
GOOD PRACTICES

During the study interactions the following good practices were observed in the shelter home.

Support in Education, Vocational Skills and Employment

- In shelter homes, the young adults were encouraged and motivated to continue their education and also to appear for the government examinations like TNPSC.

- Various skill trainings and vocational skills were provided by the shelter homes. In places where they had production units, the respondents were given the skill to produce and once they had learnt the skill, they were encouraged to work in these units through which they could earn money.

- The women from the shelter homes were helped to join the skill trainings offered by the government.

- The management of the shelter homes helped in the education of the children of survivors of violence.

- The shelter homes were also supportive in finding employments and placements in NGOs, private Institutions and Skill Based Organizations.

Legal education and Life skill education

- Legal education, life skill education, group counselling, training to improve the technical knowledge towards enhancing their employability and self-employability skills was seen as regular happenings and was part of the rehabilitation process.

Follow up and Rehabilitation

- In 5 shelter homes, during the annual day and other festivals, the past inmates were invited.

- Once the inmates leave the shelter homes to rejoin their families; there were regular follow-ups and they were encouraged to come back to the shelter home if they face problems. There were shelter homes where the inmates had come more than 3 times.
**Grievances Redressal**

- Although there was no formal grievance redressal system, in many shelter homes the grievances were redressed through day to day interactions and close monitoring by the responsible persons. In a few homes, Suggestion box was kept in a place accessible to the respondents. The contents were checked from time to time and steps were taken to redress grievances.

- The Home Committee Members periodically visited the shelter home, had an interaction with the residents in the absence of the staff. The residents could confide their grievances.

- Phone numbers of the Office bearers of the Home Committee was displayed in a prominent place and the residents could contact the members at any time they wish.

**Marriage Assistance**

20 of the 35 respondents appreciated the shelter homes for taking the initiative to organize marriages for the inmates. It was perceived as a real support for the women to re-settle in their lives. (The Tamil Nadu government welfare schemes are very much focussed on the ‘marriage assistance’ of women. Marriage assistance of Rs.25,000/- for 10th std pass or fail women and Rs.50,000/- for graduate women, has encouraged many parents to send their daughters to schools and colleges. There is also a scheme to assist the marriage of the daughters of poor widows and another scheme to assist marriage of orphan girls. Therefore, the larger question of women’s rights perspective in the policy framework remains a concern.)

**Special Shelter Home Model**

- *Janatha Hostel*, a ‘Halfway Shelter’ was launched by the warden of a Shelter Home, which was shut down. The aim was to provide accommodation to the former inmates (working women) who were not confident to live independently or had problem in going back to their families. Length of stay was usually anywhere from 6 months to 2 years. Residents of Janatha Hostel were required to contribute 25 per cent of their salary towards the running cost. The jobless women were also given shelter for some time and assisted to find some work.
• The unskilled and less educated inmates were engaged through a day care centre established for children below 4 years of the neighbourhood families.

• The shelter opened a canteen in one of the city college campus, which was managed by the shelter home residents, who showed no interest or skilled enough to enter into work force for their economic empowerment. The project opened up meaningful engagement of selective residents towards their self-development and also become an income generation programme for the shelter home and for the residents who engaged in the canteen programme. The canteen also provided additional healthy food / snacks to the residents.

• The shelter had a good collection of play and educational toys for the kids of different age groups.

SOME THOUGHTS TO HELP WOMEN SURVIVORS OF VIOLENCE

• Start talking about the issue and listen to women’s voices.
• Reduce stigma by creating space where these survivors feel emotionally safe.
• Educate ourselves about homelessness and violence against women in our surroundings.
CHAPTER VI: NEXT STEPS

Trainings on women’s rights and gender equality

- Workshops / trainings to strengthen perspectives and capacities of shelter home staff on women’s rights and gender equality, and legal literacy.
- Special trainings on feminist counselling methods and mental health are considered for the counsellors and staff in the shelter homes.

Summer Camp for Children

- One of the shelter homes has requested to hold summer camps for the children of the respondents of the shelter home.

Special Training for Muslim Women

- Muslim women had requested for special legal awareness training focusing on the rights of Muslim women. So, it has been planned to do awareness trainings in their villages and then bring them to the larger forum for interaction.

Networking and Advocacy

- Share the findings and recommendation of the study with women’s groups, government departments and lobby for the implementation of the recommendations of the study.
- To review the court orders received by women under Protection of Women from Domestic Violence Act-2005 (PWDVA) in TN and integrate the findings to the advocacy process.
- Strengthen linkage with the CEDAW – NGO alternate report process, contribute to the chapter on Housing Rights of women and give visibility to the issues of women survivors of violence.
- Network with NGOs and Shelter homes and the housing rights groups at the National and State level to address the shelter needs of women.
CHAPTER VII: RECOMMENDATIONS

This study has help us gain deeper understanding of the needs and concerns of shelter home and the women survivors of violence to seek shelter. Based on our observation during the study process the following recommendations are made.

On Policy:

- Develop a clearly defined policy guideline on shelter homes at the National level which is then translated to the states level. The policy framework should have a rights-based approach to shelter.
- Develop a state specific comprehensive policy for homeless including rehabilitation and reintegration components into it.
- Shelter homes are just temporary measures. There should be alternative spaces available like low-cost group housing for women. This may be included in to the State housing policy.
- Allocate adequate resources within the government budget for shelter homes for women. Disbursement of funds should be done regularly without any break. This could improve the quality of services provided.
- The budgeting should be adequate enough for the partner organizations to run the program comfortably. The spirit behind budgeting should be to give the best quality care to women as rights holders. The unit cost allocation need to be revisited and allocations to be made accordingly.
- Salaries of support staff need to be revised so that experienced staffs capable of giving quality services are retained.
- Strengthen multi-agency coordination of state agencies, shelter homes and other service providers (District Legal Service Agency, One Stop Centre, Health Facilities, Vocational Training Centres and Women’s Organizations).
On access to Shelter:

- Establish adequate number of well-funded shelter homes (swadhar and reception homes) in each district for women survivors of violence with medical, psychological and other counselling support services.

- Establish linguistically and culturally accessible services for women migrant workers, who are often victims of gender-based violence.

- Information on the location of the shelter homes should be given wider publicity.

On public awareness:

- *Using social media platforms and mainstream media* create awareness on the growing instances of violence against women as a violation of their human rights and also on women’s right to a violence-free home.

- *Shorter version of laws to protect the rights of women that are mobile friendly may be developed and disseminated.*

- *The sensor board of media and films should make it mandatory to give a warning scroll saying that violence against women is an punishable act (like the cigarette and alcohol warning) when ever violence against women scenes are depicted in films and TV serial.*

- Create awareness among women of their rights to both natal and marital houses. The provisions of the Protection of Women from Domestic Violence Act 2005 be given wider publicity.

- Initiatives in the forms of publicity campaigns, public presentations, and the creation of community networks should be promoted. These initiatives would support, strengthen, and encourage victims to seek out assistance and knowledge while reducing stigma associated with victimization.

- Efforts should be made on community awareness and advocacy initiatives that include a variety of programs to improve community response, reduce domestic violence, increase public attention, and inform victims of their options.

On capacity building:

- Periodic sensitizing trainings to the lawyers, police, doctors, protection officers, social welfare officers to strengthen women’s rights perspectives in the functioning of the
shelter for women. Refresher trainings should be offered to the counsellors and other staff members in the shelter homes.

- Formal school education plays a key role in gender socialization. Introduce special education for boys in schools to treat girls with respect, and how to socialize is very critical in shaping their attitude towards gender equality.

- The content of the present curriculum of school education should be critically reviewed and gender has to be recognised as a critical marker of transformation, and must become an important component in the curricular framework. The curriculum should include age specific, sexual and reproductive rights education covering human sexuality, interpersonal skills, risky sexual behaviours, teen-pregnancy, HIV etc. The teachers engaging in such educational programme should be periodically trained.

- Sexual and reproductive rights education should be made mandatory in schools. The healthcare facilities should have specific focus on creating awareness on this topic as well as providing support and care to the adolescent girls and young women.

- Introduce education for boys in schools to treat girls with respect, and how to socialize is very critical in shaping their attitude towards gender equality.

**On monitoring:**

- Mechanisms should be in place for regular monitoring and periodic audit of shelter homes and each shelter home should have an advisory committee with rights-based NGO member in it.

- Strict enforcement and monitoring of prevention of Child Marriage act and other gender friendly laws.

**Other Services:**

- Feminist counselling should be adopted and promoted (to improve victims’ coping skills, decrease social isolation, increase self-esteem and confidence, and reduce self-blame.)

- Provide free or low-cost legal aid where it is needed and give appropriate assistance to enable them to find a means of subsistence.

- Link these shelter homes with livelihood-based government programmes and NGOs so that they are independent when they leave the shelters.
Women have differences of opinion regarding staying in shelter homes, since their children were separated often a certain age and sent to children’s homes. If provision was made to accommodate children with the mothers, they will feel happy and confident.

Shelter homes are receiving various categories of survivors of violence with different physical, language, communication disabilities and the service providers often find it difficult to identify available suitable resources. A District-level Community Resource Guide should be compiled by the District Social Welfare office covering community resources of different service providers including government schemes, so as to enable the shelter homes to enhance their service delivery to the survivors of violence. Such Resource Guide should be updated periodically and should be widely circulated to the NGOs, Social Organisations and Government Departments and should be accessible to the public. There should be separate budget allocation for this task.

Many of the newly launched schemes and programmes of the Central Government carry Hindi names like the Swadhar Greh, Beti Bachao, Beti Padhao etc. All these names should have some English sub titles so that it can be easily understood and translated in to regional languages.

Half-way homes / Low cost hostels should be an integrated programme of Shelter Homes as many of the residents of shelter homes need long term accommodation. Even after regaining their equilibrium and economic independence, many survivors are yet to lead an independent life. To enable such residents, low cost hostels should be constructed. It could ensure the safety of the residents and could be an income generation programme for the Shelter Homes.

Shelter Homes functioning in rented buildings find it difficult to meet the expected physical standards prescribed for infrastructure which affects the quality of services and denies the basic rights of the residents to dignified life. There should be a budget allocation for the construction of shelter homes with a fair contribution from the NGOs running the homes.

Unused government buildings may be given to the Institutions to run Shelter Homes for women.

All the good practices of different shelter homes at the national-level should be documented and circulated to the shelter homes.
CONCLUSION

Although family is considered as the safe place for women, it is time and again proved that women face violence both in the natal and marital families. The existence of the shelters in the life-cycle of abused women plays an important role to regain confidence and most often resettle in lives. The comfort of knowing that there is a haven of last resort empowers them. The proactive support also helps. Therefore, it is not just the time of stay (though vital) but also its symbolic value that goes beyond the material domain.

Lack of awareness about their rights and the dominant patriarchal gender social norms become barriers to the process of women empowerment. Therefore, the critical step is to create awareness on the rights of women and also to create enabling environment for them to access justice including their right to shelter and other entitlements. There is an urgent need to initiate discussions with various stakeholders including men at various levels to support the women empowerment process.

Let us collectively support women survivors of violence and create spaces for them to speak out about the violation of their rights and articulate their needs so that the state commits to fulfil them with the perspective of women as rights holders.

VISITS TO SHELTER HOMES
PEER REVIEW @ CHENNAI
PEER REVIEW @ MADURAI
WOMEN’S DAY @ SHELTER HOME
## LIST OF THE RESPONDENTS: (Name masked)

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<tr>
<th>S.No</th>
<th>Assigned Name</th>
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“NO ONE SHOULD SUFFER LIKE ME”

*Kavitha* is 22 years old now. She is the survivor of incest violence. She was referred to the Shelter Home by the police, when she was 17 years old.

Her father deserted her mother when she was one year old. Her mother was in a helpless state in her struggle to claim the child. Later, the father surrendered her in a child care institution, but created a false rumour that the child was dead and was buried in the backyard of the house. Everyone believed his statement. In due course he was remarried so also her mother. The ‘child care institution’ became her home till she completed her secondary school education.

After 15 years, the staff of the child care institution traced the father to explore the possibility of reunion with the family. She was left for a trial period of 10 days during the summer vacation. Her re-entry was not accepted by the family (father, step-mother and her half-sisters). She too could not align herself to the new environment and emotionally distanced herself from everyone. She was asked to stay in a small house in the farm, away from the village. She was scared to be alone and was very apprehensive about her father’s attitude towards her. It was a great relief for her when she returned to the child care institution after vacation. Her father and step mother used to visit her occasionally.

After completing her higher secondary education, she was forced to leave the institution. Although she pleaded with the caretaker of the institution about the mischievous behaviour of the father, she was sent with her father. She had sleepless nights. When she shared her father’s incestuous behaviour with her half-sisters, she learned that they too were facing the same problem. Within a week, she had a dreadful night as her father sexually abused her. She got terrified, hid herself in the dark behind bushes and ran to her step-mother for help in the early morning. Her step-mother failed to protect her. As guided by the villagers, she went to the all women police station. Her statement was validated, and a case was filed against her father. She recorded her statement before the Judicial Magistrate under Sec 164 CrPC. He was arrested and put behind bar under judicial custody. She was admitted in the Shelter Home.
DETERMINED TO ESTABLISH IN LIFE

“Aruna is a former resident of Shelter Home. She was referred to Shelter Home by Child Welfare Committee.

She was born to HIV parents and was detected with the infection at birth. She lost both the parents at a very young age. Her aunt (mother’s younger sister) admitted her in an orphanage and she successfully completed her schooling. Only at the age of 12, she came to know that she is living with HIV. However, the institution extended moral support to her and taught her how to take care of herself. After the completion of her schooling, she was referred to Child Welfare Committee, and finally took refuge in the Shelter Home.

She expressed her desire to pursue her studies. The Home helped her to get admission in a college to do bachelor’s degree in social work. Fearing that she would be discriminated and stigmatised, she did not disclose her illness to anyone in the Shelter Home. But, the Village Health Nurse traced her in the Shelter Home. She was advised to have periodic check-up at the Government Hospital. The co-residents and the staff in the Shelter Home came to know about her illness. She faced hostility from the fellow residents. However, the warden, counsellor, staff and Board Members were with her. She was counselled to face the situation and to become emotionally strong. The warden used to share her room with her. Slowly, the situation changed, the fellow residents became friends to her. When she got her first menstruation, she was given special food and there was a celebration at the shelter home.

When she completed her second year, the Home stopped receiving funds from the Government. Yet, the Home management supported her financially to continue her studies and allowed her to do part time job. She successfully completed her B.S.W course and is going to complete M.S.W (Medical and Psychiatry) in few months. A medical doctor in the Government Hospital is sponsoring her educational expenses to do M.S.W.

Deep inside, she had a hurt feeling, as her only brother who had a hard life in native town is now working in a gulf country and is earning adequate income. He came to native place and constructed a house in her village. She was not invited for the House Warming Function. It was too painful for her as he cut off all his ties with her. As she grows, her aunts who showed concern over her are also not visiting her.
After the closure of the Shelter Home, the former warden is taking care of her. Entering into a college was her aspiration, which was accomplished by the help of many well-wishers. She says that “Warden is my mother and my co-residents are my sisters and relatives – she shared. The warden has crossed 70 years. In spite of her age-related sickness, she is feeding and caring us. I will continue to stay with my foster mother (Warden). I will reciprocate my gratitude by taking care of her”.

“I was not conscious about me doing post-graduation. Recently I had been to NIMHANS, Bangalore on a study tour, which was an enriching experience. I had an average score of more than 75 per cent. I have also done a course in Counselling and Guidance. The branch of study and subject of specialisation itself is empowering me. EKTA, honoured me as one of the 25 women achievers in the city. I am confident to get a remunerative job on completion of my course. To my knowledge, the Shelter Home had rehabilitated more than 50 survivors of violence. Many survivors of violence need emergency accommodation and support and certainly Shelter Home is a place of solace. The State should not have closed such valuable project” – she shared.”

(Case Study - 12)

TRAPPED IN TO TRAFFICKING

“Rita is now 21, she has studied up to 6th std. She lost her parents at a very early age and was in the custody of her cousin sister. Till she was in school, the sister had no problem but once she left school, she found her as a burden to feed. She was in search of a job for her, when she got in touch with a friend of hers who assured her a good work as home maid in Chennai. With this assurance, she accompanied the man to Chennai but was trapped as a sex worker.”

(Case Study - 13)

FORCED INTO SEX WORK

“Muthumari is 26 years. She fell into a relationship and was hoping that her life will be better than the life she had with her poverty-stricken parents. The man used to come well dressed and share about his wealth and businesses. She believed him but later realized the real situation, but by then there was no way out for her. He married her and took her to a house where she thought she was going to have her first night with her husband. Dressed in her best sarree and with dreams she closed the door of the bed room where she was surprised
to see stranger, a man around 45 years. She was trapped. She could not shout. She did not know what was happening. The man ravaged her body three times that night and by 5 am, he left. She tried to escape but the house was locked from outside. Later three women joined her, who were already into sex work. One elderly woman used to come and give them food and clothing. Every day morning and at night men would come and go. The man who married her did not come at all. His phone was switched off. The house was raided by the police in six months’ time and she was produced in the court to be sent to a vigilance home. In the vigilance home, she fell sick and was diagnosed with HIV infection. After completing her term at the vigilance home, she approached an organization which helps women with HIV. They treated her and gave continuous counselling to forget the past and start her life afresh. Now, she has a beautiful family with a child. She visits the organization regularly and continues with her treatment. She feels grateful to have found the organization that helped her to rebuild her life and wishes to help other women like her.”

(SEXUAL HARASSMENT AT WORK PLACE)

“Manimegalai is 28, from an economically poor family. With great difficulty she did B.Sc Nursing with the support of many friends and relatives. She joined one of the reputed hospitals for work. She was an active girl and was happy with her work. The doctor who was also posted in her department was very kind and always talked to her in a very kind and loving manner, which she had never experienced in her life. Slowly she began to like him and the doctor took advantage of this and made sexual advances. She thought that the doctor was also in love with him. She enjoyed the time she had spent with the doctor. This relationship continued for nearly 3 years when one fine morning he came to the hospital and invited her for his marriage arranged by his family in his native town with another woman. This was a real shock. She went to the doctor’s house and fought till her energy was lost. Slowly, within a few months, she fell into high depression and the management of the hospital ousted her from her job. She had to return home and went into depression. She was given treatment and later her family arranged for her marriage. After marriage when her husband’s family came to know about her treatment for depression they refused to keep her. She again slipped into depression and was admitted into the home for the mentally ill. It is one year now and she has recovered but does not want to go back to the family. She is now the nursing assistant for all
the respondents and gives them the medicine regularly under the supervision of the superintendent / warden”.

(Case Study - 15)

“Thangammal, 38 years old. She was married at the age of 16 to a man of her choice not knowing that he was an alcoholic. The initial stage of her married life was disastrous. Not knowing what to do, she assisted her husband in the shop that he had; buying old papers and scraps. He spent his income in drinking and the family lived in utter poverty. He also lost his shop and the family had to live in the platform with 2 girl children. She remembers with tears that not even one single night she could sleep peacefully. Her drunken husband would sleep immediately but men on the streets would come and torture her by even sleeping beside her. When she shared this with her husband, he never paid any attention. He just mocked at her saying that she was Cleopatra and men are after her. In this situation, her husband passed away. She packed her things and came to her mother’s house. To support her family, she started working as a coolie in the construction site. She saved some money and shifted to a rented house in the nearby locality. By this time, she gave her elder daughter in marriage to an auto driver. Her younger daughter studying VII std, stood within the first 10 ranks in her class and she wanted to continue her studies. During this time, the mason with whom she was working sexually abused her every evening. Only then, he would be allow her to come to work the next day. This happened for a year or so. One day after that day’s heavy work (To take bricks to the second floor) when she was called by the mason, she decided; TODAY IT IS A NO. She shouted at him and he barked back saying you will not get work tomorrow. She just took the bag and started without even getting the wages. She decided this is the end, but what to do for the income? She approached many women and after a weeklong-tiring search, one woman told of the sex work which could earn her high income. She decided, what is wrong in doing sex work. Working hard for her daily bread and when she was sexually abused by the mason with the threat of stopping her from work, she thought, this was not wrong. Now she goes for sex work every day by 9 am and returns either in the afternoon or in the evening. She doesn’t go at night. Now, her daughter is studying X and she wants her to do her higher education and go for a good job.”
**THROWN OUT OF HOUSE FOR RAISING QUESTION**

“Srija is 34 years old studied up to 10th. They were 4 girls, she was the last one. She was given in a married to a driver. She lived with her husband for 9 years. The issue of not having a child was always a problem in the family. The mother in law would start the topic and most often the end will be physical abuse by her husband. The mother in law always blamed her for not having a child and wanted her to go for a medical check-up, but Srija insisted that her husband also should have the check up in the hospital. That was the end of her married life. She was thrown out of the housed. She waited outside the house for nearly 6 hours, knocking on the door but in vain.

**AVERSION TO GIRL CHILD**

“Suriya, age 22 was married at the age of 17 to a driver. She has one elder sister. When she became pregnant, she was sent to her parents’ house for delivery (This is a practice in TN that the parental family would take care of the first delivery). After 2 years, she again became pregnant. She was very concerned about the financial burden on her poor parental family and was hesitant to go there for the second deliver but was forced to go to her parents’ home, with the warning that if she gives birth to a girl child, she should not return. The second child was a girl. She waited for a month and then went to her husband’s family but was refused entry.”

**FORCED MARRIAGE**

“Kumari, 21, a young woman, who has completed her degree is from a middle-income family. Her parents arranged her marriage, in-spite of her telling that she does not want a marriage at that time. As all other parents, they were keen on getting her married. After her marriage, she could not cope up with the in-laws and one fine morning, she removed her mangal sutra and kept it in her husband’s house and walked home. This brought huge problem in her marital and natal home. Not knowing what to do, the mother brought her daughter and got her admitted in a short stay home.”
DECEIVED INTO MARRIAGE

“Manimegalai a young woman, who is an orphan and was raised by her elder sister, completed her Nursing course with scholarship and donations from friends and relatives. After the completion of her course, she worked in a hospital, when she fell in love with a man, not knowing that he is already married. They got married and the life was very fine as she recollects. After 6 months, she became pregnant. She was very happy and informed this happy news to her husband, who immediately got angry and shouted; how come you get pregnant. She was stunned, not knowing what to do. After this incident, he stopped coming to her house. After a long wait of nearly 2 months, she gave a police complaint and then only came to know that he was already married. She pleaded with him to come home but in vain. She went to his house and even pleaded his wife that they both can live together. By this time, a girl baby was born to her. She started going to work and took care of the baby. When her child was 2 years old, she again gave a complaint in the police station that her husband has deserted her, and she needs justice. The case is in the court and she is now in the short stay home with her child who is going to the day care centre nearby.”

ABANDONMENT OF THE ELDERS

“Thilagavathy is 52 years old and now lives in the Integrated home for the elderly and the children. She had no schooling, and lost her husband at a very early age. She went back to her parents who took care of her and her son. Her parents passed away one by one and after that she lived in the same house but under the custody of her only brother. All along she toiled hard in the family without making any demand. Her only concern was to establish the son. Though the family was kind to her, they believed that once her son gets a job, he will take care of his mother. On the contrary, the son never thought that he should move away from his uncle’s house with his mother. In due course, the son got married and moved to Chennai with his wife. The brother expressed his inability to support Thilagavathy and the son did not show interest to take her with him. Finally, the brother admitted her in the Integrated home. She said that, she has no wish except to die soon. She has requested the management of the home not to inform her son about her death.”
Annex-IV

Tools

In – Depth Interview (IDI)

A. Personal details

B. Details of shelter home

C. Experiences of homeless survivors of violence
   - What brought them to the shelter home?
   - Experiences of early weeks/months at shelter home

D. Life at the shelter home
   - A typical day
   - Infrastructure
   - Meals and nutrition
   - Clothing
   - Staff and services provided
   - Medical facilities
   - Legal services
   - Counselling
   - Education/skill development etc.
   - Visits by officials and NGO members
   - Other experiences
   - Contact with family, Children
   - Miscellaneous
   - Experiences of survivors
FOCUS GROUP DISCUSSION GUIDE (FGD)

FGD Conducted with:

Total Participants Present:

Age Group of Participants:

Educational Qualification of Participants:

Marital Status:

Religion of the Participants:

Type of Employment of Participants:

Caste of Participants:

Type of Employment of Participants:

Participants response on the topic of ‘Violence Against Women’:

Participants’ knowledge on Shelter Homes for Women Survivors of Violence:

Participants’ knowledge of the facilities provided by Shelter Home:

Observations by Field Investigators:

Action Taken Up by Field Researchers, if any:
KEY INFORMANT INTERVIEW (KII)

- Details of Interview

  Name of Interviewer:  
  Name of Note-taker: 

  Place of Interview: 

- Respondent’s professional specialization and nature of work in a/the shelter home

- Duration of association with shelter home

- Work schedule (hours of work; number of days)

- Employer kind (government/NGO/self-employed)

- Employment type (permanent/contractual)

- If respondent is part of a team then size of team

- Vacant positions, if any

- Violence against survivors and the support provided by the respondent

- Survivors’ children and families

- Professional support to the respondent

Time of starting interview:  
Time of ending interview: