



PREVENTING VIOLENCE AGAINST WOMEN



2021

Department of Community and Family Medicine,
All India Institute of Medical Sciences (AIIMS), Guwahati,
Assam, India.



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PREFACE

Violence against women is a universal issue, prevalent across all sections of society. In India, the deeply interwoven socio-cultural dynamics makes women safety and empowerment an uphill task to this day. Violence not only impacts a victim's wellbeing but has a spillover effect on those around her. This eventually leads to a cycle of poor health (mental and physical) in the family, low productivity in the community and a socially non-progressive society.

This empowerment booklet has been developed as an educational, handy and practical guide on key aspects of violence against women. It includes the types of violence, available services, related laws, verified national and state helplines, role of healthcare sector, women safety mobile applications and movies that address forms of violence. Each person will find something relatable and/or relevant in this booklet and gain new perspective. We encourage all to take a moment to introspect within and share this onward with others. A simple act may save a life!

We express heartfelt gratitude to the experts and professionals working at the grass-roots with victims of violence, who graciously contributed to this booklet- thank you for joining our initiative in addressing violence against women.

Dr. Nilanjana Ghosh

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FOREWORD

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It gives me great pleasure to write a few lines as a foreword to the booklet. Abuse and violence against women or any other person or living being goes against our moral ethos. Yet, it lurks everywhere, hiding in plain sight. These wounds fester and spread enveloping entire communities at times with no relief for the women who endure them daily.

I am very happy that the Dept of CM & FM of AIIMS Guwahati has chosen this theme to peel open the many layers of this deep rooted problem. As the mentoring institution, on behalf of AIIMS Bhubaneswar, I wish the organising team all the very best.

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Foreword

Violence against women is a major social evil across the world but inadequately addressed. Moreover, the general lack of awareness about the forms of violence against women and the services available for victims further perpetuates the issue.

It is commendable that Dr. Nilanjana Ghosh and Dr. Limalemla Jamir, Faculty of the Department of Community and Family Medicine, All India Institute of Medical Sciences (AIIMS), Guwahati, Assam, have taken the initiative to compile an Empowerment Booklet on Preventing Violence Against Women. This booklet includes important information on the forms of violence against women, related laws and guidance for filing a complaint, measures that can be taken at various levels to prevent and tackle violence against women, helpline numbers across the country, women safety mobile applications and success stories.

I hope this endeavour motivates everyone and serves as an exemplary step for other public health professionals and organizations across the country to address this issue proactively.

On behalf of the Indian Public Health Association (IPHA), I convey my best wishes for this endeavour.

[Sanjay K. Rai]
President, IPHA



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This empowerment booklet is more of a concept, a thought than a mere literary piece of work. It thrives on the concept of equality for all and reiterates freedom is a basic fundamental right with which all mortals, irrespective of caste, creed or gender are born. It's not to be imparted or gifted or even fought for. Violence is violence, anywhere and everywhere. International Day for the Elimination of Violence against Women observes such a thought with the pledge that such days need not be in history as violence is a crime, not a day to observe/celebrate.

Indian Public Health Association is the only national association where anyone interested in public health stands a fair place and space. It has been pioneering in public health activities for over 30 years and stands reputation of being just and equal opportunity to all its members. It has increased under the leadership of eminent personalities and I take great pleasure in being a part of this endeavour. Multitasking, empathetic, strong willed, self-assured compassionate human beings are the call of the day and we need to teach children irrespective of gender the value and meaning of equality. Mental health is largely dependent on these values and as Swami Vivekananda famously quoted "A nation can progress only if its two wheels run equally and smoothly". In this context, being a protagonist of women's rights and freedom, I wish all the success to the team and look forward to carrying this vision and mission forward with vigour and enthusiasm in days ahead

Wish you all the best

Sanghamitra Ghosh

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Year 2019-21

Healthy People living in Healthy Environment



Dear colleagues and friends

Greetings from the Academy of Family Physicians of India! At the outset, I would like to congratulate the Department of Community Medicine and Family Medicine, AIIMS Guwahati for bringing out a booklet on 'Preventing Violence Against Women' and a very pertinent and useful resource for healthcare providers as well as the community at large.

The spectrum of violence is indeed widespread ranging from subtle verbal/nonverbal assaults in day-to-day life and ranging up to life-threatening injuries and homicide. The interface of intervention has to be wide spectrum as well as it is the responsibility of not only law enforcement agencies but also of community leaders, families, healthcare providers, and within the community setting itself.

Healthcare professionals are often poorly trained within this domain, for a variety of reasons, and are not able to handle violence against women when presented in the clinical setting. Many times presenting complaints are misleading and a deeper probe and professional counselling are required to assess and document the incidence of violence. Interventions in such situations may vary from providing medical relief to extending legal support and administrative protection. Family physicians the first contact providers of care in the community are often faced with such events to individuals and within the family.

This booklet presents a compilation of all necessary tools legal and otherwise in one place for awareness, education training, and execution levels. All contributors and authors deserve applause, especially the coordinating team. My best wishes for future use of this tool book towards women's empowerment within our societies. Academy of Family Physicians of India is committed to extending all support in this noble endeavour.



Dr Raman Kumar

President Academy of Family Physicians of India

Past President WONCA (World Organisation of Family Doctors) South Asia 2018-2021



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To create a world free of violence, it is compassion and empathy that is much needed, sometimes even more than justice. To ensure an equal world we need empathy more than sense of justice. It is a matter of great pleasure that faculties of AIIMS Guwahati are conducting an online programme to observe the International Day for Elimination of Violence against Women. I am glad that on behalf of Assam State Commission for Women I am able to contribute to the cause and pledge support to AIIMS Guwahati for related endeavours in the days ahead. We do hope to work in collaboration and see a world with equal opportunities in true sense.

Wishing all the best

Thanking you

Yours sincerely

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INTRODUCTION

As per the United Nations (UN) Declaration in 1993, violence against women is defined as, “any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.” The International Day for the Elimination of Violence Against Women is observed yearly on November 25, and the theme for 2021 is, “Orange the world: End violence against women now!”

Globally, it is estimated 1 in 3 women aged 15 years and older, experience physical/sexual violence at least once in their lifetime. In India, spousal violence has risen to 23.2% in recent years (National Family Health survey-5). It is also concerning that the North East State of Assam has the highest rate of crime against women in the country (National Crime Records Bureau).

Violence against women and girls broadly comprises harassment (street/workplace, cyber-harassment, forced marriage), sexual violence (forced acts, unwanted advances), intimate partner violence (psychological abuse, battering, marital rape), femicide, genital mutilation, child marriage and trafficking.

The COVID-19 pandemic that necessitated indoor confinement of people, inadvertently exacerbated all forms of violence. The repercussions of this experience in a post-pandemic world are scary, to say the least. As per an impact assessment survey by UN Women 2020, the incidence of 'indoor' violence against women rose substantially during the COVID-19 pandemic. Children too were victims or witnesses to violence in the home setting, raising grave concerns about their developmental and psychological consequences.

However, there could not have been a more opportune time to consider this as a wake-up call to each individual for taking a stand on violence against women.

PURPOSE OF THIS BOOKLET

Violence against women is a prevailing issue since time immemorial, yet kept under the carpet in the name of moral chastity and social prestige. However violence is violence, domestic or otherwise. Women often do not know what to do even when they have managed to mustered the courage to report a case of violence or have overcome the guilt and shame associated with being a victim of violence. In many instances, concerned relatives or empathetic neighbours are often rebuked for interfering in 'personal or family' matters.

Hence, this initiative was taken to compile a practical booklet on the services available for women facing violence, related laws and punishment for the offenses, guidance on the process of filing a complaint, measures and responsibilities at individual, family and community level, mobile phone applications on women safety, handy tips for common offenses such as street harassment, domestic violence and verified helpline numbers. It also includes special sections such as violence against women with disabilities, success stories for encouragement, awareness generation through movies and the role of healthcare providers in various capacities.

This booklet aims to raise awareness, sensitize communities and guide families in seeking help for women facing violence. It is especially intended for women seeking information and support in troubled times as it aims to instill confidence in victimized women to open up and seek redress. Beneficiaries can avail the right kind of help from the right person at the right time, irrespective of personal resources.

This booklet hopes to empower a woman in seeking her rights when denied or violated, realize her potential and purpose, thereby laying the first stepping stone of a bigger journey for which she is destined.

*"No more bottling up, no more lives lost. It is okay to speak up.
It is not okay to suffer in silence."*

AVAILABLE SERVICES FOR WOMEN FACING VIOLENCE

Department	Services
Law and Order	First Information Report (FIR) and complaint registration at any police station, also known as zero FIR.
Legal	Legal Services Authority in court premises, Legal Aid (free), victim compensation for victims of rape, burns etc.
National/State Commissions for Women	Receive complaints, conduct enquiry, counselling, awareness sessions, Legal Aid.
Social Welfare	Shelter, counselling, skills development, rehabilitation, childrens' education and care.
Non Government Organizations	Assistance in filing FIR, counselling, relief, rehabilitation through skilling, credit support for equipment or tools for income generation, education support, follow up.
Medical	Medical examination and treatment, rehabilitation, trauma care and counselling, social support.

LAWS RELATED TO VIOLENCE AGAINST WOMEN

SL. No.	Laws and Punishment
1	<p>The Immoral Traffic (Prevention) Act, 1956 Offence: procuring, inducing, taking a person for the sake of exploitation (slavery, prostitution etc.) Imprisonment: 3-7 years; child victim- 7 years to life.</p>
2	<p>The Dowry Prohibition Act, 1961 (Am. 1986) (I) Offence: Giving or taking or abetting the giving or taking of dowry. Imprisonment: Not less than 5 years; Fine: not less than Rs. 15,000/- or the value of the dowry, whichever is more. (ii) Offence: Demanding dowry. Imprisonment: 6 months to 2 years; Fine: upto Rs. 10,000/-.</p>
3	<p>The Indecent Representation of Women (Prohibition) Act, 1986 Offences: Publishing, distributing, circulating indecent representation of women. Imprisonment: upto 2 years, Fine: upto Rs. 2,000/-; subsequent: 6 months to 5 years, Fine: Rs. 10000 to 1,00,000/-.</p>
4	<p>Protection of Women from Domestic Violence Act, 2005 This law provides for seeking from Court protection from domestic violence, payment of monetary relief (maintenance), right to reside in the shared household, custody of children and compensation.</p>
5	<p>Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 Punishment: Disciplinary proceedings in accordance with Service Rules for the misconduct of sexual harassment (in addition to any criminal proceedings) and payment of appropriate compensation.</p>
6	<p>The Indian Penal Code (IPC 326A & 326B) a. Acid Attack (IPC 326A)- Imprisonment: 10 years to lifetime; Fine: commensurate to meet the medical expenses of treatment; b. Attempting an Acid Attack (IPC 326B)- Imprisonment: 5-7 years; Fine: as liable.</p>

LAWS RELATED TO VIOLENCE AGAINST WOMEN

SL. No.	Laws and Punishment
7	The Indian Penal Code, 1860- Section 354 (354A). Outraging Modesty (Imprisonment: 1-5 years) (354B). Sexual harassment (Imprisonment: upto 3 years) (354C). Disrobing (Imprisonment: 3-7 years) (354D). Voyeurism: (Imprisonment: 1-3 years) (354E). Stalking (Imprisonment: upto 3 years, subsequent: upto 5 years). Fine: as liable, for all.
8	The Indian Penal Code, 1860- Section 375 (Punishment for rape) Imprisonment: 10 years/20 years (gang rape) to lifetime; Fine: as liable.
9	Pre-Conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) Act, 2003 Imprisonment: upto 3 years; Fine: upto Rs. 10,000/-.
10	The Information Technology Act, 2000 Offences: (a). Publishing or transmitting obscene material in electronic form. Imprisonment: upto 3 years; Fine: upto Rs. 5 lacs; (b). Publishing or transmitting of material containing sexually explicit act/depicting children in sexually explicit act in electronic form. Imprisonment: upto 5 years; Fine: upto Rs. 10 lacs.
11	The Medical Termination of Pregnancy 1971, (Amendment) Act, 2021 Imprisonment: 2-7 years; Fine: as liable.

GUIDE TO FILING A COMPLAINT

● Any case involving deprivation of women's right or harassment of women in India can be registered with the National/State Commission for Women (NCW/SCW).

● Broad categories under which a complaint can be filed:

1. Bigamy/Polygamy
2. Cyber Crime against women
3. Dowry harassment/dowry death
4. Free legal aid for women
5. Gender discrimination including right to education/work
6. Indecent representation of women
7. Outraging modesty of women
8. Police apathy against women
9. Privacy of women and rights thereof
10. Reproductive health rights of women
11. Right to exercise choice in marriage
12. Right to live with dignity (cruelty, harassment)
13. Sex selective abortion/female foeticide/amniocentesis
14. Sexual harassment including workplace harassment
15. Stalking/voyeurism
16. Traditional practices derogatory to women rights i.e. witch hunting, devdasi pratha.
17. Trafficking/prostitution of women
18. Rape, attempt to rape, acid attack, sexual assault.
19. Women's right of custody of children (in divorce cases).

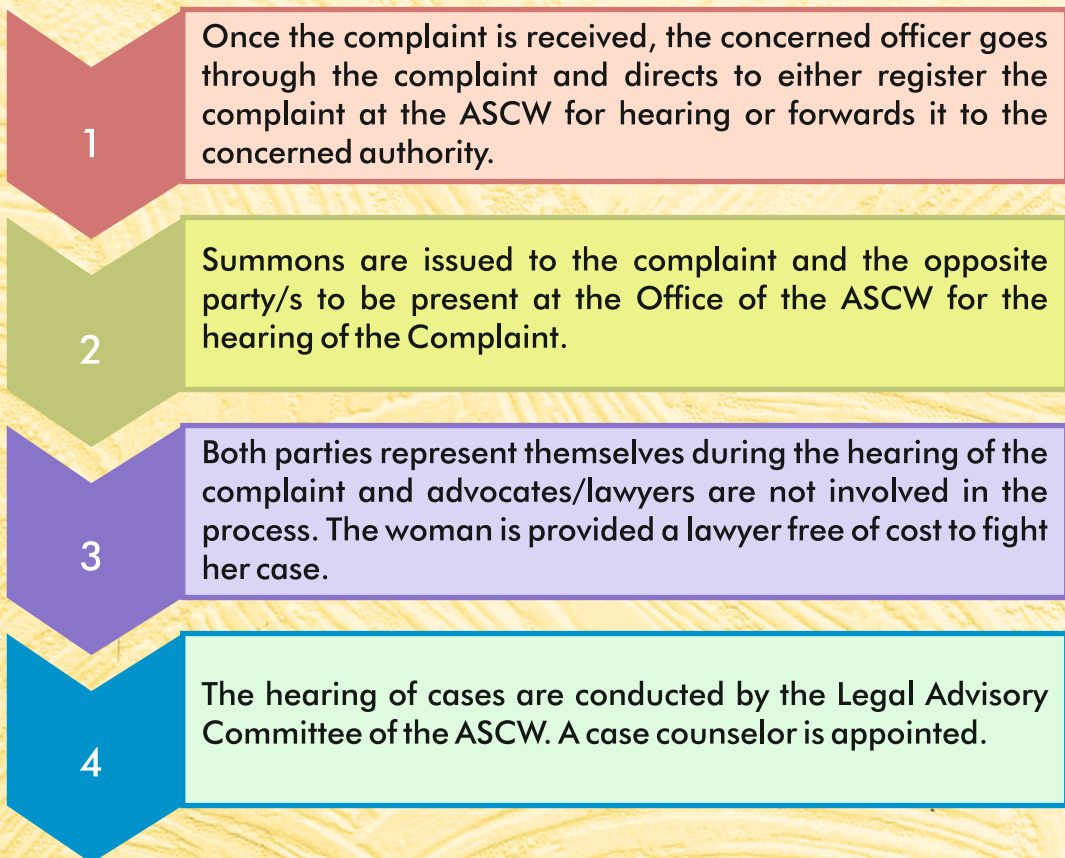
● Who can file a complaint at the SCW?

1. The aggrieved woman;
2. Any member of her family;
3. Any individual having knowledge about the incidents; on behalf of the woman;
4. The SCW also takes up Suo Moto cognizance of incidents.

● How can one file a complaint at the SCW?

1. In person/through anyone else on her behalf by filling up the complaint form available at the office of the SCW;
2. Complaint can also be registered via the official website of SCW (e.g., For Assam, ascw.org.in).
3. An aggrieved woman may also send her complaint in a plain paper, via post or email.

● What is the procedure for filing a complaint at the SCW?



RESPONSIBILITIES AT INDIVIDUAL, FAMILY AND COMMUNITY LEVELS




Level	Measures
Individual	Be aware of rights, seek help and reach out if something appears out of track, form/join a peer support circle, learn self-defence, alert relevant organizations and police, do not tolerate violence and do not commit either, educate the next generation about violence against women.
Family	Enable equal opportunity in family, maintain family time, avoid/discourage gendered behaviour, seek care-support-treatment/ counselling, form quality of trust circle, encourage environment of moral trust and openness with non-judgemental approach particularly in joint families.
Community	Enable conducive environment for healthy relationships; encourage women empowerment and equal opportunities; organise self-defence training camps, parenting and livelihood skills training etc.; share contact details of nodal persons and locally active helplines and/or referrals; form safety circles; facilitate counselling clinics, legal aid, healthcare services etc




“The best thermometer to progress of a nation is its treatment of its women.”
 - Swami Vivekananda

SOFTWARE APPLICATIONS FOR WOMEN SAFETY

Software applications (Apps) and artificial intelligence tools are available with innovative, reliable features for the safety of women in India. Most of these safety apps are available on Google play store. The basics of most apps are similar: a user-defined list of emergency contacts and transmission of geographical location.

Some of the Safety Apps available are:[1,2]

Name of App	Features
 bSafe	Live GPS trail, timed alarm if 'not checked in', Guardian Alert button, makes phone ring with a fake call if required and notifies emergency contacts with location, video and siren.
 Disha SOS	Developed by Andhra Pradesh (A.P.) Police Department for women in A.P. Disha SOS helps users in emergency situations. Informs users on nearby safe places, nearby police stations, nearby hospitals and useful contacts.
 Himmat Plus	Developed by Delhi Police for women in Delhi. Enables SMS to emergency contacts; transmission of location, audio and video of the surrounding to the Delhi Police control room for police to reach the location.
 My Safetipin	Incorporates all the essential features (GPS tracking, emergency contacts, directions to safe locations). It also pins safe areas along with safety scores and enables users to pin unsafe areas in order to help others.

Name of App	Features
<p>Nirbhayam</p> 	<p>Developed by Kerala State Police for women in Kerala. Includes text, audio/video and geo tracking features. Works in non-internet area. A 'first-reach-the-spot' feature enables authorities to reach location without compromising safety by not calling user immediately after distress call.</p>
<p>Raksha</p> 	<p>Sends alerts to registered mobile numbers with geo-location. Even if the App is off and is not working, alerts are sent by pressing the volume key for three seconds. The SOS functionality also enables text messaging if stuck without internet.</p>
<p>Smart24X7</p> 	<p>Supported by various State Police to ensure safety of women and senior citizens. Panic alerts are sent to emergency contacts. Records audio and takes photographs during the panic situation and transfers these to the police. Call centre support- tracks primary movements of the user.</p>

HANDY TIPS FOR DIFFERENT TYPES OF OFFENSES

Street harassment

1. Observe that someone is stalking, teasing you and act immediately.
2. Shout Loudly. Continuous shout garners public attention.
3. Call 100 Police Emergency. Even if there is no balance in your phone, can dial 100 as it is Toll Free.
4. Use a Women Safety App in your mobile phone.
5. Gather your courage and show that you are strong.

Domestic violence

1. If getting physically beaten, try to escape, do not argue.
2. Dial 100 and/or use Women Safety App in mobile phone.
3. Save yourself and children too.
4. Whether neighbours support you or not, tell them what happened so that it is known or captured in CCTV cameras.
5. If you are facing domestic violence, buy a miniature secret camera and use it so that evidence is available.

Workplace harassment

1. Before joining, enquire whether the workplace is safe for women to work.
2. Gather information about Internal Complaints Committee (ICC) at the workplace and Local Complaints Committee at District level to file complaint in case of need.
3. Never feel shy to complain to your higher authorities on workplace sexual harassment, it is your right.
4. Attend orientation/awareness programs on Prevention of Sexual Harassment (POSH) Act at workplace.
5. Differentiate between work-related and sexual harassment before lodging a complaint with Head of the Institution/ICC.

NATIONAL/STATE HELPLINE NUMBERS IN INDIA

SN	National Helpline	Number
1	Women Helpline (All India)- Women in distress	1091
2	Women Helpline (domestic abuse)	181
3	Police	100
4	National Commission for Women (24x7 for sexual violence and harassment)	7827170170

SN	State	Organization/Helpline	Number
1	Andhra Pradesh	Cyber Crime complaint	+919121211100
		Vasavya Mahila Mandali helpline for women and girls	+91702737964 +918662470966
2	Arunachal Pradesh	State Commission for Women	0360-2290544
3	Assam	Assam Women Helpline	181/ 0361-2521242
		State Commission for Women	0361-2220150
4	Bihar	Women Helpline	0612- 2214318
5	Chhattisgarh	Women Helpline	1800-233-4299
6	Goa	Women Helpline	1091/0832- 2421208
7	Gujarat	State Commission for Women	1800-233-1111, 7923251613
		Ahmedabad Women Group	7926441214
8	Haryana	Women and Child Helpline	0124-2335100
		State Commission for Women	0172-2584039/ 2583639

SN	State	Organization/Helpline	Number
9	Himachal Pradesh	State commission for Women	9816077100, 0177-2622929
10	Jammu & Kashmir	Women helpline	1091
11	Jharkhand	Women Helpline	9771432103
12	Karnataka	Bengaluru Women Police	080-22943225
		Karnataka Women Police	080-22100435
13	Kerala	Women Police Helpline	9995399953
14	Madhya Pradesh	Madhya Pradesh Mahila Thana	0731-2434999
15	Maharashtra	Mumbai Police Women Helpline	022-22633333/ 22620111
		State Commission for Women	022-26592707
		Women Helpline	1298, 103
16	Manipur	Women helpline	181
17	Meghalaya	Women helpline	1091/181
18	Mizoram	Women helpline	181
19	Nagaland	Women helpline	181
20	Odisha	Women helpline	181
21	Punjab	Women Helpline Punjab	1091/112
		Women Helpline Amritsar City Only	9781101091
22	Rajasthan	Rajasthan Nirbhaya Helpline	1800-1200-020
23	Sikkim	Women helpline	1091/181
24	Tamil Nadu	Women Helpline	044-28592750
25	Telangana	Women helpline	181
26	Tripura	State Commission for Women	0381-2323355

SN	State	Organization/Helpline	Number
27	Uttar Pradesh	State Commission for Women	0522-2306403; 6306511708
		Uttar Pradesh Women Helpline	1090/112
28	Uttarakhand	Women related complaints	9411112780
29	West Bengal	State Commission for Women	033-23595609
30	Andaman and Nicobar Is.	Women helpline	1091
31	Chandigarh	Women helpline	1091, 0172- 2741174
32	Dadra & Nagar Haveli	Women helpline	1091
33	Daman & Diu	Women helpline	1091
34	Lakshadweep	Women helpline	100
35	NCT Delhi	Delhi Commission for Women	011-23379181
36	Puducherry	Women helpline	1091

VIOLENCE AGAINST DIFFERENTLY ABLED WOMEN

Violence against women is a certainly a matter of great concern, yet the topic is often under the wraps. The contemporary society has started addressing the issue of violence against women to some extent and open protests and other forms of dissent have been witnessed in recent times. The outrage is however evident mainly in cases of extreme cases of violence. Day to day forms of violence starting from indignity in the streets, workplace, to harassment within the premises of one's home go unnoticed and are under reported mainly due to the associated social stigma. In addition to violence against women per se, violence against women and girls with disabilities is a significant issue that needs special mention as here the risk is dual, being related to both gender and disability-based discrimination. The combination of these two factors results in an extremely high risk of violence against women with disabilities. This group of women and girls face the same trauma but have even fewer means to voice them and hence remain helpless victims of violence. Available data shows that there is a higher rate of violence against women with disabilities than against men with disabilities. Also, in many cases, offenders are caregivers, either at home or in institutional settings, and females with disabilities often find themselves trapped by violent partners or family members because they are financially and socially dependent on them.

Despite the increased risk, there is a dearth of literature regarding the risks of abuse, and barriers to seeking and getting help among girls and women with special needs. More attention needs to be paid by womens groups, disability and violence researchers to bring this invisible issue to the forefront.

The intersection of gender and disability, makes abuse and violence against this stratum of population a very exceptional one and a lot needs to be done.

Capacity building of peers, family members is required. There is a need to train and create a group of trained personnel who will be able to identify ongoing violence against this special group. Development of a database to identify women with disabilities in a particular area with regular survey of their homes and institutions must be done. There must be a concerted effort to remove barriers to accessing treatment and justice. This can be done by, by providing women with special needs with basic and special education like formal sign language. Creating awareness and empathy amongst the general population via community outreach programme and at workplaces and special schools, and institutions for persons with special need is also required.

The task of identifying and addressing the issue of violence against women and girls with disability is colossal but like any other noble cause it can be accomplished but the first baby steps have to be taken.

SUCCESS STORIES

Harassed No More

A lady from Jorabat District lived in constant fear that someone would drag her outside her house, calling her a “Daini” or witch. She was once accused as a witch by her community, beaten up and thrown out of her house. Police rescued her but she was not allowed to go back to her house. Assam State Commission for Women (ASCW) took up the case and intervened along with police. The accused were summoned to the police station and a written statement was obtained stating that the victim would not be harassed as a Daini in future. She was also able to go back to her house.

(Assam State Commission for Women, Assam)

Breaking Free from Domestic Violence

A young, orphan engineer's marriage started with a rift due to dowry. She was oppressed, abused and not allowed to work by her spouse and in-laws. The torture increased when she suffered a miscarriage. She approached Vasavya Mahila Mandali NGO through police where she was provided counselling and shelter. The NGO also facilitated her health check-up and training in digital marketing. Now she is independent and leading a dignified life by promoting products made by women on e-commerce platforms. She also volunteers to provide peer counselling.

(Vasavya Mahila Mandali, Andhra Pradesh)

The Safe Street

The phone number of a Police Outpost was given to commuters outside a rural, remotely located medical college in Darjeeling District of West Bengal as part of a pilot study. Calls were attended and untoward incidents at an unsafe street were averted. Eventually, the street came to be known as a 'Safe Street' and women felt no fear in passing through, even at night. Moreover, nearby households offered their numbers as 'emergency helplines'.

(North Bengal Medical College, West Bengal)

COVID-19's Hand in Child Marriage

Fourteen-year-old Meena (name changed) belonged to a poor family. Her brother, the main bread winner was a daily wage labourer. The family situation worsened during the COVID-19 pandemic and Meena was pressurized to get married as her brother was barely able to provide for his own family. Child In Need Institute (CINI) also found that the sudden demise of her mother was adding to her stress and her studies were getting affected. Emotional crisis management was done for Meena and at family level, her brother was counselled on the ill-effects of child marriage and the importance of continuing Meena's education. He was also informed about all available government schemes and entitlements. This timely and focussed intervention was able to save a girl's childhood.

(Child In Need Institute, Assam)

INDIAN MOVIES THAT ADDRESS VIOLENCE AGAINST WOMEN

Movie name	Language
Bakor putek, Joymoti	Assamese
Dahan, Criss Cross	Bengali
Sanki Daroga	Bhojpuri
Hellaro	Gujarati
Arishadvarga Dandupalya 2, Hoomale, Hoovu Hannu, Megha Mandara, Nagarahavu	Kannada
Agni Sakshi, Bullbul, Chhapak, Daman, Inkaar, Lajja, Mehndi, Parched. Pink, Provoked, Section 375, Thappad	Hindi
Uyare, The Great Indian Kitchen	Malayalam
Bandishala, Bindhast, Saat Chya Aat Gharat, Sandeh	Marathi
Bisarjan, Khusi	Odia
Hard Kaur, Needhi Singh	Punjabi
Bigil, Mahanadi	Tamil
Vakeel saab	Telugu

ROLE OF COMMUNITY AND FAMILY MEDICINE

The Department of Community Medicine & Family Medicine bridges the gap between the medical system and the community. It is in a unique position to help control violence against women.

- a. The members of the department are present in the health centres, in the villages and urban areas where they can:
 1. Identify/suspect cases of violence/abuse in the OPD or in the community.
 2. They can counsel the women to reveal the truth and encourage them to seek help, who otherwise are hesitant due to fear or societal pressure.
 3. They can report the cases if they feel the necessity for the woman's safety.
- b. Through research, they can help throw light on the situation, risk factors and measures to control violence in the community, which should be facilitated by the community. Such data can be used for advocacy and can influence policy decisions.
- c. Awareness can be generated among the public in the health centres and in the community for which community should be receptive.
- d. They can help build capacity of frontline workers to fight for the cause.
- e. With interested partners, special help desk or platforms can be created to address the issue.
- f. They can work in close coordination with the panchayat, block, district, state and central govts and law enforcement authorities to control violence against women.
- g. Collaboration can be done with the NGOs and international organizations that are involved in control of violence against women. Women and community themselves have a vital role in determining how effective the department can be in helping them.

IMPACT OF COVID-19 AND ROLE OF FAMILY PHYSICIANS ON VIOLENCE AGAINST WOMEN POST-PANDEMIC

Violence Victims and Family Practice

Every family physician knows patients in their practice who have experienced violence. Many patients have experienced one or more forms of violence and trauma; although risk varies among sub populations, no economic, racial, religious, or other group is immune; and there are important age and gender differences in the types of violence for which people are most at risk. The World Health Organization defines violence as "the intentional use of physical force or power, threatened or actual, against oneself, against another person or against a group or community, which either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development, or deprivation."

COVID Pandemic and Violence Against Women

Covid pandemic has increased risk factors for violence against women. Calls to help lines have increased five-fold in some countries as rates of reported intimate partner violence increase because of the COVID-19 pandemic. Restricted movement, social isolation, and economic insecurity are increasing women's vulnerability to violence in the home around the world. By September 2020, 52 countries had integrated prevention and response to violence against women and girls into COVID-19 response plans, and 121 countries had adopted measures to strengthen services for women survivors of violence during the global crisis, but more efforts are urgently needed. In India using online survey data of 97 men and women in India, Sharma and Khokhar find that while 8.5% of respondents had experienced domestic violence in the past year, only 7.4% had experienced violence during lockdown. Of those who did, 86% reported an increase in the frequency of violence during the lockdown period (results not sex-disaggregated). The authors find that education level is negatively associated with experiences of violence during lockdown for both the victim and perpetrator. Violence is positively associated with pregnancy, past

divorce of spouse, loss of job or income by either self or spouse, and extra-marital affairs. Most participants chose to ignore the abuse or consult family or friends rather than seeking formal support services [Sharma and Khokhar 2021 ; Disaster Medicine and Public Health Preparedness].

Shadow Pandemic

Since its outbreak, the COVID-19 pandemic has only intensified VAWG, particularly in, but not limited to, the domestic sphere. It is for this reason that we at UN-Women refer to VAWG as the “shadow pandemic”. While the world's attention is focused on containing COVID-19, this other scourge is growing, exacerbated by the very measures put in place to mitigate the spread of the virus, such as lockdowns, social distancing and other forms of restrictions on movement. Stay-at-home measures are compounding perpetrators' use of mechanisms of power and control to isolate victims of VAWG.

Unemployment, economic instability and stress may lead offenders to feel a loss of that power, which in turn may exacerbate the frequency and severity of their abusive behavior. At the same time, the crisis is generating additional barriers for women and girls' access to essential life-saving services such as counseling and justice resources, and legal advice; sexual health and other crucial medical assistance; and the provision of refuge. In this context, as victim-survivors are further isolated from assistance and social support networks, the negative health and well-being impacts worsen, and the risks of more lethal and extreme violence increase. As the world is distracted by the pandemic, many perpetrators take on an ever-greater sense of impunity, assuming that they have the freedom to act without restriction.

What Family Physicians Can Do

Family Physicians is a generalist who takes professional responsibility for the comprehensive care of unselected patients with undifferentiated problems and committed to the person regardless of age, gender, illness,

or organ system. The clinical specialty of family medicine is patient-centered, holistic, evidence-based, family and community-focused, and problem-oriented. Family physicians are experts at managing common complaints, recognizing important diseases, uncovering hidden conditions, and managing most acute and chronic illnesses.

Identifying female survivors, providing them with adequate referral, and supporting them safely on a pathway to recovery could be a way to avoid the long-term impacts of violence and prevent further incidents of abuse. The approach to survivors is usually a multi disciplinary one, involving physicians, social workers, psychologists as well as community resources. The clinician's role is to identify cases of abuse, assess the patient and her family level of safety, and provide ongoing medical care and non-judgmental support. This includes counseling about the nature and course of DV and assessing the level of readiness to undergo changes, educating the patient about the range of available support services and making the appropriate referral, documenting findings, and assuring follow-up.

VAW is frequently encountered in primary care and needs to be addressed properly. Expressing empathy, acknowledgment, and continuous support are the most important elements of immediate care provided to patients who disclosed abuse; safety is to be assessed and if risk of abuse escalation is present, safety planning is to be devised. Counseling can strengthen the survivor's sense of self-worth and feeling of continuous support and assistance. Referral for psychological assistance and organizations working with abused women may be needed.

TAKE HOME MESSAGE

- ❖ Continuum of public awareness and sensitization at all levels.
- ❖ Creating platforms where women can speak without fear or intimidation and get redressed with professional help.
- ❖ Software applications for rapid response and coordination.
- ❖ Research collaborations between academia, service providers and local stakeholders for evidence to policy.
- ❖ Advocacy for political commitment.

BIBLIOGRAPHY

1. UN Women. Ending Violence against women [internet]. [cited 2021 October 16]
Available from: <https://www.unwomen.org/en/what-we-do/ending-violence-against-women/prevention>
2. National Crime Records Bureau. Crime in India 2020. [internet]. [cited 2021 October 26]. Available from: <https://ncrb.gov.in/en/Crime-in-India-2020>
3. National Commission for Women. List of laws related to women [internet]. [cited 2021 October 10]
Available from: <http://ncw.nic.in/important-links/Laws-Related-to-Women>
4. Dey A. Sites of exception: gender violence, digital activism, and Nirbhaya's zone of anomie in India. Violence against women. 2020;26(11):1423-44.
5. 7 best women safety apps. Times of India 2020. [internet]. [cited 2021 October 25]
Available from: <https://timesofindia.indiatimes.com/7-best-women-safety-apps/photostory/51285556.cms>
6. Huq M, Das T, Devakumar D, Daruwalla N, Osrin D. Intersectional tension: a qualitative study of the effects of the COVID-19 response on survivors of violence against women in urban India. BMJ Open 2021;11(9):e050381. doi: 10.1136/bmjopen-2021-050381.

WE ARE THANKFUL TO -



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