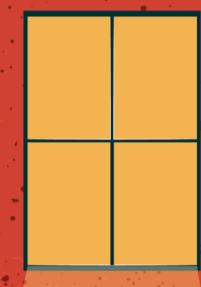
SHADOW PANDEMIC

LOBBY DOCUMENT ON ADDRESSING DOMESTIC VIOLENCE DURING THE PANDEMIC







Kingdom of the Netherlands





LOBBY DOCUMENT ON ADDRESSING DOMESTIC VIOLENCE DURING THE PANDEMIC

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This lobby document advocates the need for a gender-sensitive response to incidents of domestic violence arising in the context of the Covid - 19 pandemic, other emergencies and national crises in Sri Lanka. To substantiate this need, a series of interviews were conducted with resource persons from diverse, yet interconnected, fields and a study was developed to propose recommendations for reforms. The following sections of this document will introduce the circumstances in which the study was conducted, provide a snapshot of overall findings including factors that triggered violence and the identified shortcomings in the system, and outline the suggested recommendations.

INTRODUCTION

The Covid-19 pandemic has created a range of challenges impacting almost every aspect of modern life, for instance casting the spotlight on problems in the national economy and on public health. However, the pandemic's impact on women-centric issues has become a peripheral concern amidst this continuing crisis and has often been side-lined. Nevertheless, global statistics have indicated a surge in the number of domestic violence cases reported worldwide during the pandemic, and consequently, domestic violence (falling within the ambit of **Gender Based Violence**) has been referred to as a *"human rights concern."*¹ Since March 2020, Sri Lanka has also reported an increase in the number of domestic violence cases within the country. Although extensive surveys and research have not been conducted on the issue, anecdotal evidence has sufficiently supported this inference.

In drafting this lobby document, the authors reached out to the **National Committee on Women ('NCW')**² and **Women in Need ('WIN')**³ which operated a fully functioning helpline for women and victims of violence during the pandemic. Both entities provided evidence that indicated an upward trend in the number of domestic violence cases during this period. For example, the NCW that ran the '1938' hotline confirmed that in the year 2020 alone **1215** cases of domestic violence were reported. These numbers had increased in 2021, with **3489** out of **4976** calls being related to incidents of domestic violence. While these figures do not account for the actual number and rate of domestic violence cases in the country, most of which remain unreported, they are certainly reflective of the ongoing shadow pandemic that is domestic violence.

The Sri Lankan legal framework has long encapsulated laws on domestic violence. The **Prevention of Domestic Violence Act (PDVA)**⁴ was enacted in 2005. The PDVA stipulates that violence perpetrated within the home constitutes an offence and offers victims avenues for redress through *interim protection orders, protection orders and supplementary orders*. However, many litigators believe that the PDVA is deficient and contains severe drawbacks concerning implementation and procedure. Additionally, the PDVA is more gender neutral than gender sensitive. Notably, observations made by key stakeholders involved in the protection from and prevention of domestic violence incidents, clearly point to the procedural and legal shortcomings within the existing infrastructure in Sri Lanka.

¹ Kim Slote and Carrie Cuthbert, 'Domestic Violence & Sexual Abuse: A Women's Human Rights Information Sheet' <Intimate Partner Sexual Abuse: A Human Rights Information Sheet (<u>musc.edu</u>)> accessed 02 August 2022; 'Gender-based violence and human rights' (Council of Europe Portal) <Gender-based violence and human rights (<u>coe.int</u>)> accessed 02 August 2022; 'Type of gender-based violence' (Council of Europe Portal) <Gender-based violence and human rights (<u>coe.int</u>)> accessed 02 August 2022.

² The NCW is an arm of the national machinery on women's affairs.

³ WIN is a non-governmental organization in Sri Lanka.

⁴ Prevention of Domestic Violence Act, No. 34 of 2005 (PDVA).

1. FINDINGS

1.1 FACTORS OF VIOLENCE

The study revealed that the Covid-19 pandemic created nuanced root causes that were a catalyst for increased violence within homes. The following factors were identified as triggers of domestic violence during and after the pandemic:

1. INCREASED LEVELS OF STRESS AND FRUSTRATION DUE TO THE IMPOSITION OF CURFEWS

- Extended curfew periods imposed financial constraints on families of varying economic backgrounds.
- Many employees were laid off from their jobs in the initial phases of the pandemic, leading to unemployment and income loss.
- The ensuing financial constraints borne by the men in *most* families gave rise to deep frustration and anxiety, triggering acts of violence.

2. LIMITED ACCESS TO SERVICE PROVIDERS DURING THE PANDEMIC

- The pandemic disrupted the existing social and formal networks that were established to protect victims of violence.
- Access to service providers including Police Officers, Women Development Officers (WDO) and shelter homes were constrained due to the imposition of travel restrictions.
- Due to poor funding during this period, access to aid provided by nongovernmental organizations was limited.
- Key person interviews confirmed that the health sector was the most accessible service provider during the pandemic's peak. However, all resources and manpower were channelled towards combatting Covid-19, and the pandemic's gendered impacts were side-lined, yet again.
- Thus, many domestic violence cases remained unreported as victims chose to suffer in silence.

3. THE ABSENCE OF AN EFFICIENT SYSTEM IN PLACE TO ASSIST VICTIMS OF DOMESTIC VIOLENCE

- The pre-existing infrastructure set up to enhance the protection of women and to prevent violence, did not function efficiently during the pandemic.
- Alternative service providers, including hotlines, were not equipped to handle incidents of domestic violence at such a large scale.
- Therefore, although women were made aware of these alternative avenues of support, due to the inadequacy/inefficiency of service providers during the pandemic, many women failed to access help and instead chose to bear the violence.





4. COMPETING AIMS

- The pandemic took the limelight as the more tangible problem while issues of gender-based violence were pushed to the background.
- Consequently, all available resources were diverted to combat the pandemic and domestic violence became a peripheral concern.

5. GENDER STEREOTYPING

- Families entrenched in patriarchal customs and beliefs espoused traditional understandings of gender roles, where men exercised dominion over women.
- These beliefs created a power imbalance within the spousal relationship, empowering men to be abusive towards women within their family nuclei.
- In most cases, this entrenched power imbalance also placed an expectation on women to bear the abuse and suffer in silence.
- Many women believed that reporting incidents of violence was taboo and instead chose to endure their abusive partners.



6. ACCESS TO ILLICIT ALCOHOL

- Access to illicit alcohol was revealed to be a key factor in triggering violence.
- Without legal means of purchasing alcohol, most men found alternate avenues to access illicit alcohol.
- Consumption of alcohol in the home often led to women being victimized.



1.2 SHORTCOMINGS





1. LACK OF A WOMEN'S AUTHORITY/COMMISSION

• The formal State mechanism presently does not comprise an Authority or Commission with the adequate legal capacity to address women's affairs.

2. LACK OF ACCESS TO SERVICE PROVIDERS

- Strict lockdown and curfew regulations restricted access to the outside world.
- As a result, perpetrators of domestic violence had an increased opportunity to abuse their victims over extended periods of time when they were confined to their homes.
- Furthermore, women did not have access to independent modes of communication to report incidents of domestic violence or lodge complaints from within their homes.
- Many women did not have access to 'safe phones' to access service providers and were compelled to use their abuser's phone. This increased the risk of violence in the event they were discovered.
- Victims who succeeded in accessing service providers indicated that the quality of service they received was poor.

3. LACK OF CAPACITY

- in addressing domestic violence was further exacerbated during the pandemic, as personnel from different sectors focused their resources on addressing the immediate threat of the Covid-19 virus and its impact on these sectors.

The lack of coordination and capacity amongst different stakeholders

• The inadequacy/lack of training provided to frontline personnel to skilfully deal with and respond to the crisis also meant that vulnerable groups, including women received limited services.

4. LACK OF CONCRETE DATA ON DOMESTIC VIOLENCE IN SRI LANKA

- Departmental agencies tasked with monitoring domestic violence have not maintained a database of reported cases at the district, provincial and national levels.
- Additionally, the lack of concrete data reflecting the comparative rise in domestic violence incidents before and after the pandemic can be attributed to the absence of national surveys and poorly maintained police records and hospital records.



5. THE OVERALL INFRASTRUCTURE IS NOT CONDUCIVE TO DEAL WITH THE GENDERED IMPACT OF COVID - 19

- Violence is normalized across existing systems and institutions, and the reporting of violence is stigmatized due to prevalent cultural and societal norms. Therefore, the system as a whole, is de-sensitized to gender issues.
- These overall conditions can be attributed to the severe deficiency observed in the following areas:
 - Recognition of gender issues at the apex level.
 - Inter-sectoral coordination in terms of service provision.
 - Staff trained on gender sensitivity and having capacity at every level.
 - Female representation in decision-making institutions.
 - A monitoring body to oversee the implementation of Court Orders in cases of domestic violence.

1.3 SECTORAL SHORTCOMINGS:

There are different sectors involved in the prevention of and protection from domestic violence. This section highlights the shortcomings within each of these identified sectors.

 THE MINISTRY OF WOMEN & CHILD AFFAIRS The NCW & the Women's Bureau constitute the divisional arms of the national machinery on women's affairs. Due to the lack of oversight and funding within these arms, the overall efficacy of the system (including hotlines) could not be assessed. Other shortcomings include a lack of: A policy- issuing authority by the NCW. Legal and decision-making capacity. Funding and resources to provide emergency services to victims e.g. shelter homes.
 2. THE JUSTICE SECTOR The PDVA contains a narrow definition of "domestic violence" which excludes several groups of victims who may have benefitted from this Act. For instance, marital rape has not been criminalized to date and therefore, victims of such forms of violence are excluded from protection. The PDVA does not provide for a monitoring system to ensure compliance with the enforcement of Protection Orders.

- Further, there is a substantive delay in obtaining Interim Protection Orders.
- The closure of courts during the pandemic has resulted in the halting of legal proceedings. These obstructions to the smooth functioning of the court system have impacted the possibility for victims to obtain redress in domestic violence cases within a reasonable timeframe.
- Moreover, the lack of sensitivity when handling domestic violence cases among court personnel, including judges, lawyers and court staff, continue to be detrimental to the victim.

3. THE ENFORCEMENT SECTOR

- Police Officers often serve as the first contact point for victims of domestic violence. However, many of these police units were not sensitized to handle gender related issues and their response to complaints often led to victims facing further grievances.
- For instance, Police Officers often mishandled domestic violence complaints and forced victims to engage in mediation to resolve disputes.
- Furthermore, due to stringent lockdown regulations imposed during the pandemic, women had no access to police stations and their calls for help often went unanswered.
- The following issues were identified as primary contributors to the overall inefficiency of the system, especially during the pandemic:
 - Police desks and Women and Children's desks were not functioning and were left under resourced, while hotlines/phone numbers could not be reached by victims.
 - There was a lack of capacity, efficiency, commitment and female representation within the enforcement units.

4. THE HEALTH SECTOR

- Personnel from the health sector also serve as first contact points for victims of domestic violence. However, there appears to be a lack of gender-sensitization across the health sector.
- For example, the staff are not trained to identify potential signs/ patterns of Gender Based Violence and, specifically, incidents of domestic violence when dealing with patients and therefore, fail to offer victims the appropriate support.
- The Mithuru Piyasa, a safe space situated in public hospitals for victims of domestic violence to share their experiences, does not have a hotline. Therefore, victims must physically visit hospitals to report incidents of abuse.
- Additionally, Mithuru Piyasa is not located in discrete/separate areas within hospitals. The lack of privacy and confidentiality for victims therefore, influences their decision to seek help.

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2. RECOMMENDATIONS

2.1. LONG TERM REFORMS

1. NATIONAL MACHINERY FOR WOMEN • Promote the Ministry of Women & Children's Affairs to an independent Cabinet Ministry. • Secure and implement a gender responsive national budgeting framework. 2. BESTOW LEGAL STATUS ON THE NATIONAL COMMITTEE ON WOMEN (NCW) • Vest the **NCW** with legal authority and expand its mandate to serve as a primary focal point for all gender units in other departments. • Enable the setup of 2 sub-units – a Research Unit and a Monitoring and Coordination Unit - under the NCW. • Expand the responsibilities of the **NCW** to undertake tasks including policy making, data gathering and research, system reviewal and inter-departmental coordination. • Provide victims with facilities, including welfare checks and psychosocial support, opportunities for economic empowerment and avenues to obtain legal aid through its legal mandate. 3. INCREASE MESSAGING, CAPACITY BUILDING, GENDER SENSITIVE **TRAINING & FEMALE REPRESENTATION IN POSITIONS OF POWER** Revamp media guidelines on reporting domestic violence matters. • Engage with community level workers & grassroots Civil Society Organizations [CSOs] to raise awareness on domestic violence and on the options available to victims to seek assistance. Sensitize the workforce by conducting gendersensitive training programmes. • Implement gender-positive messaging in schools, colleges and at the community levels.

• Recruit a higher percentage of females into the workforce of different sectors/institutions.



- Advocate to pass appropriate amendments to the PDVA.
- Expand the definition of domestic violence in the PDVA without streamlining it with/confining it to the offences listed in the Penal Code.
- Alter the model of the PDVA to incorporate the following:
 - Include and explicitly spell out State obligations to victims;
 - Empower the State to file action on the victim's behalf (similar to other jurisdictions);
 - Permit representatives to initiate proceedings on behalf of victims;
 - Introduce a fast-track procedural system to hear domestic violence cases;
 - Set out clear timeframes within which applications for Interim Orders must be applied for and issued;
 - Include a provision that compels the monitoring of all forms of Court Orders issued under the Act; and
 - Provide for the establishment of an independent body to monitor, oversee and review the implementation of Court issued Protection Orders and Supplementary Orders.

5. RESEARCH & RECORDS

- Conduct systematic research to identify trends in domestic violence cases and strategies that have aided/failed in preventing domestic violence.
- Create an evidence base/repository of data which documents incidents of domestic violence.
- Conduct national level surveys to extrapolate empirical data on trends in domestic violence and strategies that have worked or failed.
- Maintain a database of reported domestic violence cases at every district, provincial and national level which should also include information on distress calls received via helplines and policies implemented in this regard over time.







2.2 SHORT TERM REFORMS



1. THE WOMEN'S MINISTRY

The **NCW** must implement measures to carry out the following tasks/ responsibilities:

- Continue to operate the 24-hour hotline with trained operators and tri-lingual services to receive reports / calls on incidents of domestic violence.
- Record data and conduct periodic reviews to ensure efficiency of the system.
- Work towards identifying and addressing deficiencies/gaps in the system based on the data gathered and the findings from periodic reviews.
- Make other policy level interventions to aid victims.
- Direct resources towards creating adhoc safe homes in disused buildings etc.



2. THE JUSTICE SECTOR

- Establish a separate Court to hear matters pertaining to domestic violence.
- Classify domestic violence cases as urgent matters and allow virtual hearings via digital platforms to take place in situations where Courts are otherwise closed to avoid delays.
- Conduct training and awareness programs to sensitize judges, lawyers and other personnel in the justice sector on gender-based violence.
- Recognize the urgency of domestic violence matters and monitor the quick implementation of Protection Orders.
- Implement a fast-track procedure to address domestic violence cases.





3. THE ENFORCEMENT SECTOR

- Sensitize the police force on matters pertaining to gender-based violence.
- Provide gender and psychosocial training to the Police force.
- Increase capacity and female representation within the workforce of this sector.
- Ensure follow-ups and home visits post complaints.
- Ensure the privacy of victims.
- Submit periodic reports on calls received and ensure that the backlog of domestic violence cases reported are sent to the Research Unit of the NCW.
- Operate hotlines offering tri-lingual services and follow up on distress calls.
- Ensure the functioning of 24-hour staffed Women & Children's Desks.

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4. THE HEALTH SECTOR

- Sensitize health staff and increase capacity of the workforce within this sector.
- Relocate the Mithuru Piyasa centers to discrete areas in hospitals to ensure privacy for victims.
- Ensure that Mithuru Piyasas liaise closely with other sectors and the Monitoring & Coordination Unit of the *NCW*.
- Create a hotline service for Mithuru Piyasa, so that victims can opt to seek assistance remotely without having to physically access the hospital.





5. INCREASED ACCESSIBILITY TO SERVICE PROVIDERS

- Ease lockdown restrictions for service providers catering to Gender Based Violence (GBV) and Violence Against Women (VAW).
- Invest in the existing infrastructure and mechanisms in place and create more virtual channels connecting victims with service providers. For example, through the establishment of hotlines.
- Revamp the referral system and ensure that service providers are available on a roster/shift basis for victims to seek assistance at any hour.
- Provide comprehensive gender-sensitive training and awareness programs for officers and first points of contact.
- Enable hotlines at every point of first contact.
- Design a local domestic violence signal for help and raise awareness of the same via social media, flyers, TV advertisements etc.

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