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for Women



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# Safe City Free of Violence Against Women & Girls Initiative

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## A STUDY OF DELHI POLICE HELP LINES (100 & 1091)

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Safe City Free of Violence against Women and Girls Initiative

A Study of Delhi Police Helplines (100 & 1091), 2012

Published in 2013

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## FOREWORD

This study is part of the Safe City free From Violence against Women and Girls Initiative, Delhi of Jagori in partnership with UN Women, UN HABITAT and the Department of Women and Child Development, Delhi Government. Women and girls are vulnerable to violence both within and outside the home and we recognize that the continuum of violence continues from personal/private to public space. We have been working on this issue since 2005 and have completed several surveys and safety audits in order to understand the problem in detail and in all its diversity.<sup>1</sup> A baseline survey was conducted in Delhi in 2010 to focus on violence against women including sexual harassment, staring, touching, sexual assault, attempted rape, stalking and lewd comments, in a wide range of public spaces. The sample was 5010 men and women above the age of 16 covering all nine districts of Delhi.<sup>2</sup>

Conducted to research into factors that create greater safety and inclusion for women in public spaces around the city, the survey gathered and analyzed information about the following: (a) nature and forms of gender-based violence and/or harassment faced by women, (b) spots where these incidents happen and that are perceived to be unsafe and inaccessible to women, (c) strategies adopted by women to defend themselves, (d) role of governing agencies and the police in safeguarding women's rights, and (e) societal perceptions and attitudes towards rights of women and girls.

After conducting interviews with a diverse range of stakeholders, both government and non government, a draft strategic framework document was drawn up in 2010.<sup>3</sup> This document identified several key areas of intervention in order to have a sustainable impact on reducing vulnerability and increasing safety. These include:

- Urban planning and design of public spaces
- Provision and management of urban infrastructure and services
- Public transport
- Policing
- Legislation, justice and support to victims
- Education
- Civic awareness and participation

This study has been carried out by Multiple Action Research Group (MARG) and provides data on the gaps in the functioning of Delhi Police helplines which are a first point contact for most people. Further the study also provides recommendations on addressing these gaps.

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<sup>1</sup> <http://www.safedelhi.in/sites/default/files/reports/gic-delhi-report.pdf>

<sup>2</sup> [http://www.safedelhi.in/sites/default/files/reports/Baseline-Survey\\_layout\\_for-Print\\_12\\_03\\_2011.pdf](http://www.safedelhi.in/sites/default/files/reports/Baseline-Survey_layout_for-Print_12_03_2011.pdf)

<sup>3</sup> <http://www.safedelhi.in/sites/default/files/reports/Strategic%20Framework%20.pdf>

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Anju Talukdar  
Executive Director  
MARG

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<b>LIST OF ABBREVIATIONS</b>	
<b>ACP</b>	<b>Assistant Commissioner of Police</b>
<b>FGD</b>	<b>Focus Group Discussion</b>
<b>CAW</b>	<b>Crimes Against Women</b>
<b>PCR</b>	<b>Police Control Room</b>
<b>SHO</b>	<b>Station House Officer</b>
<b>SOP</b>	<b>Standard Operating Procedure</b>

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## EXECUTIVE SUMMARY

### PURPOSE OF THIS STUDY

Several studies world over including recent ones undertaken<sup>1</sup> in Delhi, show high levels of sexual harassment faced by diverse women at all times of the day and night, along with low reportage. In this context, this study was designed to understand the nature of police response at the first point of contact, namely the helpline. The aim of this study is to **build upon the earlier research** to specifically understand women's experience of and **response from police helplines** and how **police helplines can be strengthened** to facilitate relief and provide support.

### METHODOLOGY

The methodological tools used were:

- Desk review,
- Interviews/ questionnaires (13 police officials and 30 working women from various professions),
- Random survey (140 women),
- Focus group discussions (7 groups of women) and
- Direct observation (of police helpline processes)

### PERIOD OF STUDY

The study was conducted from 1st August 2012 to 30<sup>th</sup> November 2012.

### AREA OF STUDY

The study was conducted in Delhi.

### KEY FINDINGS

*Interviews with various officials in the PCR system revealed:*

- The call takers see their job as limited to receiving calls and transferring the data to the local police and the PCR van.
- There is no manual or guide detailing the standard operating procedures.
- Call operators have difficulty in communicating with callers who are not fluent in Hindi.
- There is no female staff in the PCR van at any point of time.

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<sup>1</sup> Jagori, UN Women, Department of Women and Child Development, Delhi Government, (DWCD), New Concept; 2010

- No feedback is taken from callers to check the quality of the service.
- Although all calls are recorded, they are not examined later to check the performance of call operators.
- Cases are not tracked to check on adequacy of interventions made by the police.
- The staff at the helpline are moved and transferred regularly.
- Some police officials feel it is wrong for women to come out after dark and carry other similar ideas about where and when women should be out.

### *Women and Police Helplines: Needs and Perceptions*

Interviews, surveys and FGDs with a cross-section of women including domestic workers, sex workers, slum dwellers, expatriates, women with disabilities, women from northeast states, homeless women, lawyers, doctors, nurses, etc. revealed:

- Over 50% have not heard of the women's helpline.
- Most preferred a single helpline number.
- Among those who have approached the police helpline, almost all have reported either a very slow response or no response at all.
- Most feel that approaching the police for help is ineffective and prefer to turn to family and friends to deal with harassment in public places.
- Homeless women are especially vulnerable due to the complete absence of any shelter. They are routinely subject to sexual harassment and get no protection from the police.
- The experience of sex workers is that on account of their profession, the police do not help them; and when they do, they often demand bribes or sexual favours.
- Women with hearing disability find it difficult to communicate their problems verbally or even by sms. Only technology allowing them access to sign language (e.g. 3G mobiles) can serve as effective helplines for them.
- Women from the northeast and other countries face linguistic barriers in communication as the operators find it difficult to understand them.

## **RECOMMENDATIONS**

### *Monitoring Mechanism*

- All calls should be reviewed to check the performance of the call operators. Cases should be tracked to check on adequacy of interventions made by the police.
- Regular performance appraisals of helpline staff.
- Appropriate disciplinary action against helpline staff for inappropriate/inadequate response amounting to negligence or dereliction of duty.
- Systematic feedback, either of all callers, or of callers selected by random sampling.
- A grievance redresses mechanism for processing complaints by designated authorities.



### *Training*

All levels of PCR staff as well as personnel in police stations require training on:

- Gender sensitization, understanding violence and its impact upon women
- Concerns of particularly vulnerable women (e.g. women with disabilities, sex workers, homeless)
- Capacity development and communication skills to deal with sexual abuse and sexual harassment cases

Helpline staff needs additional training on:

- Understanding their role and responsibilities, which go far beyond mechanically receiving calls and transferring the matter to the PCR Van
- Language skills - familiarity with various accents of spoken Hindi and English and
- Communication skills - how to communicate with sympathy and give the woman in distress a sense of comfort and confidence

### *Procedures*

- A comprehensive manual or guide should be prepared detailing the standard operating procedures of the helpline, roles and responsibilities, Do's and Don'ts. This should include information about procedures to be followed, forms to be filled, monitoring mechanisms and documentation.

### *Helpline staff*

- Recruitment of staff who are trained to assist women in distress
- Recruitment or engagement of persons proficient in other languages common in Delhi
- Recruitment of female staff for PCR vans.

### *Infrastructure/Technology*

- Advanced technology to trace location of survivors.
- Special technology to effectively assist women with hearing and other disabilities.

### *Public Awareness*

Majority of women do not know about the 1091 helpline. Mass media should be used to spread awareness.

### *Policy Reform*

- One helpline number instead of a multiplicity of helplines.

- Creating a specialized and dedicated staff to run the PCR, so that there are no disruptions/loss of learning due to frequent transfers.
- As the role of call takers is more that of counselor/effective communicator, non-police personnel can also be part of this process.
- A more robust coordination between agencies, not limited to only taking survivors to Government hospitals for medical treatment. The Legal Services Authorities, Delhi Commission for Women, the Samajik Suvidha Kendras and other agencies should work closely with the helpline for following up on cases and providing support.
- Homeless women are most in need of access to protection, but have no access to helplines. An instrument may be installed in shelter homes and convenient locations for their free and easy use.

# CHAPTER 1

## INTRODUCTION

The rapid urbanization taking place world over has once been accompanied by increasing safety and security concerns for women. Cities are witnessing increasing vulnerability and exclusion of sections of its population, particularly those that are already at a disadvantage, either due to their gender, ethnicity, class, migrant status, differently-abled status or sexual orientation. This vulnerability is visible in the fact that such groups are unable to access or enjoy the assets and benefits of the city, including their 'right to the city' and are thus forced to compromise on their quality and dignity of life. Women particularly continue to experience different facets of discrimination as they negotiate their movements in the public space in the city, particularly gendered discrimination<sup>2</sup>.

Several studies world over including recent ones undertaken (Jagori, UN Women, Department of Women and Child Development, Delhi Government, (DWCD), New Concept; 2010) in Delhi, have shown how women's ability to participate in the everyday life of the city - whether to study, work, engage with public works and move around without any fear of violence - is presented with huge challenges. The intersection of gender with other vulnerabilities (class, migration, location, age, disability, ethnicity etc.) makes access to public spaces difficult and is fraught with risks thereby preventing women and girls from freely experiencing the city. Amid the several marginalities and violations faced by women, it has been noted that gender based violence is present at various levels beginning with discrimination at birth, further perpetuated through discrimination in education, nutrition, employment, wages and direct/indirect acts of sexual aggression (WICI, Jagori, 2010).

The Delhi baseline survey (Jagori, DWCD, UN Women and New Concept, 2010<sup>3</sup>) undertaken of more than 5000 residents (men and women) in the NCT region (all 9 districts), covering a geographically wide area and a large sample base, highlighted a wealth of information related to: typologies of harassment, vulnerability of women particularly amongst the younger women, ways of dealing with harassment while traveling, and innovative responses to deal with harassment situations, including support from family and friends, etc. It also highlighted some disturbing trends as women negotiate the city on an everyday basis:

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<sup>2</sup> Gender Inclusive Cities report, WICI, JAGORI 2010

[http://www.endvawnow.org/uploads/browser/files/understanding\\_womens\\_safety.pdf](http://www.endvawnow.org/uploads/browser/files/understanding_womens_safety.pdf)

<sup>3</sup> Baseline Survey - [http://Jagori.org/wp-content/uploads/2011/03/Baseline-Survey\\_layout\\_for-Print\\_12\\_03\\_2011.pdf](http://Jagori.org/wp-content/uploads/2011/03/Baseline-Survey_layout_for-Print_12_03_2011.pdf)

- Women of all classes have to contend with harassment as part of their daily lives. School and college students in the 15-19 age-group and women workers in the unorganized sectors are particularly vulnerable.
- Harassment occurs during day and night and in all kinds of public spaces, both secluded and crowded.
- Public transport, buses and roadsides are reported as spaces where women and girls face high levels of sexual harassment.
- The most common form of harassment reported is verbal (passing comments) and visual (staring and leering) and physical (touching/groping, leaning over etc)
- Almost two out of every three women reported facing incidents of sexual harassment between 2-5 times in the past year.
- Three out of every five women reported facing sexual harassment not only after dark but through the day time as well.
- The burden of ensuring safety remains upon women. They try to ensure their own safety by not visiting certain places, staying indoors after dark, maintaining a dress code, and carrying pepper spray and safety pins, etc.
- Only 1% women reported incidents of sexual harassment to the police.

## **PURPOSE OF STUDY**

This study deals with the response of institutions to safety of women in public places in Delhi. It does not focus on violence against women within their homes. This is not at all to say that women are safe in private spaces or that an effective helpline for women cannot also cater to domestic violence. The aim of this study is confined to understand the particular safety issues women face in public spaces, and how a helpline, particularly a police helpline, can facilitate relief and provide support.

This study is an assessment of the functioning of police helplines, and seeks to:

- Examine the dangers women face in public spaces and the particular problems faced in getting assistance in the event of any incident
- Study the processes followed by the police in their various helpline numbers for women, with particular reference to '100' and '1091'
- Highlight the criteria for an effective helpline
- Look at best practices in other helplines
- Make recommendations for strengthening the current helpline/s.

## **METHODOLOGY**

The study followed the following methodological tools:

### *Desk review*

Literature available on various helplines were studied to determine criteria for effective helplines as well as to identify best practices.

### *Interviews, questionnaires*

Interviews were held with 13 police officials connected with the helpline numbers '100' and '1091'. 30 working women from various professions, particularly those living in hostels, were also interviewed.

### *Survey*

Around 140 women were covered in a random survey to explore familiarity of the general public (women in particular) with police helplines.

### *Focus Group Discussions*

7 focus group discussions were held with various sections of women: homeless, domestic workers, sex workers, women with disabilities, expatriates living in Delhi, slum dwellers and women from northeast India living in Delhi.

### *Direct Observation*

The actual process of receiving calls made to '100' and '1091' were observed in the Police Control Room, Police Headquarters, New Delhi.

## **PERIOD OF STUDY**

The study was held from 1st August 2012 to 30<sup>th</sup> November 2012.

## **AREA OF STUDY**

The study was conducted in Delhi.

## CHAPTER 2

### CRITERIA FOR AN EFFECTIVE HELPLINE FOR WOMEN

In the context of safety of women in public places, a helpline is an emergency management tool to provide adequate support without delay to women in need of assistance. Adequate support would include the securing the immediate physical survival of the woman, mitigating the trauma, and referring her to the relevant institutions/support systems for recovery and rehabilitation.

**A helpline for women should ideally have the following characteristics:**

#### **Easy Accessibility**

The service should be widely known and easily accessible to each and every citizen. As such the needs of all sections of the population have to be kept in mind. For example, women with hearing disabilities cannot access helplines that only allow for auditory communication. The absence of the technology to facilitate visual communication excludes this group of women entirely. Homeless/destitute women cannot be presumed to have telephones to make calls. Survivors of violence may find themselves in areas without easy access to a phone. Arrangements have to be made so that in any given geographical area there are also points identified and arrangements made for making calls.

#### **Skilled call takers/operators**

Call takers should be able to listen to the callers patiently, respectfully and with a degree of care. Survivors seeking help should never be asked to offer proof of the violence they have suffered. It is important that care providers listen carefully, convey that they believe the survivor and respond with the utmost respect and without prejudice.

Helpline call takers cannot confine their work to mechanically receiving calls and making data entries. In serious cases of violence, the helpline call operator is usually the first point of contact for the survivor. An insensitive or even apathetic response can be damaging. The call taker can also play a critical role in giving encouragement and survival tips, which can sometimes make all the difference. The call taker also sets the official process for intervention in motion. Obtaining and transmitting the correct information become a particular responsibility.

#### **Procedural guidelines, staff appraisal and training**

Procedural guidelines or a training manual should be available laying down clearly the role of helpline operators, standard operating procedures, dealing with serious cases, do's and don'ts, etc. Staff needs to be trained on procedural and attitudinal aspects, so that they are not only

equipped technically but are sensitive to gender issues and gender based violence. Regular staff appraisal will improve overall performance.

### **Locating survivors/assistance seekers**

Locating the woman requiring assistance can be a challenge particularly where the caller is unable to describe the location. The onus cannot be entirely on the caller. Detailed information on the geography of the area covered by the helpline should be available digitally or otherwise to the helpline operators (call takers, personnel in PCR Vans). GPS enabled mobile phones make this location of callers easier, but this cannot be expected in all cases.

### **Prompt response**

The purpose of helplines is to activate the response mechanism immediately in case of emergencies, without the caller having to take recourse to the normal procedure of first reporting the matter to the police station. The time taken will vary from case to case depending on distance to be covered, making it difficult to prescribe a time limit. But a clear standard can be that of “prompt, without delay”, accounting only for time needed for the PCR Van to physically reach the spot.

### **Feedback mechanism**

Systematic feedback from helpline users will provide inputs for the system to keep improving. If not all, some callers should be approached by random sampling for feedback on service provided and suggestions for improvement.

### **Grievance redress**

A grievance redress mechanism is essential: with a formulated point of receiving/registering complaints, processing complaints by designated authorities within reasonable timeframes, responding to the complainant and making the redress mechanism visible.

### **Confidentiality**

Confidentiality with reference to call makers and women on whose behalf calls are made has to be strictly maintained. Third parties cannot have access to information regarding them without due authorization from designated police personnel.

### **Non-discrimination**

Helpline operators at all stages need to respect the diversity of service users and apply a non-discriminatory approach. The same level of quality of care/response should be available for all persons regardless of their gender, age, race/ethnicity, ability, sexual orientation, HIV status or

any other characteristic. Helplines must be fully accessible to all and take into account special needs of any section.

### **Coordinated response**

The protection and needs of women survivors of violence should always be at the centre of helpline services. Depending on the context, this may involve medical, psychological, legal and other aspects. As such services from relevant agencies need also to be set in motion so that the woman can get all the help available at the earliest juncture. For example, in cases involving sexual assault, the various aspects of medical assistance, evidence collection; counseling and legal assistance should all be made available at the earliest.

### **Documentation**

Data regarding each case has to be systematically recorded and updated. Continuous collection of data and compilation of statistics are necessary to evaluate, further develop and improve the helpline's response to survivors of gender-based violence. However, this has to be seen in context, with priority given to the well being of survivors and the delivery of services, over data collection or any other secondary objectives.



## CHAPTER 3

### POLICE HELPLINES: PROCESSES

The Police Helplines (100 and 1091) were observed and 13 helpline officials interviewed. These include 2 call takers of 1091, 5 call takers of 100, 1 Assistant Commissioner of Police who is in charge of the Police Control Room (PCR), 3 PCR van officials and 2 Station House Officers. All persons connected with the police helplines are police officials assigned to work with the helplines.

#### **Structure of Helpline Services**

The PCR system is divided into various branches having distinct functions:

**Call Taker:** Call taker receives the call and registers it in the computer (with preinstalled software especially for registering the complaints provided by HCL). The call taker puts all the required information in the system and indicates the seriousness of the case by categorizing it as 'high', 'low', 'mild', 'medium' etc. This 'challan' (receipt of case) is sent to dispatcher & command room, from where the case is informed to the respective Control room of a district, local police and PCR Van simultaneously.

**RAX:** RAX (Rapid Action Unit) oversees call takers and assists them in case of difficulty regarding calls. It is a supervisory unit of PCR. All the challans which are registered by the call taker are screened by the unit. They also keep a tab on action taken on a case through wi-fi dispatchers. The RAX also closes the challan after action is taken (i.e. when PCR Van sends report of handing over the complainant to the local police).

**Dispatcher:** Dispatcher is a wi-fi communication unit which sends survivor's information to the concerned local police, district control room and PCR Van. It is a communication system which dispatches communication regarding the cases received through call takers.

**Command Room:** Command Room is another unit where the ACP is the officer in charge. Its function is to monitor heinous crimes, and inform the 'Special Unit for Woman and Child' of Delhi Police in serious cases of crimes against women. In emergency situations, the officers can directly talk to top officials e.g. in cases of terror attacks they can talk directly to the Home Minister for further action.

**PCR Van or bike:** After the call taker sends the challan to the dispatcher, it sends information to the PCR Van/bike. Then on the basis of information received, PCR Van/bike reaches the spot. Survivors are taken for medical treatment and the matter is handed over to the local police station for further investigation and action.

**ACD (Automatic Call Distribution):** This is a computer related technical unit which is responsible for maintenance and quick response in case of any technical failure in computers or network.

**Console system:** The console system is a reporting module which keeps all computers in connection with each other, i.e. when call taker registers the complaint in the computer, this console system keeps them in intra link through displays and input devices.

**CAT Ambulance:** In case of any medical emergency, dispatcher sends CAT ambulance to the spot.

#### **Box 1: INTERVIEWS WITH CALL TAKERS OF HELPLINE '100'**

Interviews with 5 call takers of the police helpline 100 revealed:

- All calls relating to women are referred to the women's helpline 1091.
- The '100' call takers have a clear understanding of structure of PCR.
- They have difficulty in communicating with callers who are not fluent in Hindi.
- They felt that there was no shortage of staff.

*Suggestions made by the interviewees:*

- *There should be a specialized staff dedicated to PCR (as of now transfers take place regularly).*
- *One helpline number for all issues instead of multiple helpline numbers.*
- *Creating a computer database of all numbers relating to helplines, service providers (NGOs, shelter homes etc) for quick and easy delivery of information.*

#### **Box 2 : INTERVIEWS WITH CALL TAKERS OF HELPLINE '1091'**

Interviews with 2 call takers of the police helpline 1091 revealed:

- The call takers see their job as limited to receiving the calls and transferring the same to local police as well as to PCR van. There is no perception of the importance of providing emotional support or encouragement.
- The call takers were not strong in communication skills. They expressed inability in dealing with callers not comfortable in Hindi.
- They are not provided regular training.

- Receiving distress calls on a regular basis leads to stress.

*Suggestions made by the interviewees:*

- *Creating a computer database of all numbers relating to helplines, service providers (NGOs, shelter homes, etc) for quick and easy delivery of information.*

**Box 3 : INTERVIEW WITH OFFICER IN CHARGE (PCR): ACP JITENDRA MANI**

An interview with the officer in charge of the PCR revealed:

- There is no case tracking system to follow up on outcome of cases.
- The operators are trained in Hindi and English. There is no expert available in any other language.
- Call records are saved for 3 yrs or maximum 5 yrs, after which they are destroyed. Anyone can seek information on calls through an application under the Right to Information Act.
- Problems in running the PCR include (i)prank calls (ii) frequent transfers.
- Perception in PCR that police in local thanas are not fully aware of relevant laws and procedures.

*Suggestions made by the interviewee:*

- *Training is needed for PCR staff on technical aspects as well as communication and behaviour.*
- *More employees are needed in 1091.*
- *Female police officers should be deployed in PCR van.*
- *Transfers should not be frequent as this disrupts work and affects efficiency.*
- *More advanced technology needed to trace location of survivors.*
- *Officials trained in other languages needed.*
- *Special technology to deal with disabled women.*

**Box 4 : INTERVIEWS WITH PCR VAN OFFICIALS**

Interviews with 3 officials present in a PCR revealed:

- There is no female staff in the PCR van at any point of time.
- They were clear about their roles and duties: to provide quick relief if a person is hurt,

and to safely hand over the victim to the local police in cases of emergency.

- They are not given any kind of communication devices except the wireless set (which is used only for contacting the PCR). So if calls have to be made to the survivor, they have to use their personal mobile phones.
- Some of them said that it is wrong for women to come out after dark as 'decent' women don't do such things.
- The back seat of the PCR van is not designed to accommodate a person with serious injuries as there is no place for the person to be stretched out.

*Suggestions made by the interviewees:*

- *Female staff should be recruited for PCR van.*

#### **Box 5 :INTERVIEW WITH STATION HOUSE OFFICERS**

##### **INTERVIEW WITH STATION HOUSE OFFICER (BADARPUR POLICE STATION)**

Interview with SHO Akhilesh Yadav revealed:

- The Badarpur P.S. usually gets 25-30 calls per day from the PCR.
- Most of the calls are either untraceable or involving petty offences e.g. chain snatching, pick pocketing.
- They usually reach the spot in 5 to 10 minutes. However, by the time they reach the particular location from which the call has been made, there is no one to be found.
- There are sufficient lady police officers and at least one lady officer is always there for assistance in every shift.
- The survivors are sent to the nearest Government Hospital and some NGOs such as Prayas, Prayatna, for medical and legal counseling respectively.

*Suggestions made by the interviewee:*

- *The public should come forward and assist women facing harassment.*
- *Merely strengthening policed helplines will not bring change in society unless societal attitudes change.*

##### **INTERVIEW WITH STATION HOUSE OFFICER (MALVIYA NAGAR POLICE STATION)**

Interview with SHO Anil Kumar revealed:

- The role of police starts as soon as they get a call from PCR van.
- There is no specified procedure, but the police acts promptly as soon as they get a call.
- When they come across any women in distress in public places, they refer her to NGOs.
- It takes minimum 5-10 minutes to reach the spot, depending on proximity.
- There are 10 lady police officers in the police station which was said to be sufficient.
- For legal and medical help, survivors are sent to NGOs and Government Hospitals respectively.
- At times the survivor does not cooperate; sometimes malicious allegations are made due to personal vendetta.

*Suggestions made by the interviewee:*

- *Education system should be incorporate gender education in schools.*
- *'Pub culture' should be stopped.*
- *Alcohol should be banned at public place as it is one of the reasons of violence against women at public places.*

**Box 6 : INTERVIEWS WITH OFFICIALS IN CRIME AGAINST WOMEN (CAW) CELL , NANAKPURA**

Interviews with ADCP Suman Nalwa and her staff revealed:

- An all-women police mobile team is available round the clock at the CAW Cell to attend to distress calls received through the helpline 1091 or directly.
- CAW team receives continued training in dealing with distress calls, and are equipped both to initiate criminal action and to provide counseling and other assistance. The team also provides links to emergency support services such as shelters and short stay homes, besides offering on the spot counseling and legal advice in urgent cases.
- Only in heinous cases (e.g. rape, suicide, burns) CAW provides help.
- Coordination is done with the local police as well as the survivor.

- The CAW Cell has only one vehicle round the clock for the whole of Delhi.
- There is also shortage of staff.

*Suggestions made by the interviewees:*

- *Increase in number of vehicles.*
- *Increase in staff strength.*

### **Guide/Manual on Standard Operating Procedures**

There is no Manual or Guide detailing the standard operating procedures for the police helplines. All those interviewed in the PCR said that continuous transfers and the absence of a written manual meant that they had to depend entirely on assistance from senior officials to understand their role and procedures.

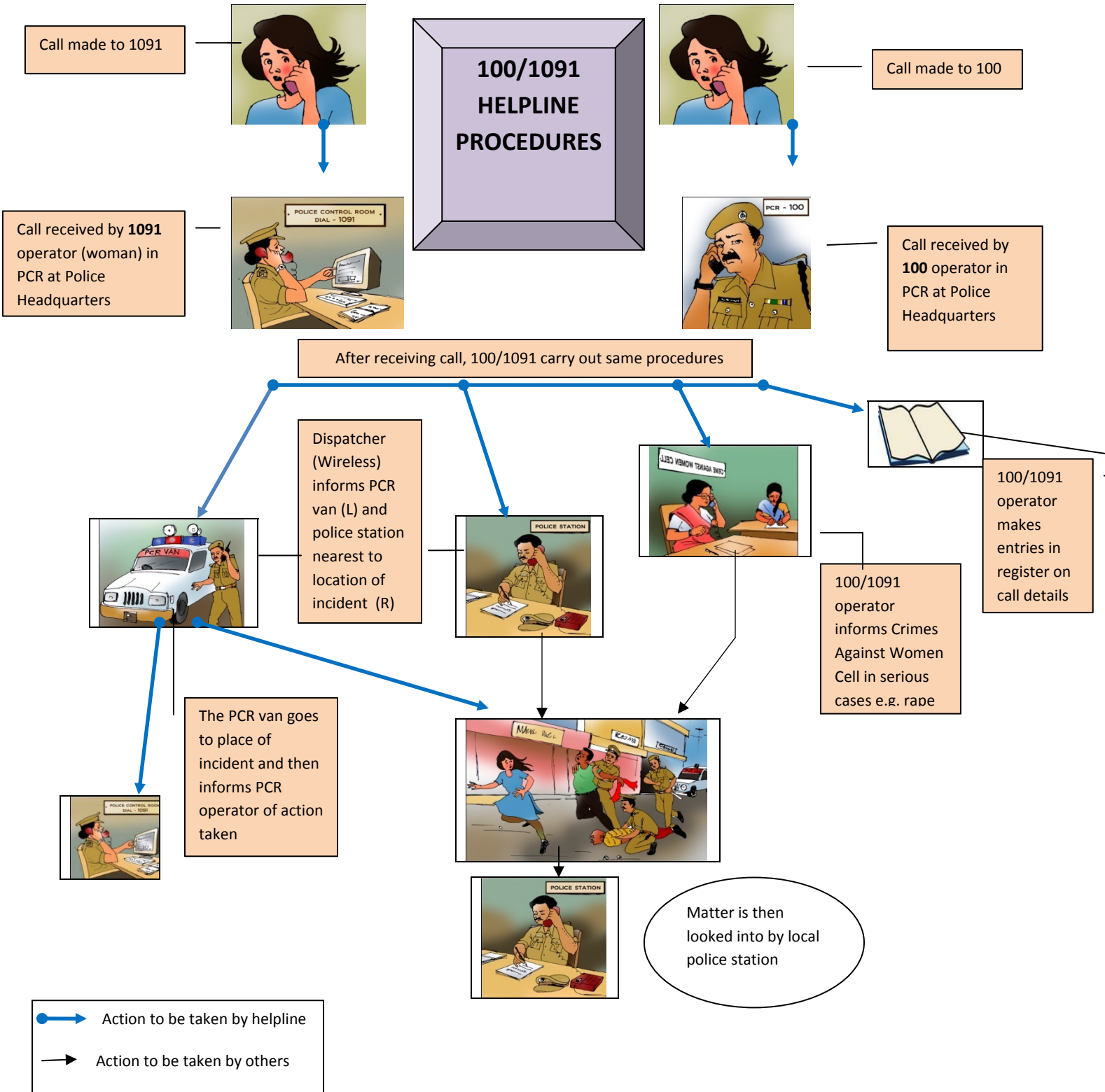
### **Feedback and evaluation**

No feedback is taken from callers to check the quality of the service and suggestions for improvement. Although all calls are recorded, they are not examined later to check the performance of the call operators. Cases are not tracked to check on adequacy of interventions made by the police. There is no regular inspection of PCR Vans (some of which were observed to be in a rundown condition).

### **Standard Operating Procedure**

- To take information from the complainant.
- After identification of the complainant, the complaint is registered in the computer system.
- The matter is sent to Command room.
- The command alerts the PCR Van and the local police station. In serious cases, the CAW Cell is also alerted.
- The PCR Van, local police station, and in necessary cases the CAW van, proceed to the location.
- Where necessary, the survivor is sent for medical treatment to a Government hospital.
- The matter is then left to the local police station for further action.
- The PCR Van informs the call operator of action taken.
- This is entered in the register.

# 100/1091 HELPLINE PROCEDURES



## CHAPTER 4

### POLICE HELPLINES AND WOMEN: NEEDS AND PERCEPTIONS

#### WORKING WOMEN LIVING IN HOSTELS

30 working women from different parts of India staying in various working women's hostels (Mirdula Sarabhai Working Women's Hostel, JMI, Jamia Nagar and Adya Jha Hostel for Working Women, Safdarjung Development Area, Hauz Khas) were interviewed. The profile of these women include architects, engineers, nurses, lawyer, doctors, scientists, etc. Age varies from 22 years to 35 years.

Questions included the problems they face in public places in Delhi; the steps taken by them to minimize the risks; factors responsible for making Delhi an unsafe city; their interactions (if any) with the police helplines; and suggestions for making this city a safer one for women.

Their interviews revealed:

- Common problems faced by women at public places are obscene comments passed by men, attempts by men to grope
- 96% said that they felt vulnerable at certain public places e.g. bus stands, metro stations, dark lonely alleys and shady markets. After sunset they felt vulnerable no matter what the place
- When faced with harassment in public, most women turned to their friends and female colleagues. Only 3 respondents had used the helpline (100) during an emergency situation. Only one respondent was satisfied with the relief provided.
- Around 53% were unaware of any police helpline for women
- 24 out of 30 respondents preferred a one number system as being safer and easier to remember.

#### RANDOM SURVEY OF WOMEN

The purpose of random survey of women was to gather quantitative data on awareness and usefulness of women's helplines. Badarpur and Malviya Nagar were two areas selected for random survey.

Badarpur is a town in South Delhi district in Delhi, at a distance of 17 km in south east. Situated close to its edge with Haryana state, Faridabad district, the area is commonly known as "Badarpur Border". Its surrounding areas are Jaitpur, Molar Band and Molarband Extension, Mithe Pur (Mithapur), Jasola, Surajkund and Tughlaqabad. The crowded areas of Badarpur



metro station and the Molarbund areas were selected for the survey. A total of 50 women were surveyed who varied in age from 18 to 60 years. They were asked about their knowledge of and experiences with the 100 and 1091 helplines.

- 95% know about 100 helpline.
- Only 44% know about the 1091 helpline.
- 8% have used a police helpline. None of them were happy with the service for reasons ranging from: PCR van not reaching on time, the legal complications regarding any complaint.
- 95% said police helplines are useful provided they actually turn up in an emergency.

Malviya Nagar is a locality in South Delhi. It is between Saket and Hauz Khas and close to IIT Delhi. It is serviced by the Malviya Nagar station of the Delhi Metro. Malviya Nagar is also home to Delhi Police's Training School. The survey was conducted in the Main Market, metro station and also certain residential pockets. Around 90 women were surveyed of ages ranging from 18 to 45 years. The heterogeneous group comprised of students, home makers, government employees, lawyers, BPO employees, domestic workers, teachers, etc.

- 88% respondents know about the 100 helpline.
- 61% women know about 1091 helpline.
- Almost 29% sought help from the police helpline. Out of this only 12% said they were satisfied with the service.
- 60% believe such helplines are useful and really contribute in making Delhi a safe city.

## HOMELESS WOMEN

A focus group discussion (FGD) was held on 30<sup>th</sup> October, 2012, with 15 homeless women ranging from 15 years to 65 years living in the Nizamuddin area. They are all illiterate women coming from different parts of India, primarily West Bengal and Assam. They all have migrated to Delhi in search of better livelihoods. The FGD was organized with help from Ashray Adhikar Abhiyaan (AAA).

The women they said that they always feel unsafe and vulnerable as they have no shelter. Sexual harassment occurs often, and they feel they have no option but to bear it. Even the old are not spared. *“Here even if someone harasses a girl, people laugh but don’t help.....they just watch the spectacle. Even if a woman is getting raped, or stabbed or beaten or killed, nobody says a word.”*

The absence of basic amenities aggravates the problem. They at times face abuse even when relieving themselves at night. A constant fear grips these women. *“Sometimes even when we*

*relieve ourselves, people stand and watch. We can't protest because they have blades with which they can attack us. Many times we have called the police. Sometimes the police come, but by the time they do, the culprits escape. Then the police ask us about the culprits, but how do they expect us to know them....then the police try to explain to us that we should be more careful."*

All the women have heard about 100, but not 1091. Since they stay near the Nizamuddin Police Station, they feel more comfortable to go to the thana rather than calling 100. Besides, they do not all have mobile phones. *"We are very near the police station and chowki, so why should we call 100, we go there and tell them. But they tell us to go away and don't take any action."*

There is a strong sense among the women that the police are not for them at all. *"Here a girl was raped and we all went together to report the case to the police. The police caught the culprit, took him away, and after taking money from him, set him free."*

## **DOMESTIC WORKERS**

An FGD was held, on October 21, 2012, with a group of 21 women domestic workers. The age group ranged from 24 years to 55 years. They are from south-, southeast-, central- and East Delhi. The NGO Chetnalaya facilitated the FGD.

The entire group believed that women are never safe in public places. Bus stands and metro stations are particularly unsafe. Men in cars and bikes often stare at them, at times make obscene gestures and offer them lifts in their vehicles. One participant was teased and followed even on the way to the FGD. Even vendors do not spare them and pass comments and try to touch the women on some pretext or other. Domestic workers feel that because of their job, they are deemed to be easy targets.

There is a strong sense among them that dialing 100 or 1091 does not serve any purpose. There is deep distrust of the police. They prefer dealing with matters on their own. In one incident, a man groped one of the participants while she was travelling by bus. When she slapped him, he threatened her with dire consequences. She then told him that if she calls 100, the police will come at once. This only made the man laugh. As she herself did not really believe in the efficacy of the helpline, she did not take the matter further.

The overall sentiment was voiced in the comment, *"We don't call 100 because the police don't work."* In another incident, a participant said, *"I was standing at the Chattarpur bus stand when a man began harassing me. I called 100 but the police did not show up even after half an hour although the Chattarpur Police Station is nearby. The police then told me to go to Saket police station. By this time I was standing with my slipper in my hand to ward off the eve teaser. No one helped me. I then decided to go to Saket and got into an auto. Then another man got into*

*the auto with me and insisted that he would drop me to Saket. He said it was very late and would give me money to go with him. I then got off the auto and went home instead. After 2 hours the police called me up and said 'we are here, where are you?' I told them I did not need their help anymore. They again called after 2 days asking what help I need. I once again said I do not need their help anymore."*

Only one of the participants had a more positive experience with the helpline (100) as the PCR van reached the spot and she was provided help.

*Suggestions made by FGD participants:*

- *Police should respond more promptly.*
- *There should be more PCR vans especially in dark, isolated places.*
- *More buses for ladies.*

## **WOMEN SEX WORKERS**

An FGD was held with 15 women sex workers of Sultanpuri area. Their age group ranged from 30 years to 45 years. The FGD was facilitated by Drishtikon.

Majority of the women are from a particular community among the Sikhs called "Sikli". They are mostly married women with children. Over the years sex work has become a family profession for the women of this community. They frequently face harassment in public places, but being involved in a profession still not legalized in India, they are afraid to approach the police. At times they even face harassment from the police themselves.

All the participants had the same opinion that Delhi is an unsafe place for women. Be it a market place or bus or auto: women are not safe anywhere.

These women feel themselves more vulnerable than other women because of their profession. They are deemed to be easily available for anybody at anytime. People in general believe that it is no crime to tease or even rape them.

With regard to police helplines, they are aware of 100 but not 1091. But their experience with the police has been discouraging. *"If you ask Police to help, they either don't help at all, or if they do help they then say 'we've done something for you now you do something for us.' In this way they demand sexual favours."*

In one case, a participant was left alone in a jungle after her customer left her stranded in a deserted area. She called the Police for help but they did not turn up. In another case, 2 of the

participants were travelling by auto. They had two thousand rupees with them. The auto driver and an accomplice tried to snatch the money. The women resisted and were beaten. *“We fought back. Then we called the police, but they did not come. We called again and this time we were told to go to the police station. When we went there they told us they would take care of the matter. We even gave them the vehicle number, but nothing has happened even after 6 months.”*

A grave problem with this group is that since they are involved in sex work, the police do not take them seriously. It is assumed that everything they do is related to sex work and hence belittled. The police do not recognize that sex workers are entitled to protection in public places.

The lack of confidence in the police is pervasive. Another participant shared the incident where she was insulted by a passerby and her husband confronted the man. An argument followed and there was soon a scuffle between them. She then dialed 100, but when the police came they took away her husband as well. She protested that he was only trying to protect her, but to no avail. The police then beat up her husband in the police station and demanded Rs. 2,500 for his release. The next day she borrowed the money and paid them to have her husband released. *“How can we trust such a police?”* she asked.

*Suggestions made by FGD participants:*

- *Police should respond promptly.*
- *Police should not be the source of harassment.*
- *They should treat sex workers at par with other women in matters of safety in public places.*
- *Women police officers should be deployed in PCR van.*
- *Police should not demand bribes or sexual favours.*
- *Helpline call takers should be sensitive to the problems of the aggrieved woman.*

## **WOMEN WITH DISABILITIES**

An FGD was held on 9<sup>th</sup> November, 2012, with 8 women with hearing disabilities. Their age group ranged from 20 to 28 years. The FGD was organized with help from the Ali Yavar Jung National Institute for the Hearing Handicapped (AYJNIHH). A sign language interpreter was present to facilitate communication.

Everyone in the group agreed that Delhi is an unsafe city, and what make things worse is that no one comes to help another in trouble. People generally tend to become mute spectators. As women with hearing disabilities, they have limited options in mobility. They all said that their

parents/ guardians do not allow them to go to public places alone. They resent this, but feel they have no choice but to accept.

Though these women use public transport occasionally, and never on their own, they believe that had there been enough safety and security for girls, even they would have felt confident enough to use public transportation without assistance. Since they cannot speak, they cannot verbally protest when someone tries to harass them. When they make sounds, people laugh at them rather than chastise the culprit.

*“We also want to roam freely like everyone else, but we are always stopped due to fear, and this is very unpleasant for us.”*

Nearly all of them felt that subways are the most unsafe place. Subways are often home to drug addicts, the walls are covered with obscene pictures, creating an atmosphere of danger. The same is the case with isolated roads. They hardly go out once it gets dark. *“We feel scared while crossing subways. Obscene words are written here and there and it is not well lit.”*

Police is perceived by this group as corrupt and inefficient. They are not aware about the women helpline (1091). If a person is hearing impaired s/he can make a call to 100/1091 just by ringing and not saying anything. Then 100/1091 returns the call. But the problem is that they can neither hear nor speak. Sending sms is an option. But the problem is that (apart from sign language), they have been only a rudimentary knowledge of English. They are not instructed in grammar and it is very difficult for them to write a sentence describing the problem.

*“Even if I send an sms to 1091, what happens if there are mistakes in an sms sent in a hurry in an emergency? What if the helpline people don’t understand me?” How will they help me if I have sent sms which has mistakes and I am not understood?”*

They find police helplines of no use to them as they cannot speak. And it is not practical to take help from other people to dial 1091/100 in any emergency. It is the way of life in Delhi that people do not help each other. What they need is a helpline that can be accessed without auditory communication e.g. through sms, where the operators are instructed on how to communicate with people with hearing disabilities.

*“Police helplines are only for hearing people.”* Besides, there is the sentiment that the police cannot be trusted. They prefer to go out with some family member or friend as a precautionary measure. But this is not always possible. Carrying a pepper spray makes them feel confident.

*Suggestions made by FGD participants:*

- *Use of 3G Mobile phones by both the caller and the call taker will allow communication by sign language.*
- *Sign language instructor should be appointed in PCR helpline who can, with the help of 3G technology, see the person and can take stock of the incident.*

- *More publicity of the Women Helpline is required.*

## **WOMEN SLUM DWELLERS**

An FGD was held on 19<sup>th</sup> October, 2012, with 18 women living in the slums of Mukundpur and Burari area. The participants were between the age group of 25-60 years. The FGD was organized in with help from Chetnalaya.

While they felt that Delhi is unsafe for all women everywhere at all times, they more frequently face harassment while using public transport. While waiting for the bus and during the commute, they routinely experience harassment by men in the form of leering, touching, etc. The public does not help, and resisting harassment leads to excuses and even rebukes such as, *“I am not trying to touch you, the bus is just so crowded it happened accidentally”, “If you are so finicky why don’t you use an auto?”*

They women expressed reluctance to approach the police due to the rough behavior of the police and their negative attitude to women. The police are perceived to be too corrupt to be of any help. *“Police do not listen to women as they do not have money to offer as bribes. So police even don’t talk or listen to them.”*

*“When we call the police, then they don’t listen. And when they do listen, they tell us not to venture out at night.”*

*“When we face harassment in a bus or auto or any public place, we feel there is no point in calling the police for help.”*

One woman narrated how she had dialed 100 when her gold chain was snatched on the streets. The PCR van reached the spot soon enough, but they harassed her with many questions. She was made to visit the thana every other day. The culprit was not caught, her chain was not recovered, and to avoid further harassment she withdrew the FIR.

Very few had heard about 1091 helpline. The few who know about it are very skeptical about its usefulness. Two participants had tried calling 1091 but was of no help.

*“Once I called 1091. At first they didn’t receive my call. I called again. Then my call was put on hold and the call taker said, “Who is disturbing us again and again”. Again my call was put on hold and nobody attended to my problem.”*

*“Once I called 1091 to help another lady. The police officer asked me to help her on my own. We got no help from 1091, and so I did what I could myself.”*

The women expressed fear for their young daughters who go out to attend school, tuitions, etc. When boys of neighboring areas tease their daughters, they try to threaten the boys saying that

they will call the police by dialing 100. The boys in turn laugh at them saying that it is useless to call police as they can always manage to escape by bribing them.

*Suggestions made by FGD participants:*

- *More PCR vans after 8pm especially for dark desolate places.*
- *Police should take extra measures to keep an eye on slum areas as the crime rate is high.*
- *Police system should be corruption free.*

## **WOMEN EXPATRIATES LIVING IN DELHI**

An FGD was held on November 3, 2012, with 5 expatriate women who are volunteers with VSO India. The participants were from the USA, UK and Philippines, from age groups ranging from 25 to 55 years.

The participants felt that harassment of women in public places betrays disrespect. And this disrespect actually leads to whole lot of crimes against women. *“Although I do not feel threatened in public places, I am made to feel uncomfortable”.*

The difference in their complexions, looks and language prompt people to stare and pass unnecessary comments. Constant staring is a common problem all expats face in public places. *“Constant staring can get really uncomfortable, and because of its consistency and intensity it can sort of be considered as a kind of violence.”*

Although these women try not to use public buses, sometimes they have to. Travelling in air-conditioned buses which are not very crowded is somewhat hassle free. But during peak hours when buses are overcrowded, sexual harassment in the form of touching, leaning over is common. As foreigners they become objects of curiosity in the bus.

The expats believe that it is always better to take precautionary measures while going out in Delhi. Their Do's include:

- Try not to be alone especially at night.
- Carry a mobile phone all the time.
- Dress conservatively covering the body as much as possible.
- Avoid eye contact with men at public places.
- Keep emergency numbers ready in mobiles.
- Avoid lonely deserted roads.

They also make it a point to look confident. *“If you look lost, you become an easy victim. Confident body language works as deterrence.”*

One of the participants had used the 1091 helpline. She was getting calls from an Indian man every night who was insisting on her meeting him. Then she gave his number to the women's helpline. This was effective as she did not get any calls from the man after that. The only problem was that the helpline call taker and she had to struggle to communicate due to language barrier. The same language problem was felt by another participant when she dialed the police helpline number when she lost her way.

*Suggestions made by FGD participants:*

- *Police should be gender sensitive and have a real understanding of the violence affecting women.*
- *Recruiting more women police is a good option.*
- *Bus drivers, conductors should be sensitized and educated as to safety of women and the problems they face in crowded buses.*

## **WOMEN FROM NORTHEAST INDIA LIVING IN DELHI**

An FGD was conducted by Jagori with people from northeast India. A part of the discussion was on the police helplines. The group consisted of 3 women and 6 men of age group 20 years-35 years. It was a mixed group of college goers and professionals from different fields.

The participants said that women from northeast India face harassment such as leering, attempt to grope, etc. Passing comments is frequent and they are often derogatorily called 'chinky'. They are perceived to be 'easily available'. They believe that such type of behavior is meted out to them because they look different, and since they dress differently. But one of the participants said that even if they wear traditional Indian clothes, still they face such the same harassment.

With regard to police helplines, the one major barrier they face is in communicating with the call taker, be it 100 or 1091, because the call takers cannot understand either their Hindi or English. So they do not consider the helpline to be of much use.

A participant had once dialed 100 as she was being harassed by the auto driver. But the PCR van reached almost after half an hour, by which time the auto driver had left.

*Suggestions made by FGD participants:*

- *Training of call takers in English.*
- *Systematic feedback option.*
- *Orientation of the call takers as far as violence against women in public places is concerned.*
- *More prompt action by PCR team.*



## CHAPTER 5

### STUDY OF OTHER HELPLINES FOR BEST PRACTICES

In 1996 Childline was launched, the country's first toll-free tele-helpline for street children in distress. As of March 2011, total of 21 million calls have been serviced by Childline which operates in 210 cities/districts in 30 States and Union Territories through its network of 415 partner organizations across India. In the beginning, a call coming from South Delhi used to be attended to by a phone in South Delhi, but now all the calls coming from any of the 4 zones of India are attended to in a centralized call centre in Mumbai. In the call centre, all the calls are recorded and archived and analyzed.

#### **Some standard procedures**

All the processes and activities of Childline are not dealt with below. Only those practices that may be suitable for replication are highlighted:

#### *Recruitment*

There are standard qualifications for call agents (master or bachelor degree holder), and written specifications on how many team members will go to handle a crisis situation.

#### *Training*

In-depth training is provided on:

- Types of cases call agents will have to attend to.
- Procedures on how to handle cases (e.g. call agents are trained to respond within 3 rings of the call, they refer to themselves as 'didi' or 'bhaiya' to make the child feel comfortable).
- How to coordinate with other authorities (e.g. District Magistrate).

All Childline India work force are provided with a yearly training. It is held at the zonal level where a mela of 4-5 days is organized. This is also an opportunity for partners to participate as coordination and among them is essential.

#### **Childline Advisory Board (CAB)**

This body comprises of government officials, NGOs, corporates and concerned individuals. The key functions of the CAB are to review the functioning of Childline and suggest measures to enhance the service e.g. through reviewing calls received and response strategies, to oversee whether there is coordination between government departments and NGOs in responding to the children in need of care and protection, etc.

**Awareness programmes**

Mass awareness is created through advertisement, street plays, etc.

**Quality Assurance**

To maintain quality in Childline India, the organization has set up a unit to review each and every call.

#### Criteria for an effective helpline for women

- Easy Accessibility
- Skilled call takers/operators
- Procedural guidelines, staff appraisal and training
- Locating survivors/assistance seekers
- Prompt response
- Feedback mechanism
- Grievance redress
- Confidentiality
- Non-discrimination
- Coordinated response
- Documentation

#### Police helpline processes: Standard Operating Procedure

- i. To take information from the complainant.
- ii. After identification of the complainant, the complaint is registered in the computer system.
- iii. The matter is sent to command room.
- iv. The command alerts the PCR Van and the local police station. In serious cases, the CAW Cell is also alerted.
- v. The PCR Van, local police station and in necessary cases the CAW van proceed to the location.
- vi. Where necessary, the survivor is sent for medical treatment to a Government hospital.
- vii. The matter is then left to the local police station for further action.
- viii. The PCR Van informs the call operator of action taken.
- ix. This is entered in the register.

On the basis of information received, PCR Van/bike reaches the spot. Survivors are taken for medical treatment and the matter handed over to the local police station for further investigation and action. The PCR van officials inform the call taker of the action taken. The call takers enters the information in a register.

Interviews with various officials in the PCR system revealed the following:

- They are aware of their roles and procedure to be followed. The call takers see their job as limited to receive the calls and to transfer the same to local police as well as to PCR

van. There is no any perception of the importance of providing emotional support or encouragement.

- There is no manual or guide detailing the standard operating procedures. There is no regular training for call operators. They rely on their seniors to guide them.
- Call operators have difficulty in communicating with callers who are not fluent in Hindi. The operators are trained in Hindi and English. There is no expert available in any other language.
- Receiving distress calls on a regular basis leads to stress among call operators.
- Many expressed the need for a specialized staff dedicated to PCR (as of now transfers take place regularly),
- The call operators felt creating a computer database of all numbers relating to helplines, service providers (NGOs, shelter homes etc) for quick and easy delivery of information would be very helpful.
- More advanced technology is needed to trace the location of survivors.
- Special technology is required to deal with women with disabilities.
- There is no female staff in the PCR van at any point of time.
- PCR Van officials expressed need to be given mobile phones to communicate with callers, as the wireless set alone does not allow for this.
- Some police officials felt it is wrong for women to come out after dark.
- The CAW Cell has only one vehicle round the clock for whole of Delhi.
- No feedback is taken from callers to check the quality of the service and suggestions for improvement.
- Although all calls are recorded, they are not examined later to check the performance of the call operators. Cases are not tracked to check on adequacy of interventions made by the police.

### ***Women and police helplines: needs and perceptions***

All the women felt Delhi is unsafe for women at all times but deserted areas after dark were particularly dangerous. It was universally felt that people do not help women facing harassment. Their experiences with police helplines have been positive in very few cases.

#### ***Working women living in hostels:***

- Around 53% were unaware of any police helpline for women.
- 80% respondents preferred a single number system as being safer and easier to remember.
- Most preferred to turn to their friends/relatives if they face harassment in a public place, rather than turn to the police helpline.

### *Random survey of women:*

A total of 50 women were surveyed who varied in age from 18 to 60 years. They were asked about their knowledge and experience with the 100 and 1091 helplines.

- 92% know about 100 helpline.
- 53% know about the 1091 helpline.
- Less than 10% of those who have used a police helpline were satisfied with the service.

### *Homeless women :*

- They always feel unsafe and vulnerable as they have no shelter.
- The absence of basic amenities aggravates the problem. They at times face abuse even when relieving themselves.
- They do not use the helpline as they have no phones. They go to the police station directly

### *Domestic workers:*

- They face much harassment while using public transport.
- There is a strong sense among them that dialing 100 or 1091 does not serve any purpose. There is deep distrust of police. They prefer dealing with matters on their own.

### *Women sex workers*

- These women feel more vulnerable because of their profession. The police by and large do not believe that sex workers are entitled to protection in public.
- The police either don't help them, or when they do, they often demand bribes or sexual favours.

### *Women with hearing disabilities*

- Since they cannot speak, they cannot verbally protest when someone tries to harass them. When they make sounds, people laugh at them rather than chastise the culprit.
- They are not aware about the women helpline (1091).
- Their disability makes it difficult to communicate their problems verbally or even by sms. Only technology allowing them access to sign language (e.g. 3G mobiles) can serve as effective helplines for them.

### *Women slum dwellers*

- Very few have heard about 1091 helpline.
- They received no help when they called the helpline.

*Women expatriates living in Delhi*

- They avoid public buses to the extent possible.
- They found the police helpline effective, but very difficult to make themselves understood by the call taker.

*Women from north east India living in Delhi*

- They find calling the police helplines ineffective as the call takers cannot understand either their Hindi or English.

## CHAPTER 7

### RECOMMENDATIONS

Based on the key findings the following recommendations are made:

#### MONITORING MECHANISM

- All calls should be examined to check the performance of the call operators. This can be done following the Childline model. Cases should be tracked to check on adequacy of interventions made by the police. Helpline staff should receive regular feedback on their performance.
- Regular performance appraisals of helpline staff should be conducted.
- Appropriate disciplinary action should be initiated against helpline staff for inappropriate/inadequate response amounting to negligence or dereliction of duty.
- Systematic feedback, either of all callers or of callers selected by random sampling. This will enhance the quality of the service and provide room for suggestions for improvement.
- A grievance redress mechanism should be set up with a formulated point of receiving/registering complaints, processing complaints by designated authorities within reasonable timeframes, responding to the complainant and making the redress mechanism visible.

#### TRAINING

All levels of PCR staff as well as personnel in the police stations require training on:

- Gender sensitization, and
- Concerns of particularly vulnerable women (e.g. women with disabilities, sex workers, homeless).

Helpline call takers need additional training in:

- Their roles and responsibilities, which go much beyond mechanically receiving calls and transferring the matter to the PCR Van.
- Language and communication: familiarity with various accents of spoken Hindi and English.

Training should also be held regularly, with refresher courses for experience staff. Training can be in the form of melas as is done by Childline, giving scope also for involving partner agencies and other stakeholders for interaction and better communication.

#### PUBLICATION

- A comprehensive manual or guide should be prepared detailing the standard operating procedures of the helpline, roles and responsibilities, do's and don'ts.
- Database of all numbers relating to helplines, service providers (NGOs, shelter homes etc) for quick and easy delivery of information by call takers.

## **RECRUITMENT**

- Recruitment or engagement of persons proficient in other languages common in Delhi e.g. Bengali, Sign Language.
- Recruitment of female staff for PCR vans.

## **INFRASTRUCTURE/TECHNOLOGY**

- More advanced technology needed to trace location of survivors.
- Special technology is required to effectively assist women with hearing disabilities.
- PCR Van officials need to be given mobile phones to communicate with callers, besides the wireless set.

## **PUBLIC AWARENESS**

Majority of women do not know about the 1091 helpline. Mass media should be used to spread awareness.

## **POLICY REFORM**

- Creating a specialized and dedicated staff to run the PCR, so that there are no disruptions/loss of learning due to frequent transfers.
- As the role of call takers is more that of counselor/effective communicator, it is not necessary to appoint only police officers for this task.
- Homeless women are most in need of access to protection, but have no access to helplines. They cannot be compelled to go to the police station when all others have a choice. An instrument may be installed in their locality for their free and easy use.
- Robust coordination between agencies, not limited to for taking survivors to Government hospitals for medical treatment. The Legal Services Authorities and the Samajik Suvidha Kendras should work closely with the helpline for rehabilitation of the survivor.
- Single helpline (100) instead of a multiplicity of helplines

*The greatest problem was found to be that of public perception of the police: as corrupt, abusive and ineffective. This prevents most women from approaching the helpline in the first place. They see it as serving no purpose. They prefer to either avoid public places after dark or make arrangements to go out in a group. In case of harassment, they prefer to turn to friends and family for assistance. Addressing these issues is beyond the scope of this study as it will require the broad gamut of police reforms. However, the recommendations made in this study, even if fully implemented, will suffer from this larger need for pervasive police reform.*



## ANNEXURES

### QUESTIONNAIRES

<b>JAGORI-MARG Study</b>
AN EFFECTIVE HELPLINE FOR WOMEN: A NEEDS ASSESSMENT STUDY
<b>QUESTIONNAIRE FOR LOCAL POLICE</b>

**Date:**

Name of the MARG Representative(s):

Interview location:

Name of the Officer in Charge:

Designation:

Age:

Qualification/Profession:

- Where does your role start in the cases which are being reported by PCR?
- How often do you get calls from PCR?
- What is the standard operating procedure(SOP) :
  - When the case is of utter emergency?
  - When the case pertaining to any distressed woman at public place is handed over to you?
  - Usually, how much time do you take to reach the spot?
  - How do you commute to such spot?
  - Is it mandatory to take Lady Police Constable along with you to those spots where a woman is in distress at public places?
  - Do you have enough lady Police officers?
  - Do you take special measures during night while dealing with such cases?
    - For providing Legal help to the complainant woman
    - For providing medical facilities
    - For initiating legal procedure against the offenders
    - For sending women to Special Homes or Counselling Centres if they fall in any category (juvenile in conflict with law , child in need of care and protection etc.)
    - For women with disability (visual, hearing and speech)
    - For Non Hindi/English speaking Women
    - For Transgender
    - For Sex worker

- Are you answerable to PCR after the case is handed over to you?
- Recording of cases reported through PCR
- Please state the following :
  - Number of Staff: (male- female ratio) per Thana:
  - Training of staff to deal with women related cases:
- What kind of cases do you generally receive from PCR (relating to women at risk in public places)?
- Do you think we need more stringent punishment for the offenders as compared to the existing?
- Do you face any difficulty after receiving complainant women from PCR van?
- What are your suggestions to provide quick relief to women in distress at public places?
- Is there any difference when a woman directly complaints to you and when a case comes to you through PCR?
- What measures would you suggest for making our city safe for women?
- Do you think a Helpline is an effective weapon in making our city a safe place for women?

<b>JAGORI-MARG Study</b>
AN EFFECTIVE HELPLINE FOR WOMEN: A NEEDS ASSESSMENT STUDY
<b>QUESTIONNAIRE FOR HELPLINE OPERATOR (1091)</b>

**Date:**

Name of the MARG Representative(s):

Interview location:

Name of the Officer in Charge:

Designation:

Age:

Qualification/Profession:

- What are the objectives of Helpline?
- What is the structure of Operating system of helpline calls?
- What is the Standard Operating Procedure(SOP) for :
  - Establishing identity of the complainant woma
  - After identification of the complainant woman ,the next steps
  - In case information is sought by any woman from helpline
  - In case of immediate medical assistance
  - In case the complainant woman is in need of emergency help

- Women with disability (visual/hearing/speech)
  - Non Hindi/English speaking Women
  - Transgender
  - Sex worker
  - Anonymous/third party
- What kinds of issues are being reported by women in public places?
  - Do you face Technical snag? If yes how do you manage?
  - How integrity of data is ensured?
  - How do you maintain confidentiality of callers?
  - How many helpline lines and operators are there in your unit to attend the call?
  - Are the number of staff is sufficient?
  - Have you undergone any training relating to operator's skill?
  - Is there any system of saving previous call records/call history?
  - Don't you think multiplicity of helplines create confusion?
  - What are the common problems being faced in running the women helpline?
  - Any suggestion for improvement of the helpline?

<b>JAGORI-MARG Study</b>
AN EFFECTIVE HELPLINE FOR WOMEN: A NEEDS ASSESSMENT STUDY
<b>QUESTIONNAIRE FOR OFFICER IN CHARGE HELPLINE</b>

**Date:**

Name of the MARG Representative(s):

Interview location:

Name of the Officer in Charge:

Designation:

Age:

Qualification/Profession:

- What are the objectives of helpline?
- What is the structure of Police helpline system?
- Please state the following :
  - Budgetary allocation for helpline :
  - Number of Staff:
  - Training of staff:
  - Selection criteria of staff:
  - Number of PCR vans & Bikes:
  - Number of Police officials in PCR Van:
  - Number of female police official per PCR Van especially in case of women victim:
- Is there any specific helpline to provide relief to women?

- When one calls '100' for women related issue, how do you respond to it?
- What kinds of issues are reported by women in helplines?
- What is the standard operating procedure(SOP) for :
  - Establishing identity of the complainant woman
  - Locating the victim
    - Do you solely depend on the information provided by the complainant?
    - Do you have any advanced technology or any other method to track the exact position of the complainant ?
  - In case of immediate medical assistance
  - In case of women in need of emergency help
  - Data entry of the call
  - Women with disability
  - Non Hindi/English speaking Women
  - Transgender
  - Sex worker
  - Anonymous/third party
  - Initiating police assistance for the complainant
  - Referral to the local police
  - Referral to only govt. Agencies or any other agency?
- Do you face Technical snag? If yes how do you manage?
- What type of 'Case tracking system' do you have:
  - Referral system
  - Follow up
  - Inquiries of the victim after referral
  - Closing report
  - All of the above
- How integrity of data is ensured?
- How to maintain confidentiality of callers?
- What are the languages in which the operators are experts?
- If a caller is non Hindi/English speaker, how do you deal with it?
- Is there any system of saving previous call records/call history?
- Can anyone retrieve those data from your helpline archive through RTI?
- What are the common problems being faced in running the helpline?
- Any suggestion for improvement of the helpline?

<b>JAGORI-MARG Study</b> AN EFFECTIVE HELPLINE FOR WOMEN: A NEEDS ASSESSMENT STUDY
<b>QUESTIONNAIRE FOR PCR VAN OFFICIALS</b>

**Date:**

Name of the MARG Representative(s):

Interview location:

Name of the Officer in Charge:

Designation:

Age:

Qualification/Profession:

- What are the objectives of Helpline?
- What's your role in police helpline service?
- Do you face any communication gap while receiving the details of the complainant from helpline operator?
- What is the standard operating procedure(SOP) for :
  - Establishing identity of the victim
  - Locating the complainant
    - Do you solely depend on the information provided by the operator of helpline?
    - Do you have any advanced technology or any other method to track the exact position of the victim?
  - Your behaviour/treatment with the complainant
  - In case of immediate medical assistance
  - In case of women in need of emergency help
  - Women with disability (visual/ speech/hearing)
  - Non Hindi/English speaking Women
  - Transgender
  - Sex worker
  - Initiating police assistance for the victim
  - Procedure of Referral to the local police(while handing over the complainant )
  - Referral to only govt. Agencies or any other agency?
  - Time taken by PCR van to reach the spot
  - Tackling a situation where number of PCR van officials are not sufficient e.g. in a mob/ gang criminals with dangerous weapon etc.
- Please state the following regarding PCR van officials:
  - Number of staff
  - Training of staff
  - No of women police officials in dealing with complainant who are women

- Coordination between PCR van officials and Local Police:
  - Relation with Local Police:
  - Behaviour of Local Police:
  - Extent of cooperation:
  - Seriousness towards women related issues:
  - Gaps between both units of Police:
- What are the difficulties you face while handing over the matter to the local police?
- What are your suggestions to strengthen helpline so that women in distress get timely help?

<b>JAGORI-MARG Study</b>
AN EFFECTIVE HELPLINE FOR WOMEN: A NEEDS ASSESSMENT STUDY
<b>RANDOM SURVEY OF WOMEN</b>

**Date:**

Name of the MARG Representative(s):

Interview location:

Name of the Respondent :

Age:

Qualification/Profession:

- 1. Have you heard about Police Helpline?**
  - a. Yes
  - b. no
- 2. Do you know “1091” helpline?**
  - a. Yes
  - b. no
- 3. Have you ever sought help from such helpine?’**
  - a. Yes
  - b. no
- 4. Were you satisfied?**
  - a. Yes
  - b. no
- 5. Do you think such Helplines are useful?**
  - a. Yes
  - b. no

<b>JAGORI-MARG Study</b> AN EFFECTIVE HELPLINE FOR WOMEN: A NEEDS ASSESSMENT STUDY
<b>QUESTIONNAIRE FOR WORKING WOMEN</b>

**Date:**

Name of the MARG Representative(s):

Interview location:

Name of the Respondent :

Age:

Qualification/Profession:

- What are the problems being a woman do you face in public places in Delhi?
- Do you feel more vulnerable in some specific places?
- Do you feel more vulnerable in public places at any particular time? If yes, why?
- Do you share those problems with anyone? Please specify.
- What steps do you take to minimize the risks that you face?
- What do you think the reasons responsible for making Delhi unsafe for women?
- Do you know how many Police Helplines are there in Delhi?
- Can you name any helpine no. for women in Delhi?
- Have you ever approached the Police helpine or any helpine? If yes, how many times? If no, why?
- What were the issues for which you approached the helpline?
- What was the relief?
- How much helpful it was( please rate its helpfulness):

**A. Promptness:**

a. very good, b. good, c. average , d. poor

**B. Understanding of the issue**

a.very good b. good c.average d.poor

**C. Communication skill of the opearator**

a.very good b.good c.average d.poor

**D. Reliability:**

a. very good , b. good, c. average , d. poor

**E. Appropriateness:**

a. very good , b. good, c. average , d. poor

**F. Behaviour of the helpline -operator:**

a. polite b. patience c. gender sensitive d. motivating

**G. Behaviour of the PCR mobile service team members:**

a. polite b. patience c. gender sensitive d. motivating

**H. Satisfaction level on receiving remedy**

a. very much b. average c. poor

- Have you ever called any helpline to get any information?
  - **If yes, on what issues?**
- How helpful was it? (Please rate its helpfulness):
  - A. Promptness:**

a. very good, b. good, c. average, d. poor
  - B. Reliability:**

a. very good, b. good, c. average, d. poor
  - C. Appropriateness:**

a. very good, b. good, c. average, d. poor
  - D. Behaviour of the helpline -operator:**

a. polite b. patience c. gender sensitive d. motivating

    - **If no, why?**
- There are many helpline numbers in Delhi, is it feasible for you to remember all? If no, then do you prefer one number system?
- If you face any problem at public places, would you be able to express it in Hindi/English? Yes/No. If no,
  - In which language you are comfortable?
  - Have you ever faced barrier due to language issue?
- Do you think that an effective helpline for women would be able to minimise the risks that women face in public places? Please state reason.
- What are the characteristics you are looking in an effective helpline?
- Do you have any suggestion to improve police-helpline?
- What measures would you suggest to make Delhi a safe place for women?



## PHOTOGRAPHS



**Domestic workers attending the FGD on safety issues of women at Public Places**



**FGD with women with hearing disability**



**FGD with homeless women**

Let's Make  
Delhi Safe  
for Women



Let's Make  
Delhi Safe  
for Women



Let's Make  
Delhi Safe  
for Women



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