INTRODUCTION

The phenomenon of homelessness is one of the worst forms of urban poverty and social vulnerability, a glaring indicator of the failure of governance and the state’s commitment to a welfare state. It is tragic and unacceptable in a civilized society and independent India that a large percentage of our poor are homeless. No one wants to be homeless by choice—it is a situation people are forced into—like endemic poverty (Singh 2007, Singh 2010: 118).

Women constitute one of the groups worst affected by homelessness. While the phenomenon of homelessness violates the most basic of human rights for all populations, women without housing and living on the streets suffer the most severe kinds of abuse and violence. State response to the needs of homeless women is grossly inadequate and the majority of homeless women are left to fend for themselves.

This paper attempts to highlight the causes and characteristics of homelessness, the nature of violence faced by homeless women, and makes recommendations to address the crisis at various levels. While the problems faced by homeless women living on the streets are ubiquitous across the country, the paper uses empirical data and case studies from Delhi and Bangalore. It is hoped that this paper will draw attention to the plight of one of our society’s most marginalized constituencies and urge the government to take urgent action to protect their human rights and prevent their further abuse and marginalization.

DEFINITION OF HOMELESSNESS

The Census of India defines ‘houseless people’ as persons who are not living in ‘census houses’. The latter refers to ‘a structure with roof’. Homelessness thus refers to those who are inadequately housed—without even basic shelter over their head, not even a kuccha (unfinished) slum or shanty house. The United Nations in 1999 interpreted homeless as including ‘those sleeping without shelter, in constructions not meant for habitation and in welfare institutions’. ‘The majority of homeless in India are found living in places such as roadsides, pavements, drainage pipes, under staircases, or in the open, temple-mandaps, platforms and the like’ (Census of India 1991: 64). Besides, in 2001 we were witness to how the homeless were underreported. Hundreds and thousands of homeless citizens were left unenumerated (Singh 2001, Singh 2006: 218-54, 379- 82).

A more encompassing definition of homelessness has been provided in Australian law, which states that a person is homeless if, and only if, he or she has inadequate access to safe and secure housing – which means if the only housing to which the person has access:

* Shivani Chaudhry is Associate Director, Housing and Land Rights Network. Amita Joseph is an Advocate, and is associated with the Business & Community Foundation. Indu Prakash Singh is Technical Advisor, Indo-Global Social Service Society (IGSSS).

1 Supported Accommodation Assistance Program Act 1994, Australia.
- damages, or is likely to damage, the person’s health; or
- threatens the person’s safety; or
- marginalises the person through failing to provide access to:
  o adequate personal amenities; or
  o the economic and social supports that a home normally affords; or
- places the person in circumstances which threaten or adversely affect the adequacy, safety, security and affordability of that housing.

The UN Special Rapporteur on adequate housing has reiterated that homelessness carries implications of belonging nowhere rather than simply having nowhere to sleep.²

THE HUMAN RIGHT TO ADEQUATE HOUSING

It has been well established in international human rights law and its interpretation that housing is not just a physical structure of four roofs and a wall. Instead, it is a much broader concept, which encompasses various material and non-material elements of adequacy, which are necessary to create a safe living space. Furthermore, adequate housing is not merely a desired goal; it is a basic human right of all human beings. This has been affirmed by the Universal Declaration of Human Rights (UDHR) in 1948, which recognizes the right to adequate housing as an integral component of the human right to an adequate standard of living.³

The UDHR states under Article 25 (1) that,

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

On the basis of the provisions established in the UDHR, the right to adequate housing was elaborated and reaffirmed in 1996 by the International Covenant on Economic, Social and Cultural Rights (ICESCR), which, in Article 11.1, declares: ‘The State Parties to the present Covenant recognize the right of everyone to an adequate standard of living for himself and his family, including adequate food, clothing and housing, and to the continuous improvement of living conditions.’

Other international treaties that provide legal protection for the right to adequate housing, include, inter alia, the Convention on the Rights of the Child (art. 27, para. 3), and the non-discrimination provisions found in article 14, paragraph 2 (h) of the Convention on the Elimination of All Forms of Discrimination against Women and article 5 (e) of the International Convention on the Elimination of All Forms of Racial Discrimination.

In the Constitution of India, Article 21, the right to life, has also been interpreted to recognize the right to shelter while Article 14 guarantees equality before the law. Article 15 prohibits discrimination; Article 19 guarantees the right of all citizens to freedom of movement and freedom to reside and settle in any part of the territory of India.

The UN Special Rapporteur on adequate housing defined the human right to adequate housing, as: ‘The right of every woman, man, youth and child to gain and sustain a safe and secure home and community in which to live in peace and dignity.’

Women’s right to adequate housing, as an inalienable, integral and indivisible part of all human rights, has also been recognized implicitly and explicitly in a range of international and regional human rights instruments. The Istanbul Declaration and the Habitat Agenda (A/CONF.147/18), adopted at the second United Nations Conference on Human Settlements in 1996, commits governments to providing legal security of tenure and equal access to land to all people, including women and those living in poverty (para. 40 (b)).

It is thus the legal responsibility of the state to respect, promote and fulfil the human right to adequate housing for all its citizens, as guaranteed in both national and international law. Though India has ratified several international human rights instruments and is also bound by national case law, the human right to adequate housing still eludes a large number of Indians, especially the homeless.

HOMELESSNESS AND VIOLENCE AGAINST WOMEN

The interlinkage between violence against women and women’s right to adequate housing is well established around the world. Lack of adequate housing can make women more vulnerable to various forms of violence and, conversely, violence against women can lead to the violation of women’s rights to adequate housing. The former Special Rapporteur on adequate housing presented a series of reports on women and housing to the UN Commission on Human Rights and the UN Human Rights Council.\(^5\) The reports highlighted that the widespread prevalence of gender-based violence is a central thread in the fabric of human rights violations faced by women, including in violations of the right to adequate housing and land. Women also suffer more from forced evictions and homelessness as both situations subject them to greater violence as well as violation of personal dignity and health (Bharucha 2006).\(^6\) They also asserted that persistent poverty, where women and others are forced to live in inadequate and insecure housing and living conditions, also exposes women to forms of gender-based violence, and arguably is itself a form of violence.\(^7\)

Causes of Homelessness for Women

Critical factors that result in homelessness, including of women, are:

1. **Lack of affordable housing:** In the absence of public housing and low-cost housing schemes in cities and towns, the poorest of the poor are forced to live on the streets, as even ‘slums’ are beyond their economic means. Accessing housing is even more difficult for women, especially single women. At the end of the Tenth Five Year Plan, the urban housing shortage in India was 24.7 million dwelling units, of which 99% per cent pertained to the Economically Weaker Sections and Low Income Groups. In Delhi, the housing shortage was estimated at 1.13 million dwelling units.


\(^5\) Reports on women and housing available at: [http://www.ohchr.org/EN/Issues/Housing/Pages/WomenAndHousing.aspx](http://www.ohchr.org/EN/Issues/Housing/Pages/WomenAndHousing.aspx)

\(^6\) This by far is the most authoritative publication, with pictures and interviews of many of us. There is a film made on this.

2. **Slum demolitions and evictions without rehabilitation**: Forced evictions, accompanied by violence, are increasing across India. Women and children are the worst affected. In the absence of adequate rehabilitation, thousands are rendered homeless and forced to eke out an existence on the streets. Even in the approximately 20 per cent of cases where rehabilitation is provided, conditions in resettlement sites are abysmal. Most of the resettlement sites are located on the peripheries of the city making it impossible for families to continue with their livelihoods. Studies in the resettlement site of Bawana, Delhi, highlight that women and their livelihoods suffer the most due to failed resettlement (Menon Sen and Bhan 2008).

3. **Domestic Violence**: Domestic violence can greatly increase women’s vulnerability to homelessness, especially when there is a lack of protection by law enforcement officials, or by the legal system itself. Many women who do manage to leave home become vulnerable to homelessness and consequently may suffer further violence. Across the world, a large proportion of homeless women are those who have escaped domestic violence. In Indian cities too, domestic violence is one of the reasons for homelessness of women. On the other hand, the associated fear of homelessness can lead some women to stay in abusive and dangerous situations, or return to them if they have attempted to leave.\(^7\)

4. **Breakdown of Family and Partnership/Marriage**: Abandonment by husbands, eviction from homes after the death of the husband, fear, desertion, husbands or fathers remarrying, and mental illness also result in women being thrown out of their homes and onto the streets.\(^8\) In settings where there is stigma associated with the perceived ‘breakdown’ of marriage or domestic partnership, informal networks of care and support may disintegrate and further expose women to the risk of homelessness.

5. **Inequitable Planning and Land Use**: Across urban India, land use planning is extremely inequitable and favours a development paradigm aimed at benefiting the upper classes and elite. A United Nations Development Programme concept note prepared in 2003 stated that 95 per cent of legal urban space was used and kept for the benefit of the most privileged 5 per cent of the city population. Separate spaces for women are not factored into planning processes, neither are women consulted in the development of city and master plans. Housing and settlement planning is not gendered and city spaces are increasingly becoming more and more unsafe for women. The failure to reserve land for low-cost housing and the increasing speculation of land and property makes housing more and more unaffordable, contributing to homelessness.

6. **Inadequacy of the Law**: The existence of discriminatory laws and anti-poor legislation such as the Bombay Prevention of Begging Act 1959 (adopted in Delhi in 1961) coupled with the absence of strong legal protection for housing rights and women’s rights, results in women finding themselves increasingly vulnerable to homelessness and violence in urban areas. Though the Protection of Women from Domestic Violence Act 2005 contains a provision securing women’s rights to remain in their place of domicile, improper implementation of the Act continues to result in victims of domestic violence being thrown out of their homes or being forced to leave situations of violence.

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\(^8\) The 2008 IGSSS study on homelessness in Delhi revealed that of the homeless women surveyed in Delhi, 28.57 per cent of the women left home due to ill treatment meted out to them at home; 18 per cent were deserted by their husbands; 25 per cent were forcibly thrown out by their relatives. It is also found that some of the women had mental health issues, which could also be the reason for homelessness.
Other factors contributing to homelessness of women are: lack of secure tenure, lack of information about women’s human rights, lack of access to affordable social services as a result of privatization, lack of access to credit and housing subsidies, bureaucratic barriers preventing access to housing programmes, rising poverty and unemployment and discriminatory cultural and traditional practices. The former Special Rapporteur on adequate housing noted that a state’s obligation to eliminate gender discrimination is one of immediate effect and failure to do so constitutes a human rights violation.9

**Overview of Homeless Women in India**

A 2003 ActionAid India report estimated that the total homeless population in India is 78 million.10 A study by Indo Global Social Service Society (IGSSS) in 2008 counted 88,410 homeless citizens in the capital city of Delhi.11 For every one homeless counted there was at least one was missed who was at work, hidden in a shelter or temporarily relocated. This makes the number of homeless citizens in Delhi around 150,000 of which at least 10,000 are women, even by conservative estimates. The IGSSS study found that women formed 4.7 per cent of the total number of homeless counted. The number may be more because many sleep with their faces covered, making it difficult for the enumerators to categorize them correctly.

Indian city streets are extremely unsafe for women, with rape, theft, murder, kidnapping, sexual exploitation and gender-based violence being common.

Most homeless women are involved in roadside vending and related activities. They face harassment from local bodies and the police who snatch their goods and displace them at will. Many women then have no option but to take to begging. Most of them beg at religious places and sleep there, as they feel more secure.

Among homeless women there are two categories of women: one that stays with her family and the other who is without any family. The homeless women without any family are among the most vulnerable.

In the capital of the country, there exists only one shelter for the 10,000 homeless women. Located in Regarpura (Karol Bagh), this has a capacity for only 30 women.

Homeless shelters are extremely inadequate, and according to even the Social Welfare Secretary of Delhi, cover only 5 per cent of the city’s homeless population.

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Sairya, 42 years old, lives in Meena Bazar area in Delhi with her family. Her husband is a rickshaw puller while she and her daughters are rag pickers in the Jama Masjid area. The girls are 17, 13 and 10 years old and this is another worry for Saira in addition to being homeless. She is unable to sleep at night, as she fears the local goons from nearby areas who molest the women and girls who are sleeping there. Generally they use blades/razors and threaten the girls and family and abuse them. Many a times they have even raped the girls. Sairya is insecure about the future of her daughters.
(Source: Study on Delhi’s homeless, IGSSS, 2008)

Kinds of Violence Faced by Homeless Women

Women experiencing homelessness are subject to unique violations of their rights and multiple forms of discrimination and gender-based violence. It is reported that homeless women are 10 times more vulnerable than men. They require specialized support services to cater for their particular vulnerabilities and needs.

a) Verbal and Physical Abuse

Homeless women across India encounter abuse of several kinds, including foul language, verbal abuses by police and passers-by; violence from male police who slap and physically abuse women, even when they are sleeping at night; and abuse from other men on the streets. They are often called sex workers and insulted by other locals. Even homeless men exploit these women. Repeated police harassment is a common complaint of homeless women. Women are supposed to be dealt with by women constables, but more often than not it is men constables who handle their issues. Hardly any cases of abuse get reported.

In Delhi, homeless women stated that their husbands can be triggered to behave abusively due to circumstances such as: unwashed clothes; poorly cooked food; meals not prepared on time; or misbehaviour of the children.12

Where women in the community are in control of the family earnings and responsible for expenditure on family essentials, the issue sometimes leads to conflict, when the husband feels that he has not been given adequate money for his needs.13

b) Sexual Violence and Exploitation

Homeless women, particularly young women, are vulnerable to sexual exploitation, sexual trafficking and drug abuse. The instances of rape, molestation and women spending sleepless nights guarding their young adolescent girls are a common feature among homeless women.

In Bangalore, a recent study reported indications of sexual exploitation of women under duress and blackmail. If the women do not succumb to these pressures there is a threat of putting their tents on fire. Several homeless women reported of miscreants teasing and harassing women and girls of the homeless community. This sometimes led to the women being forced by circumstances to take up sex work to survive.14

12 Findings from a PRA exercise conducted by IGSSS and Praxis with homeless residents of the Pul Mithai community, located in the area of Old Delhi, in close proximity to the Old Delhi Railway Station, June 2010.

13 Ibid.

In most urban areas, homeless women find it difficult to get sustained employment. They are often exploited sexually with promises of jobs. Adolescent girls are among the most vulnerable to sexual abuse and also face risks of being trafficked.

c) Lack of Basic Services and Risks to Security and Personal Safety

Facilities such as toilets, bathrooms and water are not easily accessible to the homeless. Each such service that a homeless person needs has to be paid for, and in cash. Having to pay coupled with lack of access to secure toilets and bathing areas often means that they must relieve themselves in the open, bathe less frequently or in the open/behind plastic covers, and access unclean water through public taps and leaking pipelines. This is most difficult for women, rendering them vulnerable to all forms of violence and abuse. The lack of a secure place to undress and change clothes and bathing in public spaces also makes women vulnerable to gender-based violence.

Homeless women, especially those without families, have to sleep in obscure places, which are hidden from the public view. They don’t change their sleeping place, as they feel safer in the known surroundings rather than going to an unknown place. Even homeless shelters are not the safest places for women. Locations for night shelters are often decided without the participation of the homeless and do not always have security arrangements for women.

The custodial nature of women’s homes and beggar’s homes is also a major problem threatening the security of homeless women. These institutions rather than creating a safe environment for women to live in dignity treat homeless women as criminals.

d) Inadequate Living Conditions and Risks to Health

The World Health Organization (WHO) defines health as ‘not being the absence of illness, but a state of complete physical, mental, cultural and spiritual well-being’. Culturally, some of the most private spheres of life such as bathing and sanitation are intrinsically linked to the feeling of well-being and dignity. For homeless women, however, these basic requirements are not met. Due to the want of a private space, having a bath in addition to the availability of clean water is a great challenge.

A study on homelessness in Bangalore revealed that while water for washing is sometimes available, it is not fit for drinking. Homeless people, however, have to use this water for washing clothes and utensils. This has serious repercussions on their health, thus making them vulnerable to various kinds of contamination, diseases and infections.15

Homeless women suffer from several diseases and illnesses due to inadequate living conditions and extreme weather conditions. They are vulnerable to excess heat, rain and cold, and often have insufficient clothes and blankets during the winter months. The harsh living conditions also cause homeless women to age rapidly. In most instances, illnesses go untreated or are detected too late, making them more susceptible to infection.

Malnutrition is a common problem among homeless women, affecting especially pregnant and lactating homeless women.

15 Ibid.
Research studies also indicate a direct correlation in increase in mental health and psychiatric disorders among homeless women, especially those who are abandoned.\textsuperscript{16}

The poor sanitary conditions and lack of privacy in most shelters for the homeless also pose health risks for women.

e) \textit{Inadequate Government Response, Lack of Access to Government Schemes and Livelihood Opportunities, Increasing Vulnerability}

Homeless women have no access to any government schemes. The number of women-specific shelters for homeless women across the country is woefully inadequate, even in cities like Lucknow, Varanasi, and Allahabad. Bangalore, Mumbai, Kolkata, Guwahati, Dispur, Patna, Gaya, and Pune, have no shelters for homeless women. Where shelters exist, they are night shelters for men, not 24-hour, year round shelters. Chennai has one shelter for homeless families while Hyderabad has a couple of shelters for families. In the capital city, Delhi, as mentioned above, there is only one shelter for 10,000 homeless women. The New Delhi Municipal Council (NDMC), which is one of the richest municipal bodies in Asia, has not one homeless shelter in its precinct and has abdicated its responsibility of ‘construction and maintenance of rest-houses, poor houses, infirmaries,… shelters for destitute and disabled’ (u/s 12:h-z of The New Delhi Municipal Council Act, 1994).

Due to the stigma attached to being homeless, homeless women do not get jobs as housemaids or in shops. In contrast to homeless men, the women face more difficulty in getting jobs as most have small children to take care of and most employees consider this a handicap. Yet the responsibility to purchase food and ration for their families generally rests with them, making them more vulnerable to exploitation, stress and other psychological disorders.

f) \textit{Difficulty in Accessing Healthcare}

Accessing healthcare, in particular hospitals, is a tremendous challenge for homeless people, especially women. There are countless incidents of women being denied treatment and turned away from hospitals, including a shocking case of a 32-year-old mentally ill woman Poonam Das in 2002.\textsuperscript{17} Most hospitals refuse to admit homeless women, often making them run from pillar to post, before they are able to receive any medical aid.

In July 2010, a homeless woman died while giving birth on the street in Shanker Market, Delhi, reflecting a situation of criminal negligence by the state.

In Bangalore, homeless women reported that 90 per cent of babies are born in the hospital, while 10 per cent are delivered in the community with support of untrained nurses. Some of these women also fear visiting hospitals since participants stated that doctors sometimes physically or verbally abuse patients who shout during labour pain.\textsuperscript{18} This is also the case in several government hospitals in Delhi.

\textsuperscript{16} For example, see, Housing, Health and Mental Health, \url{http://www.cmha.ca/data/1/rec_docs/549_CMHA_Housing_EN.pdf}. Also see Wellesley Institute for more studies on homeless women in Canada: \url{www.wellesleyinstitute.com}

\textsuperscript{17} See Annex 1 and article by Indu Prakash Singh titled ‘And the Night Never Seemed to End’. This was used as a base for the \textit{Indian Express} story. Mention of this has been made in endnote 1, p. 122.

\textsuperscript{18} ‘Invisible City-Makers: An Action Research on Homelessness in Bangalore City’, 2010, Bangalore, Bangalore-based NGOs and IGSSS.
g) **Destruction of Possessions and Livelihood Means**

The homeless are among the poorest of the poor and own few possessions. Yet, these are routinely destroyed by the police. Women in Pul Mithai, Delhi, reported that MCD committee officials remove and confiscate wares when they try to sell their wares on pavements. In particular, on Saturdays these authorities usually destroy such property so residents are constantly fearful when they try to continue with such work. Homeless women also constantly talk about destruction and theft of property by police, even of their *tripal* (plastic sheets), dishes, food, and other property. In some areas people find it difficult to go to work for fear that their meagre belongings will be stolen or confiscated by the police.

h) **Hunger as Violence**

Malnourishment and hunger among homeless women is common. In Pul Mithai, Delhi, residents stated that local police only allow residents to cook at night, which has significantly limited their food intake. If the women try to prepare a meal during the day, police throw away their utensils and food items. As a result, families are only able to eat one daily meal at night. If food remains from the night before, the women serve the leftovers the next morning otherwise the family remains hungry. However, the women typically purchase food from the outside market for their children, adding further economic strain.

Not all homeless shelters permit residents to cook, which means that the residents have to buy food, which is often unaffordable. In the run up to the Commonwealth Games in Delhi, the government prohibited homeless people from selling items and carrying out their livelihoods, forcing many into hunger. This most severely affected children and women, especially pregnant and lactating women. *Aap Ki Rasoi*, the free food distribution scheme of the Delhi government, was stopped from around 30 September 2010 and only resumed on 16 October 2010 causing extreme hunger for the homeless citizens.

i) **Arbitrary Arrests and Detention**

The Bombay Prevention of Begging Act 1959 (adopted in Delhi in 1961) is routinely used to criminalize and arrest the homeless. The Act defines beggars as anyone soliciting alms and who have ‘no visible means of subsistence’, including those who sell small articles at traffic lights and other public places. When penalized, beggars or homeless persons have to face hearings at a special court and may be sent to an institution, or can bail themselves out by paying money. Most homeless people, however, are not beggars. The 2003 ActionAid study found that only 28 per cent of the homeless live on mendicancy.

Women who are arrested under the Act are often separated from their children, who are left on the streets to fend for themselves or taken to child welfare homes. The ‘home’ for women in Delhi is located in Nirmal Chhaya, in the Tihar Jail complex, and is nothing better than a jail. The living conditions are deplorable, with no hygiene, sanitation or adequate food. The conditions are so bad that Ratnabai Kale, a 50-year old woman detained in Nirmal Chhaya, attempted suicide twice by trying to hang herself with her own sari in 2009.

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19 Findings from a PRA exercise conducted by IGSSS and Praxis with homeless residents of the Pul Mithai community, located in the area of Old Delhi, in close proximity to the Old Delhi Railway Station, June 2010.

20 Ibid.

The detained homeless women have no access to legal remedy in the form of a lawyer or other judicial redress, and often ending up serving a sentence from anywhere between one to ten years.

\textit{j) Death}

Several instances of deaths of homeless women are reported across India. Many of these are due to neglect, lack of access to healthcare, untimely detection of illness and disease, and often violence, including sexual violence. A study in Canada found that homeless women aged 18 to 44 years old were ten times more likely to die than women of the same age group in the general population of Toronto.\textsuperscript{22}

\textbf{Worst Affected Groups of Homeless Women}

While all homeless women suffer multiple forms of abuse, gender-based violence and discrimination, there are certain groups within homeless women who are even more vulnerable. These include: women with disabilities and mental health problems; single women and single homeless mothers; women living with HIV/AIDS; chemically dependent women and victims of substance abuse; pregnant and lactating women; and girls and adolescents.

\textit{The Homeless Girl Child}

India has the largest number of street children in the world. According to Indian Embassy figures, there are 314,700 children living on the streets of Mumbai, Kolkata, Chennai, Bengaluru, Kanpur and Hyderabad, and another 100,000 live in New Delhi. However, these numbers may not reflect the true picture, as accurate census information is difficult to collect.

Children’s human rights to protection, education, secure housing and participation, as guaranteed by the United Nations Convention on the Rights of the Child, are violated. For instance, the recently passed Right to Education Act (2010) in India does scant little for ensuring that homeless children are able to access their Fundamental Right to Education. Street children, in particular girls, find it difficult to go to school and are not able to access many government schemes, including Integrated Child Development Services (ICDS). The uncertainty of tenure of stay at any place, fear of eviction or being thrown out and not having any identity proof giving them a sense of ‘existence’ and over all the need for survival has made education a distant dream for street children. Though \textit{Sarva Shiksha Abhiyan} has several schemes, nowhere have efforts been made by the education department to promote street children’s education.\textsuperscript{23} Often forced evictions take place on the eve of exams forcing first generation learners to dropout or lose a school year.

When asked what their biggest problem is, most of the homeless children in Bangalore said it was non-availability of drinking water. Often children have to queue up at public taps to collect drinking water due to which they lose out on their recreation/study time. The children also expressed that older people took advantage of them and many times broke their plastic pots when they went to refill water back home leaving a pot in the queue. This led to them being abused and beaten up even at home.\textsuperscript{24}

\begin{itemize}
\item \textsuperscript{22} See Wellesley Institute: \url{www.wellesleyinstitute.com}.
\item \textsuperscript{23} Ibid.
\item \textsuperscript{24} ‘Invisible City-Makers: An Action Research on Homelessness in Bangalore City’, 2010, Bangalore, Bangalore-based NGOs and IGSSS.
\end{itemize}
Girl children living on the streets are especially vulnerable to victimization, exploitation and sexual abuse. Recently, a six-year-old girl at Pusa Roundabout, Delhi, was gang raped in a car, and is suffering from serious multiple injuries and disorders, and requires several corrective surgeries and long-term treatment.

**RECOMMENDATIONS**

In order to address the needs of homeless women and protect and guarantee their human rights, it is important to first have a clear understanding of the reasons for them becoming homeless as well as the multiple challenges and levels of discrimination faced by them.

As emphasized by the UN Special Rapporteur on adequate housing, addressing the problem of women’s vulnerability to homelessness must first address their access, or lack thereof, to the skills, resources and place in the community that allow for the securing of adequate housing.

A combination of a humanitarian and a human rights approach is needed to address both the immediate and the long-term need of homeless women and communities.

1. There is an urgent need to address the multiple forms of discrimination that homeless women face on grounds including class, caste, health, disability, sexual orientation, and other factors. An intersectional approach to gender discrimination is essential to address such multiple forms of discrimination faced by women, and the adoption of an indivisibility-of-rights approach to promoting women’s rights to adequate housing.

2. Permanent 24-hour shelters for homeless women need to be urgently set up in all cities and towns, as homelessness is a perennial year-round problem, not limited just to the winter. Separate shelters should be created for single women, for women with children, for women with mental illness and disabilities, and for women and their families. These need to be long-stay homes with facilities for treatment and rehabilitation. The shelters should be based on human rights standards of adequate housing and should be set up close to sources of livelihood.

3. Information must be provided to all shelter residents on the nearest hospital, police station, ration shop, and all other available government schemes and services. This should include connecting homeless people with all available schemes and services, and also connecting them to existing Homeless Resource Centres as well as Gender Resource Centres. This must be the responsibility of all shelter managers/caretakers.

4. Cities should set up a 24 hour emergency response system, including a help line and nodal point for homeless women. Hospital facilities (including beds in private hospitals) should be made available for homeless women. Community Health Departments of hospitals need to also ensure that services are provided for homeless women.

5. Special schemes should be made available for easy loans/subsidies for entrepreneurship by homeless women.
6. State-sponsored violence and police brutality against the homeless must be urgently checked and those responsible for offences must be brought to justice.  

7. Legislation against domestic violence must recognize the link with the right to adequate housing and contain legal protections for women to realise this right, while ensuring the provision of alternative adequate housing for victims of domestic violence and abuse. It should also protect women’s right to be free from violent offenders.

8. The government must introduce low-cost housing and public housing schemes for the poor with special incentives for women, including single women and women-headed households to access housing.

9. Gender-sensitive housing policies and laws need to be developed and implemented. These should make special provisions for women who are even more vulnerable to homelessness and other housing rights violations—victims of domestic violence, widows, women-headed households, women victims of forced evictions, minorities, and indigenous women.

10. Laws such as the Bombay Prevention of Begging Act 1959 that criminalize homelessness need to be repealed and replaced with laws and policies that recognize the right to adequate housing for the homeless.

11. The state must follow and implement orders of the Honourable Supreme Court of India and High Courts that relate to homelessness and adequate housing. For example, Justice A.P. Shah and Justice S. Muralidhar’s judgement on housing and rehabilitation in the case *Sudama Singh and Others v. Govt. of Delhi and Others*, 11 February 2010, lays down clearly the duty of the state and the importance of the urban poor:

   The support service provided by these persons (whom the Master Plan describes as “city service personnel”) are indispensable to any affluent or even middle class household. The city would simply come to halt without the labour provided by these people. Considerations of fairness require special concern where these settled slum dwellers face threat of being uprooted….

The High Court of Delhi has passed several interim orders calling for rehabilitation of evicted homeless communities and the need for developing a short-term and long-term plan to address homelessness in the city, but these orders are routinely violated by the Delhi government. A mechanism to report periodically to the Court on progress in implementation of court orders/judgements should be set up.

12. States should set up independent Monitoring Committees consisting of experts, including representatives of civil society and the homeless, to look at brutality by state actors, such as police, against the homeless.

13. The state should ensure access to affordable utilities such as water, electricity and heating, as well as access to education, employment and health facilities.

14. Women should have equal access avenues of legal redress for violations of their right to adequate housing.  

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15. Adequate attention and efforts must be devoted to addressing the causes of homelessness, including investing in agrarian and rural development. The state should ensure that post-disaster relief and rehabilitation is gender sensitive and does not discriminate against women.

16. National laws and policies must ensure compliance with international human rights law and the Indian government must work towards meeting its international legal obligations.

CONCLUSION

It is the legal and moral responsibility of the Indian government to ensure that the human rights of all citizens, especially the most marginalized, of which homeless women constitute an important category, are respected, promoted and fulfilled. A state that continues to violate the rights of the poor and fails to provide them with respect, dignity, protection of livelihood, health, adequate housing and living conditions, security, and freedom from violence, is failing in both its international and national legal commitments.

REFERENCES


Annex 1

Matrix depicting events regarding admission of Poonam Das, a mentally ill homeless woman, to hospital on August 3, 2002

<table>
<thead>
<tr>
<th>Time</th>
<th>Venue</th>
<th>Summary of Events</th>
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<tbody>
<tr>
<td>1:40 am</td>
<td>New Delhi Railway Station</td>
<td>During a regular “night out” programme, Poonam Das was found in a disheveled condition, in a pool of her urine spread on the floor. She was mellifluously singing at the general ticket counter of the New Delhi Railway Station. Her right arm was fractured.</td>
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<tr>
<td>1:45 am</td>
<td>Police station, New Delhi Railway Station</td>
<td>Asked the Duty Officer to depute police personnel to accompany us while taking her to the hospital. They came and quickly disappeared.</td>
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<tr>
<td>1:45 am – 2:15 am</td>
<td>New Delhi Railway Station</td>
<td>We spoke to Poonam, got her background. We also got to know that she had been bitten by a dog. Got a dress, from our van, for her to change. Five members/ community workers formed a ring around her (looking outwards), so that she could change her clothes.</td>
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<tr>
<td>2:20 am</td>
<td>Police station, New Delhi Railway Station</td>
<td>Asked the police again to accompany us while taking her to the hospital. Constable Sunil Kumar joined us.</td>
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<tr>
<td>2:25 am</td>
<td>New Delhi Railway Station</td>
<td>Carried Poonam (as she could not walk) from the station to take her to Sucheta Kriplani Hospital/ Lady Harding Medical College (SKH/ LHMC) in order to admit her.</td>
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<tr>
<td>2:35 am – 2:55 am</td>
<td>Sucheta Kriplani Hospital/ Lady Harding Medical College (SKH/ LHMC)</td>
<td>Told by the CMO emergencies to go to Ram Manohar Lohia Hospital as Anti-Rabies serum (ARS) is available for free. And also there is psychiatric ward. So she could be admitted there.</td>
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<tr>
<td>3:05 am – 4.15 am</td>
<td>Ram Manohar Lohia Hospital (RML)</td>
<td>She was given TT and ARS. As far as admission was concerned they told us that RML hasn’t got 24 hours Psychiatric services and we will have to wait until 9:30 am. We were told to get Poonam admitted at SKH/ LHMC.</td>
</tr>
<tr>
<td>4:25 am – 6 am</td>
<td>Sucheta Kriplani Hospital/ Lady Harding Medical College</td>
<td>We were asked to bring her at 9 am for psychiatric OPD for examination. We asked if this hospital wasn’t a 24 hours psychiatric services hospital. The CMO said if we insisted then</td>
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<tr>
<td>Time</td>
<td>Activity</td>
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<tr>
<td>6:05 am – 6:40 am</td>
<td>Travel in Van to IHBAS</td>
<td></td>
</tr>
<tr>
<td>6:40 am – 8:30 am</td>
<td>Institute of Human Behaviour and Allied Sciences (IHBAS)</td>
<td></td>
</tr>
<tr>
<td>8:30 am – 9:15 am</td>
<td>Travel in Van back from IHBAS to LHMC</td>
<td></td>
</tr>
<tr>
<td>9:20 am – 4:30 pm</td>
<td>Sucheta Kriplani Hospital/ Lady Hardinge Medical College (SKH/ LHMC)</td>
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</table>

College (SKH/LHMC) she would call the psychiatrist on call. We did. The psychiatrist, Dr. Anjali Verma came around 5:15 am. She referred Poonam to the Institute of Human Behaviour and Allied Sciences (IHBAS) for patient’s behavioural observation and management.

Poonam was sedated by giving her two injections, as she had enormous pain, because of the ARS.

We were told that we will have to get her dog bite care and the fracture treated at Guru Teg Bahadur hospital. We agreed to do so, as we had done in an earlier case. We also assured them that once Poonam was alright we would take care of her rehabilitation, etc. through the support of other voluntary organizations. The case history was prepared and we were asked to wait until 9:30 am for the opinion of the medical superintendent (MS).

At 8:30 am we were told by the doctor on duty that Poonam could not be admitted.

They said that she first needed to be treated for the dog bite injury and her fracture, after which she could be admitted. She needed to be physically fine to be admitted for her mental illness.

Right from the emergencies, we had to carry Poonam, precariously placed in our arms, till the psychiatry OPD – extreme end of the hospital. Poonam was under sedation but at times writhed in pain:

- (9:30 am – 9:45 am) We had to argue with Dr. Minmay Das, as he too said he could do nothing with regard to Poonam’s admission. He said we could meet the consultant in room no. 5, after we got Poonam registered in the Psychiatry OPD.
- (9:45 am – 10:15 am) waiting in queue at the OPD.
- (10:45 – 10:50 am) met the Consultant Dr. (Mrs.) Arun Lata Aggarwal. We were told to take Poonam to the psychiatry department for psychiatric examination.
- (11:30 – 12:15) Poonam is examined first by a Junior then by a Senior resident, Dr. Unnati Kumar. We were asked if there would be an attendant. We promised we would take care of that. We told them that all the attendants that we would be sending would be homeless women.
- (2:30 pm) Dr. Aggarwal examines her
- (3:00 pm) We are informed that Poonam will be admitted after completing the formalities.
- (3:10 – 4:25) We take Poonam for Medical and Gynaecological examination, to rule out sexual assault etc.
- (3:20 pm) Dr. Unnati writes for Poonam’s admission.
- (3:30 pm) We got Poonam’s admission papers, but still she could not be taken to the wards}

15
(4:25 pm) The CMO of Maternity 4, Dr. Swati, refuses to examine Poonam, until there is a letter from the Police for MLC. Tired of sitting on the wheel chair all this while, Poonam asks us to make her sit on the floor of the courtyard of the hospital. She lies down in the sedated condition there, by now she has wet her pants. We had to remove it. She remains so until we get her new clothes, by 6:30 pm.

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<tr>
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<tr>
<td>4:30 pm –</td>
<td>Police station, New Delhi Railway Station</td>
<td>To get letter for MLC: One constable joins us without the letter. He then disappears.</td>
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<tr>
<td>5:30 pm</td>
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<tr>
<td>5:40 pm –</td>
<td>Police station, New Delhi Railway Station</td>
<td>To get letter for MLC: We tell the Sub-inspector, Mr. Kitab Singh, about the content of the letter. He then writes it and gives it to us and asks the same constable to join us and deliver it.</td>
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<tr>
<td>7:45 pm</td>
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<tr>
<td>7:55 pm –</td>
<td>Sucheta Kriplani Hospital/ Lady Harding Medical College (SKH/LHMC)</td>
<td>At 8 pm the shift of the CMO comes to an end. The new CMO takes over. And she refuses to do the MLC report, as Poonam had already been given the admission papers facilitated by the psychiatry department at 3:30 pm. She would do the gynaecological examination but the MLC report has to be prepared by the psychiatry department. The letter that we had got from the police, now was of no use. The original copy of this letter is with us. By 9 pm, Poonam’s examination starts (Dr. Satyendra Kumar, Senior Resident, psychiatry, helps in speeding the process), first orthopaedic (which found through X-ray that both the bones of her right arm were fractured), then MLC is drafted by the CMO, emergencies. Gynaecological examination is done at 10:30 pm after the MLC reaches.</td>
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<tr>
<td>11:15 pm</td>
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<tr>
<td>11:20 pm</td>
<td>Sucheta Kriplani Hospital/ Lady Harding Medical College (SKH/LHMC)</td>
<td>Poonam finally reaches the ward in psychiatry department at 11:20 pm. The time in the admission form is changed accordingly to 11:20 pm.</td>
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Source: From an article by Indu Prakash Singh, ‘And the Night Never Seemed to End’.

Annex 2

Questionnaire on women and adequate housing
(Commission on Human Rights resolutions 2002/49 and 2003/22)
The purpose of this questionnaire is to solicit information from States, local authorities, civil society and other stakeholders for the preparation of a study on the topic of women and housing, which the Special Rapporteur on adequate housing will be submitting to the Commission on Human Rights in 2005 pursuant to its resolution 2003/22 (see Annex I) entitled women’s equal ownership of, access to and control over land and the equal rights to own property and to adequate housing. Background to the mandate and approach of the Special Rapporteur can be found in Annex II as well as on the OHCHR website (http://www.unhchr.ch/housing).

In his first report to the Commission on Human Rights (E/CN.4/2001/51), the Special Rapporteur, Mr. Miloon Kothari, called for a broad interpretation of the right to adequate housing, which he defined as “the right of every woman, man, youth and child to gain and sustain a secure home and community in which to live in peace and dignity”. He further developed a framework of analysis in addressing issues of housing-related discriminations which was presented in his second report (see paras. 37-47 in E/CN.4/2002/59). Pursuant to Commission on Human Rights resolution 2002/49, the Special Rapporteur submitted a report to the Commission in 2003 on women and adequate housing (E/CN.4/2003/55), in which he attempts to outline some significant issues facing women in the enjoyment of the right to adequate housing. The study particularly highlights that, despite the recognition of gender equality and non-discrimination in various legislation and policies at the international and national levels, in practice women are facing de facto discrimination in access to housing, land and civic services, which can be attributed to customs and traditions, lack of awareness or persistence of gender bias in the formulation and implementation of national polices.

In developing this questionnaire, particular attention was made to the human rights principle of non-discrimination and the indivisibility of all human rights as articulated in his reports. The questionnaire is divided into two parts: the first part addresses general legal and policy framework; and the second part attempts to seek inputs on various elements and related issues concerning women and adequate housing, which are largely based on the General Comments No. 4 and No. 7 adopted by the Committee on Economic, Social and Cultural Rights but also reflect further developments in the recognition and interpretation of the entitlements of the right to adequate housing.

Responses to this questionnaire will complement the analysis of a wide range of available literatures, materials and testimonies received. The report will also use information collected in the report by the Secretary-General (E/CN.4/2002/53), which was submitted to the Commission in 2002 in accordance with the previous resolution 2001/34. This questionnaire and responses received will also be used to guide the discussions at regional consultations and preparation of case studies and testimonies which the Special Rapporteur plans to undertake in 2003-2005.

Due to limited capacity for translation, it is strongly encouraged that submissions will be made in English, and in electronic format to the Office of the High Commissioner for Human Rights, at the following address:

Office of the High Commissioner for Human Rights
Palais des Nations, CH-1211 Geneva, Switzerland
Fax: + 41 22 917 9010

**Questions on general legal and policy framework**

**Q1.** Please provide information on relevant national legislation with regard to housing and related services. Please also specify whether the right to adequate housing is recognized in the Constitution or guaranteed in specific legislation.

In addition, please specify whether women’s equality is recognised in the constitution or guaranteed in specific legislation.

**Q2.** Does the Constitution provide that the International Covenant on Economic, Social and Cultural Rights, Convention on the All Forms of Discrimination against Women or other international human rights treaties which guarantee the right to housing, form a part of national law and have domestic applicability? Is there an effective judicial review process to ensure consistency of legislation with relevant provisions of the international human rights treaties, particularly those which specifically protect women’s right to adequate housing?

**Q3.** How do laws, policies and practices, through existing institutions (both formal and customary and traditional norms and practices), budgets and programs, ensure substantive gender equality in the various entitlements of the right to adequate housing, including land, access to finance, civic services and information and freedom from VAW?

**Q 3.b.** Do other laws (e.g. Personal laws, family laws, domestic violence legislation, inheritance laws) ensure equal right to adequate housing for women?
Q4. What is your assessment of the housing situation of women belonging to particularly vulnerable groups, such as female-headed households, indigenous and tribal women, women with HIV/AIDS, women with disability, rural women living on subsistent farming, women victims of forced evictions, women victims of violence including domestic violence, refugees, migrants, migrant workers, domestic workers, internally displaced women and women of different sexual orientation? Do they have access to justice and legal remedies? Please share case studies and testimonies where available.

Q5. What are historical, traditional, cultural, religious and other factors affecting the equal access of women to housing, land and related services?

Q6. How have the policies and processes of globalisation such as trade, finance, investment and debt affected women’s right to adequate housing and access to related services? How do these make women more vulnerable to VAW?

Q7. How have the women’s right to adequate housing and access to related services been addressed in poverty reduction strategy and programmes in your country?

Q8. How have the women’s right to adequate housing and access to related services been addressed in violence against women legislation and programmes in your country?

Q9. Please share positive examples or “best practices” whereby Governments and civil society have endeavoured, separately or jointly, to protect and promote women’s equal right to adequate housing.

Q10. Please provide gender-disaggregated statistics on housing (urban/rural, forms of ownership, female-headed households, homelessness, access to basic services etc).

Questions on specific elements of the right to adequate housing

(a) Legal security of tenure The legal right to secure tenure, whether freehold, leasehold, or other form of individual and collective rights to housing, involves protection from forced eviction, harassment and other threats. It also effectively guarantees access to, use of and control over land, property and housing resources.

Q11. Do women and men enjoy equal tenure and property rights regardless of their civil or other status? Has lack of secure tenure contributed to situations of VAW? How does the Government guarantee such security of tenure to women? What measures have been adopted to give full protection against forced eviction, based upon effective participation, consultation and negotiation with affected persons or groups?

(b) Access to public goods and services The right to adequate housing cannot be effectively realized without access to public goods and services, including, water, health-care, transport, fuel, sanitation, lighting and electricity, sewerage and waste disposal, child care and communications.

Q12. What policies and measures have been adopted by the Government to provide or regulate such services to meet the needs of the community? Do women and female-headed households enjoy equal access to such services? Are the basic services privatized? If so, are there subsidies and/or different pricing mechanisms designed to ensure affordable access by the poor?

(c) Access to land, water and other natural resources Every community must have access to natural resources necessary for its survival and livelihood, including, inter alia, fuel, fodder, water and building materials.

Q13. What are the laws, policies and measures adopted to ensure equitable distribution of land with emphasis on the gender equality and provision of necessary resources for poor households and other marginalized and vulnerable groups? Have land reforms, both urban and rural, been implemented to ensure its fair distribution as a public good? What steps have been taken to respect the housing rights of land-based indigenous and tribal peoples in general and women within these groups in particular?
Q14. Do women and female-headed households have equal access to natural resources sufficient to their needs, including necessary for its survival and livelihood, including, inter alia, land, water, building materials, fuel and fodder? What measures have been adopted by the State to effectively regulate distribution and ensure the accessibility and affordability of such resources for women and female-headed households, including through subsidies?

Q15. What measures have been adopted to ensure that clean and safe water is reliably accessible and provided in adequate supply for individual, family and community use? Do women enjoy equal access to safe drinking water and to water for agricultural or other domestic use?

(d) **Affordability:** Individuals and communities should have access to affordable housing and must have the corresponding right to livelihood so as to be able to afford decent housing.

Q16. Do women enjoy equal access to housing finance? What policies and measures have been adopted by the State, including through subsidies, tax incentives or market regulation, to ensure affordability of housing particularly for women and female-headed households? Is there a national definition of “affordability” of housing (e.g. a maximum of one-third of any household income be required to obtain adequate housing)? How does un-affordability of housing contribute to women’s vulnerability to VAW e.g., preventing women from leaving situations of domestic violence?

(e) **Habitability:** Adequate housing must provide needed space to live in dignity and peace. It must also provide protection from natural elements, structural hazards and disease vectors that are threats to physical well-being. The physical conditions of the home can affect the realisation of other rights, including the highest attainable standard of mental and physical health, as well as education, whereas the lack of conditions are not conducive to learning (especially for children).

Q17. How do laws and policies that regulate the habitability of housing or define the habitability aspect of adequate housing, take into consideration special needs of women?

Q18. What laws and policies have been adopted to regulate environmental degradation and to guarantee the right to a safe environment?

(f) **Physical accessibility:** Disadvantaged communities and groups which often include women and female-headed households, must be allowed full and sustainable access to adequate housing and resources, including land, infrastructure and sources of livelihood and the state must take account of special housing needs.

Q19. What measures and policies have been adopted to guarantee equality of access to adequate housing for women and female-headed households and other disadvantaged groups within communities (e.g. battered women, women with HIV/AIDS, women with disability, indigenous women, refugees and internally displaced)?

(g) **Location:** Adequate housing must be in a place that enables access to employment, primary health-care, education and other social services and civic amenities. The financial and temporal cost of transport must not place excessive financial and other demands on the household. In addition, both rural and urban housing must be in a location that is safe, particularly from environmental hazards and pollutants.

Q20. Do women face any particular constraints in accessing services and resources necessary for livelihood because of where they live? What are policies and measures adopted to alleviate them?

(h) **Cultural adequacy:** Housing configuration, spatial design and site/community organization should be determined locally and in harmony with a community's cultural preferences and attributes.
Q21. Are women from all cultural, ethnic, religious or other background enabled to express cultural diversity, to participate in planning process (also see questions 23 and 24 below) and have the right to self determination in relation to housing? Please share such cases and examples.

(i) Freedom from dispossession, damage and destruction: Each individual and community has a right to a place to live without threat of dispossession from land, all forms of their property, their homes and resources, as well as all individual and collective holdings required to sustain livelihood.

Q22. Does the State effectively safeguard the right not to be subjected to arbitrary interference with home, person and privacy, including dispossession? What are policies and measures adopted to protect women including female-headed households and compensate, resettle or provide for restitution where dispossession takes place?

(j) Access to information: Individuals and communities must have access to appropriate data, documents and intellectual resources that impact upon their right to adequate housing. Having access to appropriate data means being informed about potential industrial and natural hazards, infrastructure, planning design, availability of services and natural resources and other factors that affect the right.

Q23. What laws and policies exist to facilitate access to information that impact upon the right to adequate housing, including information about potential industrial and natural hazards, infrastructure, planning design, availability of services and natural resources? Are women regularly accessing such information and benefiting from them?

(k) Participation: Effective participation in decision-making is essential to the fulfilment of all other rights, as well as the elements of the right to housing. At all levels of the decision-making process in respect of the provision of and right to adequate housing, individuals and communities must be able to express and share their views, they must be consulted and be able to contribute substantively to such processes that affect housing, including, inter alia, location, spatial dimensions, links to community, social capital and livelihood, housing configuration and other practical features. The state must ensure that building and housing laws and policies to not preclude free expression, including cultural and religious diversity.

Q24. What policies and measures adopted to ensure/encourage popular participation in decision-making process with regard to housing policies and planning? Are women sufficiently represented in the process?

Q25. Do the housing laws and policies expressly protect, promote and fulfil the right to freedom of expression to ensure harmonious and effective design, implementation and maintenance of the community?

(l) Resettlement, restitution, compensation, nonrefoulement and return: Resettlement may be essential to survival in the case of natural or human-made disasters, including in conflict and post conflict situations. Therefore, the congruent right to freedom of movement can be essential to the fulfilment of all other rights. Any resettlement arrangement, whatever the cause, must be consensual, fair and adequate to meet individual and collective needs.

Q26. Are there special measures adopted in resettlement process that recognizes the need of women and female-headed households to sufficient access to the sources of livelihood, productive land, infrastructure, social services and civic amenities, as well as fair and adequate restitution and/or compensation for losses?

(m) Privacy and security: Every woman, man, youth and child has the right to live and conduct her/his private life in a secure place and be protected from threats or acts that compromise their mental and/or physical well-being or integrity inside or outside the home.

Q27. What measures have been adopted to ensure physical and mental security and personal privacy of women, including preventing domestic violence?

(n) Access to remedies: Provision of domestic legal and other remedies is an important part of protecting the right to adequate housing. Individuals and groups must be protected from abuse by landlords, property developers, landowners or any other third party
capable of abusing their rights. Where such infringements do occur, public authorities should act to preclude further deprivations as well as guaranteeing access to judicial redress including legal and equitable remedies for any infringement caused.

Q28. Are there remedies and legal aid available for women? What are measures adopted to ensure equal access of women to judicial process and remedies? What are other innovative mechanisms such as self-help groups and women’s collectives that can facilitate women’s access to housing and livelihood?

(o) Education and empowerment: Individuals and communities should have access to technical assistance and other means to enable them to improve their living standards and fully realise their economic, cultural and social rights and development potential. The State, for its part, should endeavour to promote and provide for catalysts and mechanisms for the same, including efforts to ensure that all citizens are aware of procedural measures available toward defending and realizing her/his right to adequate housing. Human rights education is a key part of such empowerment strategy.

Q29. What have been achieved in terms of building capacities and awareness on the right to adequate housing among women in your country? What is your assessment of remaining needs and challenges?

(p) Freedom from violence against women - The state must prevent all forms of violence against women committed by either state or non-state actors to ensure women’s RAH. The definition of VAW as per the UN Declaration on the Elimination of Violence against Women (1993) is "any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life". Further, the State is responsible for addressing both individual and structural forms of violence, in the family, the community and by the State and ensure that there is legal redress for any acts or threats of VAW.

Q 30. What forms of VAW and what threats of VAW occur as a result of housing violations such as, rape, domestic violence, assault, trafficking, family abuse, forced marriage, dowry deaths and others. How to housing violations make women more vulnerable to VAW?

Q31. Who are the perpetrators? What kinds of housing violations do victims of VAW face e.g., battered women, rape survivors? Show information where realisation of the RAH has lead to less VAW?

Q32. What strategies/best practices have been used to address VAW related to housing rights violations e.g., are there adequate shelters for domestic violence victims?