ICT4COP

Downloading Trust:
Can information and communication technology (ICT) help police and communities better address gender-based violence?

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In recent years, mobile applications for both the police and victims have been developed in several countries to address gender-based violence (GBV). Most have fallen under four categories: emergency assistance, reporting, mapping of incidents, and educational. At the same time, police reforms are beginning to address GBV in various ways, such as through the establishment of gender response units and the recruitment of women in the police.

Based on fieldwork conducted in a total of 11 case countries spanning four continents, this brief considers the constraints and possibilities of using technology to address GBV in community-based policing (COP) in post-conflict contexts.

In short, findings suggest that while there is potential for ICT to address GBV in many of these difficult contexts, the focus of technology development has to shift towards addressing the particular social, cultural, and technical needs and constraints of GBV victims. This includes linking technology development to trust-building efforts between police and communities, and a broader approach to GBV prevention.

In societies that have experienced violent conflict, the road to peace and human security can be long, and not always peaceful. In many cases violence continues, often in forms that are less visible than during the conflict. One of the most striking examples is gender-based violence (GBV), damaging and deadly for its victims, but not often in the limelight of post-conflict security reform, despite international conventions and resolutions.[i] Victims of GBV can be girls, boys, men, women, and LGBTQ+s. However, since the topic of GBV against boys, men and LGBTQ+s remains taboo in many societies, violence against women and girls receives more attention in public discourse, and the statistics remain dismal: according to the World Health Organization, one in three women (35%) in the world experience gender-based violence during her life.[ii] GBV is often cited as the number one insecurity for women and girls.

Fortunately, efforts to address GBV, at least for girls and women, in post-conflict police reforms are increasing. In all of our case studies, police reforms have included some gender focus, for instance, in the form of gender response units, women's desks at police stations, strategies for the recruitment of women in the police, etc.
Examples include:

• In Afghanistan, family response units have been introduced in most provinces;
• In Pakistan, women's police stations and women's desks have been introduced;
• In Nicaragua, "Mother and Child Stations" were created to tackle issues of intra-family violence;
• In El Salvador there are police gender units;
• In Serbia and Bosnia and Herzegovina, actions have been taken to increase the number of female police cadets.

While such initiatives are promising, their reach is often limited, and they operate on the assumptions that women and girls can easily report violence to the police in general and to their special gender units in particular, and that they will be able to protect victims throughout the process of reporting, registering and prosecuting cases of GBV. In contexts where societal trust is already at a deficit, these assumptions may not hold. Police are usually neither trusted nor are they able to respond adequately to incidents of GBV such that victims feel (and are) safe and perpetrators are prosecuted. In South Asia, for

example, it is considered shameful for a woman to visit a police station, which is seen as an exclusively male bastion. In El Salvador, it can be dangerous for women to be seen entering police stations, or even talking to women police, as criminal gangs can believe they are colluding with the authorities. Also, these initiatives aimed at dealing with GBV are often urban-based, leaving rural women few or no options to safely contact the police.

ADDRESSING GENDER-BASED VIOLENCE WITH ICTs

In recent years, the use of ICTs has been seen as one way to break down the barriers of reporting GBV incidents to the police in person. In our case countries, this has mainly taken the form of telephone emergency hotlines and reporting hotlines. In addition, in some cases mobile applications have also been developed. Some of the experiences have been promising, in that victims do use hotlines, and are assisted in various ways, for example:

• In Mogadishu, Somalia, a rape-reporting hotline run by an NGO receives calls on a daily basis and follows up by taking women to clinics and helping them with other issues, such as locating lost children.

• In Khyber, Pakhtunkhwa, Pakistan, the police have a new public service number that refers women's cases to a women's desk, and numerous NGOs have telephone hotlines and counselling.

• In Afghanistan, the police have an emergency call number (119) where women police in particular can report harassment and rape to the Gender and Human Rights Department in the police.

• In Serbia, in December 2018, a nation-wide 24/7 hotline for women who are victims of violence was launched that is supervised by the Ministry of Work and Veteran and Social Affairs. Also, the Serbian Ministry of Interior operates a free phone line to report all cases of domestic violence (regardless of victim's age and gender); reported incidents are passed to relevant police stations. Moreover, in this country there are a number of emergency lines for victims of gender-based violence operated by local NGOs.
It is important to note here that only a few of these hotlines in our case countries are run by the police - the vast majority are run by NGOs. When it comes to GBV-related mobile applications, a few good examples can be found in the Western Balkans:

• In Kosovo, a mobile application has been developed by an NGO where women can report the location where they were harassed, such that women, communities, and the police can respond accordingly. This could, for example, involve being vigilant,

avoiding the areas (women and girls), or taking initiatives to prevent future harassment (communities and police, i.e. installing street lights in unsafe areas, increasing the number of patrols).

• In Serbia, an NGO created a mobile application for women allowing them to look for help in case of danger. Users of this application can send an SMS to chosen persons; call the police, ambulance, hopital or other help institution; see the Google map with the locations of the closest institutions providing assistance; and fill in a questionnaire about the incident which will suggest how she should act (what she can do) in this situation. The NGO also offers a special bracelet that uses Bluetooth to connect to the mobile app.

Once again, it should be noticed that mobile phone-based solutions addressing GBV seem to be mostly created by (or in cooperation with) NGOs rather than by the police themselves in the studied countries.

Should the police become more active in the use of ICT for addressing GBV? As police, even in post-conflict, are increasingly digitalizing their work and providing online services to the public, is this also an area where they could play a more active role? Would having a hotline or online reporting facility for GBV victims in the police be enough to make victims feel safe, and provide the necessary support?

CHALLENGES: TRUST AND SAFE SPACES

Despite police efforts to make it easier to report GBV, e.g. through gender response units, in many cases it remains extremely difficult for women to report GBV to the police. The police often remain an institution that women do not yet trust to protect them from either the perpetrator or from their own families. In Afghanistan, even if a women escapes her rapist, her own family may threaten or kill her to protect family honour. If the woman goes to the police and reports the crime, there is no guarantee that the perpetrator will be prosecuted, nor that she can safely return home; perhaps she is merely returned to the same situation from which she fled. Therefore, Afghan women victims choose either not to report violence at all, or to confide in family or community institutions whom they trust to protect them. If local institutions are also controlled by men, as for example most *jirgas*[iii] in Pakistan, women are dependent on supportive male family members or powerful community women to state their case. Despite these challenges, women themselves often still prefer addressing these issues within the family or

community and not involve the police, whom they trust even less. Without access to people they can trust and spaces that are safe, women will refrain from reporting GBV to the police, despite the fact that they may have a mobile phone and a number to call. If the institution is not trusted, the technological solutions which are supposed to support victims will not be trusted either, and consequently they will not be effectively used. There thus remains a gap between victims and the police.

In many of the case countries, this gap is filled by NGOs. Where they exist, these organizations attend hotlines for GBV victims, but also offer services such as shelters, and provide legal or paralegal assistance and health advice. Some also provide information to communities about GBV and inform women of their legal rights. These organizations are able to provide safe spaces for women victims of GBV to get the assistance they need, at least in the short run. NGOs play a crucial and comprehensive role in supporting GBV victims in many of our case countries, for instance in Bosnia and Herzegovina, Serbia, Somalia, and Somaliland.

Despite filling a gap for victims, many of these organizations may not link at all to the police, nor to other government departments. In fact, some organizations experience mistrust and hostility from authorities. In Afghanistan, women's shelters run by NGOs are considered by conservatives as places of prostitution, and they have experienced a lack of willingness from police to provide protection for their facilities. On the other hand, the rape call line in Somalia is run by an NGO in close collaboration with and approval of the authorities. Research in Bosnia and Herzegovina provides us with examples of local self-governments and NGOs cooperating (together with other relevant local actors, e.g. the police) to introduce protocols establishing comprehensive response procedures in cases of domestic violence.

One of the consequences of a lack of communication between NGOs and the police in terms of GBV is less focusing on finding and prosecuting perpetrators. While protection is paramount, not concentrating on holding perpetrators accountable or enabling some kind of justice can leave a message of male impunity, prevent victims from returning safely home, and affect efforts towards prevention.

In any case, the reach of these efforts remains limited, and mainly in urban areas. Rural GBV victims, and particularly those outside areas of post-conflict security reform, have limited options for protection and police assistance. A new perspective is indeed needed.

ARE WE ASKING THE WRONG QUESTIONS? THE CASE OF PAKISTAN

Based on our findings, the constraints for reporting GBV cases may not be the only or even most important issue, and thus developing ICTs to address it may not be so relevant. Perhaps we need to change the way we see the problem and the basic questions we ask. In our research cases, we have identified four key questions that could give better insight into issues of GBV and ICT:

• Who do women trust in their communities?
• Do institutions and safe spaces already exist that offer focused protection and prevention activities?
• What role can the police take in these communities that builds trust, holds perpetrators accountable, and contributes towards GBV prevention?
•How might ICTs enhance these interactions for the benefit of GBV victims?

Focusing on these questions, our research in Pakistan has uncovered innovative institutional solutions which show promise in that context. One example is an organization working with GBV victims that has begun to focus on linking police, and specifically the women police where they exist, with government run basic health units (BHUs). These units are present in most communities and used regularly by women, and could serve as a focal point for GBV victims. For such a link to be successful, specific training is necessary for both police and health workers on how to work together to both ensure the safety of victims, and proper follow-up by the community and courts. In this scenario, there are clear advantages of the police taking a community-based policing (COP) approach, with a focus on trust-building, problem solving, and prevention. Also, while innovative in practice, the approach is nevertheless anchored in already existing government institutions, increasing the chances that the new relationships forged between the police and the health service are sustainable.

How might ICT be used to enhance trust-building between the police, the health services, and the community? The police interviewed were very clear when asked about what was needed to better address GBV. The first was the ability to look up relevant laws concerning GBV crimes to be able to report them accurately so they could be processed correctly in the judicial system. The second, however, was the need for training and guidelines (or SOPs - Standard Operating Procedures) on how to deal with GBV cases. What should they do if they are facing a GBV victim? How should they talk with GBV victims?

Who should they contact for assistance? Both needs are currently being addressed in a mobile application being developed by an NGO together with the ICT section of the Pakistan police.

There is also work being done to develop a mobile application for the use of not only victims but health staff at the BHUs as well. For victims, this app will connect them with their local support services. For health staff, it will inform on victim's rights, how to handle different situations where GBV has occurred, who to contact for further assistance, and how to work in communities to prevent GBV in the first place. The key points are: 1) these applications are based on a broader set of needs connected to GBV (not just reporting); and 2) they do not stand alone, but are an integral part of a more comprehensive approach to address GBV issues.

CONCLUSIONS

The Pakistan case exemplifies how closer attention to local context can result in new constellations of institutional cooperation, as well as a new look on how ICTs could be used to address GBV.

However, while the innovative solution created in this case country can serve as inspiration, at the same time it does not provide a blueprint for other contexts. A collaboration between BHUs and the police in a different country may not be feasible at all, and there will likely be regional and contextual differences as well. The four questions suggested from our work need to be asked in each context, and discussed together with police and communities, to discover the unique combination of actors and technology that will make a difference in that particular context.

Notes
i) For example UNSCRs 1325 and 1820; UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW); Council of Europe Convention on preventing and combating violence against women and domestic violence.
ii) Source: https://www.who.int/news-room/factsheets/detail/violence-against-women
iii) Group of village elders.

RECOMMENDATIONS

• Before considering ICTs to address GBV, thoroughly understand the social and institutional context of which victims are a part
• Communities, civil society organizations, and government actors such as the police, health workers, teachers, religious leaders, and the like should be actively included in defining the issues, and designing possible ICT tools.
• Dialogue and trust-building should be in the center of all initiatives to address GBV. ICTs should be used to enhance trust-building relationships, not replace them.
• ICTs should be part of a broader system of GBV prevention and response.

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The Project

The ICT4COP research project seeks to understand human security in post-conflict settings by researching community-based policing and post-conflict police reform.
The Norwegian University of Life Sciences (NMBU) is the project coordinator.

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