



Panel Discussion on



Safety of Women & Girls in Goa : Effective, Accessible & Accountable One Stop Crisis Centres

Co-organised by The International Centre Goa
and Saad Aangan – Goa (a gender resource group)

Monday, 28th March 2016, 3.00 – 6.00 pm

At The International Centre Goa, Dona Paula

Chairperson: **Adv. (Dr.) Albertina Almeida Lawyer**
Human rights activist and independent researcher

Speakers:

1. **Ms. Fransquinha Oliveira** (Deputy Director - Directorate of Women & Child Development)
“Scope, concept, rationale, structure and status of One Stop Crisis Centres”
2. **Dr. Shaila de Souza** (Head, Centre for Women’s Studies, Goa University)
“Goa’s need for One Stop Crisis Centres”
3. **Ms. Maria Angelica D’Souza**, (Volunteer, Saad Aangan and a para-legal volunteer with the District Legal Services Authority, North Goa)
“Need from the experience of women’s groups”
4. **Ms. Anita Haladi** (Associate Professor, Department of Economics, DM’s College, Assagao, ex-Vice-Chairperson, Goa State Commission for Children, founder-member, Children’s Rights in Goa)
“Economic Sense of One Stop Crisis Centres and Relation of the Centre with NGOs and CSOs”

INTRODUCTION

There is serious concern about the increasing violence against women and girl children which is leading to further insecurity among women in our society. It has time and again been expressed that if the complaints of violence are appropriately redressed, and the guilty brought to book, there will be a decrease in violence. Also, it has been noticed that some sections of women are more vulnerable to violence and have lesser possibilities of assistance. In that context, citizens’ and women’s groups have expressed a growing need for accessible and accountable units that can assist a woman victim/survivor of violence in her journey for justice in all respects. One Stop Crisis Centres have been a long standing demand. The Government of India has developed a One Stop Crisis Centre Scheme in response. What is this Scheme about? Can the Centres as visualised be effective? How can it be ensured that the Centres are effective, accessible and accountable?

It was to understand the scope of this scheme, to brainstorm whether the centres as visualised can be effective and to explore ways of ensuring that the Centres are effective, accessible and

accountable, that the discussion was co-organised on 28th March, 2016, by The International Centre Goa and Saad Aangan. In other words, it was intended to foreground the concerns, issues and suggestions that can help make One Stop Crisis Centres and Helplines effective, accessible and accountable. The Panel Discussion was therefore meant to both inform and kick start the discussions and address the issue comprehensively.

The symposium brought together Government and institutional functionaries related to the subject, and civil society representatives, including representatives of women's rights organisations, human rights organisations and service providers.

Panellists included activists and persons from academia besides a representative of the Directorate of Women and Child Development. The discussion was chaired and moderated by Adv. (Dr.) Albertina Almeida.

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The representative from Directorate of Women and Child Development, Government of Goa, **Ms. Fransquinha Oliveira**, Deputy Director, made a lucid presentation on the One Stop Crisis Centre Scheme formulated by the Ministry of Women and Child Development, Government of India. Her presentation highlighted:

- That the Scheme has, as **its objectives**,
 - a) Provision of integrated support and assistance to women affected by violence, both in private and public spaces under one roof and
 - b) Facilitation of immediate, emergency and non-emergency access to a range of services including medical, legal, psychological and counselling support under one roof to fight against any forms of violence against women.
- That the Scheme is fully **funded** by the Central Government both in terms of establishment of infrastructure as well as the operating expenses as per the Guidelines and the standard operating procedure.
- That the Centre is intended to **cater** to all women including girls below 18 years of age affected by violence, irrespective of caste, class, religion, region, sexual orientation or marital status, and **link institutions and authorities** established under Juvenile Justice (Care and Protection of Children) Act, 2000 and the Protection of Children from Sexual Offences Act, 2012, for girls below 18 years of age.
- That the services that would be available at the Centre are: medical assistance, police assistance, psycho-social support/ counselling, legal aid/counselling, short stay in case the women so require. It would be integrated with a Women Helpline 181 to provide a range of services.
- That as per the scheme, the State Government can outsource activities required for functioning of Centre such as management, legal assistance, medical assistance, counselling, IT, multipurpose and security etc.
- That the State Government has opted to construct OSC and thus has allotted and transferred land admeasuring 500 sq. metres belonging to Goa Medical College in Survey No. 83 of the Village Panchayat , Bambolim. to this Directorate for construction and setting up of OSC, and that steps were being taken for obtaining ownership of the land. The Ministry has sanctioned amount for establishment and for

construction of the Centre. The Ministry has sanctioned amount for establishment and for construction of the Centre.

- That since a full fledged, permanent One Stop Centre will take time, the State felt that there is an urgency to establish OSC and provide facilities to women in distress, and that hence, a **temporary arrangement** was made vide Order dated 30/10/2015, Adv. Emidio Pinho, The Co-ordinator, Victim Assistance Unit /SCAN, NGO is appointed to temporarily establish the One Stop Centre as well as Universal Women Helpline in the space allotted for the functioning of Victim Assistance Unit in the Forensic Department of Goa Medical College, Bambolim- Goa and provide assistance to women in distress as per the Ministry of Women & Child Development. Further, Vide Order dated 30/10/2015, the Dy. Director (Child Welfare) of this Directorate is appointed as a Nodal Officer. According to Ms. Oliveira, as per the monthly reports forwarded to Ministry of Women and Child, the number of cases registered and service provided was 34 in November 2015 and 33 in December 2015.
- That a **State Steering & Monitoring Committee is constituted** to monitor the functioning of “ SAKHI” One Stop Centre of this State with the following officials:- Secretary (Women & Child Development), Secretary for Tribal Welfare, Representative of Department of Home (*not below the rank of I.G.P.*), representative of Department of Health & Family Welfare (*not below the rank of Director*), representative of the State Legal Service Authority (*not below the rank of Secretary*), Civil Society Members, Director (Women & Child Development
- That **A Management Committee is constituted** who shall be responsible for the overall management of the “ SAKHI” One Stop Centre of this State and act as a Monitoring Committee at District level with the following officials:- District Magistrate/Commissioner, Superintendent of Police, Secretary, District Legal Service Authority, Chairperson of the Bar Council, Chief Medical Officer, District Programme Officer (DPO), Protection Officer (PO) appointed under Protection of Women from Domestic Violence Act, 2005, District Panchayat Officer, Members of the Civil Society (3 members out of which at least 2 be women), Project officer ITDA/ITDP in district with ITDA/ITDP area, any other member co-opted by the Chairperson.
- Ms. Oliveira pointed out that The Directorate of Health Services has set up Crisis Intervention Centre in December, 2014 in collaboration with CEHAT (Centre for Enquiry in Health and Allied Theases), Mumbai at the District Hospital, North Goa (Asilo) with financial support from NMEW (National Mission for Empowerment of Women), Department of Women & Child Development. She further stated that this Centre offers crisis intervention services to all victims/survivors of domestic violence and sexual violence which includes psychological support, registration of police complaints, legal counselling, referrals to protection officers and lawyers, and that the medical care is also provided by respective departments of the hospital. A core group comprising of doctors, nurses and social workers are provided intensive training on the issue of violence against women and are trained as trainers. The core committee monitors and plan to impart trainings for health paramedics, teachers, headmasters, transport department, staff, etc. Such training has been conducted for doctors, nurses and labour staff.

This was followed by a reflection of a three member panel on the One Stop Crisis Centres, the need as well as the scheme.

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Dr. Shaila Desouza, Head of the Department of Women's Studies, Goa University, presented the magnitude of the need for one stop crisis centres, and further recalled the experience of organisations demanding a Special Cell to deal with Crimes against Women.

The highlights of her presentation were:

- A One Stop Centre is envisaged as a place where one can access multiple services such as medical assistance, a Police desk, psycho-social support/counselling, shelter, referral, legal aid, video-conferencing facility, at one point.
- It is meant to address gender based violence, that is, any act that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.
- The statistics from Goa Police of 495 cases in 2013 are only the tip of the iceberg, as much violence goes unreported and even in the statistics reported there are discrepancies.
- Since 1992, women's groups have been demanding a Special Cell to deal with Crimes Against Women, and a temporary cell was sanctioned at old GMC where support services were provided on a voluntary basis and this effort was coordinated by the Centre for Women's Studies, and thereafter by the State Commission for Women, until the Family Counselling Centre scheme was implemented under the supervision of the State Social Welfare Advisory Board by an NGO. However, the Counselling was kept completely apart from the police cell, where it was seen as required to be at that time, in order to facilitate a woman who approached the police with a grievance of gender based violence. A woman who has been the victim or survivor of a crime requires to be hand held through the entire criminal justice system when she reports a crime against her to the police.
- If it is a pilot project, it can begin with one Centre, but its outreach needs to be expanded in view of the volume of crimes against women as reflected in the experiences of each service provider (including women's groups) that is contacted for assistance.
- Drawing from experience, the focus of the Centres needs to be empowerment and should certainly include but not be restricted to individual counseling which makes it seem that it is just an individual problem, and does not address the social environment; postings to this Centre should not be perceived as punishment or retirement postings and must have the value they deserve, given the investment of time, services and skills
- There has to be transparency in the appointment of Implementing Agency and empanelment of service providers.

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Ms. Maria Angelica D'Souza, volunteer of Saad Aangan and a para-legal volunteer with the District Legal Services Authority, North Goa, dwelt on the need and scope of the One Stop Crisis Centres as experienced by women's groups

The highlights of her presentation were:

- The range of activities and skills and extent of commitment called for in hand holding a woman through the crisis she is experiencing.
- This begins with making the woman feel comfortable so that she is at ease to talk and can talk coherently, which may take a couple of sessions sometimes.
- It also means hearing a woman in crisis out in detail so that the options available in terms of suiting her interests, can be explained to her.
- It then entails referrals or hand-holding a woman through the various institutional mechanisms.
- It also often involves escorting the woman if necessary.
- It also calls for engaging with family members and other significant persons.
- It means building bridges for her support systems.
- It means constant interactions with various institutional mechanisms, as the problems are systemic.
- It means coordination among various functionaries of institutional mechanisms and support systems involved for a woman.
- She particular emphasized the accentuation of difficulties for women from poor economic backgrounds or from the unorganized sector when in a crisis.

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Ms. Anita Haladi, Associate Professor, Department of Economics, DM's College, Assagao, ex-Vice-Chairperson, Goa State Commission for Children, founder-member, Children's Rights in Goa, and Hamara School, presented on the Economics of One Stop Crisis Centres.

The highlights of her presentation were:

- That the Centre proposes to provide for one Centre per state as a pilot project, for which the initial budget is allocated to the State Governments UT admins as per the proposals received by the respective States/ UTs and it was necessary to clarify whether the DWCD had sent an initial proposal and what that proposal was.
- The MWCD has worked out the financial estimates for the OSCC. The provisions need to come under the scrutiny.
- The importance of adhering to time schedules to enable the MWCD to release the funds in time.
- The lessons from the past in pursuing the demand for Women Police Station, including the lack of clarity for budgetary provision of certain services, non-compliance of Standing Order imperatives such as meetings with NGOs and stakeholders.

- The need to have a clearly established protocol regarding NGOs and the engagement with Government in service provision.
- The need to revisit the clubbing together of services for women and children.
- The problems associated with outsourcing, with Victim Assistance Unit under the Goa Children's Act as an example.
- The need for notification of guidelines and protocols to make them legally binding.
- The need to ensure that we are not saddled with a resource deficient and hence non-functional one stop crisis centre
- The need for the State Government to pool in resources to ensure that every taluka has a one stop crisis centre.
- The OSCC should not be a cover for deficiencies in policies and schemes
- There should be no dilution or spreading out of coverage by saddling the one stop crisis centres with unrelated functions as additional charges or responsibilities

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**List of recommendations to be submitted to
Directorate of Women & Child Development, Government of Goa**

1. The protocols and guidelines need to be statutorily notified and binding, otherwise there is no accountability,
2. The setting up of such a centre/s should not become a basis for dislocation or dismantling of other existing services.
3. In special category cases / situations such as mentally ill persons / children in domestic labour / incest, there are added responsibilities and services required to be dispensed.
4. The lack of transparency is apparent in that a temporary OSCC is already in place without organizations working in the field knowing anything about it.
5. One Stop Crisis Centres cannot rest on the plank of schemes, they have to be institutionalized.
6. There need to be built-in-systems to ensure that the Centres are not paper-oriented, but people-oriented.
7. There has to be appropriate budgeting, for gender sensitization at all institutional levels, and awareness of the existence of OSCC/s
8. There has to be a criteria for tapping any expert services or skills residing in NGOs
9. A proper evaluation of the deficiencies with or challenges for the existing helplines has to be carried out so that the issues are addressed with the new helpline proposed to be set up
10. Selection process and criteria have to be clearly set out, in the interests of transparency and effectiveness
11. There has to be appropriate infrastructure and services, so that the Centres are not rendered redundant, and are duly accessible.
12. Due process must be upheld at all times and political interference must be eschewed.
13. Technology must be effectively harnessed in the functioning of the OSCCs
14. There is a need for at least one One Stop Crisis Centre in each taluka. One may be set up as a pilot instantly, but it has to be a pilot at a taluka level, and the experiences of the pilot cannot simply be replicated in other talukas, as there may be some specifically different needs.
15. Social audit is imperative. The demand and obligation for periodic meetings with civil society members must be duly observed.
16. Without a proper Budget allocation, which appropriately factors salaries of staff and not honoraria / token payments, commensurate with the required qualifications and skills, and for adequate amount of personnel and infrastructure, OSCCs will be reduced to lip-service.
17. The participants had serious reservations about outsourcing of OSCCs, and were largely opposed to the same. This was all the more compounded by the announcement that the OSCC has already been temporarily outsourced from November!
18. The need for the State Government to commit resources to meet the needs and requirements.
19. ACCOUNTABILITY, TRANSPARENCY, EFFECIVENESS AND ACCESSIBILITY has to be Key.