

**GOVERNMENT**  
**ORDERS**  
**2012**



**GOVERNMENT OF KERALA**

Abstract

Social Welfare Department-NIRBHAYA-Kerala State Policy to combat sexual violence and sex trafficking of Women and Children-draft framework-approved-orders issued.

**SOCIAL WELFARE (B) DEPARTMENT**

G.O (MS) No. 17/2012/SWD

Dated, Thiruvananthapuram, 13.03.2012.

Read: G.O (MS) No. 39/2011/SWD, dated 23.8.2011

**ORDER**

As per the Government Order read above, Government have constituted an Advisory Committee with the following members to prepare a draft policy to combat sexual violence and sex trafficking of women and children.

Smt.K.Sugathakumari	-	Chair Person
Smt.Lida Jacob IAS(Retd)	-	Member
Smt.Sarada Muraleedharan IAS	-	Convenor
Secretary, Social Welfare Department		
Smt.Sunitha Krishnan	-	Member
Smt.Mallika Sarabhai	-	Member

The Committee submitted its report and the comments/suggestions of the various departments have also been incorporated in the draft frame work submitted by the Committee.

Government after having examined the matter in detail, are pleased to approve the draft framework of NIRBHAYA, Kerala State Policy to combat sexual violence and sex trafficking of women and children, as appended to this Government Order.


By Order of the Governor,

**Dr.K.M.Abraham**  
Principal Secretary to Govt.

To:

The Director of Social Welfare, Thiruvananthapuram.  
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
The Accountant General (A&E) Kerala, Thiruvananthapuram.  
The G.A (SC) Department (vide item no.1306 dt 6.3.12)  
Stock file/O.C.

Forwarded/By Order

  
Section Officer

Copy to: PS to Minister (Panchayat and Social Welfare)  
PA to Principal Secretary, Social Welfare Department.



**GOVERNMENT OF KERALA**

Abstract

Social Welfare Department - Implementation of 'NIRBHAYA' policy - Executive Committee - Constituted - orders issued.

**SOCIAL WELFARE (B) DEPARTMENT**

G.O.(Rt) No. 253 /2012/SWD

Dated, Thiruvananthapuram, 22.05.2012

Read: 1) G.O.(Ms) No. 17/12/SWD dated 13/03/2012.

2) Letter No. F3-13341/12 dated 4.5.2012 from the Director of Social Welfare.

**ORDER**

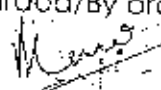
Government are pleased to constitute the Executive Committee of 'NIRBHAYA' as per para V.8 of the Policy with the following members.

- Minister for Social Welfare - Chairman
- Principal Secretary, Social Welfare
- Principal Secretary, Local Self Government Department
- Director, Social Welfare,
- Director, Panchayaths
- Adv. J. Sandhya, Human Rights Law Network, Thiruvanthapuram
- Director, Trivandrum Social Service Society.
- Smt. Seema Bhaskar, Former Executive Director, Kerala Mahila Samakya Society.
- Smt.T. M.Sudha, Senior Town Planner
- Smt.Lida Jacob, Advisor( Gender and Child Protection)- Convenor

By order of the Governor,  
**Dr. K.M.Abraham**  
 Principal Secretary

All the Members  
 Director of Social Welfare  
 Smt. Lida Jacob, Advisor( Gender and Child Protection)  
 The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
 The Accountant General (A&E), Kerala, Thiruvananthapuram.  
 The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
 Stock file/ O.C.

Forwarded/By order

  
 Section Officer



GOVERNMENT OF KERALA

Abstract

Social Welfare Department - Implementation of 'NIRBHAYA' policy - State level Co-ordination Committee - Constituted - orders issued.

**SOCIAL WELFARE (B) DEPARTMENT**

G.O.(Rt) No. 254 /2012/SWD

Dated, Thiruvananthapuram, 22.5.2012

- Read: 1) G.O.(Ms) No. 17/12/SWD dated 13/03/2012.  
 2) Letter No. F3/13341/12 dated 04.05.2012 from the Director, Social Welfare.  
 3) G.O (Rt) No.253/12/SWD dated 22.5.2012.

**ORDER**

Government are pleased to constitute the State Level Co-ordination Committee of 'NIRBHAYA' as per para V.7 of the Policy with the following members:

- 1) Chief Minister- Chairman
- 2) Minister for Social Welfare - Vice- Chairman
- 3) Minister for Youth Affairs -Vice- Chairperson
- 4) Chief Secretary to Government
- 5) Principal Secretary, Social Welfare- Convenor.
- 6) Principal Secretary, Home
- 7) Principal Secretary, Health & Family Welfare
- 8) Principal Secretary, Local Self Government Department
- 9) Principal Secretary, Scheduled Caste /Scheduled Tribe Development Department.
- 10) Secretary, General Education Department
- 11) Secretary, Law Department
- 12) Director General of Police
- 13) 3 District Panchayat Presidents (Heads of district level Nirbhaya Committees)
  1. Smt. Suhra Mampad, Malappuram
  2. Shri. Eldos Kunnappilly, Emakulam
  3. Shri. R. Gopalakrishna Pillai, Kollam
- 14) Adv. Noorbina Rasheed, Member, Kerala Women's Commission
- 15) Director of Public Instruction
- 16) Executive Director, Kudumbashree
- 17) Project Co-ordinator, Kerala State AIDS Control Society
- 18) Member Secretary, KELSA

- 19) Director, Social Welfare - (Joint Convenor)
- 20) Managing Director, Kerala State Women's Development Corporation
- 21) Project Director, Kerala Mahila Samakya Society
- 22) Smt. Lida Jacob (Advisor, Gender & Child Protection) - Representative of the State level Executive Committee of NIRBHAYA
- 23) Three NGOs/Social Workers to be nominated by Govt.
  - i) Smt. Sugathakumari Teacher, ABHAYA, Thiruvananthapuram.
  - ii) Smt. P.E. Usha, Thaikula Sangham, Attapady - (tribal area)
  - iii) Director, Alappuzha Social Service Society - (Coastal area)

By order of the Governor,  
**Dr. K.M. Abraham**  
 Principal Secretary  
 Secretary to Government

All Members  
 The Director of Social Welfare, Thiruvananthapuram.  
 The Advisor, (Gender & Child Protection)  
 The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
 The Accountant General (A&E), Kerala, Thiruvananthapuram.  
 The Accountant General (D.B. Cell), Kerala, Thiruvananthapuram.  
 Stock file/ O.C.

Forwarded/By order

  
 Section Officer

Copy to: Private Secretary to Chief Minister  
 Private Secretary to Minister (Panchayat and Social Welfare)  
 Private Secretary to Minister for Youth Affairs  
 Additional Secretary to Chief Secretary  
 CA to Principal Secretary, Social Welfare Department  
 CA to Additional Secretary, Social Welfare Department



GOVERNMENT OF KERALA

Abstract

Social Welfare Department - Implementation of 'NIRBHAYA' policy - District Nirbhaya Committees - Constituted - orders issued.

**SOCIAL WELFARE (B) DEPARTMENT**

G.O.(Rt) No. 288/2012/SWD

Dated, Thiruvananthapuram, 19. 06.2012

Read: 1) G.O.(Ms) No. 17/12/SWD dated 13/03/2012.

2) Letter No. F3-13341/12 dated 4.5.2012 from the Director of Social Welfare.

3) G.O.(Rt) No. 253/12/SWD dated 22/05/2012.

4) G.O.(Rt) No. 254/12/SWD dated 22/05/2012.

5) Minutes of the NIRBHAYA State Level Co-ordination Committee held on 31.5.2012.

**ORDER**

Government are pleased to constitute the District level 'NIRBHAYA' Committees as per para V.5 of the NIRBHAYA Policy with the following members, in each of the 14 Districts of the State:

- Chairperson of District Planning Committee(DPC) - Chairperson
- District Collector - Vice- Chairperson
- District Social Welfare Officer- Convener
- District Probation Officer- Joint Convener
- Superintendent of Police/City Police Commissioner
- District Medical Officer
- Deputy Director, Education
- District Project Officer, Sarva Siksha Abhiyan
- Deputy Director, Panchayats
- District Mission Co-ordinator, Kudumbashree
- Women Protection Officer (PWDV Act)
- District Probation Officer under the JJ Act
- Tribal Development Officer
- Nodal Officer Anti- Human Trafficking Squad
- Heads of the Government care institutions concerned
- Representative of the District Legal Services Authority
- Representative of the Kerala Mahhila Samakhya Society
- Representative of the District Level Jagratha Samaiti ( non official)

- Chairperson of the District Child Welfare Committee(JJ Act)
- Child line representative
- 3 Representatives of the panchayat/municipal level Jagrata Samitis
- Representative of 3 NGOs/service providers collaborating in the programme

The District Collector concerned shall nominate the representatives of various organizations/Samitis etc mentioned in this order, in consultation with the District Panchayat President and the District Social Welfare Officer concerned.

By order of the Governor,  
**Dr. K.M.Abraham**  
 Principal Secretary

The Director of Social Welfare  
 All District Collectors  
 The Advisor, (Gender and Child Protection)  
 All the Members, (through the Director of Social Welfare)  
 The Principal Accountant General (Audit); Kerala, Thiruvananthapuram.  
 The Accountant General (A&E), Kerala, Thiruvananthapuram.  
 The Accountant General (D.B.Cell); Kerala, Thiruvananthapuram.  
 Stock file/ O.C.

Forwarded/By order

  
 Section Officer

Copy to: Private Secretary to Chief Minister  
 Private Secretary to Minister (Panchayat and Social Welfare).  
 CA to Principal Secretary, Social Welfare Department.  
 CA to Additional Secretary, Social Welfare Department.



**GOVERNMENT OF KERALA**

Abstract

Social Welfare Department - Implementation of 'NIRBHAYA' policy - State Level Co-ordination Committee of NIRBHAYA- Additional members as Special invitees- included - orders issued.

**SOCIAL WELFARE (B) DEPARTMENT**

G.O.(Rt) No. 427/2012/SWD

Dated, Thiruvananthapuram, 28.9.2012

Read: G.O.(Rt) No. 254/12/SWD dated 22.5.2012.

**ORDER**

Government are pleased to include the following persons as Special invitees to the State Level Co-ordination Committee of 'NIRBHAYA' constituted as per the Government Order read above.

- 1) Sri. Aryadan Shoukath, Chairman, Nilambur Municipality
- 2) Smt. Sunitha Krishnan, Projwala, 3<sup>rd</sup> floor, Behind Charninar Bus stand, Hyderabad 500002, Andra Pradesh.
- 3) Sri. P.Vijayan, IPS, Commissioner of Police, Thrissur

The above Government Order stands modified to this extent.

By order of the Governor,  
**Dr. K.M.Abraham**  
Principal Secretary

All the Members  
Director of Social Welfare  
Smt. Lida Jacob, Advisor ( Gender and Child Protection)  
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
The Accountant General (A&E), Kerala, Thiruvananthapuram.  
The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
Stock file/ O.C.

Forwarded/By order

  
Section Officer





GOVERNMENT OF KERALA

Abstract

Social Welfare Department - Implementation of 'NIRBHAYA' policy - Executive Committee - Additional members- included - orders issued.

**SOCIAL WELFARE (B) DEPARTMENT**

G.O.(R1) No. 428 /2012/SWD

Dated, Thiruvananthapuram, 28.9.2012

Read: G.O.(R1) No. 253/12/SWD dated 22.5.2012.

**ORDER**

Government are pleased to include the following persons also as members in the Executive Committee of 'NIRBHAYA' constituted as per the Government Order read above.

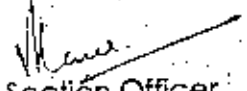
- 1) Executive Vice Chairman, Kudumbashree Mission
- 2) Member Secretary, Kerala State Social Welfare Board
- 3) Smt. Sahira Thangal, Flat 1-2, Hill Palace Apartments, Opp. Bishop House, Thiruvankulam P.O, Ernakulam.
- 4) Smt. Alphonsa John, Ex. MLA

The above Government Order stands modified to this extent.

By order of the Governor,  
**Dr. K.M. Abraham**  
 Principal Secretary

All the Members  
 Director of Social Welfare  
 Smt. Lida Jacob, Advisor (Gender and Child Protection)  
 The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
 The Accountant General (A&E), Kerala, Thiruvananthapuram.  
 The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
 Stock file/ O.C.

Forwarded/By order

  
 Section Officer

Copy to: Private Secretary to Chief Minister  
 Private Secretary to Minister (Panchayat and Social Welfare)  
 CA to Principal Secretary, Social Welfare Department I



കേരള സർക്കാർ  
സംഗ്രഹം

ഹൃദയകുഴപ്പം വകുപ്പിൽ പ്രവർത്തിക്കുന്ന വൺഡേ ഹോം നിർമ്മാണത്തിന് താല്പര്യമുള്ളവർക്ക് അനുബന്ധമായി നൽകി ഉത്തരവ് പുറപ്പെടുവിക്കുന്നു.

സാമൂഹ്യക്ഷേമ (ബി) വകുപ്പ്  
(സാധാ) നം. 459/2012/സം.ക്ഷേ.വി. തീയതി, തിരുവനന്തപുരം: 16.10.2012.

മർദ്ദം:- 27.07.2012-ലെ സാമൂഹ്യക്ഷേമ ഡയറക്ടറുടെ N/23005/12 നമ്പർ കത്ത്.  
ഉത്തരവ്

സാമൂഹ്യക്ഷേമ വകുപ്പിന്റെ പുഷ്പൂർ സാമൂഹ്യക്ഷേമ സ്ഥാപന സമുച്ചയത്തിൽ പാർട്ടി വൺഡേ ഹോം ആയി പ്രവർത്തിച്ചു വരുന്ന കെട്ടിടം നിർമ്മാണത്തിന് താല്പര്യമുള്ളവർക്ക് അനുബന്ധമായി നൽകി ഉത്തരവ് പുറപ്പെടുവിക്കുന്നു. ഇതിന്റെ പ്രവർത്തന ചുമതല സമുച്ചയത്തിലെ കൺട്രാക്ടർ സാമൂഹ്യക്ഷേമ ഡയറക്ടർ അദ്ധ്യക്ഷതയിൽ ഉണ്ടാകണമെന്ന് തീരുമാനിച്ചിട്ടുണ്ട്.

സർക്കാർ ഇക്കാര്യം വിശദമായി പരിശോധിച്ചതിന്റെ അടിസ്ഥാനത്തിൽ പുഷ്പൂർയിലെ സാമൂഹ്യക്ഷേമ സ്ഥാപന സമുച്ചയത്തിൽ ഇപ്പോൾ പ്രവർത്തിച്ചു വരുന്ന വൺഡേ ഹോം നിർമ്മാണ ചെൽട്ടർ ഹോം ആയി പ്രവർത്തിപ്പിക്കുന്നതിനും ഇതിന്റെ നടത്തിപ്പ് ചുമതല കേരള മഹിളാ സമഖ്യ സൊസൈറ്റിയെ ഏൽപ്പിക്കുന്നതിനും അനുബന്ധമായി നൽകി ഉത്തരവ് പുറപ്പെടുവിക്കുന്നു.

വെർണറുടെ ഉത്തരവിൻ പ്രകാരം,  
റ്റി.കെ.രാധാകൃഷ്ണൻ  
അണ്ടർ സെക്രട്ടറി,  
പ്രിൻസിപ്പൽ സെക്രട്ടറിക്കുവേണ്ടി.

- സാമൂഹ്യക്ഷേമ ഡയറക്ടർ, തിരുവനന്തപുരം.
- പ്രിൻസിപ്പൽ അക്കൗണ്ടന്റ് ജനറൽ (ഓഡിറ്റ്), തിരുവനന്തപുരം.
- അക്കൗണ്ടന്റ് ജനറൽ (എ ആന്റ് ഇ), തിരുവനന്തപുരം.
- അക്കൗണ്ടന്റ് ജനറൽ (ഡി.ബി.സെൽ), തിരുവനന്തപുരം.
- കരുതൽ പായൽ/ഓഫീസ് പകർപ്പ്.

ഉത്തരവിൻ പ്രകാരം.  
  
സെക്ഷൻ ഓഫീസർ.



**GOVERNMENT OF KERALA**

Abstract

Social Justice Department - Implementation of NIRBHAYA Policy in the State - Minimum Standards for shelter homes and Standard Operating Procedures (SOP) for conducting the Shelter Homes - Approved - Orders issued.

**SOCIAL JUSTICE (B) DEPARTMENT**

G.O.(Rt) No. 546/2012/SJD

Dated, Thiruvananthapuram, 18/12/2012

Read: Minutes of the 3<sup>rd</sup> Executive Committee of Nirbhaya held on 31/10/2012

**ORDER**

The 3<sup>rd</sup> Executive Committee of NIRBHAYA held on 31/10/2012 has approved the Minimum Standards for Shelter Homes which also covers the Standard Operating Procedures (SOP) for conducting the Shelter Homes, which was prepared on the basis of national standards issued by the Ministry of Home affairs after having made appropriate modifications to suit the needs of the State vide the minutes read above.

Government are pleased to approve the minimum standards for Shelter Homes covering the Standard Operating Procedures (SOP) as appended to this order.

By order of the Governor,

**DR.K.M.ABRAHAM**

**PRINCIPAL SECRETARY TO GOVERNMENT**

To

The Director of Social Justice, Thiruvananthapuram  
The Advisor (G&CP), Thiruvananthapuram  
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
The Accountant General (A&E), Kerala, Thiruvananthapuram  
The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
Local Self Government Department  
Stock file/ O.C.

Forwarded/By order

Section Officer

107

# MINIMUM STANDARDS OF CARE IN HOMES FOR VICTIMS OF SEXUAL VIOLENCE AND TRAFFICKING

## Introduction

Measures to implement the Kerala state policy to combat sexual violence and trafficking of women and children comprises of prevention, protection and prosecution.

Protection measures are the most important link to effective prevention and successful prosecution. It is also a matter of serious concern that protection measures in the form of Shelter Homes have not fulfilled their objectives and poor rehabilitation measures have ended up in further victimization of victims.

Institutionalization of child victims of sexual violence should not be considered as the first option in the process of their protection and rehabilitation. The option of placing such children under foster care based on the provisions of the Juvenile Justice Act should be examined first. For this, the Social Justice Department should prepare a panel of families that are willing to offer foster care.

Thus, with the aim to improve the conditions of Shelter Homes, minimum standards of care are now introduced. These standards for shelters are those non-negotiable care components that should be integrated in any home managed either by the government or the NGO to ensure that facilities for rehabilitation are in place as a matter of right of the victim. These standards will ensure that the safety, dignity and the well-being of each victim are provided for.

The minimum standards of care will be reviewed every two years for relevance and changed according to the contemporary information available about care and protection of victims of sexual violence and trafficking.

The guiding principles of these standards are:

**Rights Based:** All standards will ensure that the basic human rights of the victim is upheld and respected. Additionally the following rights will be an integral part of each care process:

- Right to dignity
- Right not to be re-traumatized and re-victimized
- Right to informed choices and confidentiality
- Right to self-determination and participation

**Individualized and Comprehensive:** The care components should be inclusive and be able to address the needs of each individual through a continuum of care opportunities for all life categories of survivors.

**Equitable:** The program should ensure that all services are accessible to all victims. The services are designed in a manner that facilitates persons who may be facing more vulnerability, disabilities or impact to have an equal access to services.

**Gender sensitive:** The program should be child-friendly and focused on the psychological recovery of the victim. The programs will recognize the gender-based vulnerabilities and risks, will be developmentally appropriate and ensure that the recovery of the victim is paramount.

**Accountable:** All the programs will be accountable and will be subject to mandatory external standardized care process audits.

## STANDARDS OF CARE

### **Standard I: Location**

1. Any Shelter Home meant for victims of sexual violence should be located in a residential area and should be maintained and integrated in the local scenario. The name board of the Home should not reveal either the purpose or the kind of service it provides. The Home meant for 50 residents should not be less than 5500 sq ft, which includes different types of spaces required.
2. The location of the home should minimize risk to the residents and should have a favorable ambience (not close to a public facility, liquor shop, slum or shanties and the homes should be far away from auto stands, bus stations, railway stations, road side stalls) with adequate privacy for the residents.
3. The home/shelter should be well equipped with other amenities such as water, electricity, sanitation, approach road, etc. Care should be taken to ensure that the physical infra-structure allows no undesirable outside contact.

### **Standard II: Security**

1. The home should have 24 hrs security arrangements. Without appearing custodial in nature, the home should ensure adequate security to the residents. The security persons should be free of any addictions and they need to be suitably trained.
2. All inflammatory or hazardous substances such as kerosene, petrol, pesticides, phenol, medicines, acid, bleaching powder, rat poison, drugs, especially sedatives etc) should be kept securely, out of the reach of the residents. Field Security Plan should be in place with fire exit marking. There should be a regular fire drill. Basements should not be used for residential purposes. Stock

Register of all the above mentioned hazardous substances should be maintained and regular monthly stock taking should be monitored.

3. For residents who are suffering from psychological disturbances, any task with sharp/hazardous instruments/substances such as knives, screw drivers, ropes and wires should be avoided to the extent possible and if unavoidable, to be done under proper supervision.
4. All doors (bathroom, toilets, kitchen, storage, bedrooms) should have provisions for opening from outside in cases of emergency.
5. No visitors for residents should be allowed in the home without requisite vetting and permission. The home should have a Visitors' Policy which should include arrangements to screen and interact with visitors away from the residential area within the campus. The best interest of the resident should be the guiding principle. All visits should be documented in a well-maintained Visitor's Book that will record all details such as name, designation, organization/institution, address etc Proper check of staff at entry and exit should be done and CCTV cameras may be installed in the visitor's room.
6. No resident should have access to mobile phones and any phone call made should be under supervision.

### **Standard III: Legal Custody and Arrangements for Leave from home**

1. Legal custody of residents must be under the supervision of the Child Welfare Committee (if minors) or the Service providing Organization or any other competent authority dealing with the issues of women and/or children of the area as the case may be.
2. A social worker must accompany the residents (who are at risk to coercion and exploitation) whenever she leaves the place of safety. The home should have specific protocols for different circumstances when the resident may leave the home unaccompanied by staff. Such protocols should be evolved through risk assessment and risk-reduction information.

### **Standard IV: Confidentiality**

1. The resident should not be exposed to the media and complete confidentiality should be maintained about the facial and other personal identity of the resident. This is valid at all stages from rescue to prosecution and social

- reintegration and thereafter. All case records especially medical records should be maintained with utmost confidentiality.
2. No information about a resident will be given to any outsider without the permission of the authorized person and the informed consent of the resident.

#### **Standard V: Basic Infrastructure Facilities**

1. The home should be well ventilated, with adequate space (approximately @50-60 sft per resident, toilets and bathrooms at a proportion of 1:5.) There shall be separate sections in the Home based on age-(a) below 10 years (b) below 18 years and(c) above 18 years.
2. The home should have well ventilated kitchen, a common hall, counseling room, medical room, study rooms, dining hall, bedrooms, quarantine room, storage facility and staff quarters. Basements should not be used for residential purposes.
3. The home should have open spaces for recreation, washing/drying arrangements which ensure privacy.
4. The residents of the home should have access to common facilities such as garden, playground and recreational facility etc.
5. The home should be disabled-friendly with suitable arrangements in toilets, bathrooms, bedrooms, recreation area etc, and wheel chairs and other assistive devices should be provided.
6. Each resident should be provided with individual cot, bedding, 2 bed sheets, 1 blanket and pillow, mosquito nets per year. Dormitory type halls with double decker beds should be provided.
7. Universal care processes should be established which enables the home to provide for the special care needs of HIV positives, disabled, pregnant and lactating mothers and severely sick residents without any stigmatization or isolation.
8. The home should have faculties for skill training and production of goods.

#### **Standard VI: Staff recruitment/Training:**

1. Staff should be recruited only after adequate screening about their past record and assessment of their skills and attitude. Special care should be taken to ascertain any indications of past criminal record or association, psychological disorders, addictions (alcohol, tobacco, panparag, drugs etc).
2. All staff, irrespective of the post should be given induction training and adequately sensitized on aspects of trafficking, needs of trafficked residents, trauma care, first aid and counseling and should be made individually and jointly accountable for the well being and security of the residents.
3. Standardized training module has to be developed with regular updates.

4. The Head of the home with a postgraduate degree, Two trained Counselors' one with MSW and other with MA Psychology with special training on trauma care should be recruited on a fulltime basis, and where one Counselor is to be a resident and other may be a non-resident for better functioning. The home may also choose to use primary level peer Counselors who are present in the home all the time and supported by secondary level professional Counselors as mentioned above.
5. Ideally The home should have the following human resources for better operations for a average of 50 residents with:
  - a. 1 fulltime resident Warden/Superintendent who should be at least a graduate.
  - b. 2 Cooks
  - c. 4 caretakers with a minimum SSC education.
  - d. 1 Accountant cum Documentation personnel.
  - e. 2 Security personnel with a reading and writing skills.
  - f. Part time life skill trainer.
  - g. A Panel of Medical practitioners (both government and private) should be identified to attend to the needs of the residents at any time of requirement and appropriate budget should be extended for medical kits, transport and honorarium.
  - h. For legal assistance it should be converged with existing free legal aid services. If such services are not easily available a budget may be provided for legal support and assistance till such a time mainstream services can be accessed.

#### **Standard VII: Home Management**

1. The residents should be directly involved in the day-to-day management of the home. All residents should be part of the General Body in running the home. The committees should be chosen on democratic lines from the General Body which will support in the management of the home on different aspects.
2. The committee should be reconstituted every 3 months and every resident in the home should be given a chance to be an active committee member.
3. All process of the committee meetings, staff meetings, general body should be well documented.

#### **Standard VIII: Induction of the residents:**

1. As soon as a resident enters a home she should be received with a welcome kit which will consists of two pairs of clothes, towel, toiletry (tooth brush, tooth paste, soap, sanitary napkins, powder, shampoo, hair oil, comb etc).



2. In the first one hour the new resident should be allowed to take a bath and freshen up. A light snack with water should be provided as the initial formalities are completed.
3. Older residents trained, as barefoot Counselors should be given the task of receiving a new resident and introducing her to the other residents. As a part of the reception, a tour of the home should be provided.
4. If the resident is brought during the night she should be allowed to rest and personal profile and other documentation formalities should be taken only the next day after the resident is feeling rested.
5. Develop and establish moral support with the newcomer.

### **Standard IX: Induction and Orientation**

1. The preliminary assessment report of the new resident should be recorded on the prescribed format. The profile of the resident will be updated periodically. A photograph of the victim should be taken at the earliest suitable time.
2. As a part of the personal profile, care must be taken to establish the true identity of the resident such as her real name, whereabouts of family members, community members, relatives, next of kin, address etc. Updating can be done in a phased manner and computerized.
3. The resident should be provided all information regarding the procedures, rules and facilities in the home. She should be also informed about her legal and civic rights. A grievance/redress mechanism should be created.
4. The resident should be informed about all the benefits she is entitled from the government such as immediate relief and all other rehabilitation package such as livelihood skills, livelihood options, and education for her and her children etc as per the government orders.
5. The resident should also be informed and counseled about the routine medical tests and examinations she will be asked to undergo and also the tests for which she has to provide informed consent. The resident's consent for HIV test if necessary. The resident should be told why the test is being taken and its importance.
6. Only after the resident is well oriented (may take a minimum of two weeks) an undertaking should be taken by the resident on her choice to rehabilitate/reintegrate.

### **Standard X: Recording and Documentation**

- 1) As soon as the resident is admitted, her personal profile should be recorded in a specified format. The said profile should be updated regularly. The profile to be recorded only when the resident is mentally prepared for the same. The persons responsible for recording/documenting the profile should

- be trained mainly on communication and documentation. He/She needs to be patient with the residents and ensure authenticity.
- 2) There should be separate files maintained for each resident which should include a profile consisting of personal details, informed consent and referral records and a medical file consisting of medical reports, treatment plan and prescriptions. Confidentiality should be maintained especially in the case of residents who are HIV positive.
  - 3) Separate registers should be maintained for attendance, visitors, incoming/outgoing and restoration/ reintegration.
  - 4) There should be a victim care plan which should take into consideration the educational background and interests/talents/skills of the victim (to be recorded in a prescribed format for all residents and kept in the personal profile). Individual care plans should be made based on this and appropriate training to be imparted taking into consideration the emerging areas of human resource requirements. This care plan should be followed up and updated from time to time for each resident even after repatriation for at least 3 years.

#### **Standard XI: Tracking Systems**

1. Homes should maintain all relevant details of the resident after the rescue process (FIR copy, remand diary etc.) A complete record of the resident's contact information (names of relatives, address, phone number etc.) should be maintained in the resident's personal confidential file. Authenticity of the resident's information should be ensured.
2. A recent/latest passport size photo of the resident should also be kept in the confidential folder.
3. Profiles of her close associates are to be secured & maintained. All relevant information should be comprehensive and form a part of the initial assessments.

#### **Standard XII: Health and Medical Support**

1. As soon as a resident is admitted she should be provided immediate medical support (check up, treatment for immediate ailments etc). Pediatric support should be given for children accompanied and a check up by a gynecologist if the woman is pregnant.
2. Medical Tests for HIV/AIDS should be done only after the resident gives her informed consent.

3. Each home should have facilities for health check-ups by a registered medical practitioner, gynecologist, pediatrician, referral to external medical experts, hospitals, and facilities for hospitalization, on an as-needed basis. Individual Health cards should be maintained.
4. Home should have trained caretakers to provide appropriate care and support for HIV positive residents for early management of symptoms. All staff in the Home must be trained in HIV care and support.
5. Home should have referral networks with mental health professionals (psychologist, psychiatrist, psycho-therapist etc) and mental health institutions for immediate and timely support for psychologically disturbed residents.
6. Home should have referral network with de-addiction centers for those residents who have a problem of substance abuse/alcohol addiction.
7. Each home should have a first aid box with basic medicines and equipment and updated medical record of each resident. It should be replenished on a regular basis and medicines should be checked regularly for their expiry date.
8. Home should have arrangement for caretakers who will escort residents during hospitalization and also facilities for transportation of a sick resident.
9. Home should maintain proper registration of births and deaths.
10. Home should have a Corpus Fund for health related emergencies such as special health conditions, funeral rites.
11. Safe drinking water, sufficient number of bathrooms and toilets, fans and proper ventilation, mosquito nets and proper drainage systems should be in place to ensure the health of all residents.
12. Residents should be provided a nutritious diet. Care should be taken to cater to the special needs of residents who are HIV positive and lactating mothers as per the diet chart. The menu for the week should be a part of the home committee decisions.

### **Standard XIII: Counseling and Therapeutic Support**

1. There should be both professional and peer Counselors-preferably female- in a home who would provide immediate trauma care and long term counseling for the residents.

- 129
2. The ambience of the home should be therapeutic in terms of non-judgmental attitude of the staff, along with avenues for relaxation, recreation and spiritual growth and activities for executing responsibilities and to gain confidence and control. Illustrated activities include indoor & outdoor sports, physical exercise, cultural activities, workshops, study material, magazines, music, meditation, yoga, gardening etc.
  3. There should be both individual and group counseling for the residents. Peer counseling including group discussions should also be promoted.
  4. Residents showing symptoms of psychiatric disorders should be immediately referred to a professional psychiatrist.

#### **Standard XIV: Life Skills**

1. There should be daily classes for residents on life skills such as grooming, socialization, and communication, and conflict management, stress management through yoga, meditation etc, and leadership training. Both formal and informal processes including mentoring and exposure visits should be used. Modules prepared by SCERT/SSA are to be utilized for school going residents.
2. Innovative and creative tools of teaching life skills should be used such as art, craft etc which will restore a sense of well being and dignity.

#### **Standard XV: Education**

1. Residents who have no formal education should be helped to obtain education through Open school, Saksharatha programme or any other Adult Education program.
2. Residents who have basic literacy and have an aptitude for further education should be helped to enroll in Non Formal Education programs including Open School/university for continuum of educational process.
3. Take all measure to mainstream minor residents in normal schools on priority basis.
4. Children of residents should be admitted to either residential hostels or in local schools. If in private schools, join through sponsorship preferably from

Government. If in Government School the government should take care of all the expenses for education.

#### **Standard XVI: Diet & Nutrition**

1. Home committee should prepare weekly diet chart for the home in consultation with the Superintendent/Warden. Care should be taken to ensure that the needs of the residents are incorporated as much as possible.
2. Special diet charts should be prepared for lactating mothers, infants, and pregnant residents, residents with special conditions such as HIV/AIDS, diabetes etc and sick/bedridden residents.

#### **Standard XVII: Livelihood Training**

1. Residents should be admitted to livelihood training within two months after admission to shelter/home.
2. In collaboration with reputed technical training institutes (continuing education, ITI, Community polytechnics etc.) viable, sustainable and job-oriented trades should be taught to the residents. The residents must be allowed to join Certificate or Diploma Courses conducted by government or reputed certified agencies for better employability.
3. It should be ensured that all livelihood training should lead to job placement after the stay in the home.
4. Corporate tie-up should be explored for developing livelihood training which increases the employability of the resident.

#### **Standard XVIII: Livelihood Option/Economic Empowerment**

An Economic Rehabilitation Plan for each resident should be developed. Formation and membership in Self Help Groups must be encouraged to access micro-credit finance, start placement services for open employment and obtain support for starting small businesses etc.

#### **Standard XIX: Legal Aid/ Assistance**

1. The home should have a part time professional legal advisor (who is duly sensitized) who could provide legal aid/assistance to the residents. There should be tie up with KELSA /DELSA for free legal aid.
2. Arrangements should be made with police and other enforcement agencies to recover all properties of the victim from the place of exploitation.

3. The residents should be provided all assistance if she is a witness in a case and if need be, additional protection as a part of victim witness protection. Care must be taken to take complete consent of the resident for her to become a witness.
4. The legal advisor should provide the residents preparation for trial (through mock trial or any other role play/ discussion method).
5. Legal assistance shall be provided unconditionally, that is, it shall not be conditional upon the victim/survivor's willingness to serve as a witness. Use existing legal aid/assistance structures fully, and in case of non-availability of Govt. legal aid cell, services of an advocate may be used.

#### **Standard XX: Civic Benefits**

1. A requisition on behalf of the resident in the prescribed format should be submitted to the District Collector and to the Director, Social Justice for the allocation of housing, ration card, voters ID and other civic benefits entitled as part of the rehabilitation package for the resident. Care should be taken that these benefits reach the resident within a stipulated period of 6 months after being rescued. It should be further ensured that these benefits do not stigmatize the resident but instead mainstream the benefits with the family/community. It should also provide benefits for the second generation taking care to see that it reaches the male child also.

#### **Standard XXI: Restoration and Repatriation**

1. Any formalities for the restoration/repatriation process should begin only after getting the informed consent of the resident.
2. Restoration/repatriation plan for a resident should be undertaken only after a complete home investigation (format enclosed) is done. The home investigation should include an assessment of the family (are they involved in trafficking?), family and community's willingness to accept the girl/woman and the family's environment.
3. Before a resident is restored/repatriated a detailed discussion should be held with the resident and the restoration team on what explanation should be given to the family on her absence from her village/community. The resident's version should be adopted as the final version.

4. Proper record and documentation (photos, undertaking from parent/guardian) should be maintained for all restoration undertaken.
5. No victim shall be sent back to the family without adequate assessment and without ensuring social acceptance and family support. Government will ensure that repatriation is carried out depending on how safe and nurturing the family environment is for the victim. If and when the victim chooses to return to an abusive family situation, the state machinery would need to intervene and repatriate the victim to an institution which can protect and care for the individual. Repatriation will be done after the stay in a shelter.
6. Govt. agencies in collaboration with voluntary agencies shall work out the details of the repatriation procedures and structure and mainstream them in order to facilitate the smooth and efficient repatriation of the victims and their dependent minors.
7. The members of the governmental/professional and preferably voluntary organizations who have had some role in interaction with the victim, shall be represented in the process of repatriation.
8. Rescued victims shall be sent back to the family only after fully ensuring that the victim shall not be further trafficked or sexually exploited.
9. A victim from another country being repatriated should be counseled and prepared to return to the country of origin after providing her with adequate medical and psycho-social care as well as after empowering her through basic life- skills so that she can be reintegrated in main stream life.
10. Adequate financial assistance from the Corpus Fund should be provided for meeting the needs of rescued victims during travel while repatriating them to their families or institutions in source areas.
11. Adequate provision for dearness allowance for police escort or any other authorized escort during such travel should also be made by the government.
12. It should be ensured that the legal formalities should be completed for the residents before being restored or repatriated.

## Standard XXII: Follow Up

1. For the first six months after the restoration is done monthly follow-up should be done. Thereafter the follow up could be done once a quarter for the next one year.

Follow up program should ensure the following:

- Protection against re-trafficking and against commercial sexual exploitation.
- Protection against stigma and discrimination.
- Protection against any other exploitation.
- Optional link with a variety of professional support systems.
- Confidentiality
- Reorientation.
- Restoration/ensuring/exercising of full citizenship rights.
- Livelihood options.
- Mental health
- Restoration/ ensuring/exercising of rights over parental, ancestral and community property and entitlements.
- Survivor friendly.

2. Monthly follow-up should be provided for the first six-months and thereafter whenever required, to ensure that the victim receives adequate support and does not get sexually exploited or re-trafficked. Adequate follow-up of the victim supervised by the Social Justice Department and Child Welfare Committee along with the close co-operation of selected accredited non-governmental organizations should be mandatory for a period of three years after the victim has been repatriated.

## Standard XXIII: Social Reintegration

- 1) Those residents whose families do not accept them and for those whose families are not a conducive space for restoration( for example parent's involved in trafficking) special efforts should be made to support the resident to stand on her own feet and slowly, in a phased manner supported to live in the society independently.
- 2) It should be ensured that no rescued victim is sent back to the family without ensuring social acceptance and family support to the victim in order to prevent re-trafficking and further commercial sexual exploitation.
- 3) Collaborations with government agencies or non-governmental organizations should be made on priority basis to provide employment services, entrepreneurship development training, which will include skills,



knowledge, resources, marketing skills and micro-credit at the district where the resident is reintegrated.

- 4) The Home shall conduct outreach / support activities, or shall oversee the delegation of those activities to other organizations or individuals in accordance with the Reintegration Plan. Outreach / support activities shall be conducted only with the consent of the victims.

#### **Standard XXIV: Accountability**

1. All homes run for the purposes of trafficked victims should be directly accountable to the Department of Social Justice. The minimum standards prescribed should be adopted irrespective of whether it is government funded or private funded. All homes should have certification of implementing the prescribed minimum standards of care.

#### **Standard XXV: Monitoring**

- 1) The convener of the District Nirbhaya Committee assisted by an Empowered Committee including Nirbhaya Committee members NGOs and members of government and civil society, should visit and monitor the functioning of the homes every two months. The monitoring and review report should be submitted to the Chairperson of the District Nirbhaya Committee, the District Collector and to the Director of Social Justice Department.
- 2) Within the home there should be staff meetings fortnightly to implement the minimum standards of care. There should also be monthly meetings with the residents to review the minimum standards.
- 3) Feedback on the minimum standards should be used to improve on the management of the home. Management meeting should be convened monthly, to review the improvement of the standards.
- 4) Monitoring should be participatory (Residents, NGOs and Govt. Officials) with the aim to meet the prescribed standards in full.
- 5) Half-yearly internal audits and external social audits should be done annually apart from ensuring total transparency in matters relating to receipt of funds and expenditure.

**Prl. Secy. to Govt. (Social Justice)**

**GOVERNMENT OF KERALA**

Abstract

Social Justice Department - Implementation of NIRBHAYA Policy - State Level  
Co-ordination Committee - Amended - Orders issued

**SOCIAL JUSTICE (B) DEPARTMENT**

G.O.(Rt) No. 567/2012/SJD

Dated, Thiruvananthapuram, 28/12/2012

Read: 1. G.O(Rt) No.254/2012/SWD dated 22/05/2012.  
2. U.O No. 26206/F3/12/SCSTDD dated 29/10/2012 from Scheduled  
Castes Scheduled Tribes Development (F) Department

**ORDER**

Government have constituted the State Level Co-ordination Committee of NIRBHAYA as per the G.O read above. As per the U.O read as 2<sup>nd</sup> paper above, the Scheduled Castes Scheduled Tribes Development (F) department has requested to include Secretary (Scheduled Castes and Scheduled Tribes Development Department) and Secretary (Scheduled castes Development Department) in place of Principal Secretary (Scheduled Castes and Scheduled Tribes Development Department) as there is no post of Principal Secretary at present and at the same time there is Secretary each for dealing with the subjects pertaining to Scheduled Castes and Scheduled Tribes.

Government have examined the matter in detail and are pleased to include Secretary Scheduled Castes and Scheduled Tribes Development Department and Secretary Scheduled Castes Development Department in place of Principal Secretary (Scheduled Castes and Scheduled Tribes Development Department) in the G.O read above.


The GO read above stands modified to this extend.

By order of the Governor,  
**T.K.RADHAKRISHNAN**  
UNDER SECRETARY

To

All Members.  
Secretary, Scheduled Castes and Scheduled Tribes Development  
Department.  
Secretary, Scheduled Caste Development Department.  
The Director, Social Justice Department, Thiruvananthapuram.  
The Advisor, (Gender & Child Protection)  
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
The Accountant General (A&E), Kerala, Thiruvananthapuram.  
The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
SC/ST Development(F) Department.  
Stock file/ O.C.

Forwarded/By order

  
Section Officer



49

**GOVERNMENT OF KERALA**

Abstract

Social Justice Department – NIRBHAYA Policy – District NIRBHAYA Committee –  
Amended - Orders issued

**SOCIAL JUSTICE (B) DEPARTMENT**

G.O.(Rt) No. 568/2012/SJD

Dated, Thiruvananthapuram, 28/12/2012

Read: 1. G.O(Rt) No.288/2012/SWD dated 19/06/2012.  
2. Letter No.26206/F3/12/SCSTDD dated 08/10/2012 from Scheduled  
Caste/Scheduled Tribe Development (F) Department

**ORDER**

Government have constituted the District NIRBHAYA Committees in the State as per the G.O read as 1<sup>st</sup> paper above. As per the letter read as 2<sup>nd</sup> paper above the Scheduled Caste / Scheduled Tribe Development (F) department has requested to include the District Level Officers of Scheduled Caste Development Department as a member of District NIRBHAYA Committee for proper co-ordinations.

Government have examined the matter in detail and are pleased to include the District Level Officer of Scheduled Caste Development Department as member of District Nirbhaya Committee.

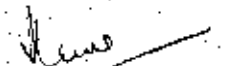
The G.O read above stands modified to this extent.

By order of the Governor,  
**T.K.RADHAKRISHNAN**  
**UNDER SECRETARY**

To

The Director, Social Justice Department, Thiruvananthapuram.  
All District Collectors  
The Advisor, (Gender & Child Protection)  
All Members  
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
The Accountant General (A&E), Kerala, Thiruvananthapuram.  
The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
SC/ST (F) Department.  
Stock file/ O.C.

Forwarded/By order

  
Section Officer



51

**GOVERNMENT OF KERALA**

Abstract

Social Justice Department – NIRBHAYA Policy – Smt.Sunitha Krishnan, Prajwala, Hyderabad - Appointed as State Advisor for NIRBHAYA - orders issued.

**SOCIAL JUSTICE (B) DEPARTMENT**

G.O.(Rt) No. 576/2012/SJD

Dated, Thiruvananthapuram, 31/12/2012

Read: G.O(Ms) No.17/2012/SWD dated 13/03/2012.

**ORDER**

Government are pleased to appoint Smt.Sunitha Krishnan, Prajwala, Hyderabad as State Advisor for NIRBHAYA on an honorarium to be decided by the Executive Committee of NIRBHAYA.

By order of the Governor,  
**GOVINDAN NAMBOODIRI.V.S**  
**ADDITIONAL SECRETARY**

The Director, Social Justice Department, Thiruvananthapuram.  
Smt.Sunitha Krishnan, Prajwala, Hyderabad  
The Advisor, (Gender & Child Protection)  
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram.  
The Accountant General (A&E), Kerala, Thiruvananthapuram.  
The Accountant General (D.B.Cell), Kerala, Thiruvananthapuram.  
Stock file/ O.C.

Forwarded/By order

*M. S. S.*  
Section Officer