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</tr>
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<tr>
<td><strong>CSA</strong></td>
<td>Child Sexual Abuse.</td>
</tr>
<tr>
<td><strong>POCSO</strong></td>
<td>Protection of Children from Sexual Offenses Act, 2012.</td>
</tr>
<tr>
<td><strong>IPC</strong></td>
<td>Indian Penal Code, 1860.</td>
</tr>
<tr>
<td><strong>Cr.P.C</strong></td>
<td>Criminal Procedure Code,</td>
</tr>
<tr>
<td><strong>GCA</strong></td>
<td>Goa Children’s Act, 2003.</td>
</tr>
</tbody>
</table>
Foreword

Arz along with the law enforcement agencies, parents, teachers, staff of the Department of Women and Child Development, Government of Goa have been working for many years on the issue of child sexual abuse. Arz has commonly experienced that there exists a lot of denial about existence of child sexual abuse, especially about sexual abuse of boys. There is lack of knowledge about the legal provisions, procedures and skills for handling victims of sexual abuse among the Caregivers.

In the last few years the central government and various state governments including Goa have paid a lot of attention to the problem of child sexual abuse. Legislations such as POCSO, Goa Children's Act have been passed and IPC and Cr. P. C. have been amended to address sexual abuse of children. The new legislations and amendments may help in prosecution of abuser. But legislation itself is not enough to address the problem of child sexual abuse. There is a need for skill building of different stakeholders to be able to identify the incidence of CSA, reporting of CSA, handling victims of sexual abuse in a sensitive manner, and to treat the victims in a child friendly manner while being processed through the criminal justice system.

I am hopeful that the Handbook on Child Sexual Abuse, prepared by Arz will be handy for Caregivers, such as parents, teachers, police, doctors, prosecutors, and social workers in providing services to the victims of sexual abuse.

I thank ECPAT LUXEMBOURG ASBL for their support to publish this manual and Ms. Eliette Guyot for the illustrations.

I dedicate this handbook to the Caregivers who have been sincerely involved in prevention of child sexual abuse; protection and rehabilitation of the victims of sexual abuse and prosecution of the abuser.

Arunendra Pandey
Child sexual abuse is the assertion of power, through sexual acts, against children before the age of consent – that is, under 18 years of age.

A child under the age of 18, whether consented to or not, to sexual activity, is immaterial.

**Sexual abuse may include:**

- **Touching sexual abuse:** fondling of genitals/anus, masturbation, oral sex, object/finger penetration of the anus/vagina if it does not have any valid medical purpose, or/and encouraging the child to perform such acts on the abuser.

- **Sexual Exploitation:** soliciting, engaging a child for prostitution, filming, photographing for pornography.

- **Non Touching sexual abuse:** exhibitionism, exposure to sexual activity, pornographic materials or producing visual depictions of such conduct, masturbating in front of a child.
MYTH: Sexual abuse is due to the behaviour or the way the child dresses.  
**FACT:** Child is not to be blamed for the abuse. It is the abuser who needs to be blamed as he/she has misused his/her power, position with the child and broken the trust of the child.

MYTH: A known person cannot sexually abuse the child.  
**FACT:** Abusers are usually known to the child and the family.

MYTH: Children who are sexually abused get HIV.  
**FACT:** Child sexual abuse is not necessarily penetrative sexual abuse. All penetrative sexual abuse does not necessarily lead to HIV.

MYTH: Child Sexual Abuse happens only to poor and migrant families.  
**FACT:** The abuser does not target the child based on class, region or financial status of the child.

MYTH: It is best if the child forgets the abuse.  
**FACT:** Abuse causes emotional and psychological disturbances in the child. It can be healed with professional service and care.
Sexual abuse can happen to a child of any age and gender. There is no particular reason for a child to be at risk. Some of the risk factors can be:

- Child who is an orphan
- Child with single parent
- Child with step-parent/s
- Child where there is addiction in the family
- Child who has emotionally unstable parents
- Child lacking love and care.
- Child in a dysfunctional family (conflict, misbehaviour, neglect)
- Child with poor parent child relationship
- Unsupervised child
- Child without shelter
The vast majority of abusers do not get caught, and they have no criminal records.

- Abusers are very friendly with children.
- Abuser gives extra attention to a child by treating them differently and giving gifts without reason.
- Abusers usually do not speak the truth.
- Abusers use their relationship with the child in a manipulative manner.
- Abusers spend most of their time with children or places where there are children (playground, children park, outside schools)

Process adopted by the abuser to abuse the child:

1. Abuser identifies a child
2. Befriends the child

3. Frightens the child

4. Threatens the child

5. Test / abuses for the first time

6. Repeatedly abuses
Sexual abuse can happen to a child of any age.

Children who have been sexually abused for the first time may exhibit the following behaviour:

- Silent.
- Fear of certain person, place, object.
- Lack of interest in things they like.
- Change in food habits.
- Change in sleep pattern – excessive sleep or less sleep.
- Sudden change in behaviour.
- Staying aloof.
- Lost in thoughts.
- Refusal to follow a routine.

If the abuse is repetitive, the child may exhibit the following behaviour:

- Aggression towards others – fights.
- Aggression- breaking things.
- Violence.
- Temper Tantrum and irritability.
- Uncontrollable temper.
- Sudden change in behaviour (withdrawal, disobedience towards adults, fear of being left alone, anxieties).
- Frustration with people around.
- Difficulties in day to day activities.
- Excessive crying.
- Nightmares.
- Sexualized language, behaviour, actions.
- Delinquency such as running away, lying, stealing.
- Harmful behaviour- cutting of wrist, suicidal attempts.
Caregivers should be alert for the following signs:

a) Physical signs

- Child walking in odd manner.
- Blood on underwear.
- In case of girls - missing periods, pregnancy.
- Sharing by child of pain in vaginal and anal area.
- Discharge, itching in the genital area.
- Injury in the vaginal/anal area.

b) Emotional changes:

- Have negative feelings (rejection, unworthiness).
- Confused thoughts about themselves.
- Blame oneself for the abuse.
- Non acceptances of oneself.

Any one sign doesn’t mean that a child was or is being sexually abused, but if there are several signs present, it is time to be alert and caregiver should consider seeking help.
Disclosure of Abuse

Children sexually abused are told by the abuser not to share the “secrets” between the abuser and the child.

In case the abuser is a family member, friend, neighbour, teacher, then the chances of the child disclosing about the abuse is less.

When a child discloses or shares about the abuse the response by the caregiver:

<table>
<thead>
<tr>
<th>Usual Response by an adult</th>
<th>Response expected by the child</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oh my god!</td>
<td>It’s OK I am with you.</td>
</tr>
<tr>
<td>Really?</td>
<td>I believe what you say.</td>
</tr>
<tr>
<td>I can’t believe it!</td>
<td>It’s not your fault.</td>
</tr>
<tr>
<td>Is it so?</td>
<td>It is ok if you are angry with the abuser.</td>
</tr>
<tr>
<td>Are you sure it happened?</td>
<td>Don’t worry the abuser will not harm you again.</td>
</tr>
<tr>
<td>I hope you are not lying.</td>
<td>If you want, we can see how he does not abuse other children.</td>
</tr>
<tr>
<td>What nonsense are you speaking?</td>
<td>Is there anything that you want me to do.</td>
</tr>
<tr>
<td>What rubbish! This person can’t do it</td>
<td>I am there for you.</td>
</tr>
<tr>
<td>You should have told me earlier. Why you are telling me now?</td>
<td>Good you told me.</td>
</tr>
<tr>
<td>Now don’t speak about it again.</td>
<td>You can share anything with me without any fear.</td>
</tr>
</tbody>
</table>
What an adult can do when a child shares about sexual abuse

**Respond with “CARE” and “URGENCY”:**
If you think a child is trying to tell you about a sexually abusive situation, respond immediately and with care.

**Handle the situation “calmly”:**
When the abuser is known, adults must handle the situation calmly. Children should not be blamed for the abuse. The abuser should be held responsible for the abuse.

**Do not make false promises to the child:**
No false promises should be made to the child, such as “will beat the abuser”, “will not disclose to anyone”.

**Create a safe and protective environment for the child:**
Do what is necessary to protect the child from further harm, both emotionally and physically. If necessary, temporarily shift the child.

**Get help:**
Get help from professionals who can guide you towards safety and healing.
Reporting Child Sexual Abuse

- Any person, who has an apprehension that an offence is likely to be committed or has knowledge that an offence has been committed, has a mandatory obligation to report the matter to the police. This includes persons/staff from media, hotel/ lodges, hospitals, clubs, studios, teachers, social workers, photographic facilities, etc.

- Failure to report to the police attracts punishment with imprisonment of up to six months or fine or both.

- A child or parent or NGO can make a complaint of sexual abuse at any police station. If the complaint is lodged out of jurisdiction, then the FIR can be filed and then transferred to the relevant police station.

- It’s not up to the police to decide whether or not to accept the case. The complainant has the right to lodge a complaint.

- It is mandatory for the police to register an FIR in all cases of child abuse. In case registration of FIR has been refused or not lodged, a complaint can be made to the Superintendent of Police, or one can file a private complaint in a court having jurisdiction.
Recording of the statement of the victim

- Child who has been sexually abused will have to share about the abuse with the Investigating Officer.

- Inform the child that the police will ask many questions and if the child doesn’t understand something, he/she can ask the police officer or parent/caregiver for clarification.

- The statement of the child should be recorded only when the child is ready and can give a detailed account of the incident.

- The statement of the child victim can be recorded at her/his home or at a place of her/his choice in presence of her parents or relatives.

- The statement should be preferably recorded by a woman police officer.

- The statement of the child is to be recorded by an officer not below the rank of police Sub-Inspector.

- The police officer should not to be in uniform while recording the statement of the child.

- Before recording the statement of the child, explain to the child that he/she is not a bad person for reporting the abuse.

- Police officer should ensure that the child should not in any way come in contact with the accused or exposed to the accused or his/her representative.
• The statement of the child is to be recorded as spoken by the child.

• Assistance of an interpreter or translator or an expert can be taken as per the need of the child.

• In case of a mentally challenged child the assistance of a special educator or any person familiar with the manner of communication of the child should be taken.

• Child should not be questioned unnecessarily or pressurized into giving details.

• Police and parents should ensure that the child does not have to repeat the incident on multiple occasions.

• While recording the statement the child should be given ample breaks.

• While recording depending on the age of the child arrangement should be made for toys, colours, chocolates, food, water, etc.
Evidence collection in cases of CSA

- The evidence in the CSA may include – clothes of the victim, clothes of accused, bed-sheet, mattress, injury marks on the body of the victim and accused, mobile phone, camera, pen drive, video recording device, any written document, statement of witnesses, medical examination reports, etc.

- Extra care needs to be taken to ensure that the evidence is not tampered with or destroyed.

- The victims should not be given bath or the clothes of the victim should not be washed as it may destroy crucial evidence.

- The police should conduct an investigation and gather evidence relevant to the case.

- The investigation may include examining the crime scene for evidence and talking to people or witnesses who may be able to give information about the incident.

- The police should use gloves while collecting evidence from the crime scene.

- The evidence collected from the crime scene should be packed properly to avoid any kind of damage to the evidence.

- Clothing containing dry biological stains (blood, semen or saliva) should be packed separately and in such a way that the stains are not broken or rubbed off.

- The victim and the accused clothing should be packed separately and should not come in contact with each other.

- Strands of hair on garments should not be allowed to come in contact with other garments that may contain hair.
Medical Examination of victim of CSA

- The medical examination should be done within 24 hrs from the time of receiving the information relating to the sexual abuse.
- The examination is to be done in a government hospital.
- The medical examination is to be done after taking the consent of the victim or of the person competent to give such consent on his/her behalf.
- The examination to be done in the presence of a family member or a social worker with whom the child is comfortable.
- The medical examination is to be conducted by a female doctor if the victim is a girl child.
- The examination must be done privately in a comfortable and warm room.
- The child should be semi-dressed or covered by a blanket/sheet during the medical examination.
- The doctor should do a full examination on the child, checking from head to toe for physical injuries, especially in the hidden areas.
- Lack of signs of physical injury does not mean that the child was not abused.
- During the forensic examination, the doctor should collect any evidence that can be used in court against the abuser.
- This examination may be uncomfortable for the child, so the doctor needs to support the child and make him/her comfortable.
- Scientific method to be used for medical examination instead of ‘two finger’ tests.
- Child friendly special courts to be setup for child sexual abuse cases.
- The Special Court should complete the trial within one year.
- The evidence of the child is to be recorded within a period of 30 days to ensure speedy trial.
- Child should not to be called repeatedly to testify.
- Frequent breaks should be given to the child during trial.
- The defence lawyer cannot directly ask questions to the child.
- The defence has to give the questions first to the court who will then ask questions to the child.
- Court not to permit aggressive questioning or character assassination of the child.
- The environment in the court should be child friendly.
- The trial should be in camera.
- During the child’s deposition the parents or the family members or social worker whomever the child feels comfortable with, should be allowed to be present.
- The child should not be exposed to the accused while the child is deposing in the court.
- At the time of the deposition of the child in the court depending on the age of the child arrangement should be made for toys, colours, chocolates, food, water, etc.
Sexual abuse is a traumatic experience that may interrupt the life of the victim and the family at home, at work, at school and in the neighbourhood. Many survivors of sexual abuse feel isolated in the aftermath of the assault. 

**In order to reduce those feelings, the caregiver can work towards recovery of the victim in the following manner:**

1. Provide the victim with a “feeling” of safety, a feeling that the abuser will not harm her/him.

2. Enable her/him to get back to “routine life” at the earliest, such as attending school, playing with other children, watching TV, etc.

3. Ensure that the victim is not isolated or feeling a “sense of isolation.”

4. Create an environment to make the victim feel “accepted.”

5. Enable the victim to feel “normal”. The victim should not start feeling that he/she is different from other children.

6. Do not make the victim feel “guilty” for sharing about the abuse and the legal action being taken against the abuser.

7. Provide “support and comfort” to the victim and the family.

8. Connect the child and family to professional services that can keep him/her safe, provide support and facilitate their recovery from trauma.
I. Counselor:

- **Listen**: What the child is sharing or intends to share.
- **Believe**: What the child shares.
- **Probe**: What the child shares.
- **Understand**: Child’s mental and emotional state.
- **Encourage**: Child to share about the abuse and abuser.
- **Share/ Inform**: Parents, or Principal, or NGO.

“The counselor should provide a space for the children to speak without fear, hesitation or discrimination”

II. Teacher:

- **Observe**: Children with externalizing behaviour (aggression, anger, difficulty concentrating on schoolwork, and sexualized behaviour), and internalizing behaviour (such as anxiety, depression, withdrawal, and post-traumatic stress disorder).
- **Build relationship with the child**: Provide children space and opportunity to express themselves.
- **Be Alert**: On the change in behaviour of children.
- **Share**: With senior staff, counselor, parents, NGO. It is important for the
III. Parents:

- **Be friendly with your child:** talk to your child about child’s activities, feelings, good or bad, fun or sad, easy or difficult; about person, they are afraid, shy, angry or uncomfortable. Spend time with your child, doing activities, playing, discussing, sharing, and talking.

- **Be Observant and alert:** on change of behaviour of your child.

- **Create conducive environment:** to enable your child to share, communicate and feel safe.

- **Impart information knowledge to your child:** on private parts of the body; which no one can touch, see, show or click photos. Never to keep Bad secrets, secrets between two person, that are usually told to keep for a long time, lifelong and never to be disclosed.

- **Listen:** to what your child wants to communicate, inform you of fearful or uncomfortable experiences or person.

- **Trust:** Express to your child that you trust whatever he/she is sharing.

- **Take assistance:** Contact counselor or NGO working with children in case you find anything unusual in the behaviour of your child.

“**The school should provide an environment which offers security and stability to a child facing or on the verge of facing sexual abuse**”
• **Report:** In case child shares about abuse, report to the police.

• **Refer for specialized services:** In case a child reports abuse, refer child for counseling, care, and support.

  “Child trust and fears his/her parents the most. His/her sharing about the abuse depends on the response he/she knows will get, when information about the abuse is, shared with parents.”

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IV. Community:

• **Be alert:** on any action, behaviour, person which can cause harm to children.

• **Create safety measures:** in the community for children such as ensuring streetlights, patrolling in deserted area in the community; check on outsiders, local anti social persons, addicts, etc.

• **Report:** to the police of any suspicious persons, incidents of sexual abuse.

• **Gain knowledge:** and information on laws and how to handle cases of child sexual abuse.

• **Reintegration:** Do not blame the victim or the family for the abuse. Provide support to the child and the family to reintegrate back to normal life.

  “Alertness and information sharing by the community can keep children safe”.

**Section 8:** Child abuse and trafficking - Punishment with imprisonment for a term which may extend to 7 yrs and a fine which may extend to Rs. 1,00,000/-.

**Section 9:** Commercial sexual exploitation & Dedication - Punishment with imprisonment for a term which may extend to 7 yrs and a fine which may extend to Rs. 1,00,000/-.

**Indian Penal Code:**

I.P.C. 376: - **Rape** - Imprisonment not less than 7 yrs but up to life imprisonment.

I.P.C. 354: - **Outraging the modesty of a woman** - imprisonment of up to 2yrs.

I.P.C. 377: - **Unnatural Offences** - imprisonment not less than 10 yrs but up to life imprisonment.

I.P.C. 511: - **Attempt** - Half of the punishment of the offence.

**The Protection of Children from Sexual Offenses Act, 2012**

The Act defines a child as any person **below the age of 18 years** and provides protection to all children under the age of 18 years from the offences of sexual assault, sexual harassment and pornography.

This is the first time that an Act has listed aspects of touch as well as non touch behaviour (eg: photographing a child in an obscene manner, the Act even criminalizes watching or collection of pornographic content involving children) under the ambit of sexual offences.
Penetrative and aggravated penetrative sexual assault, sexual and aggravated sexual assault, sexual harassment, and using a child for pornographic purposes are the five offences against children that are covered by this act. The Act incorporates child friendly procedures for reporting, recording of evidence, investigation and trial of offences.

The attempt to commit an offence under the Act has also been made liable for punishment for up to half the punishment prescribed for the commission of the offence.

The Act also provides for punishment for abetment of the offence, which is the same as for the commission of the offence. This would cover trafficking of children for sexual purposes.

For heinous offences of Penetrative Sexual Assault, Aggravated Penetrative Sexual Assault, Sexual Assault and Aggravated Sexual Assault, the burden of proof is shifted on the accused.

The media has been barred from disclosing the identity of the child without the permission of the Special Court.

The rules laid down in this act also had defined a criteria of awarding the compensations by the special court that includes loss of educational and employment opportunities along with disability, disease or pregnancy as the consequence of the abuse. This compensation would be awarded at the interim stage as well as after the trial ends.

For speedy trial, the evidence of the child is to be recorded within a period of 30 days. Also, the Special Court is to complete the trial within one year.
Section 4: Penetrative sexual assault- imprisonment not less than seven yrs but up to life imprisonment and fine.

Section 6: Aggravated penetrative sexual assault- imprisonment not less than ten yrs but up to life imprisonment and fine.

Section 8: Sexual assault- imprisonment not less than three yrs but up to five years and fine.

Section 10: Aggravated sexual assault- imprisonment not less than five yrs but up to seven yrs imprisonment and fine.

Section 12: Sexual harassment- imprisonment up to three yrs and fine.

Section 14:
1. Using a child for pornographic purposes- Imprisonment up to five yrs and fine (first time), imprisonment not less than 10 yrs but up to life imprisonment and fine. (Second time or subsequent conviction)

2. Participating in pornographic acts and involving in penetrative sexual act with the child - imprisonment not less than 10 yrs but up to life imprisonment and fine.

3. Participating in pornographic acts and involving in aggravated penetrative sexual act with the child – rigorous imprisonment for life and fine.

4. Participating in pornographic acts and sexual assault on the child - imprisonment not less than six yrs but up to eight yrs and fine.

5. Participating in pornographic acts and involving in aggravated sexual assault of the child - imprisonment not less than eight yrs but up to ten yrs and fine.
Section 15: Person who stores any pornographic material in any form involving a child, for commercial purpose- Imprisonment up to 3 yrs or fine or both.

Section 17: Abetment of an offence- if the act abetted is committed in consequence of the abetment, shall be punished with punishment provided for that offence.

Section 18: Attempt to commit an offence- punishment for a term one half of the longest term of imprisonment for that offence.

Young Persons (Harmful Publications) Act, 1956:

Obscenity and pornography are dealt under the Young Persons (Harmful Publications) Act, 1956. A young person means a person under the age of 20 years. It is an offence to sell, let, hire, distribute or publicly exhibit harmful publications.

Information Technology Act, 2000:

Under Section 67 of the Information Technology Act, 2000, publication and transmission of pornography through the internet is an offence.
# ANNEXURE (i)
## Contact Number of Service Providers in Goa:

### 1. Helpline Numbers:

<table>
<thead>
<tr>
<th>Service</th>
<th>Number</th>
</tr>
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<tbody>
<tr>
<td>Child Helpline</td>
<td>1098</td>
</tr>
<tr>
<td>Women Helpline</td>
<td>1091</td>
</tr>
<tr>
<td>Police Control Room</td>
<td>100</td>
</tr>
<tr>
<td>Ambulance</td>
<td>108</td>
</tr>
</tbody>
</table>

### 2. Goa Police:

#### North District Police Stations

<table>
<thead>
<tr>
<th>S.P (North)</th>
<th>Office</th>
<th>Mobile</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2416100 Ext- 201</td>
<td>7875756016</td>
</tr>
</tbody>
</table>

#### Police Inspector North District:

<table>
<thead>
<tr>
<th>Police Station</th>
<th>Office</th>
<th>Mobile</th>
</tr>
</thead>
<tbody>
<tr>
<td>PI Panaji</td>
<td>2428482</td>
<td>7875756022</td>
</tr>
<tr>
<td>PI Old Goa</td>
<td>2285301</td>
<td>7875756024</td>
</tr>
<tr>
<td>PI Agacaim</td>
<td>2218000</td>
<td>7875756023</td>
</tr>
<tr>
<td>PI Mapusa</td>
<td>2262231</td>
<td>7875756026</td>
</tr>
<tr>
<td>PI Calangute</td>
<td>2278284</td>
<td>7875756031</td>
</tr>
<tr>
<td>PI Saligao</td>
<td>2914052</td>
<td>-</td>
</tr>
<tr>
<td>PI Porvorim</td>
<td>2417704</td>
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<tr>
<td>PI Anjuna</td>
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<td>7875756027</td>
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<tr>
<td>PI Pernem</td>
<td>2201233/2201065</td>
<td>7875756028</td>
</tr>
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<td>PI Bicholim</td>
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</tr>
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<td>PI Valpoi</td>
<td>2374255</td>
<td>7875756034</td>
</tr>
<tr>
<td>PI Ponda</td>
<td>2313101</td>
<td>7875756036</td>
</tr>
<tr>
<td>PI Collem</td>
<td>2600233</td>
<td>7875756037</td>
</tr>
</tbody>
</table>
### South District Police Stations

| S.P (South) | 2732218 | 7875756005 |

### Police Inspector South District:

<table>
<thead>
<tr>
<th>Police Station</th>
<th>OFFICE</th>
<th>MOBILE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PI Margao Town</td>
<td>2705095</td>
<td>7875756039</td>
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<td>PI Maina Curtorim</td>
<td>2714787</td>
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<td>PSI Konkan Railway Margao</td>
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### 3. NGO

#### North Goa

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Location</th>
<th>Contact Number</th>
</tr>
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<tbody>
<tr>
<td>CRG</td>
<td>Porvorim</td>
<td>2413341 / 2413342 / 9822983336</td>
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<tr>
<td>Childline</td>
<td>Panjim</td>
<td>2422507 / 2422508 / 8275381590 / 8275381591</td>
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<td>SCAN</td>
<td>Panjim</td>
<td>2438097 / 9422389926 / 8605670055</td>
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## 3. NGO

<table>
<thead>
<tr>
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<tr>
<td>Arz</td>
<td>Vasco</td>
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<tr>
<td>Bailancho Ekvott</td>
<td>Margao</td>
<td>2705025 / 9423884669</td>
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<tr>
<td>Jan Ugahi Trust</td>
<td>Margao</td>
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## 4. Shelter Homes

### North Goa

<table>
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<th>Organisation</th>
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<tbody>
<tr>
<td>El Shadai</td>
<td>Assagao</td>
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<tr>
<td>Ish Kripa</td>
<td>Siolim</td>
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<tr>
<td>Gomantak Lok Seva Trust</td>
<td>Anjuna</td>
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<tr>
<td>Matruchaya Trust</td>
<td>Ponda</td>
<td>2312152 / 2313142</td>
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<tr>
<td>Care &amp; Compassion (Girls Home)</td>
<td>Altinho</td>
<td>2426940 / 9823388747</td>
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<tr>
<td>Care &amp; Compassion (Boys Home)</td>
<td>Santa-Cruz</td>
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<tr>
<td>Sr. Adores</td>
<td>Nachnola</td>
<td>2293433</td>
</tr>
<tr>
<td>Margaret Bosco Bal Sadan</td>
<td>Bardez</td>
<td>2261200</td>
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### South Goa

<table>
<thead>
<tr>
<th>Organisation</th>
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<tbody>
<tr>
<td>Stepping Stone</td>
<td>Margao</td>
<td>6571697 / 9503966106</td>
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<tr>
<td>Sr. Adores</td>
<td>Nuvem</td>
<td>2790479</td>
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<tr>
<td>Nitya Seva Niketan</td>
<td>Revona</td>
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5. Government Shelter Home

<table>
<thead>
<tr>
<th>Institution</th>
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</thead>
<tbody>
<tr>
<td>State Protective Home, (Victims of commercial sexual exploitation)</td>
<td>Merces</td>
<td>2446655</td>
</tr>
<tr>
<td>Apna Ghar (Children in need of care and Protection and children in conflict of law)</td>
<td>Merces</td>
<td>2445030</td>
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</table>
Victim Compensation:

The Goa Government has notified a scheme titled, “Goa Victim Compensation Scheme 2012” under which the Government has constituted a fund, titled, “Victim Compensation Fund”. Under this scheme the victims of rape, human trafficking and acid attacks in the state will be given a compensation of Rs. 10 lakhs. This scheme has been prepared under sec.357-A of Cr.P.C.

Implementing Department: Home Department, Goa.

Rehabilitation scheme:

The Goa government has formulated and notified “PRABHAT”, a scheme for the rehabilitation of victims of Commercial sexual exploitation in Goa and sexual abuse. Under this scheme the provisions are made for shelter, education, vocational training, employment, grant for business, honorarium etc.

Implementing Department: Department of Women and Child Development, Goa.
a) Video Conferencing:


The whole inquiry before a Court being to elicit the truth, it is absolutely necessary that the victim or the witnesses are able to depose about the entire incident in a free atmosphere without any embarrassment. Section 273 Cr.P.C. merely requires the evidence to be taken in the presence of the accused. The Section, however, does not say that the evidence should be recorded in such a manner that the accused should have full view of the victim or the witnesses. Recording of evidence by way of video conferencing vis-a-vis Section 273 Cr.P.C. has been held to be permissible.

b) In camera trial:


The Court had highlighted the importance of provisions of Section 327(2) and (3) Cr.P.C. and a direction was issued not to ignore the mandate of the aforesaid provisions and to hold the trial of rape cases in camera. It was also pointed out that such trial in camera would enable the victim of crime to be a little comfortable and answer the questions with greater ease and thereby improve the quality of evidence of a prosecutrix because there she would not be so hesitant or bashful to depose frankly as she may be in an open court, under the gaze of the public. It was further directed that as far as possible trial of such cases may be conducted by lady Judges wherever available so that the prosecutrix can make a statement with greater ease and assist the court to properly discharge their duties, without allowing the truth to be sacrificed at the altar of rigid technicalities.
c) Cross examination of victim:

Sakshi vs Union Of India AIR 2004 SC 3566

In holding trial of child sex abuse or rape:
(a) a screen or some such arrangements may be made where the victim or witnesses (who may be equally vulnerable like the victim) do not see the body or face of the accused;
(ii) the questions put in cross-examination on behalf of the accused, in so far as they relate directly to the incident, should be given in writing to the President Officer of the Court who may put them to the victim or witnesses in a language which is clear and is not embarrassing;
(iii) the victim of child abuse or rape, while giving testimony in court, should be allowed sufficient breaks as and when required.


d) Medical Examination of the victim & Recording of the statement:

Dilip vs State Of M.P 2013 STPL(Web) 343 SC

It is an obligation on the part of the State authorities and particularly, the Director General of Police and Home Ministry of the State to issue proper guidelines and instructions to the other authorities as how to deal with such cases and what kind of treatment is to be given to the prosecutrix, as a victim of sexual assault requires a totally different kind of treatment not only from the society but also from the State authorities. Certain care has to be taken by the Doctor who medically examines the victim of rape. The victim of rape should generally be examined by a female doctor. Simultaneously, she should be provided the help of some psychiatric. The medical report should be prepared expeditiously and the Doctor should examine the victim of rape thoroughly and give his/her opinion with all possible angle e.g. opinion regarding the age taking into consideration the number of teeth, secondary sex characters, and radiological test, etc. The Investigating Officer must ensure that the victim of rape should be handled carefully by lady police official/officer, depending upon the availability of such official/officer. The victim should be sent for medical examination at the earliest and her statement should be recorded by the I.O. in the presence of her family members making the victim comfortable except in incest cases. Investigation should be completed at the earliest to avoid the bail to the accused on technicalities as provided under Section 167 Cr.P.C. and final report should be submitted under Section 173 Cr.P.C., at the earliest.
REFERENCES

www.goapolic.org
Goa Police website.

The Indian Penal Code, 1860,

Criminal Procedure Code,

The Teddy Bear Clinic & Center for AIDS Development
Research & Evaluation (CADRE),
Child Sexual Abuse a Handbook for Parents & Care Giver.
a report by

an endeavor supported by