Administrative Order No. **67**
Series of 2003

**SUBJECT:** Guidelines in the Operationalization of a "Rape Crisis Center"

I. **Rationale**

There is a strong recognition that increase of sexual abuse cases of women occurs on a significant and universal scale. Women and children are the most vulnerable sectors to rape. For the period 1998-2002, DSWD served a total of 4,620 sexual abuse cases both women and girl-children. While there are some instances of sexual abuse among the younger males, it is still under reported due to its sensitive nature.

Generally, rape victims are left in a shattered world. Results of studies reflected the victims as deeply hurt with strong feelings of betrayal and powerlessness. However, they do not readily tell their stories. Many actually think that they do not have much choice in the situation but to suffer in silence and solitude.

We are also faced with the reality that there are limited facilities and programs that respond to the needs of rape victims. Another gap that needs to be responded to is the inadequacies of concerned GOs and NGOs on the procedures involved in the establishment of centers. It is in this context that the need to establish rape crisis centers is crucial to address the pressing needs/concerns of victims to regain their psycho-social functioning and eventually contribute/participate in national development efforts. This is the genuine intent of "Republic Act 8505, the Rape Victim Assistance and Protection Act of 1998".

Given these situations, a guideline that will adequately provide information on the systems and procedures involved in the establishment of a Rape Crisis Center which will serve as basis for other GOs/NGOs in establishing their own facility is needed, hence this order.

II. **Legal Basis**

1. Article II, Section 11 of the Philippine Constitution which provides that "The State values the dignity of every human person and guarantees full respect for human rights."

**REPUBLICA NG PILIPINAS**
KAGAWARAN NG KAGALINGANG PANLIPUNAN AT PAGPAPAUNLAD
(DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT)
BATASAN PAMBANSA COMPLEX, CONSTITUTION HILLS
QUEZON CITY
2. Article 6 of the ratified UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) which states that "Women have the right to be protected from all forms of trafficking and prostitution including sexual slavery, generally and by the military, the deception of migrant women, and "mail order" and false marriages. Women and girls also have the right to be protected against resorting to prostitution for survival".

3. Article 34 of the Convention on the Rights of the Child (CRC) which states that "Children have the right to be protected from all forms of sexual exploitation and sexual abuse particularly: inducement of coercion to engage in unlawful sexual acts; involvement of children in prostitution or other unlawful sexual acts; and involvement of children in pornographic performances and materials.

4. RA 7610, the Special Protection of Children Against Child Abuse, Exploitation and Discrimination Act – An act providing for stronger deterrence and special protection against child abuse, exploitation and discrimination, providing penalties for its violation, and for other purposes.

5. RA 8353, the Anti-Rape Law of 1997 – An act expanding the definition of the crime of rape, reclassifying the same as a crime against persons, amending for the purpose RA 3815 as amended, otherwise known as the Revised Penal Code, and for other purposes.

6. RA 8505, the Rape Victim Assistance and Protection Act of 1998 – An act providing assistance and protection for rape victims, establishing for the purpose a rape crisis center in every province and city, authorizing the appropriation of funds therefor, and for other purposes. Section 3 of this Act States that "The DSWD shall be the lead agency in the establishment and operation of the Rape Crisis Center”.

III. Objectives

General:

To facilitate the establishment on a Rape Crisis Center in every province and city in a government hospital or health clinic or any other suitable place to provide a comprehensive rehabilitation program for rape victims.

Specific:

1. To provide immediate psychosocial intervention and health services including medico-legal examination, to rape victims and survivors;

2. To assist rape victims and survivors in securing free legal assistance in hastening the investigation and effect immediate arrest of offenders and the filing of cases in court;

3. To provide a therapeutic and recovery program for the survivors including a temporary home to ensure their privacy and safety and counseling to the family members of the survivors;
4. To access the survivors to other services/programs that may be of help to them for their immediate recovery, whenever necessary.

IV. Description

1. What is a Rape Crisis Center (RCC):

   A “Rape Crisis Center (RCC)” is a place within a province or city where victims or survivors of rape including their families and members of the community can avail of a comprehensive network of programs and services.

2. Target Clientele:

   Victims of rape who are male or female, minor or an adult.

3. Component of a “Rape Crisis Center”:

   a) Advocacy and Social Preparation

   This involves conduct of activities like community assembly, distribution of flyers for information dissemination by the core staff in the RCC and complemented by other concerned government agencies, community organizations and the civil society to create public awareness on the elimination of violence against women and rape and the promotion and protection of the rights of women and children and support in the operation of a “Rape Crisis Center”. Social preparation shall ensure participation of the existing structures in the community e.g. Sangguniang Kabataan (SK), Barangay Council for the Protection of Children (BCPC), Kalipunan ng Liping Pilip (KALIP), Federation of Senior Citizens Association of the Philippines (FSCAP), Pag-aso Youth Movement (PYM), Local Government Units (LGUs), Churches, etc. to effectively implement the program.

   b) Technical Assistance and Capability Building of Implementors

   RCC staff, LGU/NGO social workers, medical officers, volunteers and other persons involved in the implementation of the program shall be trained on protection of rights of children and women as well as in managing and handling victims of rape by a team of experts who shall be organized by the DSWD.

   c) Networking and Resource Generation

   This involves tapping and maximizing local, national and international resources, linking with other agencies, organizations for resource mobilization and technical expertise by the core staff of the RCC. Collaboration with involved agencies shall be done to strengthen the delivery of services to victims and their families.

   d) Data Banking and Documentation

   Data banking, management and utilization shall be done and maintained on the profile of minors and adults served and the number of service providers trained, among others by the RCC core staff. It shall be
V. General Policies/Implementing Details

1. Establishment of a Rape Crisis Center

Rape Crisis Centers shall be established in areas where there are high incidence of rape cases as reported by the concerned agencies e.g. PNP, NGOs and LGUs. It may be located in any suitable place or government hospital or clinic and will be established by creating or upgrading existing facilities or by establishing or building upon existing networks providing support and assistance to victims of rape. The center may be known by some other names so as to prevent stigmatization of the survivor. Hence, the following shall be considered:

1. Careful assessment on the need for the establishment of a center. Prevalence of rape is one consideration for the need for a facility.

2. A social preparation process must be initiated to identify key stakeholders. Project presentation is critical to inform them of the need for the center to solicit support. Bring them together to envision and plan the program, design the collaboration.

   It is important to set-up a task force or working committees to guide the social preparation process. Initially, it is important to access resources for the social preparation process through donations and/or government funds.

3. Training of all center staff on a feminist perspective of looking at rape and responding to survivors in a gender-sensitive, non-judgmental way. Modules developed should go beyond providing skills and tackling the built-in biases, stereotypes and misjudgments abounding in society.

4. Program planning meetings should be undertaken by the task force or working committees. Areas needing special planning and attention are:

   • A common vision and mission for the Rape Crisis Center which will be a framework for the policies and procedures.

   • A clear division of responsibilities between and among the center staff, LGUs, NGOs and/or the GO partner agencies, slating what should happen, where, by whom and why.

   • A well-worked out and consistent client flow from entry to discharge to reintegration to the community/family.

   • A clear referral process/system using a standard referral form.

   • Agreements on client documentations.
• Infrastructure, staff and resource requirements.

• Methods of monitoring and evaluation of services by parties concerned.

• Management and supervision of the center.

• Content and timetable of trainings for center staff at all levels.

• Services for victim's family

• Joint development of a protocol of policies and procedures.

2. Program Management/Administration

a. Tasks/Responsibilities:

As a network of services, the RCC shall compose of the following core staff who shall act jointly in providing full support and assistance to rape survivors and their families at anytime and in every step of the process:

a. 1 Specific

The staff may come from DSWD, LGU or from any participating NGOs/organizations, etc. In cases where needed staff is not available from the cooperating agencies/organizations, purchase of service may be done subject to pertinent COA and CSC rules and regulations and availability of funds.

1. Social Worker or Crisis Worker – shall respond to the psychosocial needs of rape survivors among others.

• Assess the cases of rape survivors received in the center;

• Define the problems to be worked on and set an agreement with the survivors consistent with the functions of the rape crisis centers;

• Formulate treatment plans with the rape survivors including their families consistent with the functions of the rape crisis centers;

• Organize and direct the interdisciplinary team in the center towards a holistic approach for the healing, recovery and reintegration of the rape survivors;
• Conduct stress management and other appropriate interventions to the rape survivors towards resolving trauma brought about by the experience;

• Network with the five pillars of the justice system to link the survivors to appropriate resources in response to identified needs;

• Terminate the helping relationship after attainment of the treatment plans; and

• Ensure social reintegration of rape survivors in their family and community through the provision of after care services.

2. Physician – shall conduct medico-legal examinations and provide treatment to injuries and diseases related to the rape.

a) Before Examination:

• Ensure that the medico-legal examination shall be conducted by a woman, or if unavailable, in the presence of a duly authorized woman; and

• Ensure that only the person(s) expressly authorized by the rape survivor are allowed inside the examination room.

b) During Examination:

• Conduct a speedy and thorough examination of the survivor so that humiliation as a result of repetitious procedures may be minimized; and

• Treat the victim with gentleness and utmost respect.

c) After Examination:

• Prepare an official Medico-Legal Report based on the findings of the examination ensuring that it is duly endorsed by the Chief and the Director of the Medico-Legal Division or duly authorize representative with its corresponding case number. The Medico-Legal Report is prepared within two or three days unless other requirements are requested like x-ray, pregnancy test,
ultrasound and others which would take a longer period of medical analysis, and

- Prepare and issue an initial report if there is an immediate need for the Medico-Legal Report, e.g., the suspect is detained.

d) Post Examination Assistance

- Refer all cases of rape to the rape crisis center or other government organization concerned; or to the hospital of choice for medical attention and counseling if not yet referred; and

- Appear and testify in court as an expert witness on the case.

3. Psychologist or psychiatrist – shall provide psychological counseling and psychiatric services to the victims whenever necessary.

4. Police Officers – shall conduct the investigation, ensure the gathering of evidence material to the case, ensure the speedy arrest of offenders and the filing of cases in court as well as provide security to victims, witnesses, counselors and social workers, where the circumstances of threat merit such police security.

5. Prosecutors or lawyers – shall facilitate the litigation of the rape cases that have been filed.

a) A prosecutor who shall preferably be of the same sex as the victim or if not present or available, shall be gender sensitive to conduct the inquest or preliminary investigation as follows:

- Inform the rape survivor of his or her rights and what to expect in the legal process;

- File the information against the offender including the discharge of a suspected offender to become a state witness;

- Inform the rape survivor of the detention status of the accused pending trial, i.e., the rape survivor shall be informed beforehand of the release of the accused;

- Schedule each court proceeding that the rape survivor is required to attend; and
• Accept a plea of guilt by the accused or the promulgation of judgment in the rape case.

b) Prevent during trial, the admission of evidence of the victim’s past sexual conduct, opinion thereof, or reputation;

c) Ensure that the inquest or preliminary investigation and trial shall be conducted in a language or dialect that is known or familiar to the victim;

d) Exert utmost efforts to prevent delay in the preliminary investigation and trial of the rape case; and

e) Shall divulge to the public the name, address and any other information or circumstances tending to establish the identity of the victim. Moreover, the public shall be barred during the conduct of the inquest or preliminary investigation if it will serve the best interest of the victim.

6. NGO representatives who shall, among others, conduct awareness raising and advocacy activities.

a.2 Common Duties and Responsibilities of the Investigating Police Officer, Examining Physician, Prosecutor, Social Worker or Crisis Workers:

• Respect the rights and dignity of the survivors as a person;

• Arrange for psychological counseling of rape victims and survivors by a trained and qualified counselor;

• Arrange for the medical examination of the offended party by a trained and qualified physician and further medical services;

• Refer the case to the Women’s and Children’s Desk of a precinct or agency;

• Refer the survivor for legal services if he or she decides to file a case;

• Inform the survivor of the range of his/her options

• Ensure the information regarding the survivor and his/her circumstances are kept confidential; and
• Undergo training and other capacity development programs on, but not limited to, the following: trainings on gender sensitivity, gender sensitive counseling, human rights and women and children rights and legal management of rape cases.

b. Budget:

The funds for the establishment and maintenance of the Rape Crisis Center shall be sourced out from the following:

1. Annual budget allocations of DSWD, DOH, DILG and DOJ, agencies mandated to provide for the implementation & operation of the RCC;

2. Annual budget of the LGUs;

3. Certain percent from the development funds of the LGUs subject to the approval of the Sangguniang Panlalawigan; and

4. Other local sources e.g. PCSO, PAGCOR and other gaming and amusement centers.

3. Partner Agencies and Specific Tasks

1. Department of Social Welfare and Development (DSWD)

• Provide support services to rape victims and their families such as residential and community-based service.

• Establish linkage with the academe and all NGOs for the necessary support services to rape victims/survivors and their families.

• Conduct training to Social Workers and other service providers for the effective operation and management of the RCC.

• Conduct of training for counselors on basic approaches in dealing with victims of rape.

• Provide technical assistance to LGUs for the operation and maintenance of RCC.

• Develop programs that facilitate the recovery of rape survivors and other support interventions.

2. Department of Health (DOH)

• Provide a space at the Regional Hospitals for the RCC.

• Provide immediate medical assistance to victims of rape.
• Develop and adopt uniform medical examination procedures including the accomplishment of forms/report, such as the conduct of physical examination within 48 hours.
• Conduct training to examining physicians and other health workers on gender sensitivity core messages.
• Ensure both the validity and confidentiality of the medical records required in cases of litigation.

3. Department of Interior and Local Government (DILG)
   • Establish Women’s Desk in every precinct throughout the country authorized among others to conduct investigation of rape cases through the Philippine National Police (PNP).
   • Conduct training to law enforcement officers and barangay officials on related topics in coordination with appropriate offices/agencies.
   • Provide support to LGUs to assist victim of rape and to ensure the sustainability of such services.
   • Issue a memorandum order to LGUs to support the establishment of RCC in every province/city.

4. Department of Justice (DOJ)
   • Ensure speedy disposition of rape cases.
   • Ensure the efficiency of legal services supporting the free legal assistance to victims of rape.
   • Conduct training of prosecutors and other officers at the justice system.

5. Lead Non-Government Agency
   • Conduct public information/dissemination.
   • Assist in the development and implementation of training programs for the different workers involved.
   • Advocate for community-based programs.
   • Advocate for the elimination of all forms of violence against women and children.

VI. Effectivity

This order shall take effect immediately and revokes all previous orders contrary thereto.

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Secretary
Department of Social Welfare and Development