“Implementing the National Referral System for Battered Women”

Attendance (without distinction):

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**Ministry of Women’s Affairs:** Ilham Sami, Nijmeh, Ghada Madmouj, Sabah Shadid

**Council of Ministers:** Ismail Hammad, Hayat Bazzar, Myasar, Mustapha Souf, Saja Yousef Tirawi

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**Civil society institutions:** Mohammed Ghannam (Family protection – Hebron), Ableh Abul Rub (Family Protection, Ramallah), Nijmeh Samhan, Victoria Shukri Jameel, Hanan Abu Ghosh (Health work committees), Maria Zayed (Jusur)

**Social Affairs Ministry:** Basima Subuh, Nawal Tamimi

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**Justice Ministry:** Munjid Abdallah, Suna Nassar

**Interior Ministry:** Nihad Wahdan

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**Introduction:**

This paper is part of MIFTAH’s “Support for the Protection of Women” program implemented by MIFTAH in partnership with UNFPA, to activate UNSCR 1325 for achieving
peace and security for Palestinian women and to promote protection for women and accountability for those who commit crimes against them in addition to the protection of women from violence.

The paper builds on the results of meetings and sessions held by MIFTAH with the health, police and social sectors on the one hand, and with institutions specialized in building the national system for battered women to be ratified by the Council of Ministers.

There have been ongoing concerted efforts in the past two years to work towards ratifying and adopting this national referral system, which peaked with the Council of Ministers’ decision No. 18 of 2013. The system was adopted and binding for all relevant parties (police, social, health and other sectors). It also called for laying the groundwork for comprising a national covenant to deal with battered women through providing protection and care for women requesting this service.

**Overview:**

The relevant parties partially committed to implementing the system, which means we need improved application, which comes through follow-up, evaluation and accountability.

Civil society organizations that offer services to battered women did exert efforts including pushing for the issuance of the abovementioned resolution, through building and developing skills for and training on the use of the system by service providers and developing protocols to include other sectors that need protection such as special-needs women. They also include developing a work mechanism for following up and monitoring the effectiveness of the national system with the goal of establishing a methodology among institutions as part of their strategic approaches.

Still, the developments and achievements mentioned above have not risen to the aspired level in terms of providing real and complete protection. There must be constant efforts to turn this system and its goals into a culture and to institutionalize it, where it is not impacted by whether or not funds are available or not. Rather, it must be viewed as a national, social development necessity based on the protection of human rights and dignity and not as a project linked solely to funding.

**Discussion:**

This policy meeting is a follow up of MIFTAH’s previous policy meeting held at the end of 2014, which evaluated the implementation of national measures to protect women and curtail violence against them. It also addressed the importance of implementing measures and arrangements that guarantee women’s safe access to services, which includes attempts to revive coordination and networking between ministries and executive bodies and civil society institutions. This is aimed at closing the gaps which hinder the application of the national system.
for battered women and to set ground rules to regulate the relationship between service providers and women beneficiaries.

**Follow-up of system application by the Ministry of Women’s Affairs**

The Ministry of Women Affairs (MoWA) set up a team at the end of December, 2014 to follow up on implementing the proposed plan to the technical committee. This committee includes the ministries MoWA women’s, Ministry of Health (MoH) and Ministry of Social Affairs (MoSA), in cooperation with MIFTAH. A preliminary assessment was conducted on the implementation of the system and its application through holding consultative meetings and field visits to the three sectors (MoH, MoSA and Family Protective Services in the Police) after which the MoWA noted the following obstacles:

- A weakness in following up on the application of the national system as a result of a lack of knowledge on the context and protocols of referral among the directorates at various levels (centers, service-centers), in addition to the lack of unified concepts of violence.
- A disparity in the distribution of the system in directorates of the three districts, which impacted the extent to which the system could be adopted as a basic procedure in the referral of battered women.
- Lack of financial and human resources, which could otherwise contribute to the effectively implementing the system.

**Follow-up of system application by the Justice Ministry**

- Reaffirming the importance of the national system as an important accomplishment in protecting battered women. The most important approaches in this regard are:
  - Adopting a strategy and sustainable methodology to follow up on the implementation of the national system.
  - The importance of offering psychological support to battered women and the need to spread social awareness on the issue of violence and to work on organizing lobbying and advocacy campaigns in this direction.
  - Coordination and networking with organizations and parties to organize these campaigns to pressure decision makers to pass laws on the protection of women and girls from violence, in particular the Palestinian penal code draft law and the bill for family protection from violence.
  - The importance of integrating the judiciary in efforts towards a protection system within the framework of the national referral system.
  - The protection of women and girls from violence is a top priority with the justice ministry. Evidence of this was the integration of the law into strategic and operational plans, starting with a review and development of measures and models pertaining to the protection and safe transfer systems for battered women and ending with the integration of the system in general budgets in order to enable its implementation.
**Steps and follow up from MoH:**

The ministry stressed on the importance of offering complete health care for battered women, which requires a budget allocation that includes a program for developing capacities and integral training to service-providers in terms of the protocols of the national system and gender-based violence. This in turn, needs a harmonized infrastructure to help provide services to battered women. Coordination is also necessary between MoH and the police. However, in spite of all this, there is still a need for more cooperation and coordination between the ministry and social sectors, including relevant institutions.

**Obstacles faced by MoH**

- Cases were not documented in accordance with the national system. Rather, the most serious cases are transferred to safe houses. This is done according to procedures and documentation papers from the ministry (having an effective monitoring system for cases of violence in general).
- The lack of a system to follow up on cases transferred to safe houses; the ministry’s service ends after providing this health service.
- A lack of budgets for implementing the referral system at the health ministry
- The occasional stance of battered women on being referred to the family protection department.

**Follow-up by The police Family Protective services unit**

- A guidebook was developed on the special procedures for family protection from violence, which was adopted over a year ago. The guidebook overlaps in terms of content with the national referral system, however this step needs to be completed so a unified more comprehensive guidebook is developed.
- Family protection expanded its mandate to include offering services to minors and girls who are victims of domestic violence in 11 districts, where the team in each district consists of 11-15 members. Still, there are several obstacles to this, including:

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1 Women whose lives are in danger because of sexual or physical assault are offered health services by the ministry, which commits to transferring the case to the police department’s family protective services where referral and protection procedures are finalized, including a report reflecting the severity of the case.
- A lack of understanding of the roles and powers of the three sectors, which in turn leaves the door open to the protection system being implemented from the perspective of each separate party and their understanding of this role instead of according to the national system.

- There is a gap and disparity in the ongoing training offered to service providers in the various districts whereby some are targeted systematically while others do not receive the necessary training.

- The constant transfers among rehabilitated staff adversely affect the intention of accumulated experience and push progress back to point zero. This leads to a shortage of specialized cadres in some administrations.

- The lack of knowledge and awareness among service-providers on the subject of gender-based violence.

- The lack of consideration in terms of infrastructure to the exclusivity of the situation of battered women.

- Lack of special budgets to enact and better implement the system.

**Social Affairs Ministry:**

- The ministry adheres to applying the system of protection centers, all the way from receiving the cases until reintegration them into society. The case is followed up in terms of the component of safety and risk for the beneficiary and her family members.

- The ministry adheres to a process of coordination and networking between the various parties. There is active coordination between the Ministry of Social Affairs and the police department’s Family Protection Services. Cases are referred based on a report which reflects the degree of risk for the battered party.

- As for the database on battered women, this is the responsibility of the social affairs ministry according to the division of roles stipulated in the national system. All concerned parties must send their data to the database. However, there is still a problem in terms of activating the database as required.
Obstacles to implementing the system in MoWA:

- Lack of specialized staff for providing services to battered women
- Linking the provision of services with official working hours, with the exception of certain directorates, which means women are often hindered in obtaining social affairs services.
- Sectors do not adhere to the use of the database on battered women and to providing the ministry with information according to the agreement between the parties.
- Lack of a budget for the implementation of the system

Policies for enacting and implementing the national system:

The following policies are aimed at implementing and enacting the national referral system and integrating it within the national strategies on violence against women. They are also aimed at developing the capabilities of service providers and adopting an integrative work approach for the relevant parties. This is expected to have a positive and effective impact on the implementation of the system and its adoption as a binding national system enacted in the health, social and police sectors.

First: Release of a circular on the decision, in accordance with an official statement from the Council of Minister’s general secretariat:

This policy will be put into effect when the Council of Ministers’ secretary general addresses decision-makers in the health, social and police sectors and releases a binding circular for implementing the national system for battered women. Its distribution to all service providers in Palestinian directorates and districts will then be followed up.

Second: Dissemination and distribution of the national system for battered women:

The system is considered a primary reference and treaty for health, social and police service providers for battered women and is a legal foundation that determines the nature of the relationship between the health, social and police sectors. Hence all 30 articles of it must be printed and published.
Third: Institutionalizing the technical committee to follow up on the national system’s implementation

This policy is realized through adopting an ongoing training and awareness program for all members of the staff which provides services to battered women in service centers and in the three sectors. It is also through coordinating and networking with relevant civil society organizations and reaching partnership agreements, all in order to develop the capacities of service providers regarding the national system. Efforts must also be made in the three sectors to alleviate the problem of speedy and abrupt referrals among service providers, along with capacity building for them in the national system and protocols in referring battered women. Relevant civil society institutions should also be provided with the names of service providers working in service centers who have not yet been trained, so that they are part of capacity-building programs on the use of the national system and the adopted referral procedures.

Fifth: A guidebook or clear and comprehensive list explaining procedures for the referral of battered women:

The policy will be cemented through a review and development of the procedures followed in the various districts and through circulating the agreed on procedures, unifying and disseminating them and then providing training on them. These will later be adopted within a general framework in all locations.

Sixth: Surrounding the national system with other national systems pertaining to the protection of weak and marginalized sectors

This policy will be enacted through a review of all the systems pertaining to the protection of marginalized and weak sectors and through updating follow-up mechanisms to accompany the national system; attaching the protocols of these systems within the national system and raising the awareness of service -providers on the contents of these systems; developing models of referral which would include protocols for the referral of sectors included in the other systems.

Seventh: Enacting the database agreed on between the three sectors

This is through developing the questionnaire previously prepared by the system’s technical committee, so as to include all types of violence; disseminating the questionnaire to all parties; reviving the role of the social affairs ministry in safekeeping information and data; agreeing with the parties to regulate the relationship between the partners in terms of sending
information and training service-providers on data entry with consideration to the women in the Gaza Strip as well.

**Recommendations:**

**Government sector (three sectors)**

- Follow up on the official circular of decision-makers in the health, social and police sectors to the directorates in the districts, which stipulates the necessity of using the national system.

- For the national committee against violence to officially appoint the technical committee as part of adopted procedures in order to follow up the implementation of the national referral system.

- Consolidating the terms used in the national referral system for battered women and presenting them to all directorates in the three sectors.

- Preparing an evaluation report that reflects the reality of the system’s implementation and its use by the sectors.

- For the social affairs ministry to follow up on the use and activation of the database within the protocols of the national system and to transform the system into a unified, national electronic system.

- Integrating the prosecution and the judiciary (forensic medicine) as active parties in the system for protection from violence.

- Reviewing and developing work strategies for the three sectors which would guarantee the integration of the national system and the allocation of budgets to activate this system.

- Setting up the infrastructure and creating special and separate places for receiving cases of violence in a way that coincides with the exclusivity and needs of battered women; providing service centers with the necessary staff; providing them with cars for transferring women seeking services so they are protected by security services in civilian dress.

- Adopting a clear strategy for developing the capabilities of service providers for battered women in the health, social and police sectors; increasing knowledge on the regulations of the national system and the protocols of the TAKAMUL project.
Recommendations of civil society:

- Revive and develop the coordination and follow up committee, comprised of partners (official and civil society sectors) so it can put the system into action.

- Review the mechanisms for following up on the referral of battered women in terms of estimating the level of risk and severity.

- Review and development of the national system in terms of procedures and the attached forms and reaching an agreement on how to document cases in a manner that conforms with the exclusivity of the three sectors (health, social and police).

- Organizing a training program that includes all service providers for battered women (on the protocols of the system, the concepts and terms used in the system, documentation of the report, documentation of files) to develop the capacities of service-providers.

- Developing the system in terms of expanding the scope of protection and prevention whereby its procedures would include other groups of marginalized women.

- Completing, reviewing and developing a guidebook for institutions that offer services to battered women and girls; printing and distributing it.

Recommendations of the media:

- Building a media strategy targeted at spreading awareness on the importance of implementing the national system and trying to influence decision-makers in order to integrate the system within the strategies of social protection.

- Organizing media campaigns that shed light on the reality of battered women and the mechanisms for referral (the national system).

- Spreading awareness on the importance of the national system through organizing audio and visual media sessions and distributing posters and infographics that explain the referral system for battered women.
Annexes

Annex (1): Definitions:

**Enacting the system:** Allotting the necessary material and human resources to the parties in order to put into effect the procedures and measures necessary for the safe protection of battered women.

**Implementation of the system:** Adopting a strategy to integrate the national system for battered women into the health, social and police sectors to be followed by its translation into strategic and operational plans.

**TAKAMOL project:** A group of regulating charters, rules, procedures and protocols that aim to protect, care for and rehabilitate battered women over the age of 18 in the social, health and police sectors. Partners work towards building programs that aim to provide social, health, legal and police services and to implement them with professionalism and effective integration.

**System of National Referral for battered women:** A group of regulating rules and provisions which comprise a national charter for dealing with beneficiaries and those seeking services. It includes unified and clear definitions of concepts and terms pertaining to violence against women.

**Victim/attacked:** Any woman who is or was subjected to violence of any sort, whether by a family member or from someone outside the family, and who needs social support.

**Beneficiary:** A battered woman who is 18 years or older and who benefits from any type of services at the level of protection, care and rehabilitation in the health, social or police sectors, or in all of the above.

**Technical committees:** Male and female members who represent ministries and official and non-official sectors including civil society and women’s organizations. The committees were formed upon initiative from the Women’s Center for Legal and Social Counseling and Juzoor for Health and Social Development. Its mission is to prepare and build a national referral system.

**Targeted sector:** The three sectors (service providers for protecting battered women, women seeking services)
Legal basis:

Council of Ministers Resolution (18) for 2013 pertaining to the national referral system for battered women.

Based on the provisions of the amended Basic Law of 2003, namely Article (70), and on the provisions of the social affairs law (16) of 1954, namely Article (4) and after reviewing the order for protection centers for battered women (9) of 2011, and on the Council of Ministers Resolution (01/79/13/m.o/s.f) of 2011 pertaining to ratification of the strategic plan for combatting violence against women; and on recommendation of the woman’s affairs minister and the minister of social affairs; and based on the matters approved in the Council of Ministers’ session in Ramallah on 10/12/2013; and based on requirements of public interest, we issued the following system:

“The goal of this system is to lay down the regulations that constitute, in their entirety, a national covenant for dealing with beneficiaries, which are: 1. Achieving protection and care for women in the health, social and judicial sectors; 2) laying down the foundations and regulations that govern and clarify the binding framework for the professional relationship with beneficiaries; 3) Forming a reference and arbitration for moral, professional and ethical programs illustrating the rights and duties of the service providers and beneficiary women.