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Understanding the Victim Assistance Models for Survivors of Sexual Abuse: A Comparative Study of South Africa, Brazil and India

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Abstract

The phenomenon of victim assistance emerged in the United States and spread through Europe via multiple international instruments. In Indian context, the discourse still centers on financial assistance and other forms of assistance services receive scant legislative recognition. The realities of a society including crime rates, socio-economic conditions and persisting societal disadvantages shape the schemes and policies of the society and these policies are expected to address the complex needs of the victims of crime with intersecting identities. Against this backdrop, the authors in this paper conduct a comparative examination from a global south perspective by reviewing the victim assistance models of South Africa and Brazil to test their coherence with the Indian legal structure, particularly focusing on women victims of rape and sexual violence. South Africa and Brazil have been selected because both continue to report alarmingly high levels of sexual victimization against women while their victim-support measures have been listed by UN Women as good practices (UN Women, 2016). The paper combines doctrinal analysis of statutes, case laws and policy instruments with a documentary analysis of official data, parliamentary records and evaluation studies, assessed through five parameters, namely accessibility, integration, accountability, funding and outcomes. The analysis finds that in India and Brazil formal funding commitments have not reliably translated into resourced services, that South Africa's Thuthuzela model offers stronger integration but faces heavy attrition of cases before trial, and that in India assistance under the One Stop Centre scheme remains a policy benefit rather than an enforceable entitlement of the survivor. The paper is divided into four parts, the first being the introduction to the notion of victim assistance, the second being the research methods, the third being the discussion of this comparative study and the fourth concluding the paper.

Keywords: Victim Assistance, India, Brazil, South Africa, Global South, Enforceable Rights

1. Introduction

The paradigm of 'victimology' garnered attention as a distinct discipline since mid-20th century through the works of Benjamin Mendelsohn (Daigle, 2017) and Fredric Wertham (Gopalan, 2022) which later on was reshaped and restructured by the works of scholars in the field. The subject matter of victimology can be deciphered into two separate aspects, one being

the general notion of victimization caused by unprecedented disasters or natural calamity and the other being the 'penal victimology' which focuses on the victims of crime (van Dijk, 1999) and the present work is confined within this second segment. The discourse of victimology reflects the evolution of theorization in victimological studies from a positivistic approach to a critical approach and understanding this transitioning becomes more relevant in the context of sexual victimization and rape. Early theorists focused on the objectivity and attempted to list out features of victims to claim that such features directly or indirectly contributed to the occurrence of the crime which created a discourse of 'victim-blaming' especially in cases of sexual victimization and rape until the upsurge of feminist approach in 1980s which pointed out how such theorization essentially silenced the voices of the women victims and perpetuated gender stereotypes and rape myths in society which led to the formulation of critical theory of victimology that focuses on the subjectivity and analyses the lived experiences of the victims (Wolhuter et al., 2016).

The concept of victim assistance as an emerging dimension of victimology gained some visibility during the civil rights movement, and women's and children's movement in USA. In particular, concerns surrounding sexual victimization and rape became increasingly central to the development of the discourse on victim assistance, which focused on addressing the lived experiences of women and child victims of rape and family violence, thereby contributing to the establishment of institutional mechanisms to run victim assistance programs (Takahashi & James, 2019). Modalities of victim assistance have been further expanded throughout the UK and elected individuals were assigned the role of Police and Crime Commissioners to act as an intermediary between the service providers and victims and effectively work in advancement of victims' right to get support (Spalek, 2017).

The pillars of victims' rights at the international level are rooted in the 1985 UN Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power and a comparative analysis of the Declaration with the draft UN Convention on Justice and Support for Victims of Crime and Abuse of Power reveals that the draft convention inculcates the theoretical construct of restorative justice and introduces the concept of informal methods of resolving disputes while keeping the dignity of the victims intact by providing them a clear choice on whether they seek to proceed with such informal mechanisms and by ensuring foolproof security measures to prevent misuse of such mechanisms to the disadvantage of such victims (Groenhuijsen, 2020). Therefore, theoretical reliance on restorative justice for victims can be found at the international level, whereas in Indian legal scenario the conceptualization of restorative justice is yet to take its proper shape since Indian criminal jurisprudence subscribes to the 'due process model' which enshrines a catena of rights to the accused. The framework of this model perceives the legal procedure as a battle between the State and the accused which consequently sidelines the needs and rights of the victims. Hence, authors argue that the lack of approaches in adaptation of restorative justice paradigm in favour of victims within the Indian criminal legal system contributes to the marginalisation of survivors of rape (Amani & Dewani, 2019).

Renee Zauberman in her article posed an important question as to whether victims of crime can be treated as consumers of the services provided to them for assistance and argued that at least in France and England the service providing function has been considered as a 'regalian state function' (Zauberman, 2000). A sovereign contour is thus attached to these public services which leads to a further question as to whether the State can be held liable in cases of unavailability of adequate services.

British criminologist Joanna Shapland (Shapland, 2017) acknowledged that the support needs of victims are intricate and multifaceted and raised an important question as to how far the

available services are able to satisfy the changing and complex support needs of the victim. She also analysed that the relevance of the 2012 EU Directive (Directive 2012/29/EU) is rooted in the fact that availability of multiple fragmented support services was problematic, and that in the absence of a uniform framework the EU came up with minimum parameters to be fulfilled by the countries of Europe in providing services to the victims of crime. She further argues that a plain interpretation of the Directive reveals that accessing victim support service is a 'right' of the victim. Europe, in this context, advanced victims' cause by adopting a rights-based approach which creates a binding obligation on the part of State machineries and allows the victims to access victim services as their legitimate claim rather than existing at the mercy of the Executive's benevolence.

A. Research Questions and Objectives

The paper addresses three research questions. First, whether the victim assistance models of global south countries such as India, South Africa and Brazil are formulated to cater to the specific needs of women victims of sexual violence; second, how the legal and policy frameworks of these countries differ in making assistance an enforceable entitlement rather than a discretionary benefit; and lastly, how India's victim assistance framework can be strengthened by incorporating good practices from these countries. Accordingly, the objectives of the paper are:

(i) to map the legal and policy basis of victim assistance for women survivors of sexual violence in India, South Africa and Brazil, with India's One Stop Centre scheme as the primary focus;

(ii) to compare the three models on five parameters, namely accessibility, integration, accountability, funding and outcomes (Table 1), separating what the law and policy promise from what the available evidence shows is actually delivered; and

(iii) to identify specific measures, drawn from the South African and Brazilian experience, through which assistance in India can move from a scheme-based benefit to an enforceable right of the survivor.

B. Scope and Limitation of the Paper

While dealing with the phenomenon of victim assistance, the authors have narrowed down the scope of the paper to only victims of crime, hence, assistance mechanism available to victims of accidents do not fall under the purview of this analysis. The authors have also adopted a gendered lens and analysed the legal frameworks of India, Brazil and South Africa from the perspective of women victims of crime and violence. The paper relies on published legal materials, official data and secondary studies available at the time of writing and does not include fieldwork; the findings on implementation are therefore limited by what the three States and independent researchers have made public, and such gaps are stated where they arise.

C. Comparative Framework

Before assessing the three different models of victim assistance in India, South Africa and Brazil, the authors have specified five parameters based on which the assessment shall be conducted. An a priori comparative matrix depicting how the comparative analysis shall be guided based on what indicators is drawn below (Table 1).

Table 1: Comparison Matrix

Parameter	Indicators to Capture	What It Tests
Accessibility	Number/density of service centres and district or provincial coverage; operating hours and cost to the victim (24/7, free of charge); statutory or scheme-based mandate establishing the service; cumulative service-reach figures (women assisted to date).	Whether a victim can physically and financially access a service point, and whether that accessibility is backed by a legal or

		policy mandate rather than ad hoc provision.
Integration	Co-location of legal, medical, police and psychosocial services ('under one roof'); existence of a multi-disciplinary or inter-agency coordination team; specialised courts or case pathways linked to the service; statutory/judicial design connecting police, prosecutors, health and welfare actors.	Whether assistance is delivered as a single coordinated pathway for the victim, or as fragmented services the victim must navigate separately.
Accountability	Enforceability of the entitlement (discretionary relief vs statutory right); existence of an independent grievance-redress or oversight body; complaint-escalation channels named in official documents; judicial enforcement track record (case law compelling compliance); independent field or pilot studies documenting implementation gaps.	Whether the mechanism can be held to its own stated standards, and if it fails, whether the court, ombuds body, or no one makes the State accountable.
Funding	Budget allocated, released and utilised, tracked as a disbursement chain (not a single allocation figure); statutory funding mandates or earmarks (e.g., a fixed percentage of a national fund); independent (non-governmental) monitoring of actual expenditure; sub-national or facility-level funding and staffing shortfalls; historical funding trend and co-funding sources (international, federal, state/provincial).	Whether formal financial commitment actually translates into resourced service delivery, or stalls somewhere in the disbursement chain.
Outcomes	Victim survey or case-resolution rates where available, and whether they are facility-specific or network-wide; service-uptake/reach figures distinguished from case-outcome figures; prevalence data used only as background context, never as a proxy for service performance; independent critique or attrition analysis of official outcome statistics; explicit identification of data gaps rather than silent omission.	Whether the mechanism produces measurable, independently verifiable results for victims, and how much of the available evidence is self-reported by the implementing authority versus externally checked.

Note. Developed by the authors. The parameters draw on the principles of availability, accessibility and coordination of services set out by UN Women (2016) and on the minimum-standards approach of Directive 2012/29/EU discussed by Shapland (2017).

2. Research Methods

The methodology adopted for this paper is primarily doctrinal, supplemented by a documentary analysis of secondary empirical material. The doctrinal part analyses statutes, case laws, schemes and policy instruments of India, South Africa and Brazil, while the documentary part examines official data, parliamentary records, evaluation reports and independent studies to understand how far the legal framework is implemented in practice. To conduct this research, the authors adopt two methods, analytical and comparative. An analytical approach is undertaken to understand the victim assistance framework within the legal structure of India and to strengthen the analysis of this legal spectrum a comparative approach is also undertaken through a global south lens to analyse the realities of sexual victimization of women in the context of South Africa, Brazil, and India. Comparative legal scholarship has cautioned that a purely functional comparison of legal rules 'has no eye and no sensitivity for what is not formalized and not regulated under a given legal regime' (Zumbansen, 2005, p. 1076). This caution is important for victim assistance, since much of what decides whether a survivor actually receives help, such as funding, staffing and grievance handling, lies outside the text of the statute. The five parameters in Table 1 are therefore applied both to the law as written and to the evidence on how it operates.

The rationale behind drawing comparisons of victim assistance models among these nations is grounded in the fact that on the one hand, South Africa, being a leading global south nation, has been witnessing one of the highest degrees of sexual victimization in the world (Ngcobo et al., 2025) and on the other hand, UN Women lists the Thuthuzela Care Centre at GF Jooste Hospital in Cape Town among its 'good practices' (UN Women, 2016) to tackle the sexual victimization of women. Similar reasoning has been articulated for choosing Brazil as a nation for drawing comparisons as UN Women also lists the Special Courts for Domestic and Family

Violence created under the Maria da Penha law as 'good practice' (UN Women, 2016) while the rate of sexual victimization of women in Brazil is strikingly high (Miklos & Bueno, 2025). Although the three countries do not share a single procedural model, with India and South Africa following the adversarial system while the criminal process in Brazil retains strong inquisitorial features, the Supreme Court of India (hereinafter SCI) (*Om Prakash v. Union of India*, 2025) has referred to the report of Malimath Committee (Ministry of Home Affairs, 2003) and highlighted the need for seeking truth as the paramount goal of legal system and to achieve that it is important to look beyond the straitjacket idea of adversarial system. Comparative scholarship also shows that the sidelining of the victim, who was reduced to little more than a witness for the prosecution, took place in both adversarial (common law) and inquisitorial (civil law) systems (Braun, 2013), which suggests that the problem studied in this paper is not confined to one legal family. The large population of these countries with intersecting identities as discussed above are diverse in nature, therefore, a comparative lens shall be adopted to analyse global south realities and practices in South Africa, Brazil and India.

A. Sources, Validation and Handling of Conflicting Data

The sources used in this paper have been arranged in a hierarchy according to their authority and independence. The first tier consists of primary legal sources, namely constitutions, statutes, decrees, schemes and judicial decisions. The second tier consists of official records, including replies of Ministers in Parliament, reports of parliamentary committees, annual reports of implementing agencies and government press releases. The third tier consists of peer-reviewed studies and evaluations by public research bodies, such as the national docket study of the South African Medical Research Council (Machisa et al., 2017) and the evaluation of the Maria da Penha law by Brazil's Instituto de Pesquisa Econômica Aplicada (Cerqueira et al., 2015). The fourth tier consists of grey literature, that is, reports of non-governmental organisations and investigative journalism, which have been relied upon only where the higher tiers are silent and are identified as such in the text and in the note to Table 2. For outcome figures, where official data is self-reported by the implementing authority, independent studies of the third tier have been given equal weight.

Every key figure has been checked against at least one other source, preferably from a higher tier. Where sources conflicted, three rules were followed. First, the source from the higher tier was preferred, and among sources of the same tier, the more recent one. Second, where two figures measured different things, such as conviction rates calculated on cases finalised in court and conviction rates calculated on all reported cases, both are reported with an explanation of the difference rather than one being preferred over the other. Third, where a figure could be found only in grey literature, it has been retained only if it is consistent with the official data that is available, and the claim has been worded with corresponding caution. For example, the replies of the Ministry of Women and Child Development in Parliament give the utilisation of One Stop Centre funds only State-wise and do not give a national utilisation figure (Ministry of Women and Child Development, 2024b, 2025); the national figures discussed in this paper therefore come from press investigations and are presented as such.

3. Discussion

A. Emergence of Victim Assistance in Indian Context

In Indian legal landscape the discipline of victimology has a chequered past, where on the one hand the procedural and substantive criminal laws have evolved through multiple amendments over the past few decades to become more inclusive of rights of victims, including compensation and assistance, on the other hand, violence against women has risen to new heights and the systematic failure to cater to the survivors has been a recurring issue of the

Indian legal system. Dube (2008) denominated the offence of rape as a 'burning problem' in Indian context since the offence continued to occur even after repeated strides to reduce it, and after almost two decades the issue still persists, which makes the importance of studying sexual victimization in Indian context focusing on women survivors self-evident.

Before understanding the present realities of victim assistance mechanisms it is pertinent to keep in mind the historical backdrop of victimology in Indian context. A thorough analysis of the evolution of the criminal legal system in England has been conducted to locate the legal restructuring which silenced the voice of the survivors and how that system was imposed on India through colonisation (Bajpai & Gauba, 2016). The roots of victim rights can be traced back to Hindu criminal law system existing in *Maurya* period which enunciated notions of *'justice'* and the conceptualization of 'Diyat*'* or *'Blood Money'* as a remedial measure in Muslim criminal law system also reflects the element of victim compensation, but the idea of victim assistance continued to be novel in both pre-colonial and colonial period of India as evident from the substantive and procedural criminal laws enacted in 1860 and 1898 respectively. While financial assistance received first statutory recognition through Section 545 of the Code of Criminal Procedure, 1898 (Bajpai & Gauba, 2016), it was tied to the outcome of the trial and a failure of prosecution in securing conviction of the accused would result in negating the actual sufferings of the victim. The Code of Criminal Procedure, 1973 empowered the trial, appellate and revisional courts to award compensation (Sec.357), and the definition of the term 'victim' [Sec.2(wa)] was later inserted through the 2008 amendment, but the idea of providing assistance to victims other than compensation remained novel in Indian legal structure.

Subsequently through judicial pronouncements the Indian judiciary cultivated the notions of assistance. The SCI back in 1979 for the first time imposed liability on the State in providing legal assistance to the victims of the criminal justice system trapped in prisons as under trial prisoners (*Hussainara Khatoon v. Home Secretary, State of Bihar, Patna*, 1979). The Court also interpreted the scheme of the Constitution to expound the paradigm of medical assistance to be made available for all citizens who are victims of accidents (*Parmanand Katara v. Union of India*, 1989) but the notions of assistance tailored for victims of crime received its first judicial recognition through a landmark precedent of 1994 which laid down an elaborative list of guidelines detailing on the aspects of assistance for victims of rape, expanding the obligations of the victim's advocate (*Delhi Domestic Working Women's Forum v. Union of India*, 1995). In the same pronouncement the SCI underscored the need for a policy framework catering to the needs of victims of rape acknowledging the intersecting identities of such victims due to various factors like poor socio-economic background and directed the National Commission for Women to adopt steps in this regard (*Delhi Domestic Working Women's Forum v. Union of India*, 1995). After more than a decade in 2010 the Parliamentary Consultative Committee of Ministry of Women and Child Development declared the possible formulation and publication of a scheme which prescribed for support services beyond merely financial support, for victims of crime (Ministry of Women and Child Development, 2010). The 2012 Nirbhaya incident ignited a nationwide demand for effectuation of the scheme which eventually remained ineffectual due to scarcity of fund (Shetty, 2013).

Thereafter in 2015 the One Stop Centre scheme was articulated prescribing a wide range of victim assistance services for women victims of sexual offences (Ministry of Women and Child Development, 2015) and the genesis of the scheme can be traced back to the recommendations of J.S. Verma Committee which emphasized on the need for drafting policy mechanisms to bridge the gap between women victims and welfare schemes of the Government by making these services more accessible (*Aman Satya Kachroo Trust v. Union Territory of J&K*, 2022). The 2013 Verma committee report although recognised the psychological battle that a survivor

goes through and recommended assistance of a counsellor during medical examination of the victim, it did not specifically formulate a systematic framework to provide for assistance services to victims (Justice Verma Committee, 2013). The Central Government appointed Justice Usha Mehra Commission of Inquiry also published its report in 2013 and for the first time mentioned the importance of having a One Stop Centre scheme which can establish a robust system of centres for rape victims to provide all kinds of services including legal, medical and rehabilitative under one roof (Justice Usha Mehra Commission of Inquiry, 2013) and in 2018, the SCI in the judgment of *Nipun Saxena* (*Nipun Saxena v. Union of India*, 2018) also directed the establishment of *'One Stop Centres'* in every district of the country to provide varied assistance services to women survivors of rape and sexual offences and advocated for victim-friendly trials in these centres.

The Indian government later in 2022 launched the scheme of 'Mission Shakti' to foster a strong mechanism which ensures protection and safety of women and under its sub-scheme 'Sambal', the government has enlisted few schemes for the empowerment and security of women and One Stop Centre scheme is one of them. The objective of the scheme of 'Mission Shakti' also recognises the intersecting identities of women caused due to different existing vulnerabilities such as socio-economic background, disability and others and advocates for short term and long term assistance to be provided to such women victims of crime to uplift their position in society beyond the existing marginalization (Ministry of Women and Child Development, n.d.).

Critiques in this field have analysed the compensation schemes which are formulated under the criminal procedural law in different States and highlight existing inconsistencies within the definitional structure of important terminologies. The scope of the literature relating to victim assistance in Indian context is largely limited to compensation schemes which mainly prescribe financial assistance and legal and emergency medical aid in certain cases. Gulzar in her article reviewed the existing compensatory schemes of India and critically argues that in Indian legal context the grant of compensation still depends on the widely discretionary power of the Judges or Authorities and an absence of duty boundness on their part reflects that the victim's claim to seek compensation has not received the status of a 'right' which puts the victim in a disadvantageous position at the mercy of statutory bodies or Judges (Gulzar, 2019).

Arguments in similar lines can be traced through other literature as well where researchers delve into the discourse of rights concerning victims of crime and claim that the victim's rights shall be recognized as a constitutional right in Indian legal scenario. In this context it is relevant to mention here eminent scholar B.B. Pande's argument. His latest work delineates the rights of victims as embedded within the structure of Indian Constitution but he elucidates on the judicial pronouncements dealing with POCSO cases and referred to the Supreme Court decision of formulating an 'Expert Committee' to draft directions which can instil 'compassion' and 'sensitivity' in the minds of Judges in order to build a more responsive and sensitive judicial system which deals with sexual offences against women and children.

Therefore, he argues for not only mere recognition of rights constitutionally but the need for practical changes in the judicial process which directly deals with the victims of sexual offences (Pande, 2026). The Indian Constitution recognises rights of the accused as fundamental rights but similar explicit recognition concerning victim's rights cannot be found within the framework of the Constitution although through judicial interpretations the rights have been recognised within the schemes of fundamental rights to some extent but the discourse of victim rights deserves more constitutional backing. The works relating to Indian legal jurisprudence revolve around the compensatory discourse and its implementation and jurisprudential underpinnings but the compensation is only one of the important aspects of the phenomenon

of assistance and services to victims of crime, hence, a broader approach has to be undertaken while studying the needs and issues of victims of sexual violence in Indian context to locate the whole range of assistance services available to respond to them.

B. Need for Analyzing Victim Assistance Modalities from a Global South Aspect

Since the realities of a society, including its crime rates and socio-economic conditions, shape its victim assistance policies, it is essential to explore and scrutinise the victim assistance models available to victims of rape and sexual victimization from a global south perspective.

The term 'global south' was first used by Carl Oglesby (Maharatih et al., 2025), who in his influential work Containment and Change reflects on the Vietnam war and the Cold War and claims that the political approach of the USA shaped the socio-political environment of third world countries and actively contributed to their marginalisation (Oglesby & Shaull, 1967).

Mahler (2017) elaborates that the term indicates nations that have faced exclusion and marginalisation due to imperialist approaches of economically developed nations, and that the global south is not bound by territorial limitations but represents countries similarly positioned within the world structure due to their shared legacy of colonisation and the exploitation that flowed from colonisation. In another scholarly work, an analysis of newspapers of Latin America, Africa and Asia tracing the growing usage of the term 'global south' suggests that countries like India, South Africa and Brazil have been leading this new discourse (Grasland, 2026). Therefore, an analysis of the victim assistance models in these countries can depict an authentic picture of global south which might be quite different than the one existing in western developed countries.

Kimberlé Crenshaw for the first time proposed the construct of intersectionality and the approach has since been used in criminology to study sexual victimization and rape (Paik, 2017). An in-depth study of rape and sexual victimization in global south cannot be conducted in an isolated manner without considering the consequences of marginalisation which generates intersecting identities of victim in different contexts. In the work of Rebecca Helman, 'Affected by Rape : An Intersectional Approach to Researching Sexual Violence', the author undertakes "an affective approach" to study the impacts of sexual victimization and rape in South Africa within contextual intersecting factors such as gender inequality, economic inequality and racism (Helman, 2026). She argues that the media portrayal of global south countries like India and South Africa as dangerous for women, although it reflects the truth, in practice disfavours survivors of rape, since it normalises the offence as a banal matter of society. Her own experience of seeking post rape assistance at a centre in South Africa, where her victimization shocked the caregiver due to her being a white person, implied the cultural normalisation of sexual victimization of women of colour, and she claims that similar biases are present in the victim service mechanism of the country (Helman, 2026). Hence, a relook at the victim assistance and service framework is necessary in South African context.

Literature suggests that in cases of sexual violence women have been targeted and weaponised during tensions for the longest time and a lack of aftercare mechanism which fails to deal with urgent termination of pregnancy causes further victimization (Narismulu & Botes, 2025). In one scholarly work, the researchers have conducted detailed study of implications of sexual victimization and rape of women in South Africa and finds that exposure to such abuse is associated with adverse changes in the cardiometabolic risk profiles of young women, which raises their long-term risk of heart disease (Nguyen, 2025). In another work, the researchers have conducted a content analysis of newspaper reports to locate the rape and sexual victimization cases by Police in South Africa during the period 2018 to 2024 and the findings show 92% of the victims were women (Ivkovich, 2025). While the authors also delve into the

existing police culture in South Africa, it is essential that while studying the offence of rape in different contexts of South Africa, a gendered notion shall have to be adopted.

The prevalence of various intersecting factors in a society impacts not only cases of abuse against women but also creates impediments for women researchers to access lived experiences of victims of crime, as one study conducted in São Paulo reveals through the idea of a 'gendered fear of crime' (Beecheno, 2020). Another author argues that the journey of turning into a victim is not a standalone event in the society, rather the systematic unjust mechanisms imbibed within the societal structure form part of the process of victimization, and therefore sexual abuse should be considered as a problem of the society which thrives in the absence of answerability on its part (Schafer, 2024). Researchers have conducted detailed analysis of assistance services available to women victims of crime in Brazilian context with reference to the 'Brazilian Woman's House' which provides a combination of services to survivors and decoded the phenomenon of victim services as a matter of public policy (Amorim et al., 2022) but the argument still sustains that there is need for recognizing these services as basic rights of victims within the structure of criminal justice system.

Similar concerns have been raised in the context of Bangladesh, where gender bias and the hegemony of patriarchy shape the responses of society to rape survivors and systematic revictimization continues to deter reporting of the crime (Nasrin, 2014; Alam et al., 2026).

The above discussion of literature highlights the need for understanding the phenomenon of victim assistance through a comparative lens in the countries of India, South Africa and Brazil and as per the above set parameters, the primary legal sources, official records and secondary studies described in the Research Methods section have been analysed with the help of the indicators mentioned in Table 1 and the following table has been drawn to depict the comparative picture of this study.

Table 2: Comparative Matrix of Victim Assistance Mechanisms – India, South Africa, Brazil

Parameter	India	South Africa	Brazil
Accessibility	Victim assistance services can be accessed in India through One Stop Centres (OSCs) administered by the Ministry of Women and Child Development under the 'Sambal' sub-scheme of the umbrella 'Mission Shakti', which directs the establishment of an integrated centre in every district to provide legal, medical, police and psycho-social assistance to women survivors of violence (Ministry of Women and Child Development, 2015), and the judiciary reinforced it through Nipun Saxena v. Union of India (2018). According to the Ministry's replies in Parliament, 802 of the 878 approved centres were operational by late 2024, 64 of them in rented buildings, and the centres had assisted 10.98 lakh women up to February 2025 (Ministry of Women and Child Development, 2024a, 2024b, 2025). State compensation schemes which are administered under the general procedural law (Bharatiya Nagarik Suraksha Sanhita, 2023, s. 396; see also Code of Criminal Procedure, 1973, s. 357A) also help victims to access financial assistance through District Legal Service Authorities.	The Service Charter for Victims of Crime (Department of Justice and Constitutional Development [DOJ&CD], 2004a) and Minimum Standards on Services for Victims of Crime (DOJ&CD, 2004b) paved the way for victims to access services and the Thuthuzela Care Centres (TCCs), an initiative of the National Prosecuting Authority which operates alongside the Sexual Offences Act 32 of 2007, claim to provide seamless services 24/7 and free of cost (National Prosecuting Authority [NPA], 2025). The network has grown from 55 centres in 2021 to 66 (Minister of Justice and Constitutional Development, 2026).	Casa da Mulher Brasileira units presently under the Safe and Protected Women Programme were established as a centre through which women could access assistance. Previously it was under the Women Living Without Violence Programme launched in 2013 (Decreto nº 8.086, 2013).

Integration	In Indian legal scenario the judiciary played a pivotal role in pushing for an integrated mechanism providing services to women victims. The *Delhi Domestic Working Women's Forum v. Union of India* (1995) precedent for the first time directed the framing of a scheme addressing rape victims' need for combined legal, medical and psychological assistance. Later, the Justice Usha Mehra Commission of Inquiry (2013) recommended the establishment of One Stop Centres, which were established under the 2015 scheme to integrate legal, medical, police and rehabilitative services 'under one roof', and the implementation guidelines provide for personnel who work alongside police and prosecutors (Ministry of Women and Child Development, 2017). The scheme was absorbed in 2022 into the 'Sambal' sub-scheme of 'Mission Shakti' (Ministry of Women and Child Development, n.d.).	The TCCs of South Africa are located inside public hospitals and connected to a dedicated magistrate's court. The centres are staffed by multi-disciplinary teams of the National Prosecuting Authority, Department of Health, South African Police Service, Department of Social Development and NGOs, together aiming to reduce the time period of resolving each case (NPA, n.d.).	The National Council of Justice (CNJ) provides for institutional backing for establishment of Special Courts for Domestic and Family Violence as prescribed by the Lei Maria da Penha law (Conselho Nacional de Justiça, 2011; Instituto Brasileiro de Direito de Família, 2007; Lei nº 11.340, 2006); Casa da Mulher Brasileira co-locates police court and psychosocial services (Decreto nº 8.086, 2013).
Accountability	Financial assistance remains discretionary in Indian legal system and not yet recognised as an enforceable right (Gulzar, 2019). The general procedural law although prescribes for victim compensation scheme and permits an award even where a prosecution does not result in conviction (Law Commission of India, 1996), it does not prescribe remedies for the victim if her right to get compensation gets violated and does not get fulfilled by the State. The One Stop Centre scheme also does not prescribe for any independent body to look over the functioning of each centre and keep a window open for receiving grievances from victims in case they were not satisfied with the services or did not receive the services.	The Victims' Charter and Minimum Standards (DOJ&CD, 2004a, 2004b) set service benchmarks and include a complaints mechanism directing dissatisfied victims to statutory oversight bodies, including the Office of the Public Protector, the South African Human Rights Commission and the Commission for Gender Equality (DOJ&CD, n.d.). The Independent Police Investigative Directorate, established under the Independent Police Investigative Directorate Act 1 of 2011, independently investigates rape and sexual offences committed by members of the South African Police Service (see Independent Police Investigative Directorate, 2023). Through the measurement of time period of resolving each case, the TCC maintains an internal check of functioning (NPA, n.d.). These instruments, however, are policy documents and do not by themselves create a legally enforceable claim to services.	The National Council of the Public Prosecution Service (CNMP) separately operates a dedicated Ouvidoria das Mulheres channel for complaints concerning the handling of violence against women cases within the prosecution service (Conselho Nacional do Ministério Público, 2021). Lei do Feminicídio (Lei nº 13.104, 2015) and the 2018 Penal Code amendment (Lei nº 13.718, 2018) strengthen substantive criminal accountability.
Funding	Since the Scheme's inception in 2015, Rs 867.74 crore has been allocated to the One Stop Centre Scheme, of which Rs 798.81 crore (92.05%) has been released to States/Union Territories, but only around Rs 339 crore, approximately 42.4% of releases, had been utilised as of April 2024 according to a press	South Africa follows a multi-source funding model: (1) Department of Social Development budget to the Victim Empowerment Programme, where the Western Cape allocation rose to R62,866,000 in 2022/23, up from R45 million in 2019, with a further R1.6 million for NGO	Lei 14.316/2022 amended existing public-security legislation to mandate that a minimum of 5% of resources committed under

	investigation (Raju & Bhavani, 2024). The release figure is broadly consistent with the Rs 853.78 crore shown as released on the Mission Shakti portal later in 2024, and a 2021 NITI Aayog evaluation, which has not been made public, reportedly found that only about 20% of released funds had been utilised (Tapasya, 2024). The Ministry's replies in Parliament give utilisation only State-wise, with some States yet to submit utilisation certificates, so no official national utilisation figure is available (Ministry of Women and Child Development, 2024b, 2025). The shortfall recurs at State level: Tamil Nadu centres received a Union construction grant of Rs 60 lakh against an actual estimated cost of Rs 86.5 lakh per centre, leaving eight centres operating from temporary buildings, while sanctioned staffing in Andhra Pradesh was cut from eighteen to thirteen positions per centre following 2022 guidelines, and Andhra Pradesh OSC staff reported salary payments delayed by more than eighteen months (Raju & Bhavani, 2024). This pattern echoes the broader Nirbhaya Fund, of which the OSC Scheme forms one component: the Parliamentary Standing Committee on Home Affairs observed in March 2021 that only about 39% of the Fund (Rs 3,581.11 crore of Rs 9,288.45 crore allocated) had been disbursed (Department-related Parliamentary Standing Committee on Home Affairs, 2021; "Only 38.5% of Nirbhaya Fund Disbursed," 2021), before utilisation improved to approximately 76% (Rs 5,846.08 crore of Rs 7,712.85 crore allocated for FY 2024–25) by March 2025 (Press Information Bureau, 2025). As with Brazil's shortfall against the Lei 14.316 5% earmark (Instituto Sou da Paz, 2023; Lei nº 14.316, 2022), the Indian pattern indicates that statutory or budgetary commitment has not reliably translated into funds spent at the point of service delivery.	operating costs benefiting 36 NGOs, including 14 shelters (Western Cape Government, n.d.); (2) Thuthuzela Care Centres funded and run jointly by the National Prosecuting Authority with the Department of Health (NPA, n.d.); and (3) earlier European Union co-funding of over €18 million for the Victim Empowerment Programme, jointly managed with UNODC until 2012 (United Nations Office on Drugs and Crime, n.d.).	the Fundo Nacional de Segurança Pública (FNSP) be allocated to combating violence against women, including specialised service centres, shelters, police stations, public defender units, and forensic health services (Lei nº 14.316, 2022); the law was formally sanctioned in March 2022 (Agência Senado, 2022). Independent monitoring by the non-governmental Instituto Sou da Paz found that only 0.2% of FNSP funds, approximately R$3.7 million, was actually spent on combating violence against women in 2022, roughly twenty-five times less than the statutory minimum (Instituto Sou da Paz, 2023). Federal Senate budget-transparency data (Siga Brasil), compiled by the Instituto de Estudos Socioeconômicos (INESC), shows Casa da Mulher Brasileira funding execution fell to zero in 2019 despite R$13.6 million authorised, recovered only to roughly R$1–1.2 million of R$21.8 million authorised in 2021, before rising to R$21.2 million executed in 2022 (Instituto

			de Estudos Socioeconômicos, 2022).
Outcome	The National Crime Records Bureau of India publishes the 'Crime in India' report but it only tracks registered cases and conviction rates, and India does not have any national victim survey data. The Ministry reports only the number of women assisted by One Stop Centres (Ministry of Women and Child Development, 2025), and the case-level data which is supposed to be maintained in these centres is not publicly available. The 2021 NITI Aayog evaluation reportedly found no data on service quality or beneficiary feedback and no grievance redressal mechanism (Tapasya, 2024).	At facility level, the GF Jooste Thuthuzela Care Centre in Cape Town reported a 95% conviction rate (UN Women, 2016). Across the network, the NPA reports that the TCC conviction rate rose from 60% in 2010 to 77.5% by December 2023, with about 36,800 cases reported at TCCs in 2022/23 (South African Government News Agency, 2024). The NPA calculates conviction rates on cases finalised with a verdict (Rademeyer, 2014). The national docket study of rape cases reported in 2012, by contrast, found that only 8.6% of all reported cases ended in a guilty verdict for a sexual offence, although 46.5% of the cases that reached trial did so (Machisa et al., 2017). The two sets of figures show that high conviction rates at TCCs coexist with heavy attrition before trial, and that TCC figures, being self-reported, need independent verification.	Registered rapes rose 6.5% to a record 83,988 in 2023 (Fórum Brasileiro de Segurança Pública, 2024), which is prevalence data rather than a measure of service performance. The official evaluation by the Instituto de Pesquisa Econômica Aplicada estimated that the Maria da Penha law reduced domestic homicides of women by about 10%, while noting that the protective services were institutionalised unevenly across the country (Cerqueira et al., 2015). The authors could not locate a national evaluation of survivor outcomes specific to Casa da Mulher Brasileira units, which is itself a data gap. The funding gap shown above (Instituto de Estudos Socioeconômicos, 2022; Instituto Sou da Paz, 2023) also indicates that the formal entitlement has not translated into resourced service delivery.

Note. Compiled by the authors from the sources cited in each cell. Statutes, judgments and official records form the main sources; peer-reviewed studies and public research evaluations (Gulzar, 2019; Machisa et al., 2017; Cerqueira et al., 2015) are used for outcomes; non-governmental and press sources (Raju & Bhavani, 2024; Tapasya, 2024; Rademeyer, 2014; Instituto Sou da Paz, 2023; Instituto de Estudos Socioeconômicos, 2022; Fórum Brasileiro de

Segurança Pública, 2024) are used only where official data was not available and are identified as such in the text.

C. Outcome Evidence across the Three Models

The outcome row of Table 2 shows that the evidence available for the three models is uneven both in quantity and in independence. South Africa provides the most data, but most of it is produced by the implementing authority itself. The NPA's network-wide TCC conviction rate of 77.5% (South African Government News Agency, 2024) and the facility-level rate of 95% at GF Jooste (UN Women, 2016) measure success among cases that reach a verdict, whereas the independent docket study by Machisa et al. (2017) measures attrition from the point of reporting and shows that fewer than one in ten reported rape cases ends in a conviction for a sexual offence. Both figures can be true at the same time, and read together they suggest that the TCC model performs well once a case reaches court but that the larger problem lies in the earlier stages of investigation and the decision to prosecute. The same study found that only 30% of the medico-legal examinations it analysed took place at TCCs or other specialised centres (Machisa et al., 2017), which indicates that a large share of survivors did not pass through the TCC pathway at all during that period.

Brazil presents the reverse picture. There is an evaluation at the national level, which found a reduction of about 10% in domestic homicides of women after the Maria da Penha law (Cerqueira et al., 2015), but it measures the effect of the law as a whole and not of the service network, and its authors themselves note that protective services were institutionalised unevenly across the country. No comparable evaluation of survivor outcomes at Casa da Mulher Brasileira units could be located, and the budget data suggests that in some years the units were barely funded (Instituto de Estudos Socioeconômicos, 2022). India has the least outcome evidence of the three. Official reporting on One Stop Centres is limited to the number of centres and the number of women assisted (Ministry of Women and Child Development, 2025), and the only national evaluation, conducted by NITI Aayog in 2021, has not been published (Tapasya, 2024). For India, therefore, the absence of outcome data is itself a finding: without case-level data the State cannot show whether the scheme delivers what it promises, and survivors have no basis on which to hold it to account.

D. Enforceability of Victim Assistance Entitlements: A Comparative Reading

The accountability row of Table 2 raises a further question which runs through this paper, namely whether victim assistance in each country is an entitlement that a survivor can enforce, or a benefit which the State may provide at its discretion. Following Shapland's (2017) reading of Directive 2012/29/EU, a service becomes a right when the law places a binding obligation on the State and gives the victim a route to a remedy when the obligation is not met. Read in this way, none of the three countries has fully converted assistance into a right, but each has developed constitutional or administrative routes which partly fill the gap.

In South Africa, the Service Charter for Victims of Crime and the Minimum Standards (DOJ&CD, 2004a, 2004b) are policy instruments adopted by the executive and not statutes, so a victim cannot directly sue for a service promised in the Charter. The gap has been partly filled by constitutional adjudication. In *Carmichele v Minister of Safety and Security* (2001), the Constitutional Court held that the State, through the police and prosecution, is under a positive duty to protect women against sexual violence and that a negligent failure to perform this duty may give rise to liability in damages, and the Supreme Court of Appeal applied this reasoning in *Van Eeden v Minister of Safety and Security* (2003). These decisions rest on the Bill of Rights, which obliges the State to protect and fulfil the rights it contains and guarantees the right to be free from all forms of violence from either public or private sources (Constitution

of the Republic of South Africa, 1996, ss. 7(2), 12(1)(c)). The enforceable duty, however, is a duty to protect, enforced after the harm through a claim for damages; it does not by itself give a survivor a claim to a particular support service.

In Brazil, the Federal Constitution provides that the State shall ensure assistance to the family in the person of each of its members by creating mechanisms to curb violence within their relationships (Constituição da República Federativa do Brasil, 1988, art. 226, § 8), and the Supremo Tribunal Federal relied on this provision when it upheld the constitutionality of the Maria da Penha law (*Ação Declaratória de Constitucionalidade 19*, 2012; *Ação Direta de Inconstitucionalidade 4424*, 2012). The Maria da Penha law itself, however, provides that the Union, the Federal District, the States and the municipalities 'may create and promote' integrated multidisciplinary care centres, shelters and specialised police, defender and health services (Lei nº 11.340, 2006, art. 35). The permissive wording leaves the creation of these services to each level of government, even though the constitutional duty is framed in mandatory terms, and the funding data in Table 2 shows that the earmark under Lei 14.316 was not met in practice (Instituto Sou da Paz, 2023). Brazil therefore has a stronger constitutional anchor than India, but the delivery of services still depends on budgetary choices.

In India, the One Stop Centre scheme is an executive scheme and confers no statutory entitlement on the survivor. The procedural law goes further for compensation, since every State Government is bound to prepare a victim compensation scheme (Code of Criminal Procedure, 1973, s. 357A; Bharatiya Nagarik Suraksha Sanhita, 2023, s. 396), and the SCI has held that courts are under a duty to consider interim compensation on taking cognizance of an offence (*Suresh v. State of Haryana*, 2014). The grant and quantum of compensation, however, remain within the discretion of the Legal Services Authorities (Gulzar, 2019), and the directions issued in *Nipun Saxena v. Union of India* (2018) for establishing One Stop Centres in every district are enforced through continuing judicial supervision rather than through a remedy available to the individual survivor. The comparison suggests that India has the judicial tools to recognise assistance as part of the right to life and dignity under Article 21, as it has done for legal aid and emergency medical care (*Hussainara Khatoon v. Home Secretary, State of Bihar, Patna*, 1979; *Parmanand Katara v. Union of India*, 1989), but that a statutory basis, as in the EU model, would give survivors a clearer and more certain claim than case-by-case judicial intervention.

E. Key Findings and Implementation Steps

An analysis of the data depicted in Table 2 across the five parameters yields four key findings. Each is paired with implementation steps in Indian scenario drawn from the South African and Brazilian experience.

Finding 1 – Governance and accountability. The One Stop Centre Scheme has no independent body to receive survivors' grievances, and compensation remains a discretionary award rather than an enforceable right (Gulzar, 2019). South Africa directs dissatisfied victims to named statutory oversight bodies (DOJ&CD, 2004b, n.d.), and Brazil runs a dedicated complaints channel for women within the prosecution service (Conselho Nacional do Ministério Público, 2021).

- Incorporate a grievance authority, such as the District Legal Services Authority, with a fixed time limit for responding to survivors' complaints about OSC services.
- Publish a survivors' service charter at every OSC, listing entitlements and escalation routes, on the model of South Africa's Service Charter.
- Recognise assistance and compensation as a statutory entitlement of the survivor rather than a discretionary award.

Finding 2 – Budget. Allocated funds are not reaching the point of service. Press investigations report that only about 42.4% of OSC funds released to States had been utilised by April 2024, that construction grants fell short of actual costs and that staff salaries were delayed (Raju & Bhavani, 2024), while the official replies in Parliament do not publish a national utilisation figure at all (Ministry of Women and Child Development, 2025). Brazil shows the same gap: a 5% statutory earmark translated into 0.2% actual spending (Instituto Sou da Paz, 2023).

- Create a ring-fenced, per-centre budget line that covers construction at actual cost and guarantees timely payment of salaries.
- Track allocation, release and utilisation for every centre each quarter, and publish the figures.
- Tie the release of each new instalment to reported utilisation and service data.

Finding 3 – Internal checks and outcome data. India reports how many women OSCs have reached (Ministry of Women and Child Development, 2025) but not what happened to their cases. Thuthuzela Care Centres are organised around measurable targets such as case-cycle time and conviction rates (NPA, n.d.), although the national docket study shows heavy attrition before trial and that such self-reported data needs independent checking (Machisa et al., 2017).

- Set a minimum dataset for every OSC: time taken to resolve each case, referrals completed, survivor withdrawals and case outcomes.
- Carry out periodic independent audits and anonymous survivor feedback surveys.
- Publish an annual performance report for the OSC network.

Finding 4 – Integration and training. Thuthuzela Care Centres are staffed by multi-disciplinary teams from the prosecution service, health, police and social development departments and are linked to a dedicated court (NPA, n.d.). India's OSCs rely on guideline-based coordination with police and prosecutors (Ministry of Women and Child Development, 2017), while sanctioned staffing has been cut (Raju & Bhavani, 2024).

- Fix a minimum multi-disciplinary staff for each OSC, with a designated case coordinator.
- Adopt written referral protocols linking each OSC with police stations, hospitals, prosecutors and the District Legal Services Authority.
- Make periodic, trauma-informed and intersectional training mandatory for OSC staff, police officers, medical officers and prosecutors.
- Link OSCs to special or fast-track courts for sexual offences, following the Thuthuzela model.

4. Conclusion

This comparative study shows that an effective response to sexual violence cannot stop at criminalising and prosecuting the offender. Survivors need immediate medical care, psychological support, legal assistance, safe accommodation and long-term rehabilitation, delivered in ways that are accessible, confidential, coordinated and responsive to their choices (UN Women, 2016). South Africa's Thuthuzela Care Centres and Brazil's Casa da Mulher Brasileira, within the Maria da Penha framework, show the value of delivering these services through specialised, integrated institutions in societies that, like India, face high levels of sexual violence and intersecting vulnerabilities.

India has laid an important foundation through the Bharatiya Nagarik Suraksha Sanhita, 2023, State compensation schemes and the One Stop Centre Scheme under Mission Shakti. The comparison shows, however, that a scheme on paper does not by itself deliver assistance in practice; its value depends on enforceable entitlements, funds that reach the centres,

independent internal checks and trained, coordinated personnel. The evidence on outcomes is also thin, particularly for India, where the absence of published case-level data makes it difficult to assess whether the scheme delivers what it promises. Adapting the good practices of South Africa and Brazil to India's context, with particular attention to caste, disability and socio-economic disadvantage, can turn victim assistance from a policy aspiration into a right that survivors can claim, treating them as rights-bearing participants whose safety, dignity and recovery are central to justice.

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