

**GUIDELINES FOR A SHELTER SERVICE
DELIVERY MODEL FOR VICTIMS OF
ABUSE**

JJ GROENEWALD

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**GUIDELINES FOR A SHELTER SERVICE DELIVERY MODEL FOR VICTIMS
OF ABUSE**

by

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**SUPERVISOR: PROF WF VAN DELFT
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I declare that the GUIDELINES FOR A SHELTER SERVICE DELIVERY MODEL FOR VICTIMS OF ABUSE is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

.....
Signature
(JJ Groenewald)

Date: 25 November 2009

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Summary

This research was initiated, based on the recommendations of Groenewald (2006:126-127), in the Evaluation of Programmes of Shelters for Victims of Abuse in Gauteng Province, to develop a shelter service delivery model.

The research is exploratory in nature and outlines the literature review, methodologies, tested shelter model and findings based on the experiences of stakeholders. These stakeholders are responsible for the registration and management of shelters for victims of abuse in South Africa. They include nine Provincial Victim Empowerment Programme Co-ordinators and thirty-two shelter managers.

The main objectives for shelter managers and Government Departments, such as Social Development, are to provide care, support and protection. The aim is also to empower those who were caught up in relationships, fraught with gender-based violence, as well as to break the cycle of violence. This is presented in the guidelines for a shelter service delivery model for victims of abuse.

The shelter model focuses on three phases:

- Intake procedures
- Programmes and services
- Exit strategy

These three phases address both psycho-social issues and the self care of service providers.

The main purpose of the shelter model is to provide social service providers with a structural format for intervention with victims of abuse and their significant

others. The outcome, for most of them, should be to come to terms with themselves and create a personal vision for the future without abuse or, alternatively, to take a firm stand against such actions. The model is based on a person-centered approach in order to assist victims of violence, within a development model, to attain effective living.

Other findings of the research are, among others, that there is neither legislation, nor registration procedures for shelters for victims of abuse in place, except for Non-Profit Organisations, which is voluntary. It is recommended that Government should consider the amendment of the Domestic Violence Act, 116 of 1998. These amendments should include accreditation of service providers, registration requirements, norms, standards and uniform funding criteria.

LIST OF KEY WORDS

- ✚ Abused women and their children; Battered/batterer; Domestic Violence; Gender-based violence; Model, Programmes; Services; Shelter; Victim Empowerment; Victimisation; Victim's rights

LIST OF ABBREVIATIONS

AIDS	Acquired immune Deficiency Syndrome
CBO's	Community Based Organisations
ORC	Office on the Rights of the Child
CSO	Civil Society Organisation
OSW	Office on the Status of Women
CFO	Chief Financial Officer
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women
CJS	Criminal Justice System
CIPRO	Companies and Intellectual Properties Registration Office
DSD	Department of Social Development
FAMSA	Families South Africa (since June 2009)
HIV	Human Immune Deficiency Virus
JCPS	Justice Crime Prevention System
NCPS	National Crime Prevention Strategy
NDA	National Development Agency
NGO's	Non-governmental Organisations
NPF	National Policy Framework
NPO	Non-Profit Organisation
PBO	Public Benefit Organisation
STD	Sexual Transmitted Disease
IDP	Independent Development Plan
PTSD	Post Traumatic Stress Disorder
UN	United Nations
VEP	Victim Empowerment Programme

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CHAPTER 1

General orientation

Introduction

In order to develop guidelines for the establishment of shelters for victims of abuse this research focused on the assessment of the experiences of the following research participants:

- Provincial Victim Empowerment Programme (VEP) Co-ordinators who are responsible for the management, development, approval and sustainability of services within the Victim Empowerment Programme.
- Shelter managers and social workers who are working in shelters for victims of abuse.

1.1 Positioning the researcher in relation to the field of study

The researcher has been a social worker within the National Department of Social Development since 1990. The researcher was appointed as the Professional Secretary for the then Drug Advisory Board, that was later replaced by the Central Drug Authority. Transformation within the Department contributed towards her passion for victims of violence, when researcher was relocated to the newly established Directorate: Women's Strategy in 1999. My main responsibility was to execute the requirements for the implementation of the Domestic Violence Act 116 of 1998 ¹ in order to put measures in place for the implementation of the Act. The Women's Strategy Directorate merged with the Victim Empowerment Programme during the late 1999s.

¹ All references to the Domestic Violence Act refers to the Act as promulgated during December 1999

Researcher was appointed as Deputy Director: Services to Victims of Violence and Transnational Crimes during May 2007. Despite this appointment, researcher experienced the desire to complete this research in order to contribute towards the development of services to victims of domestic violence in South Africa. Therefore the research is a follow up on her MA research on the Evaluation of the Programmes of Shelters for Victims of Abuse in Gauteng Province, 2006.

1.2 Research problem

Groenewald (2006:126-127) identified the need for a shelter service delivery model for victims of abuse in South Africa in the Evaluation of Programmes of Shelters for Victims of Abuse in Gauteng Province. The study found that there is a need for a standardized shelter model combined with generic guidelines.

Artz & Smythe in Davis & Snyman (2005:131) reflected that South Africa's transition from apartheid to a democratic state coincided with, and in many respects provided, the driving force for a concerted focus on advancing women and children's rights, as well as the rights of victims of violence. Over the past ten years the South African government has made significant commitments to protect victims of violence through the ratification of international instruments and the development of legislation. This has been particularly true in the area of violence against women and children, towards a victim-centered and human rights-orientated approach to victims of violence.

Artz & Smythe in Davis & Snyman (2005:139) further elaborated that the Domestic Violence Act, 1998 (116 of 1998:2) was formulated with the aim of affording victims of domestic violence the maximum protection from domestic abuse that the law can provide. The Act recognizes that victims of domestic violence are amongst the most vulnerable members of society and that the remedies available to date proved to be ineffective. This statement is confirmed

in the Consolidated Report on the Nature and Prevalence of Domestic Violence in South Africa (2008:153-154) as it found that current processes and services are failing the victims of domestic violence. There is a need for more shelters and funding to existing shelters should increase. Mechanisms should be established to ensure proper costing and budgeting for resources and service delivery.

Researcher would like to comment that the Domestic Violence Act, 1998 (116 of 1998) only mentions shelters for abused women and no further reference is made in the Act, or the Regulations of the Act, on how to implement the issue of shelters. The Act stipulates the following in Section 2:

“Any member of the South African Police Service must, at the scene of an incident of domestic violence, or as soon thereafter as is reasonable possible, or when the incident of domestic violence is reported:

- (a) render such assistance to the complainant as may be required in the circumstances, including assisting or making arrangements for the complainant to find a suitable shelter and to obtain medical treatment”.

Researcher identified the gap that there are no standardized norms, regulations or guidelines dealing with the registration processes of shelters for victims of abuse. Therefore, researcher proposes to initiate a process which is based on research principles that can bring about change in the development of a standardized registration process, one which will regulate effective and efficient services and contribute towards sustainability. The assumption is made that Non-Governmental Organizations can approach Government for uniform subsidized criteria for shelters, if a shelter model for victims of abuse is available.

The following motivation guided researcher in planning and executing the research.

1.3 Motivation for the study

Researcher identified the need to contribute towards the review of the Domestic Violence Act, by acting proactively in providing collective remedies to enable negotiations with the Department of Justice and Constitutional Development and the National Law Reform Commission (responsible for legislation), which could contribute towards the amendment of the Act, if necessary. The reader should take cognizance of the fact that government will only consider amendments to an Act after five years of implementation, which is applicable now.

It is imperative that the Department of Social Development (national and provincial) manages the registration of shelters according to specific requirements. These should be secure standardized management procedures and services within shelters that cater for victims of abuse and ensure proper costing, budgeting of resources and sustainable funding for service delivery.

The following working definition was used to enable the participants in the research to have a mutual understanding of shelters: According to the Department of Social Development's Policy Framework and Strategy for Shelters for Victims of Domestic Violence (2003:5): "A shelter is a residential facility providing short-term intervention in a crisis situation (two weeks up to approximately six months as the need dictates). This intervention includes meeting basic needs (protection, food, clothing), as well as support, counseling and skills development, amongst others. The intervention further advocates the rights of the victim and strengthening of the victim's capacity".

1.4 Aim and objectives

1.4.1 Aim

The aim of this study was to develop guidelines for a shelter service delivery model for victims of abuse to be utilized by social service providers.

1.4.2 Objectives

Objective 1

To provide a literature survey on gender-based violence for assessment of the service rendering of shelters and find some directions for changes in legislation compared to registration procedures.

Objective 2

To assess the experiences of stakeholders responsible for the registration and management of shelters for victims of abuse in South Africa. In this research the stakeholders are the nine Provincial Victim Empowerment Co-ordinators and the shelter managers.

Objective 3

To develop standardized guidelines for a shelter service delivery model. This refers to a residential facility that provides temporary accommodation and services to victims of abuse in a developmental, holistic and integrated approach to restore and enhance the psycho-social well-being of the victim.

1.5 Research Questions

The outcome of the research addressed the following questions:

- 1.5.1 What are the international practices with regard to the registration of shelters for victims of abuse?
- 1.5.2 Which procedures do provincial Victim Empowerment Co-ordinators follow with the registration of shelters and what requirements are applicable?
- 1.5.3 What are the needs and constraints to register a shelter for victims of abuse?

1.6 Research design

Welman, Kruger & Mitchell (2005:52) explain research design as the plan according to which we obtain research participants (subjects) and collect

information from them. This study elaborated on provincial registration processes for shelters for victims of abuse, funding criteria, accountability measures, programmes and services. This approach enabled researcher to draw conclusions and make recommendations about the registration and management of shelters in South Africa.

The population in the research comprises of all shelters in South Africa that cater for victims of abuse as known by the nine provincial Victim Empowerment Co-ordinators, the nine National Shelter Movement provincial co-ordinators and the Department of Social Development's National Directory on Services for Victims of Violence and Crime (2009). The approach in establishing the population was to consolidate the existing lists as mentioned above.

1.6.1 Exploratory study

Grinnell (2001:29) states that exploratory research seeks to find out how people get along in the setting under investigation, (the setting under investigation is shelter managers who provide accommodation on a temporary basis to victims of abuse who seek protection at a shelter base on traumatic experience in their own home environment. Another setting is the nine Provincial Victim Empowerment Co-ordinators and how they manage the registration of shelters) what meanings they give to their actions, and which issues concern them. The aim was to learn "What is going on here?" and to investigate social phenomena and intervention programmes and services, in order to design guidelines for a shelter service delivery model for victims of abuse.

1.7 Research methods and instruments

The aims of the qualitative and quantitative pre-tested questionnaires were to gain an in-dept understanding from key experts (Provincial Victim Empowerment Programme Co-ordinators, see Appendix F – Terms of Reference) and practitioners (shelter managers, See Appendices K & L) in the field of

domestic violence prevention and management of shelters for victims of abuse, amongst others:

Questionnaire 1. Provincial Victim Empowerment Programme Co-ordinators

(See Appendix K)

- Registration information of the departments responsible for the managing of shelters in their provinces
- Information on the registration of shelters for victims of abuse
- Subsidization matters pertaining to shelters
- Social work services at shelters

Questionnaire 2. Shelter managers (See Appendix L)

- Registration information of the shelters
- Background information on the establishment of each shelter
- Management of shelter
- Focus group to be accommodated in shelters
- Educational programmes for children during their stay in the shelters
- Services and programmes for victims of abuse in shelters
- Financial resources
- Recommendation for elements to be covered in a shelter model

Questionnaire 3. Pilot phase of the guidelines for a shelter service delivery model for victims of abuse. (See Appendix M)

The questionnaire was designed to determine how the social workers, who participated in the piloting of the guidelines for a shelter service delivery model for victims of abuse, perceived the services and programmes at the shelters.

Services:

- Counselling

- Intervention with the victim of abuse (adults and their children)
- Working with family and significant others (and or referral)
- Ice breakers

Programmes:

- Different phases of the mourning process
- Different forms of domestic violence versus rights based approach
- Myths surrounding gender-based violence
- The cycle of violence
- Power and control wheel
- Communication strategies
- Childcare
- Options for victims of abuse as to when the act of domestic violence is committed
- HIV and AIDS
- Exit Strategy

This next section outlines the research methods and instruments used in the research. The sample of the research represents 35% (34 shelters) of the known 96 'shelter' population.

1.8 Stages of the research

First stage: Participation of Nine Provincial VEP Co-ordinators

An experimental (pilot) quantitative-qualitative questionnaire was designed for the provincial Victim Empowerment Co-ordinators. This questionnaire was tested to examine the feasibility and efficiency of the questionnaire. The comments from a group of four social workers were sought to clarify any problems in the wording of the questionnaires. The final questionnaire was

then compiled as Appendix K. The empirical research commenced during February 2008 and was completed during June 2008. The participants in the research were nine provincial VEP Co-ordinators who are responsible for the managing of the broader provincial Victim Empowerment Programme that includes shelters for victims of abuse. They function on Assistant Director Level and report to the Deputy Directors in the hierarchy of each provincial department. Most of the provincial officials are responsible for three sub-programmes such as Older Persons, VEP and Substance Abuse. With this in mind, it is clear that officials only have one third of their time per month available, in which to receive VEP. The exception is Gauteng-, Eastern Cape-, Western Cape-, Free State -, North West-, Mpumalanga Provinces that has full time VEP Co-ordinators for 2008. Most of them are new in the service field.

Second stage: Known shelters

The second stage of the research was to develop a population framework of known shelters in South Africa which was conducted during September to October 2008. (See Appendices N and O) The latter was achieved through the consolidation of the Provincial VEP Co-ordinators existing lists, the newly established national Shelter Movement, and the National Department of Social Development's National Directory on Services for Victims of Violence and Crime. Telephone discussions took place with some of the shelters on the list. It seemed obvious not to focus on victims of abuse alone. Their role was verified and the list was adjusted and amounts to 96 known shelters.

Third stage: Sample for the research

The third stage of the research comprises of an experimental (pilot) quantitative-qualitative questionnaire for shelter managers. The inputs from a group of three social workers were sought to clarify any problems in the wording of the questionnaires. The questionnaire was then finalized as Appendix L. The research sampling methodology was nonprobability, convenience sampling: meaning the probability of selection cannot be

estimated, and it is difficult to determine the representativeness of the sample, but the research composed of the available participants. Grinnel (1997:215-216). This implies that although the consolidated list of shelters reflects 96 shelters, there was no guarantee that they existed at the time of research. No site visits were conducted to establish if all shelters on the register did, in fact, exist at the time of research. It was, however, established that some shelters in provinces are not known to the provincial VEP Co-ordinators and that if all these facilities would be grouped together, they would amount to a total of 136 shelters. Therefore a difference of 40 shelters exists. After verification, it was established that these 40 cater for other vulnerable groups such as homeless, pregnant women and Aids patients. They do therefore not fall into the category of shelters for victims of abuse. These 96 shelters were requested to participate in the research. The study commenced during October 2008 and was completed during May 2009. Thirty four shelters (35%) out of the 96 shelter managers participated and formed the sample.

Fourth stage: Data collection

The fourth stage comprised of the data collection. This included the recording and coding of the received completed questionnaires and an analysis of the information. (See Chapter 5 of the research)

Fifth stage: Guidelines for a shelter service delivery model for victims of abuse

The fifth stage was to develop the shelter service delivery model for victims of abuse based on the research. (Refer to Chapter 6 of the research)

Sixth stage: Piloting phase

The sixth phase of the research included piloting the guidelines for a shelter service delivery model for victims of abuse at two shelters, namely: Usindiso Ministries, Johannesburg and Stellenbosch Safe House, Stellenbosch. Researcher visited Usindiso Ministries social service providers and explained the model in line with a self developed monitoring and evaluation tool for social

service providers to test the model. (Appendix M) Researcher only had telephone discussions and intervention by e-mail with the social worker at Stellenbosch Safe House, Western Cape Province, due to the location and financial implication that prohibited researcher to physically visit the shelter.

The general goal for a pilot study was to provide information that can contribute towards the success of the research project as a whole. The latter is supported by the following quotes concerning the value and goal of the pilot studies: De Vos (2002:410) motivates the pilot study, "To see if the beast will fly", Blaxter, Hughes & Tight (1996:121) state that it is a "reassessment without tears" and Teijlingen & Hundley (2001:2) states in this regard: "Do not take the risk. Pilot first." The following reference was selected based on the synopsis of the content of a pilot study by Nan (1976:197-201), that elaborated on gaining relevant knowledge on the specific context first in which the research is to take place. Furthermore, gaining entry into the social system is very important. Gaining familiarity with the respondents in the pilot study and their environment is also crucial to the study. Piloting the study means to determine the feasibility and efficiency of the proposed model in line with questionnaires for the participant's responses on the topics.

The research procedures for the pilot study were as follows:

- Starting the pilot study:

The literature review and the findings of Chapter 5 inform the proposed shelter service delivery model for victims of abuse.

- Entry point:

Identify shelters to pilot the guidelines for a shelter service delivery model for victims of abuse.

- Telephonic and personal intervention to gain approval from two shelter managers to participate in the pilot. This happened through e-mail, telephone discussions and site visits.
- Present the guidelines for a shelter service delivery model for victims of abuse to the two social workers at the two shelters that participated in the pilot study and orientate them with the content thereof. The pilot study commenced during May 2009 and ended during September 2009.

1.9 Method of data collection

The measuring instruments were:

- Three self-administered questionnaires (Appendices K, L and M) that served as an instrument to understand the management and administration of the research. The first questionnaire (Appendix K) was developed for the nine provincial Victim Empowerment Programme Co-ordinators for completion. This questionnaire was e-mailed to the nine provincial VEP Coordinators. The responses were slow and therefore researcher gave a hand out questionnaire to the Eastern Cape Province VEP Co-ordinator during a provincial workshop in the Eastern Cape Province on 1 June 2008. The questionnaire was submitted on 5 June 2008. Researcher handed out questionnaires, (during a VEP Management Team Meeting in June 2008,) to the provincial VEP Co-ordinators who had not submitted their questionnaires yet. They were the provincial VEP Co-ordinators of Free State Province, Limpopo Province, North West Province, Northern Cape Province and Western Cape Province. The completed questionnaires were received on 20 June 2008 and represented the entire population.

The second questionnaire (Appendix L) was designed for shelter managers. The population under review comprised of 96 shelters in South Africa as reflected in Chapter 5, Table 5.9. The questionnaire was e-mailed to Ms Fugard after consent had been reached telephonically, that she would manage the distribution

of the questionnaire through the National Shelter Movement's provincial Co-ordinators towards the end of October 2008. Due to slow or no responses in receiving completed questionnaires, researcher decided to approach the National Shelter Movement Provincial Co-ordinators to establish if they experienced any constraints in co-ordinating the questionnaires. The result of this intervention was that 60% indicated by telephone that they would not be in a position to distribute the questionnaires during October/November 2008, due to their preparations for the 16 Days of Activism Campaign on No Violence against Women and Children that commenced on 25 November and lasted until 10 December. As a result of that response, researcher decided to distribute the questionnaire to those shelters which had e-mail addresses, facsimiles and postal addresses by sending them the questionnaires with the request to participate in the research. Twenty (20) questionnaires were posted and 74 were e-mailed during November and December 2008. Thirty four shelters² (35%) out of the 96 shelters eventually participated in the research, presenting the researcher with a sample of 35%. The empirical data for this research refers to the period March 2007 to September 2009.

The last questionnaire (Appendix M) served as an evaluation tool for the two participating shelters in the pilot phase to determine the feasibility of the guidelines for a shelter service delivery model for victims of abuse that commenced during May 2009 to September 2009. The model was amended for social service professions to guide programmes during intervention with victims in shelters.

Researcher established a register for the nine provincial VEP Co-ordinators, a register for the National Shelter Movement provincial co-ordinators and a register of all shelters in South Africa with the purpose of managing the responses from participants.

² Two shelters did not meet the criteria of the shelter definition and was therefore excluded

- Researcher utilized the Statistical Program for Social Science (SPSS) (quantitative) system and the Atlas TI (qualitative) system to arrange and order data in graphic and tabular form (figures and tables) and indicating means, medians, modes and percentages.

The presentation of the data enabled researcher and the reader to have a visual overview of what is being measured and shows what the situation is in provinces. The latter reflects the registration of shelters for victims of abuse in South Africa as well as the management of shelters with regard to service delivery and provision of services, especially to women and children.

1.10 Ethical considerations

Researcher will comply with the Code of Ethics for Research as outlined by Grinnell (2001:1-2), which reads as follows:

- ✓ “Social workers should promote and facilitate evaluation and research to contribute to the development of knowledge.
- ✓ Social workers engaged in evaluation or research should obtain voluntary and written informed consent from participants, where appropriate, without any implied or actual deprivation or penalty for refusal to participate, without undue inducement to participate, and with due regard for the well-being, privacy, and dignity of participants.
- ✓ Confidentiality will be maintained at all times”.

1.11 The validity and reliability of the research instrument

The validity and reliability of the research instrument are highly interrelated and will be discussed below:

1.11.1 Validity

According to Grinnel (2001:133), validity has been described as the degree to which an instrument measures what it is supposed to measure. Validity further implies that the research study is to be externally valid by

demonstrating that the sample was representative of the population. The first sample of the population comprised of the nine provincial VEP Coordinators. This reflects a 100% representation and therefore the research results are valid in terms of the data obtained from all nine provinces in the managing of shelters for victims of abuse.

The second sample represents 35% of the shelter population and therefore it may not be possible to generalize the research findings, although Grinnel (2001:222) states that usually a sample size of one-tenth of the population (with a minimum of 30 out of 100) is considered sufficient to provide reasonable control over sampling error. Therefore the 35% shelters in this sample could be used as key informants in an attempt to construct a picture of how shelters for victims of abuse managed their shelters.

1.11.2 Reliability

According to Grinnel (2001:134-150), reliability has been described as the degree of accuracy or precision of a measuring instrument and refers to accuracy or precision of an instrument. The researcher administrated the questionnaires as outlined in item 1.7 and the measuring instrument was standardized throughout the research procedures. This aimed at empirically verifying the research elements, results and applicability in a consistent manner.

1.12 Data presentation

The method of data collection was a standard approach and format to be designed by researcher. The Statistical Program for Social Science (SPSS) (quantitative) system and the Atlas TI (qualitative) system, that arrange and order data in table findings in the form of means, medians, modes and percentages were utilized. The scale of measurement was nominal.

1.13 Structure of the report

The report consists of 7 chapters structured as follows:

- Chapter 1 - General orientation
- Chapter 2 - Gender-based violence
- Chapter 3 - Progression of legislative framework for victims of abuse:
internationally and South Africa
- Chapter 4 - Registration procedures for shelters for victims of abuse
- Chapter 5 - Research results
- Chapter 6 - Guidelines for a shelter service delivery model for victims of abuse
- Chapter 7 - Conclusions and recommendations

1.14 Operational definitions

<p>Advocacy: Related to lobbying, advocacy involves supporting or arguing for an issue, cause or policy. An action directed at change, advocacy involves placing a problem on the agenda, providing a solution to that problem, building support for the solution, and formulating action to implement that solution. Advocacy includes education and informing the public about and important issue. (Themba Lesizwe Organisation, 2005)</p>
<p>Capacity building: Improving an organisation or community's ability to carry out its task effectively and confidently. Capacity building can include job skills training, adult basic education, organisational development, building administrative and managerial skills, and planning and budgeting skills of staff in organisations. It provides opportunities for people to gain hands-on working experience and ensures that people have full access to the information they need in order to function effectively. (Themba Lesizwe Organisation, 2005)</p>
<p>Care: Providing for physical, psychological and material needs where people are unable to provide these for themselves. (Themba Lesizwe Organisation, 2005)</p>
<p>Counsellor: A person who is specially trained to provide counselling. (Themba Lesizwe Organisation, 2005)</p>

<p>Communal housing: Communal housing can be defined as an affordable rental form of social housing accommodation. Long-term tenure and shared communal facilities are key characteristics. Communal housing projects are subsidized through government housing subsidies and are managed by an institution. (Transitional and Special Needs Forum, 2006)</p>
<p>Constitution: The formal document capturing the founding statement, vision and broad objectives of an NPO. It encompasses all the procedures and disciplines required for the orderly governance and operation of the organisation. In the case of registered Trusts or Foundations this includes Trust Deeds in terms of the Trust Property Control Act of 1988, and in the case of registered Section 21 Companies the Memorandum of Articles of Association. (Codes of Good Practice for South African Non-profit Organisations, 1997)</p>
<p>Continuing care services: Department of Social Development: (2005:21) The Integrated Service Delivery Model Towards Improved Social Services reflects Continuing care services are those services that maintain or improve the physical, social and psychological well-being of individuals who, for a variety of reasons, are not able to care for themselves fully. The goal of continuing care is to improve their independence and quality of life. Continuing care requires a progressive and flexible system that allows people to access all the services that they need. Continuing care services work toward meeting needs in the least intrusive manner possible, and provide the greatest opportunity for lasting well-being and functional independence.</p>
<p>Cycle of Violence: A cycle of behaviour in which the victim of violence responds with violence, either against the perpetrator or against someone else. This may be immediate or may be inter-generational. For example, children who are exposed to abuse and violence or who are the victims of abuse and violence, may as a result of this exposure and/or victimisation, fail to develop positive coping and problem-solving skills and may themselves use violence and abuse as a means of conflict and problem-solving. (Integrated Training on Domestic Violence, 2004)</p>
<p>Development: This is the provision of appropriate resource support to individuals and units, while demonstrating faith in the potential of people to grow and thrive. (Themba Lesizwe Organisation, 2005)</p>
<p>Developmental approach: A way of thinking about human functioning which attempts to explain current behaviour as it relates to previous life experiences, particularly childhood experiences. For example, violent offending in adults might be related to abusive childhood experiences. Similarly, poor mental health outcomes in victims of violence might be related to earlier unresolved or untreated trauma.</p>

<p>Domestic violence: The definition in terms of the Domestic Violence Act, 116 of 1998, covers domestic violence as follows:</p> <p>Physical abuse, sexual abuse, emotional, verbal and psychological abuse, economic abuse, intimidation, harassment, stalking, damage to property, entry into the complainant's residence without consent, where the parties do not share the same residence, or any other controlling or abusive behaviour towards a complainant, where such conduct harms, or may cause imminent harm to, the safety, health or well-being of the complainant.</p>
<p>Early intervention: Services delivered at this level make use of developmental and therapeutic programmes to ensure that those who have been identified as being at risk are assisted before they require statutory services, more intensive intervention or placement in alternative care. (Integrated Service Delivery Model, 2006)</p>
<p>Empowerment: Refers to the process of "conscientisation" which builds critical analytical skills for an individual to gain self-confidence in order to take control of her or his life. Empowerment of women is an essential process in the transformation of gender relations because it addresses the structural and underlying causes of subordination and discrimination. (Resource: National Gender Policy Framework /OSW Glossary of Terms page xvii, 1999)</p> <p>Empowerment refers to both individual psychological empowerment and community empowerment. The term is mostly used in relation to dealing with issues of the powerless of marginalized groups. Empowerment implies raised awareness in people and communities of their own abilities and resources to mobilize for social action. Individual psychological empowerment involves a subjective sense of enhance control over one's live, of being worthy of voicing opinions, of being able to do what one needs to do, and to take decisions concerning the direction of one's life. Empowerment can include such things as financial support and access to opportunity and experience. Community empowerment is considered a collective phenomenon, but includes a psychological component, and is demonstrated in political action around social issues affecting the community. (Rissel, 1994)</p>
<p>Extended family: An extended family is a multi-generational family that may or may not share the same household. It includes family members who either share blood relations, relation by marriage, cohabitation and/or legal relations. (Final Draft National Family Policy, February 2007. Department of Social Development)</p>

Family: A family is a group of persons united by the ties of marriage, blood, adoption or cohabitation characterised by a common residence (household) or not, interacting and communicating with one another in their respective family roles, maintaining a common culture and governed by family rules. (Final Draft National Family Policy, February 2007. Department of Social Development)

Family at risk: These are generally families that function well enough to cope with daily challenges, but which experience a crises as a result of sudden trauma or setback, such as death, disability, unemployment, rape, and violence among others. In such instances, urgent intervention may be required to assist families to manage the crisis until such time that they can revert to their own coping skills and systems. (Final Draft National Family Policy, February 2007. Department of Social Development)

Gender: Gender refers to the social roles allocated respectively to women and to men in particular societies and at particular times. Such roles, and the differences between them, are conditioned by a variety of political, economic, ideological and cultural factors and are characterized in most societies by unequal power relations. Gender is distinguished from sex which is biologically determined. (National Gender Policy Framework 1999)

Gender-based violence: Although gender in fact refers to both women and men, "gender-based violence" mostly refers to acts of violence that result in, or is likely to result in, the physical, sexual or psychological harm or suffering of women, including threats of such acts, coercion or arbitrary deprivations of liberty, whether occurring in public or private life. Sexual harassment, domestic violence, assault, rape, violent threats, entry without consent and stalking are included in the definition, as is economic, verbal, physical and sexual abuse. (Nel, 2007)

Gender role: Gender role refers to the behaviour based on anatomical sex that are placed on an individual by society. In every society there are cultural norms for feminine and masculine behaviour, and certain tasks and behaviours are considered appropriate for a person's biological sex. This would be, to a greater or lesser degree, what we think of a stereotypical male or female behavioural presentation. For example, through socialization men are expected to wear certain types of clothes and provide for the family, and women have their own specific dress code and are expected to stay at home and raise children.

In patriarchal societies, men are considered superior to women and their roles dominant. Males, 'masculine' characteristics (such as rationality and competitiveness) and roles assigned to men are considered superior and valued above females, those characteristics considered 'feminine' (such as emotionality

and nurturing), and roles assigned to women. Gender and gender roles are, however, not fixed as society and culture are forever changing. Also, masculinity, as well as femininity, are neither inherited nor acquired in a once-off manner. Instead, it is constructed in the contexts of class, race and other factors. (Morrel, 2001)

Intersectoral collaboration: Ensuring all sectors contribute to the design and implementation of an intervention. People who are targeted for an intervention are likely to have other insights or perspectives on their problem than the researcher or professional from outside the community. Being part of the solution enhances their buy-in. (Prilleltensky & Nelson, 1997)

Patriarchy: Patriarchy refers to the historic system of masculine dominance; a system committed to the maintenance and reinforcement of male superiority in all aspects of life – personal and private privilege and power as well as public privilege and power. Society's values identify particular personal characteristics and roles assigned to men over those assigned to women. (Hattingh, 1994)

Person-centred theory: Rogers (1987:30) developed the Person-centred theory. Du Toit, Grobler & Schenck (1998:ix) adapted the latter's theory that focus on how to understand the client and how the client sees himself/herself. The facilitator has come to recognise that if we can provide understanding of the way the client seems to himself at this moment, he can do the rest. The therapist must lay aside his preoccupation with diagnosis and his diagnostic shrewdness, must discard his tendency to make professional evaluations, must cease his endeavours to formulate an accurate prognosis, must give up the temptation to subtly guide the individual, and must concentrate on one purpose only; that of providing deep understanding and acceptance of the attitudes consciously held at this moment by the client as he explores step by step into the dangerous areas which he/she has been denying to consciousness.

Rights-based approach: In a rights-based approach to development, the achievement of human rights is set as an objective of development. Human rights-thinking is central to the development policy and international apparatus of human rights where accountability is invoked in support of development action. The rights referred to here are inclusive of civil and political, as well as economic and social rights. (Synergos Institute, 2006)

Service provider: Any person rendering services to beneficiaries (Themba Lesizwe Organisation, 2005) In this study, it refers to the legal, judicial, but especially shelter manager/social worker/social auxiliary worker responsible for victims of violence in communities and shelters.

<p>Shelter: According to the Department of Social Development: Policy Framework and Strategy for Shelters for Victims of Domestic Violence (2003:5), a shelter is a residential facility providing short-term intervention in a crisis situation (two weeks up to approximately six months as the need dictates). This intervention includes meeting basic needs (protection, food, clothing), as well as support, counselling and skills development, amongst others. The intervention further advocates the rights of the victim and strengthening of the victim's capacity.</p>
<p>Shelter Model: For the purposes of the study a shelter model refers to a residential facility that provides accommodation and services to victims of abuse in a developmental, holistic and integrated approach to restore and enhance the psychosocial wellbeing of the victim.</p> <p>Further concepts related to the shelter model are: Developmental Multi-disciplinary approach Psychosocial wellbeing (The present researcher, JJ Groenewald)</p>
<p>Social housing: Social housing is defined as affordable, high quality and well-located subsidized housing managed by viable, sustainable, independent institutions on participatory management principles. Social housing is aimed at low-to-moderate income families and provides different tenure options with the exception of immediate individual ownership. (Transitional and Special Needs Forum, 2006)</p>
<p>Statutory intervention/residential/alternative care: At this level an individual has either become involved in some form of court case or is no longer able to function adequately in the community, and services are aimed at supporting and strengthening the individual involved. (Integrated Service Delivery Model, 2006)</p>
<p>Transitional housing: Is temporary accommodation in and around the inner city for people who are in transition between homelessness and permanent accommodation. Short-term tenure and empowerment training are key characteristics of transitional housing. The accommodation is managed by an institution and subsidized through government housing subsidies. (Transitional and Special Needs Forum, 2006)</p>
<p>Trauma: A highly distressed, but not necessarily unhealthy emotional state experienced</p>

by individuals or families, and arising from exposure to a traumatic event. Note that trauma refers to an emotional state, not to an actual event. Different types of traumatic events include once-off/simple trauma where a person is exposed to only one traumatic event such as a hijacking, burglary, rape, earthquake; and multiple trauma where one is exposed to more than one type of trauma. The symptoms and interventions required in this type of trauma are more complex than in once-off/single trauma.

Related terms: Complex Trauma; Continuous Trauma; Secondary Trauma; Vicarious Trauma. (Themba Lesizwe Organisation, 2005)

Trauma counselling

Brief intervention by a recognised counsellor with special training in traumatic stress, aimed at assisting a person to recover from the effects of recent trauma exposure. (Themba Lesizwe Organisation, 2005)

Traumatic Event

When a person experiences, witnesses or is confronted with, an event involving actual or threatened death, serious injury or threat to bodily integrity of the self or others; and when the person responds with intense fear, helplessness or horror. Examples of traumatic events include human or man-made disasters, violent crimes, motor vehicle accidents, and human rights abuses. (Themba Lesizwe Organisation, 2005)

Traumatic Growth

The sense of personal growth that a small group /some people experience following their recovery after exposure to a traumatic event. (Themba Lesizwe Organisation, 2005)

Trauma Debriefing

Trauma debriefing can be described as early interventions or non-clinical forms of secondary prevention for traumatised people. There is a variety of different approaches used, including information and advice (psycho-education), self-help groups, concrete and direct help (housing, financial assistance), psychological debriefing, crisis intervention, structured trauma counselling and brief psychotherapy, to name just some. (Themba Lesizwe Organisation, 2005)

Trauma support: The provision of emotional first aid, practical assistance, psychological education and the mobilization of coping resources and social support. The aim of trauma support is to stabilize a person immediately after a traumatic event and to make appropriate referrals. (Themba Lesizwe Organisation, 2005)

Victims: The term 'victims' refers to victims of crime and violence as defined in

the United Nations Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power – i.e. persons who, individually or collectively, have suffered harm, including physical and mental injury, emotional suffering, economic loss and substantial impairment of their rights through acts or omissions that are violations of national criminal law or of internationally recognized norms relating to human rights. (Department of Social Development, 2005b. Draft Integrated victim empowerment policy.)

Related terms include 'patient', 'client' and 'survivor'.

A person may be considered a victim regardless of whether the perpetrator is identified, apprehended, prosecuted or convicted and regardless of the familial relationship between the perpetrator and victim. The term 'victim' also includes, where appropriate, the immediate family or dependants of the direct victim and persons who have suffered harm in intervening to assist victims in distress or to prevent victimization. (United Nations Commission on Crime Prevention and Criminal Justice, 1996)

Victim empowerment: Victim empowerment is an approach to facilitating access and delivering a range of services for all people in South Africa, who individually or collectively suffered harm, trauma and/or material deprivation through violence, crime, natural disasters, human accidents and/or socio-economic conditions, towards restoring and building a healthy, peaceful and economically viable society. (Department of Social Development, 2005a. Draft Victim empowerment strategy plan 2006-2008)

Victim empowerment refers to a certain philosophy of care and assistance, and to a specific approach by service providers (irrespective of which state department or sector they represent) in delivering available services to victims of crime. Victim empowerment is a philosophy, method or technique of handling victims that accepts that, rather than being dependent on the expertise and assistance of a professional or someone else, all people have certain skills and competencies that, when facilitated appropriately, can come to the fore to assist individuals to help themselves or to cope better with an incident of victimization. (Nel, Koortzen & Jacobs, 2001)

Internationally known as "victim support" or "victim assistance", the term "victim empowerment" was coined in 1996 at the first national workshop addressing crime victim-related issues arranged by the South African Police Services and Institute for Security Studies. During the workshop the need was expressed to take the concept "victim support" further by attaching crime prevention to it, so as to break the cycle of violence and prevent repeat victimization. (Camerer & Nel, 1996; Snyman, 2005)

Victim support: Victim support seeks to assist victims and survivors of crime or tragedy with emotional support, practical aid, information and advocacy. The objective of victim support are to reduce the psychological shock and trauma victims may suffer by providing emotional support and practical assistance immediately after the incident or shortly thereafter; identify symptoms of post-traumatic stress, and referring victims for trauma counselling and other professional services where necessary, prevent or reduce secondary victimization by the criminal justice system by providing information on matters such as the status of the investigation, the functioning of the court system and the rights of victims within it; prevent repeat victimization by advising and guiding the individual towards a preventative lifestyle, and by creating awareness among the public of the risks of crime. (Themba Lesizwe Organisation, 2005)

CHAPTER 2

Gender-based violence

Introduction

The objective of this chapter is to establish an understanding of the phenomenon of abusive relationships, with specific focus on gender-based violence specifically focussing on women and to an lesser extent their children. Myths surrounding gender-based violence are addressed, also the cycle of violence, reasons why women remain in the same abusive situation, explanation as to why abused women may also abuse their children, the link between child abuse and domestic violence. Attention is given to physical and psychological manifestations of domestic violence experiences in children, new risk situations - consequences of separation, endeavours of the South African Government, the needs of victims, benefits of the Victim Empowerment Programme and support services to regulate domestic violence in society.

2.1 An overview of gender-based violence

2.1.1 Conceptualising gender

Researcher would firstly like to indicate that the initial perceptions on gender, following the democratisation of South Africa, were that gender refers to women and to women's issues alone. This resulted in a situation in which professionals in social development focused exclusively on women's issues, eg. the establishment of a Directorate for Women in the National Department of Social Development during the late 1900s – a Women's Strategy to advance intervention on women specifics. As time passed, researcher and other colleagues at the Department of Social Development started differentiating between gender, gender-based and gender-mainstreaming. This resulted in gender being accepted as an issue of men and women and not exclusively women. With regard to gender-based violence, the concept of patriarchy is relevant in conceptualising an understanding of gender-based violence, as illustrated in the next section.

2.1.2 Patriarchy

In Germany, the Action Plan of the federal government states that violence against women (1999:5) is the expression of persistent structures of a patriarchal society and at the same time of individual experiences and conflict-solving patterns. "Patriarchal" refers to a social system in which the father/male is the head of the family and men have and exercise authority over women and children. Walby (1990:1). In a United Nations study (United Nations 2006:28-30) on violence against women.....concurs with the latter that historically, gender roles have been ordered hierarchically, implying that the socially constructed roles of women and men were that of men exercising power and control over women. Therefore, male dominance and female subordination! A patriarchal system/society restricts the choices of women, but does not render women powerless, as evidenced by the existence of women's movements and successful claims by women for their rights. United Nations study (United Nations 2006:28-30) further states that patriarchy has had different historical manifestations and its functions differ from culture to culture, geographical and political settings. Its expressions are also influenced by economic status, race, ethnicity, class, age, sexual orientation, disability, nationality, religion and culture.

United Nations Study as refer to above further illustrates that when a woman is subjected to violence for transgressing social norms governing female sexuality and family roles, the violence is not only individual, but through its punitive and controlling functions, also reinforces prevailing gender norms. A broad focus is necessary to avoid the impact of systemic gender inequality and women's subordination, rather than focussing on the social context of power relations.

The Uniform Protocols (2005:2) for the management of victims, survivors and witnesses of domestic violence and sexual offences confirm that violence against women is a manifestation of the historically unequal power relations between men and women. These relations have led to domination over and discrimination against women, by men, and to the prevention of the women's

full advancement. Furthermore, violence against women is one of the crucial social mechanisms by means of which women are forced into a subordinate position in comparison to men. In a United Nations study (United Nations 2006: 29) on violence against women.....concurs with the latter and includes the exploitation of women's productive and reproductive work, control over their sexuality and reproductive capacity. It also includes cultural norms and practices which entrench women's unequal status, government state structures and processes that legitimise and institutionalise gender inequalities, and violence against women.

The United Nations Population Fund (UNPF) Gender Theme Group (1998:5), defines gender-based violence as "violence involving men and women, in which the female is usually the victim, and which is derived from unequal power relationships between men and women. Violence is directed specifically against a woman because she is a woman, and affects women disproportionately." Uniform protocols for the management of victims, survivors and witnesses of domestic violence and sexual offences (2005:2-4) concur that women and children are the most vulnerable groups of our society, which have been subjected to cruel and inhumane practices of domination. This domination has plagued the global community and is particularly deeply rooted in the South African community, resulting in South Africa being shamefully reported as a country with one of the highest rape statistics. The Department of Social Development Draft Anti-Rape Strategy (2007:4) reflects that over 54 000 incidents of victims of rape are reported every year, over half of them by minors (under 18 years). Although even the reported rates are high, less than one third of reported cases of rape and sexual crimes reach the courts or result in a successful prosecution.

The United Nations Population Fund (UNPF) Gender Theme Group (1998:5) defines gender-based violence as physical, sexual and psychological harm (including intimidation, suffering, coercion, and/or deprivation of liberty within the family, or within the general community). The German action plan

(1999:4-5) reflects that concrete living conditions such as poverty, unemployment, cramped living conditions, combined with alcohol and substance abuse, as well as the way in which society manages and views violence, should be addressed in strategies which focus on the general societal causes as well as the individual ones. Individual prevention comprises all efforts which may be suited to interrupting the cycle of violence which perpetuates itself over generations.

The Integrated Training on Domestic Violence Manual (2004:17-21) indicates that women and children are often in danger in the one place where they should be safe – within their families. For many, home is a place where they face a regime of terror and violence at the hands of someone close to them – somebody they should be able to trust. Those who are victimised usually suffer physically and psychologically, and are constantly afraid of repercussions, should they speak out. The effects of domestic violence can be severe and may result in death. For instance, the most critical time for women is when they express an intention, or actually attempt to leave the abusive relationship. The social, health and legal interventions required are therefore critical in reducing or eradicating abuse within the domestic sphere.

The United Nations Population Fund (UNPF) (1998:3) indicates that reliable data on the incidence of gender-based violence are scarce, especially for developing countries. There is an increasing body of knowledge which indicates that it is widespread and common. It occurs in a broad context of gender-based discrimination with regard to access to education, resources, and decision-making power. Domestic violence statistics are difficult to obtain, due to the fact that domestic violence is not a crime as such and police statistics only reflect reported crimes, such as assault, rape or malicious damage to property, inter alia. There are many actions that constitute domestic violence, but are not defined as crimes, such as forced isolation, verbal abuse, stalking and economic abuse. These are not recognised in South African criminal law.

2.1.3 The broader scope to take into consideration in gender-based violence prevention strategies

Gender-based violence does not stand alone – in a violent relationship there are consequences. According to Oppong & Wery (1994:29) sexual coercion, exploitation and harassment in various forms, need to be more explicitly recognized and addressed, particularly in terms of the consequences for AIDS prevention. In this regard, policies and programmes to protect girls and women, as well as promote equality of opportunity and treatment in places of education, training and employment, will be crucial. It is crucial to address the link between HIV, AIDS and domestic violence within this chapter, in order to enhance the knowledge level and explore possible consequences for heterosexual relationships. The 16 Days of Activism Report on No Violence Against Women and Children (2003:3) reflects that during the last 20 years, HIV and AIDS have become formidable challenges as morbidity and mortality of able-bodied individuals have increased significantly. The implication of morbidity and mortality has an adverse effect on social and economic development of countries which are hard-hit by the epidemic. Available evidence shows that the impact of AIDS is felt at all levels of society, but most of the impact is borne at individual, household, family, and community level. HIV and AIDS pose a problematic challenge, both in terms of policy and in the case of programmes within shelters for abused women and their children. The researcher is of the opinion that programmes within shelters should address the issue of the prevention of HIV and AIDS on a continual basis and also make provision for the effect of substance abuse on an individual, (foetal alcohol syndrome) and the nuclear family. This information will broaden the knowledge-base of victims and enable them to protect themselves from sexually-transmitted and communicable diseases.

Jacobs (2003:1-3) indicates that violence against women is both a cause and consequence of HIV and AIDS infection and is also of the opinion that violence against women is deeply rooted in patriarchal stereotypes (meaning that the husband/father is the head of the family) and gender roles. This is

an assumption which often results in the abuse of women being normalised or legitimized within domestic relationships. Physical violence, the threat of violence, the fear of abandonment and other forms of domestic violence are powerful factors which prevent women from talking about fidelity, sex and condom use, or leaving relationships which may put them at risk of HIV infection.

Maman (Jacobs 2003:1-3) recognizes that HIV and AIDS, as well as violence against women, dovetail in the following ways:

- Increased risk of HIV infection as a result of coerced sexual intercourse.
- It limits women's ability to negotiate HIV preventative behaviour.
- Increased risk of violence as a result of disclosure of their HIV status to partners.

Despite all the above-mentioned research opinions, there are still certain myths about gender-based violence which will be highlighted in the next section.

2.2 Myths surrounding gender-based violence

Within the context of this study the question arose: Why does battering occur? Maine Coalition (2001:1) argues that the following elements highlight certain myths around gender-based violence. These were adopted:

Out of control. The abuser is actually in control. It is a myth that the abuser provides excuses for the abusive behaviour, such as that he/she cannot understand his/her own behaviour during the abusive situation, "you push my buttons". Abuser decides who to abuse, when and where, which parts of the body to batter, and the length and severity of the episode. The abuser may remove rings or a belt as a signal, or threaten that s/he is "going to do something" and when it is due to happen.

Poor anger control. It is a myth that battering is a crime of passion, in fact, many batterers admit to loss of control during violent incidents. Actually most batterers are able to control their emotions when at work, socializing with friends, in court, or when dealing with the police.

Stress. It is a myth that batterers do not necessarily experience more stress than non-batterers do. They choose to deal with stress violently. Batterers believe that they have the right to control and have their way.

Low self-esteem. It is a myth that batterers do not differ from non-batterers in their level of self-esteem. The difference lies in the batterer's belief-system regarding women and children. The problem is not how batterers feel about themselves, it is the permission they give themselves to control and hurt other people.

Poor communication skills. This myth is grounded in the belief that the abusers will not abuse if they communicate their needs and their needs are not met. This myth relates to poor communication skills of abusers and is a form of victim blaming. Abusers demand that their needs be met before the needs of all others. For their safety, victims learn to read subtle, non-verbal communication well. Even when victims meet the needs of abusers, they continue to abuse.

Substance abuse causes the abuse. It is a myth that getting sober and into a programme stops the abuse or the violence. For example: "When I was drunk, I did not know what I did." In addition, being a "recovering addict or alcoholic", may be used to sidestep responsibility for abusive behavior. Substance abuse is another way for an abuser not to be held accountable. Becoming sober is just the first step in dealing with the underlying issues of power and control.

History of abuse during childhood. Many batterers were abused as children. Many victims were abused while they were growing up, but choose not to abuse. Statistics show that men who have witnessed their fathers

abusing their mothers, are more likely to batter than those who have been physically abused themselves. Both, however, remain serious risk factors.

Battering is provoked or enjoyed by the victim. Battering and other forms of abuse are degrading and humiliating. No behaviour on the part of the victim ever justifies battering. No behaviour on the part of the victim can change the abuser's decision to batter.

Batterers need to learn non-violence. It is a myth that abusers do not know non-violence. The problem is not their inability to resolve conflict non-violently, but their unwillingness to do so.

This completes the description given by the Maine Coalition (2001:1).

In addition to the above mentioned myths, Padayachee & Singh (1998:15-18) adds, *among others*, the following myths that will be discussed briefly in the text to follow, which are:

- Only poor women, uneducated and black women are abused
- Batterers are mentally ill
- Battered women deserve to get beaten. They provoke their beatings by nagging, or other annoying behaviour.
- Battered women enjoy it, are crazy or mentally ill
- Children need their fathers even if they are violent

Padayachee & Singh (1998:6-10) point out that low income, uneducated and Black women in South Africa are more likely to seek assistance from public agencies, shelters, government hospitals and social services, because they have fewer resources than women from middle-and upper class income. The assumption is that, when economically independent women experience abuse, they usually can afford to leave their violent partners and sustain themselves in a crisis situation.

The issue of culture is linked to battered women who, allegedly, deserve to be abused, in order to control the woman. This happens when the abuser is of the opinion that it is the appropriate time because the woman's "behaviour is getting out of control" - according to his/her perceptions.

Researcher will cover the link between child abuse and domestic violence in this chapter - section 2.7, which will give the reader a better understanding of the effect of violent behaviour within the family context.

Padayachee & Singh (1998:18-19) are of the opinion that the myth of "children need their fathers even if he is violent", shatters faster than any of the other myths. This is clear when one is confronted with the data on the number of children who are physically and psychologically abused in homes where domestic violence is prevalent.

According to Fisher (1999:26), witnessing domestic violence is not the only way in which children are traumatised. Many children also describe very traumatic events which they have heard from the next room. Some children are forced by the abuser to observe or participate in the abuse against their mothers. This humiliating behaviour may have far-reaching consequences. This may require further research in respect of the impact of the manner in which children are raised, compared to their lifestyle and family relationships as adults.

A study conducted by Rasool et al (2002:xvi), with regards to abuse in rural areas, details experiences of abuse by women. Those women were most likely to define abuse in terms of physical aspects, even though many may have experienced other types of abuse. Eighty (80%) percent had experienced emotional abuse, 76% physical abuse, 63% sexual abuse, 62% economic abuse and 32% had experienced all types of abuse. All four types of abuse tended to have been experienced over a long period of time and the most common location for abuse was in the home. In the latter, the study focus group discussions revealed that efforts need to be made to help family

members understand the dynamics of abuse and to respond appropriately to survivors.

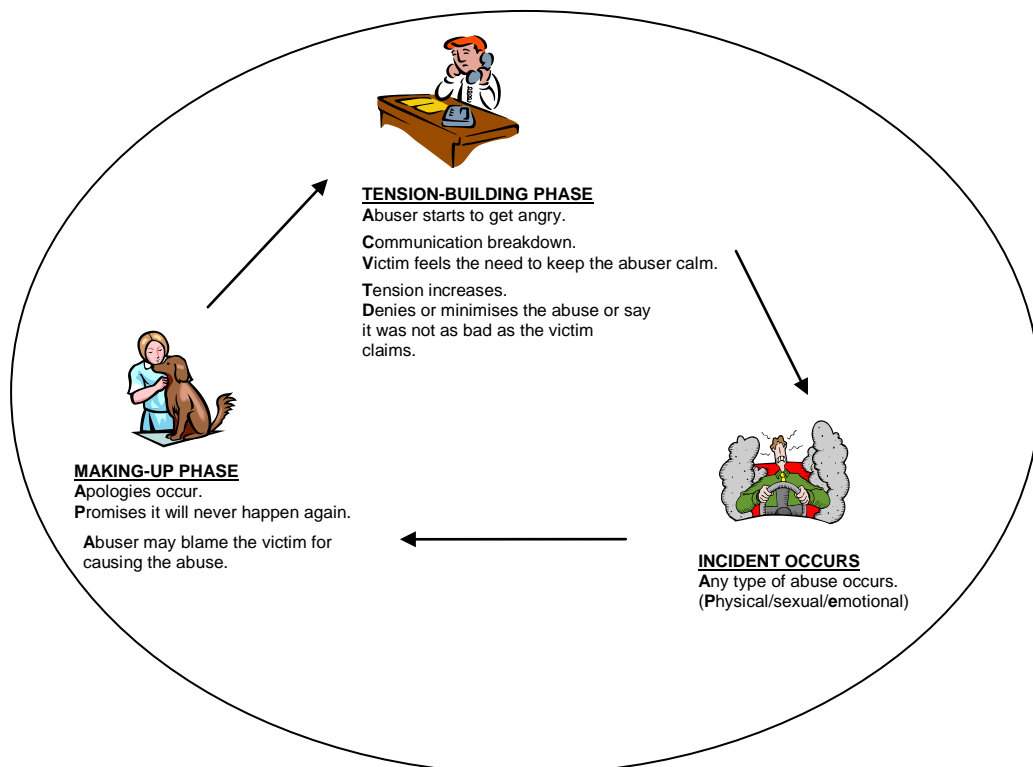
2.3 The cycle of violence

According to the Integrated Training on Domestic Violence Manual (2004:27) the cycle of violence can occur manyfold in a single abusive relationship. The "cycle of violence" in a violent relationship consists of three phases: (Walker 1979:55-70)

- The tension-building phase
- The acute battering episode and
- The aftermath: Loving respite

Each stage lasts a different length of time in a relationship. The total cycle has its own duration, from a few hours to a year or more to complete. Some details regarding the cycle of violence are outlined in Figure 2.1 to enhance the reader's understanding of this phenomenon.

Figure 2.1 Cycle of violence: As adapted from The Integrated Training on Domestic Violence Manual (2004:27)



The tension-building phase. During this phase the partner/husband may become verbally abusive. According to Padayachee & Singh (1998:23-24), certain elements of domestic violence can be demonstrated by verbal abuse, minor hitting, slapping, and other incidents. Tension builds within the perpetrator, for various reasons (eg family pressure, work stress, or his own thought patterns). According to Padayachee & Singh (1998:24), other couples will have a range of responses to this tension which do not include violence, but in an abusive relationship it leads to the stand-over phase. The woman senses that the man is becoming agitated and more prone to react negatively to any trivial frustration. During this phase women may feel helpless and try to please/nurture/ stay out of the way of the husband/partner.

The woman often experiences her partner's behaviour in this phase as being legitimately directed towards her and internalizes the task of preventing the situation from exploding. It is known that women who have been abused over time, usually know when the tension-building phase aggravates, but often deny this knowledge to help herself cope with the abuser's behaviour. During this phase, fear is the basis of the woman's coping mechanism in the relationship, fear of the known and unknown, almost "like walking on eggs". (Padayachee & Singh 1998:23)

It may appear, according to Padayachee & Singh (1998:24), that this phase can be subject to the **stand-over** phase, because of the physical strength and the realistic and frightening threats to hurt her. The victim feels that she is being controlled by the abuser and his verbal attacks will weaken her further.

The incident occur phase is known as the explosion phase. (serious battering incident). The explosion phase is when the abuser loses self-control. Many men report that they do not start out by wanting to hurt the victim, but only want to teach her a lesson as reflected in the Integrated Training on Domestic Violence Manual (2004:27). The physical violence usually starts with pushing, shoving, shaking, hair pulling or beating with open hands or clenched fists. In many instances, the violence aggravates to the extent of leading to

the death of the victim or the abuser. This scenario often occurs where dangerous weapons or firearms are used. During this phase, murder can also occur with the loss of lives of one or more members in the relationship.

In cases of physical abuse, there may be visible injuries inflicted on the victim, especially if the abuser is inexperienced and most probably ignorant of the legal consequences. Most victims become extremely grateful when the violent attack ends and often consider themselves fortunate that it was not worse, no matter how serious their injuries are. They will often deny the seriousness of their injuries and refuse to seek immediate medical attention. According to Padayachee & Singh (1998:23), the other alternative is that the victim may try to cover up injuries or may look for help.

The third phase is the **making-up phase**. The first sub-phase is the **remorse phase**. This is a period of calm, loving and contrite behaviour. The abuser appears to be genuinely remorseful for what he has done. In an intimate relationship, his worst fear may be that his partner will leave him and he will try as hard as he can to compensate for his brutal behaviour. He may sincerely believe that he can control himself and will promise himself, as well as to the victim, never to hurt her again. On the other hand, the victim wants to believe that the abuse has come to an end. The second sub-phase is the **pursuit phase**. The abuser's reasonableness and loving behaviour (such as gifts, flowers, doing special things for her) during this period, also supports her desperate desire for a change. (Padayachee & Singh 1998:23). She usually feels responsible for her own conduct that led to the violent attack. She may also feel responsible for the abuser's well-being.

Du Toit, Grobler & Schenk (2006:18) state that all behaviour, irrespective of how strange it may seem to an outsider, does have a goal or some motive. During the making-up phase, the abuser and the victim experience feelings like guilt, anxiety and most probably resolve not to let it happen again. The abuser will treat the victim with respect, love and affection. Researcher's experience

in the field of violence against women illustrates that there are, during this calm phase, always feelings of uncertainty and anxiety – with the emotional question; When will an attempt at violence occur again?

The above-mentioned cycle may differ from family to family. It is, however, important for the service provider to take into consideration that the “making-up” and “calm” phases may disappear. In some cases, abusers never express sorrow for their behaviour. In some instances the victim reacts in such a way that she does not deny or minimize the violence. She may, however, refuse to co-operate with the law enforcement agents due to use of threats, violence and intimidation by her abuser.

Generally speaking, relationships which involve any level of physical violence, have a recurring cycle of behaviour. Therefore, it is important for service providers to understand the dynamics of the cycle of violence to intervene effectively by:

- Reminding the victim of the similar remorseful periods in the past
- Predicting a return to the tension-building phase
- Explaining the likelihood of more frequent and severe episodes of violence in the near future

Researcher's experience indicates that victims of abuse often seek assistance from the Magistrate, or Police, between the acute battering phase and the honeymoon phase as outlined in Figure 2.1. The abuser is often on his best behaviour and pressurises the victim to withdraw charges. Once the charges are dropped, the cycle of violence begins again with the tension-building phase.

2.4 Reasons for women to remain in the same abusive situation

Groenewald (2006:22-23) found that during a workshop at the University of the Western Cape during 2003, the discussion groups highlighted some of the

reasons why women do not report abuse. The following reasons were produced by the group, but are not verified:

- Fear of abuser
- Loving the abuser
- Shame of stigma
- Do not see it as abuse
- Dependency
- Fear of police and legal system
- Low self-esteem
- Accept the abnormal as normal
- Lack of a support system
- Hope for change
- Fear of what will happen to the children
- Breaking up the family
- Increase of violence
- Ignorance of social and justice system
- Lack of education. Do not know their rights (with children)

The above reasons illustrate why women remain in abusive relationships. In the following section, researcher will attempt to explain why women in abusive relationships may also abuse their children.

2.5 Explanations as to why abused women may also abuse their children

Groenewald (2006:23-27) emphasises the importance for professionals to understand why abused women may also abuse their children in order to direct interventions. Some reasons given by Davimes (2003:20-21) were adapted and are as follows:

- Battered women may batter their children in order to “discipline” the children, so that they do not anger the male abuser. This may cause

abuse of both the mother and the children. The perpetrator may abuse the child as part of their violence against women, "I will get you".

- The mother may abuse her children out of frustration about her own abuse and as a means of gaining back some power and control.
- Women may also abuse their children if they associate the child with the abuser. This may occur as a result of the abuser using the child to participate in the abuse against the mother, or if the child was conceived through marital rape, or if the child resembles the abuser, either by appearance or behaviour. Counselling would then be necessary to help the mother separate (in her mind) the child from the abuser.

Davimes (2003:22-23) describes that dysfunctional families may also abuse both animals and children and it is not uncommon for humane workers (animal welfare workers) to observe child neglect or abuse and for social welfare workers to observe animal abuse or neglect. Lacroix in Ascione & Arkow (1999:62-65), argues that shared characteristics of women and children as victims of family violence can easily be extended to family pets. Victims of family violence share common traits. For example, women, children, and animals have historical status under the law as property, which means that their rights under the law have been superseded by conflicting rights of their abusers. Unlike women and children, who have had their rights increased by reform movements, animals continue to be the losers when their interests are weighed against the possessor's use and enjoyment interests of their owners. Women, children and family pets share the consequences of their abusers' misuse of power and control. They further share economic dependence, strong emotional bonds; and an enduring sense of loyalty to their abusers. Lacroix in Ascione & Arkow (1999:64-66) elaborates on the close relationship between pet owners and their pets, given the weight of evidence indicating that people have "human-like" relationships with their pets. It will be an act of ignorance not to include family pets in this pool of potential victims.

Davimes (2003:22-23) calls for an urgent link between inter-disciplinary training and intervention, in order for family violence and abuse, be it spousal, child or animal abuse, to be prevented and treated in a collaborative and more effective manner. Davimes (2003:23) further argues that abusive parents or adults may kill or threaten to kill children's pets to punish or threaten them, or to obtain their compliance in satanic cults or sexual abuse. Children may kill their own pets in order to prevent the abuser from doing so, or they may kill their pets as a dress rehearsal for their own suicide. Children may suffer from shame and guilt concerning their own abuse, but may find it easier to disclose the abuse of their pets.

Battered women often remain trapped in violent homes because they fear for their pets' lives or because they are aware that no-one will take care of their animals if they should leave. The effects of domestic violence are greatly increased when animal abuse is involved, especially with the knowledge thereof or abuse in front of the children.

A third form of animal abuse which may occur in families, is when disturbed children perpetrate violence against their pets or other animals. This represents a dangerous inability to empathise and has often been noted as a precursor for future anti-social crimes. Jorgensen & Maloney in Ascione & Arkow (1999:145), emphasise that not all children who abuse animals will grow up to become mass murderers. Nor do all children who are abused become abusers themselves. However, it is becoming apparent that many persons who abuse animals, were themselves abused as children.

Cohen in Ascione & Arkow (1999:336) indicates that the good news is that experts are finding that compassion and empathy can be taught. Therefore, they have added specialised human education to their school curriculum, in order to teach compassion and empathy. He further encourages more in-depth analysis of the link between people and animal abuse, so that communities can teach these personality attributes to their youth. Today's animal abusers need

not continue their despicable actions and become tomorrow's dangerous felons, thereby perpetuating the cycle of violence which is taking such a devastating toll on society.

2.6 The link between child abuse and domestic violence

Fisher (1999:26) suggests that the term "victim" should be broadened to include, not only those who have been targets of criminal acts or who have been directly injured by physical violence, but also those who are witnesses to violence. Having been an "eye-witness" to domestic violence is not, however, the only way in which children are traumatized. Many children also describe very traumatic events which they have not visually experienced, but which they have heard. Whilst some children are able to describe the violent events in detail as a result of hearing them from the next room, other children are forced by the abuser to watch or participate in the abuse against their mothers. Whilst this has an obviously degrading effect on the woman, it also adds to the confusion and torment of the children.

In South Africa, we are only just beginning to understand the phenomenon of domestic violence and, therefore, the effects of marital conflict on children have also been completely ignored. It is imperative to investigate the link between child abuse and domestic violence. Children who were subjected to domestic violence or who are being subjected thereto should form part of holistic services rendered by service providers as a method of prevention. Hester et al (2000:30–63) found that a number of aspects are apparent such as:

- The perpetrator of domestic violence may also be directly physically and/or sexually abusive towards the child.
- Witnessing violence to their mothers may have an abusive and detrimental impact on the children concerned.
- The perpetrators may abuse the child as part of their violence against women.

Some of the findings of Hester et al (2000:30–63) show that, in order to develop professional understanding of and practice in relation to child abuse, we need to recognize that children often experience a mixture of physical, sexual and/or emotional abuse. Focussing on only one aspect of these different forms of abuse can therefore be incorrect. Similarly, where there are both domestic violence and child abuse, professionals need to examine the entire picture. The researchers emphasize that child abuse, in the context of domestic violence, has to be understood in terms of gender; that is, not as family violence carried out by family members or parents, but specifically as violence and abuse primarily carried out by men against their children and female partners. The researchers indicate that a wide range of research has found that witnessing violence to their mothers can have a detrimental impact on children, tantamount to emotional abuse or psychological maltreatment.

Hester et al (2000:63) found that there is no uniform response to living with domestic violence. Children's responses vary enormously, with some children being affected far more than others, and children within the same family being affected differently. Each person, and therefore each child's, experiences and reactions are unique, which are confirmed by Du Toit et al (1998:4). Every person's experiential world is central, personal and continuously changing. It includes both conscious and unconscious experiences. This is known only to the individual, which means that outsiders can only form an idea of an experience if the individual tells them about it. Therefore, they will be the best managers of their lives, with the necessary knowledge to enable them to make informed decisions.

Perpetrators who abuse their adult partners, often also abuse their children. Davimes (2003:19-29) refers to a study which was conducted by the American Humane Society 1994, which found that 45-79% of battered women in shelters reported that their husbands had also perpetrated some form of child abuse. The study concluded that child abuse is fifteen times more likely to occur in households where domestic violence is present, as opposed to where there is

no adult violence. Another way in which domestic violence is linked to child abuse, is that children are often hurt when getting involved in domestic violence in order to protect their mothers, or by merely being accidentally hurt in the "line of fire". Abused mothers may also abuse their children. Battered mothers are twice as likely to abuse their children than mothers who are safe. As male abusers become more aggressive towards their partners, their aggressive behaviour towards their children also increases. The same is true of women; - as their partners' aggression towards them increases, their own aggression towards their children also increases.

Hester et al (2000:62-63) demonstrate that some clinicians and researchers have linked the amplified impacted trauma of experiencing and witnessing domestic violence with post traumatic stress disorder. This is seen as a type of enduring anxiety disorder following exposure to a traumatic event. In the context of domestic violence, it may be particularly difficult and stressful for children to deal with the fact that the trauma is occurring at home, undermining the child's notions of safety and protection from harm. The child may react in ways consistent with the symptoms of post traumatic stress disorder.

However, the reactions may become apparent as indicated by Hester et al (1990:72) much later than the traumatic event and may therefore, be difficult to link to the original trauma:

... "the notion of post-traumatic stress implies that children who chronically witness wife abuse in their homes may display emotional symptomatology at some point in time that may be quite far removed from the initial traumatic events."

Hester et al (2000:62-63) are further of the opinion that the impact on children witnessing domestic violence has been underplayed by professionals, even though in some cases this might cause the child to react in ways consistent with the symptoms of post traumatic stress disorder.

2.7 Physical and psychological manifestations of domestic violence in children

The wide range of effects which children might experience in circumstances of domestic violence can include behavioural, physical and psychological effects, which may be short-term and/or long-term. These are outlined by Hester et al (2000:30-63).

Table 2.1 Physical symptoms and psychological symptoms

Physical symptoms	Psychological symptoms
Physical injuries, including bruises, broken bones	Feeling guilty/to blame
Being protective of mother and/ or siblings: by physically intervening, withholding information, getting help etc	Disruptions in schooling and living arrangements
Fear/insecurity/tension	Self-blame/bitterness
Aggression/anger to mother and/or others (including other adults and siblings)	Truancy/absconding
Introversion/withdrawal	Developmental delays in young children
Bed-wetting	Difficulties with trusting others
Sleep disturbances	Ability to negotiate difficult situations
Weight loss	Low self-esteem
Sadness/depression	Highly developed social skills
Self-harm	Poor social skills
Social isolation	Emotional confusion in relation to parents
Secretive/silent/unable to tell	Difficulties at school
Nightmares	Advanced in maturity and in sense of responsibility

Table 2.1 reflects physical and psychological behavioural symptoms that children might experience. Service providers, such as social workers and shelter managers, should be informed to address such special needs of children within shelter programmes and services.

2.8 New risk situations: Consequences for separation

Risk situations may occur when a woman leaves the abusive relationship. Social workers should be aware of such consequences and address options with abused women during intervention. A safety plan should be developed with the abused woman, putting measures in place to escape from abusive attacks when necessary.

Davimes (2003:19-29) states that abused women are most at risk when attempting to leave the abusive situation. It is usually at the separation stage in the relationship that the violence escalates and the risk of abuse toward children also increases. When a woman threatens to leave, or when she actually leaves the relationship, she is at the greatest risk of being murdered by her abuser. Many women are killed in the months immediately after ending the relationship with abusive men, than at any other given time.

Once the parents have separated, there are a number of new risks that arise for the children:

- Witnessing physical or verbal abuse of the parents when they meet with each other.
- Abduction and use of the child to force the woman to return to the relationship.
- Interrogating the child about the mother's activities, which increases the child's sense of divided loyalty.

2.9 Endeavours of the South African Government in fighting gender-based violence

South Africa has advocated a new way of approaching crime since 1996. The paradigm shift is to perceived crime as a social issue and to adapt a victim centred restorative justice approach. The first document to refer to restorative justice in South Africa was the National Crime Prevention Strategy. Batley in Davis & Snyman (2005:118) states that the paradigm shift for crime prevention is a "victim-centered criminal justice system which

is concerned with addressing the direct effects of crime and places the emphasis on those victims least able to protect themselves". According to Hooper & Busch (1996:1), the restorative justice process provides opportunities for victims and offenders to participate actively in the criminal justice system. However, the desire for change should not prevent service providers from losing sight of the limitations of the process. These limitations arise from the dynamics of mediation and conferencing and are clearly demonstrated in cases of domestic violence. Hooper & Busch (1996:1) states that, in the early trial period of restorative justice initiatives in New Zealand, great care and thought should be given to whether domestic violence cases should be referred to these programmes. In their view the decision should not be taken lightly. The process should only be attempted in exceptional cases and then, only after special protocols were followed to ensure the victim's free and informed consent and safety. It must be remembered that in most cases, an abuse victim turns to the criminal justice system for protection from on-going violence. Hooper & Busch (1996:1-3) argue that the victim should not be asked to participate in any process which may compromise the victim's safety and risk exposing the victim to further violence. At the very least, the system which a victim turns to for protection, should not be complicit in the victim's further victimisation.

The Domestic Violence Act, 1998 (116 of 1998:2) states that the South African Government recognises that domestic violence is a serious social evil and that there is a high incidence of domestic violence within the South African society. Victims of domestic violence (children, women and older persons) are amongst the most vulnerable members of society. The South African government further recognises that domestic violence takes on many forms. These acts of domestic violence may be committed in a wide range of domestic relationships and the remedies currently available to the victims of domestic violence have proved to be ineffective.

It is perceived that, with regard to services to the victim and family members, a good understanding of the phenomenon of domestic violence, as defined in the Domestic Violence Act, (116 of 1998:3-6), is necessary for appropriate intervention. Rasool et al (2002:1-162) conducted a National Survey on Violence Against Women. The aim was to broadly inform policy direction on violence against women and to provide practitioners with information about specific service delivery issues. One thousand (1,000) survivors of economic, emotional, physical and sexual abuse were interviewed across all nine provinces in South Africa. Rasool et al (2002: xvi) detail the experiences of abuse by stating that women are most likely to define abuse in terms of physical aspects, even though many may have experienced other types of abuse.

Rasool et al (2002:66) state that, besides financial dependence and commitment to children, other reasons why women find leaving abusive relationships difficult, are, amongst others, lack of housing, day care and support services, fear and isolation. Many of the shelters are full and are temporary by nature. Women who do not have access to appropriate housing, often relocate to informal settlements, which increase their vulnerability and that of their children. It is clear from the above researchers, that the approach to interventions in respect of domestic violence should be based on an understanding of the dynamics of abuse, as will be discussed in the next section.

2.10 The needs of victims (of domestic violence) and benefits of victim empowerment programmes and support services

It is evident from the above-mentioned research findings that primary and secondary victims of abuse have various psycho-social needs. It is obvious that every individual who experiences domestic violence can be affected differently. Responses vary enormously, with some victims being affected far more than others, and members within the same family being affected differently.

Counselling is a key component of trauma management, as crime and violence victims are often only treated for their physical injuries. Little thought is given to the long-term mental and/or emotional trauma which they may experience.

Holtmann (2007:9) states: "Victims in a traumatized state experience uncharacteristic mood swings, find it hard to plan for the future and are depressed, anxious and often angry or vengeful. Their recall of the event is often chaotic and they may suffer short-term memory loss. They need the help of professional counsellors who are trained to respond with respect - preserving the victim's dignity. Being a victim support volunteer or a trauma counsellor is not an easy job. They constantly have to listen to victims harrowing accounts of crimes. Thus these counsellors require regular supervision so that they are protected from secondary victimization – being traumatized by proxy via another person's trauma. Victimization is best dealt with in a sensitive and – in most cases private way. Victims need compassion and empathy, comfort, protection and help with complexities of dealing with the aftermath of a trauma. There is huge and pressing need for more victim support services, where one-on-one support is offered. There is a need to train and retrain such volunteers, to provide facilities and venues for such services and to have regular supervision and support for volunteers. We need to develop ways and means to best assist the victims of violence on the road to recovery."

Bruce, in Davis & Snyman (2005:101), reflects that some of the earliest types of victim support measures were shelters to provide temporary accommodation. This is also regarded as one of the remedies in the South African Domestic Violence Act to protect victims of repeated violence or abuse. South African Government (Department of Social Development under the umbrella of the Victim Empowerment Programme), developed a Shelter Strategy to address the needs of the most vulnerable people, women and their children who experience domestic violence. In addition to the above

mentioned strategy, the Department of Social Development also developed a national Directory on Services for Victims of Crime and Violence, 2009. This Directory provides information on a network of services to enable service providers to refer victims of violence appropriately and to avoid secondary victimisation, implying that victims should not be subjected to being sent from pillar to post. Furthermore, victims of domestic violence should have sufficient information to make informed choices about their circumstances and future plans.

Summary

Chapter Two outlined a literature review on gender-based violence to bring about an understanding of what is meant by gender and gender-based violence. It also referred to some consequences where gender-based violence occurred and contributed towards Objective One of this research.

The issues raised in this chapter indicate the complexity of the phenomenon of abusive relationship. The importance of understanding the cycle of violence, myths associated with regard to gender-based violence and some remedies of the South African Government to address gender-based violence, have also been scrutinised.

The chapter further demonstrated that gender-based violence in a domestic relationship has far-reaching consequences for the individual, such as child/ren, women and extended family members who are the victims of violence even if they only witnessed the abuse. Therefore, no intervention can be in isolation, a holistic approach in dealing with victims of violence (in line with a directory on the network of service providers in each community), is recommendable for speedy references to other stakeholders. Service providers should be well-informed about the cycle of violence in order to understand the phenomenon; which services are available to the most vulnerable and that every victim of abuse has his/her own choices and opportunities.

The following chapter will outline the progression of legislation framework for victims of abuse. The chapter will further demonstrate the democratic movement, from 1948 until recently.

CHAPTER 3

Progression of legislation framework for victims of abuse: internationally and South Africa

Introduction

South Africa's transition from apartheid to a democratic state coincided with and, in many respects, provided the impetus for changes in equality of gender roles and protecting victims from violence. This initiated a concerted effort to advance women's and children's rights, as well as the rights of victims of crime and violence in general. In this chapter the researcher will, among others, focus on the contributions of the South African government and commitment to the protection of victims of violence through the ratification of international instruments and the development of policies, strategies and legislation. This chapter will attempt to outline developments in national and international law reform, which are aimed at the protection of vulnerable groups, such as women and children.

3.1 Overview on the development of Human Rights

Gender-based violence is a form of discrimination and a violation of human rights. In a United Nations study (United Nations 2006: 28) on violence against women.....states that the pervasiveness of violence against women cuts across the boundaries of nation, culture, race, class and religion and points to its roots in the patriarchal system - the systematic domination of women by men. In recognition of this injustice, endeavours across the globe are aimed at the promotion of gender equity and equality. This happens through the efforts of various governments when they sign various regional and international conventions, treaties, declarations and protocols.

In retrospect, the human rights movement assists to gain understanding of the developments of the Human Rights Movement (since 1948). This will be discussed comprehensively in the next section.

3.2 Victims' Rights: International and national perspectives

The United Nations (UN) Universal Declaration of Human Rights, as quoted from the Integrated Domestic Violence Training Manual (2004:42-45), reads as follows:

- 1948** United Nations (UN) Universal Declaration of Human Rights
- ✓ Article 1: All human beings are born free and equal in dignity and rights. One should act towards one another in a spirit of brotherhood.
 - ✓ Article 2: Everyone is entitled to all the rights and freedoms set forth in this declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.
- 1976** UN International Covenant on Civil and Political Rights
- 1976** UN International Covenant on Economic, Social and Cultural Rights
- 1981** UN Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)
- ✓ Article 2: State parties shall condemn discrimination in all its forms of discrimination against women.
 - ✓ CEDAW was ratified and signed by South Africa on 16 December 1996.
- 1985** United Nations Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power. This Declaration states that all victims of crimes and abuse of power must be treated with respect

for their dignity. It imposes a duty upon service providers to be responsive to their special needs.

1986

African Charter on Human and Peoples' Rights:

- ✓ The African Charter includes the right of women to equal treatment.
- ✓ Imposes a positive obligation on states to eliminate every form of discrimination against women.
- ✓ Mandates the protection of the rights of women and children as stipulated in international declarations and conventions.
- ✓ Requires States to be conscious of the values of African civilization and the duty to preserve and strengthen positive African cultural values.

1989

Convention on the Rights of the Child:

- ✓ This Declaration imposes a duty upon States to protect those rights, which include the right to be protected from exploitation, physical abuse, mental abuse, sexual abuse, economic abuse, and from any type of violent treatment.

1992

CEDAW General Recommendation:

- ✓ Lays down the nature of state duties to address violence against women and endorses that it is a form of discrimination.

1993

The UN Declaration on the Elimination of Violence Against Women states that:

- ✓ "Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women."
- ✓ Violence against women is a health, legal, economic, educational, developmental, and above all, a human rights issue.

1994

Commission of Human Rights appointed the first UN Special Rapporteur on Violence Against Women.

- ✓ Governments that fail to take action against perpetrators of violence against women are as guilty as the perpetrators.
- 1995** The Beijing Platform of Action and Declaration - Fourth World Conference on Women.
- ✓ Included the elimination of all forms of violence against women as one of its twelve strategic objectives.
 - ✓ Listed concrete actions to be taken by governments, the UN, international and non-governmental organizations, in the process of the elimination of violence against women.
- 1996** Ratification of CEDAW by South Africa.
- ✓ The Ratification implies that the provisions of CEDAW, including the duties imposed on state parties to address violence against women, are now also legally binding on the South African government.
- 1998** SADC Declaration on Gender.
- ✓ Adopted by Heads of State - Addendum on Prevention and Elimination of Violence Against Women adopted.
- 1999** UN Optional Protocol for CEDAW, states that the Committee may:
- ✓ Receive and consider complaints from individuals or groups.
 - ✓ Conduct confidential investigations and issue urgent requests for governments to take action to protect victims from harm.

This completes the description of the development of the Human Rights Movement. The United Nations Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power contributed towards all endeavours in South Africa. These include the development of amongst others, human rights such as security and freedom, that are translated with the development of legislation, programmes and services for victims of crime and violence. This Declaration is translated in the Bill of Rights of the Constitution of the Republic of South Africa, Act 106 of 1996.

3.3 The Constitution of the Republic of South Africa, Act 108 of 1996

South Africa's signature legislation is the Bill of Rights in the Constitution of the Republic of South Africa (1996). Section 1 of the Constitution provides that the South African state is founded on the values of:

- a) human dignity, the achievement of equality and the advancement of human rights and freedoms and
- b) non-racialism and non-sexism

Specific rights that protect every citizen of South Africa against any form of violence, as reflected in the Constitution of the Republic of South Africa, are as follows:

Section 7 (2): The state must respect, protect, promote and fulfill all the elements in the Bill of Rights.

Section 9 (1): Everyone is equal before the law and has the right to equal protection and benefit of the law.

Section 9 (3): The state may not unfairly discriminate, directly or indirectly, against anyone on any grounds, eg race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, sexual orientation, age, disability, religion, conscience, belief, culture, language and birth.

Section 10: Everyone has inherent dignity and everyone has the right to have their dignity respected and protected.

Section 11: Everyone has the right to life.

Section 12: Everyone has the right to freedom and security of the person, which includes the right to be free from violence from either public or private sources. In addition, everyone has the right to bodily and psychological integrity, which includes the right to security and control over their own body.

The Constitution of the Republic of South Africa (1996: Article 1) defines gender-based violence, that is, violence which is directed against a woman because she is a woman or which affects women disproportionately, as discrimination. This

includes acts that inflict physical, mental or sexual harm, or suffering threats of such acts, coercion and other deprivations of liberty. Gender-based violence may breach specific provisions of the Convention, regardless of whether those provisions explicitly mention violence.

Gender-based violence, which impairs women's enjoyment of human rights and fundamental freedoms under general international law or under human right convention, is discrimination within the meaning of Article I of the Convention. The South African Government embraced the Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power of the General Assembly of the United Nations by the establishment of the National Crime Prevention Strategy, as outlined below.

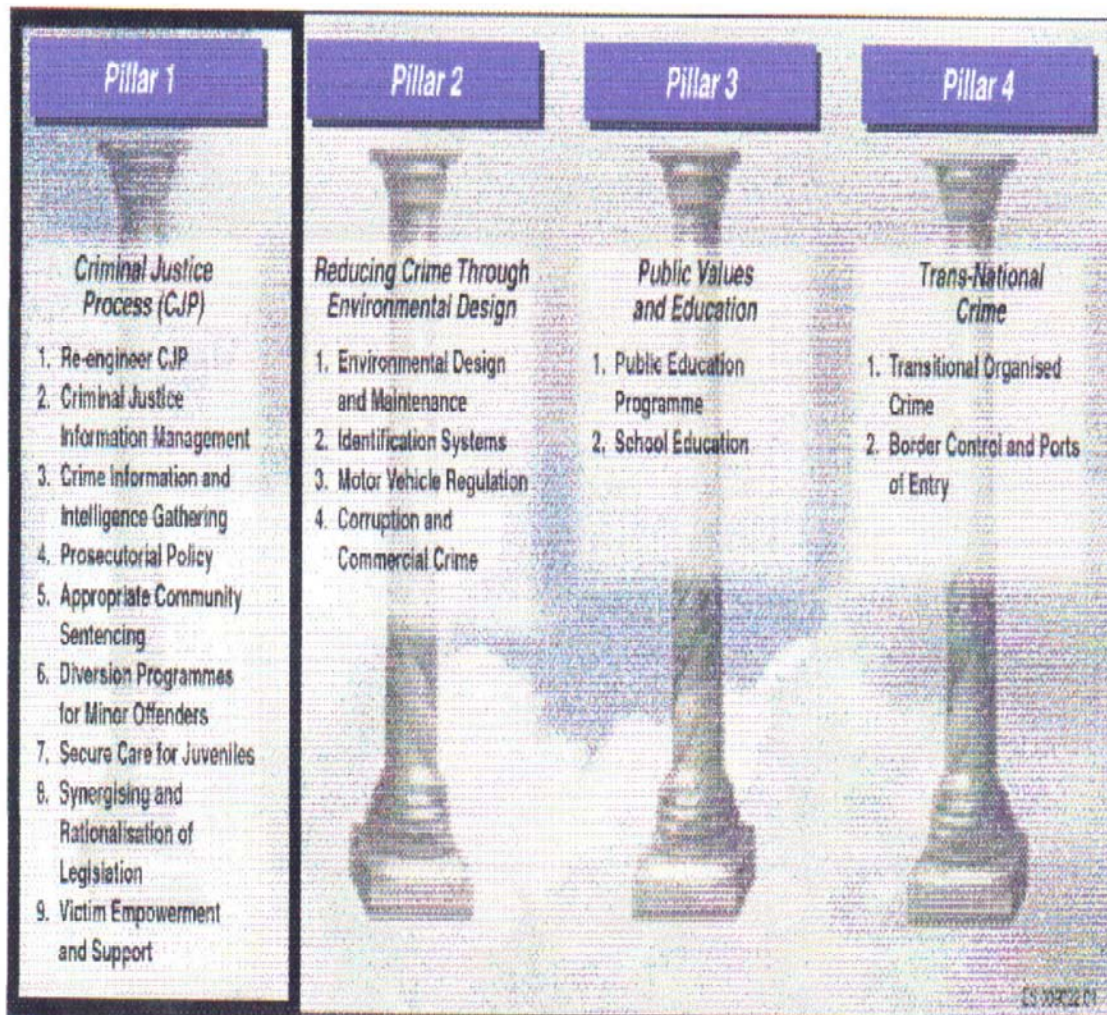
3.4 National Crime Prevention Strategy

The South African Government recognized that crime is a complex social problem with complex social and legal consequences. Internationally, the needs and rights of victims were recognized and addressed through, among others, the adoption of the Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power, by the General Assembly of United Nations on 29 November 1985. South Africa is a signatory to this convention. The Declaration is based on the philosophy that victims should be adequately recognized and treated with respect for their dignity. Victims are entitled to access to the mechanisms of justice and prompt redress for the harm and loss suffered. They are also entitled to receive adequate specialized assistance in dealing with emotional trauma and other problems caused by the impact of victimization. (Victim Empowerment Programme Fact Sheet 2005)

The South African government's response to the United Nations General Assembly's Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power (1985) was translated into the South African National Crime Prevention Strategy.

Figure 3.1 below illustrates Four Pillars of the National Crime Prevention Strategy (NCPS). Pillar 1 reflects the Criminal Justice Process (CJS) and the reader's attention is drawn to number 9 within Pillar 1, where the Victim Empowerment Programme (VEP) originated from. (Interdepartmental Strategy Team, 1996:6).

Figure 3.1 The four pillars of the NCPS



The National Crime Prevention Strategy (NCPS) was announced in May 1996 and officially launched in August 1998. However, implementation only started in January 1999, after a lengthy process of obtaining approval of the inter-sectoral business

plan. (National Crime Prevention Strategy, Victim Empowerment Programme, September 1998).

The Justice Crime Prevention System (JCPS) was approved in 1999 as an improvement on and with a view to broadening the focus of the NCPS to also cover issues beyond the Criminal Justice System as well. The main objective of the JCPS is to focus government efforts and resources jointly, in addressing the incidents of crime, public disorder, inefficiencies in the justice system and all those aspects of society that have the most negative effects on development.

The JCPS Cluster identified several additional strategic interventions over and above the NCPS pillars. Areas of focus pertaining to domestic violence are the following:

- Social crime prevention
- Human resource development
- Quality service delivery and
- Private-public partnership

The JCPS framework incorporates measures that seek to achieve an integrated response to violence against women. The following diagram summarises the integrated approach of the JCPS to violence against women.

Figure 3.2 Programmes to address Violence against Women and Children



Figure adapted from Beijing +10 Report 2005

Figure 3.2 illustrates that the refined integrated approach to violence against women covers all spheres of life that impact on violence against women. This includes environmental redesign, poverty alleviation and moral regeneration. At the level of role players, the model recognizes that all areas in society need to be mobilized to play a role in the prevention and eradication of violence against women.

With regard to the prioritization of crimes, South African measures in respect of violence against women, have thus far given priority to domestic violence and sexual offences, with emphasis on rape. For example, the integrated response of the JCPS to violence against women, incorporates a National Anti-rape Strategy

and a Policy Framework and Shelter Strategy for Abused Women and their children. (Department of Social Development: 2003). The Victim Empowerment Programme was established in response to the strategy of the government.

3.5 Victim Empowerment Programme (VEP)

The obligation to establish the Victim Empowerment Programme was vested in the national Department of Social Development, in partnership with their provincial counterparts. The Victim Empowerment Programme (VEP) Terms of Reference (2005:1) indicates that the approach of the VEP is strongly based on building and maintaining partnerships between government and Civil Society Organisations (CSOs), volunteers, business, academia, research institutions and faith-based organisations.

3.5.1 National Policy Guidelines for Victim Empowerment

The National Policy Guidelines for Victim Empowerment (2009:6-14) is an intersectoral programme, explicitly founded on principles of restorative justice and service delivery to victims of crime. At a principle level it establishes an important recognition that victimization, in itself, constitutes human rights violation. It therefore attempts to shift the emphasis of the state's responses to crime from conviction of the perpetrator to services for the victim. Due to the fact that victimization is contextual – affecting different victims and different categories of victims in different ways – policy advocates a responsive, individualized approach to dealing with victims of crime, regardless of any objective perception of its seriousness (Department of Social Development, 2004). The six identified priority areas for implementation of this policy refer specifically to areas of victimization within which the victim is often already vulnerable, including violence against women, domestic violence. These are outlined on the next page:

3.5.2 Some priority areas in the Victim Empowerment Programme Policy Guidelines

- **Violence Against Women**

The vulnerable status of women is widely acknowledged and international conventions have been drafted to improve the protection of this group. Conventions include the Convention on the “Elimination of All Forms of Discrimination against Women” (1981). The SA government has ratified these Conventions, and in doing so government took upon itself the responsibility to protect women by means of the Domestic Violence Act, 116 of 1998. The Domestic Violence Act can be perceived as a vehicle to protect vulnerable groups, such as women, who experience abuse in a domestic relationship and who need protection from the police to survive.

Research tends to refer to domestic violence as gender-based violence, because it evolves in part from patriarchy that defines our society. “Whilst the government has taken significant steps to improve the response of the state to violence against women, women in South Africa-, who have been the targets of sexual or other assault-, continue to face a system that is often hostile to their efforts to seek redress. The argument that investment in prevention should at least balance the spending on law enforcement and response to violence is therefore not new. The National Crime Prevention Strategy (1996) spelled out very clearly that early intervention and prevention programmes are essential to a safe society. Investment in prevention is still a challenge.

- **Child Abuse**

The vulnerable status of children is also generally recognized and international conventions have been established to improve the protection of children. Conventions include the “United Nations Convention on the Rights of the Child” (1979) that South Africa ratified on 16 June 1995. Child abuse is a very sad, but a real element of victimisation in this country. Children are abused by supposed

caregivers, by family members and strangers. The Children's Act 38 of 2005 protects children under the age of 18 years who are in need of care and protection. The Criminal Law (Sexual Offences and Related Matters) Amendment Act, 32 of 2007:2) provides comprehensive remedies to address the particular vulnerability of children and mentally disabled persons in respect of sexual abuse or exploitation of boys and girls younger than 16 years. There are also special provisions relating to the prosecution and adjudication of consensual sexual acts between children older than 12 years, but younger than 16 years.

- **Domestic Violence**

The Consolidated Report (2008:9-10) argues that the incidences of domestic violence in South Africa are very violent and are increasing. The research found that 83% of the abuse takes place at home and the majority of adult victims are women.

Domestic violence includes physical-, sexual-, economic-, emotional-, verbal and psychological abuse, intimidation, harassment, stalking, damage to property and entry into complainant's residence without consent. The Domestic Violence Act 116 of 1998 provides remedies for those who need intervention from the Law as outlined in 3.7.

- **Victims of Sexual Assault**

The Government of South Africa acknowledges that rape and sexual violence are deplorable crimes that are crippling the nation, its new-found stable democracy and its international image. Addressing this challenge that permeates every economic, racial, religious and social class of South Africa and which begs an interrogation of the country's moral and ethical codes, has not proved easy. This is simply because rape has no identifiable face – it cannot be segmented and categorized, making possible 'at risk' analyses difficult.

According to Crime Information Management–South African Police Service (SAPS) Rape cases (2001-2007) reported to SAPS are over 36,190 incidents reported during 2007. The assumption is that many other victims of rape do not lay any criminal charges and therefore the actual phenomenon is much higher. Although even the reported rates are so high, less than one third of reported cases of rape and sexual crimes reaches the courts or result in a successful prosecution. There is no estimate of the 'actual' levels of sexual violence.

The Criminal Law (Sexual Offences and Related Matters) Amendment Act 32 of 2007 (2007:2) deals with all legal aspects relating to sexual offences in a single piece of legislation and covers issues such as:

- Rape, applicable to all forms of physical penetration without consent, irrespective of gender
- Sexual assault, applicable to all forms of sexual violation without consent
- Criminalising certain compelled sexual acts
- Providing certain services to certain victims of sexual offences, including affording a victim of certain sexual offences the right to apply that the alleged perpetrator be tested for his or her HIV status and the right to receive information.

The South African Government has created structures within the Presidency such as the Office on the Rights of the Child (ORC) and the Office on the Status of Women (OSW), as well as mainstreaming gender within government departments, especially those departments responsible for addressing women's and children's rights.

On instruction from the Cabinet, the Government developed a Rape Strategy under the leadership of the Department of Justice & Constitutional Development, to be led by the Sexual Offences and Community Affairs Unit (SOCA) of the

National Prosecuting Authority (NPA). SOCA developed an Inter-departmental Management Team (IDMT), comprising the following national departments: Safety and Security, Education, Social Development, Correctional Services, Justice & Constitutional Development, Health and Treasury. SOCA established Thuthuzela Care Centers at hospitals to offer rape survivors the best available free services. Interdepartmental Management Task Team (IDMT) Monitor Report (2002:6)

Abuse of Older Persons

Although other forms of violence within the family have received increasing attention over recent years, including the physical and sexual abuse and neglect of children and domestic violence, abuse of older persons remains relatively obscured. Nyaredi (2009:11) indicates that some types of abuse of older persons are well known in the Republic of South Africa. These abuses and neglect include:

An ineffective social security system. This leads to mismanagement of pay points. Government Batho Pele principles of client services first! The irony is that government officials are slow and delay applications for older persons pensions. Nyaredi (2009:11) further argues that older people are easy targets for muggings, robbery, assault, rape and murder. There is a growing concern about the increasing number and severity of cases reported by the media and other sources. The Older Persons Act 13 of 2006 makes provision, among others, for compulsory reporting of the abuse of older persons to the Director-General of the Department of Social Development or the South African Police. (Older Persons Act 13 of 2006:24)

Abuse of People with Disabilities

People with disabilities, particularly women, appear to be at the same risk for emotional, physical, financial, and sexual abuse as women in general. However, researchers believe that they are more likely to experience a longer duration of

abuse than women who are not disabled, in view of their incapability to respond immediately, depending on the level of disability. The Disability Action Research Team (2006:32) argues that elderly people with disabilities are vulnerable to social security in acquiring official documentation. The administration is problematic in terms of accessing grants. The disability and old age pension is the primary source of income for the family and the elderly disabled persons are open to abuse and financial exploitation.

Disability Action Research Team (2006:48) recommended, in the National Research Study to identify Social Needs concerning People with Disabilities in South Africa, that the Department of Social Development should promote the concept of Psycho-social Rehabilitation (PSR). This should be done in order to improve the mental health of individuals (disabled children, disabled youth, disabled adults, and disabled older persons) and as part of Victim Empowerment Programmes (VEP).

Present legislation provides mechanisms to deal with this vulnerable group, eg the Domestic Violence Act 116 of 1998, Older Persons Act 13 of 2006, and the Criminal Law (Sexual Offence and Related Matters) Amendment Act 32 Of 2007.

3.5.3 Mandate of the Victim Empowerment Programme in South Africa

The leadership role of the Department of Social Development requires it to co-ordinate, manage and facilitate the implementation of the National Policy Guidelines for Victim Empowerment (2009), as proposed in the Draft Integrated Victim Empowerment Strategy (2006: 2007-2010). The Victim Empowerment Management Forum is responsible to provide strategic direction on victim empowerment related issues. It is furthermore expected from each role player to also accept responsibility to develop their own internal victim empowerment-related strategies, policies, structures and programmes. Due to the fact that the VEP is multisectoral and deals with crime prevention, the psycho-social consequences of crime and violence, and

the Criminal Justice System (CJS), the reporting protocol of the VEP is to both the Heads of the Social and the Justice Crime Prevention (JCPS) Clusters in government.

The VEP is accommodated within different directorates in the various government departments, eg Justice and Constitutional Development, National Prosecuting Authority (NPA), South African Police Services, Correctional Services, Health, Education and Social Development. The Department of Housing was co-opted to address, among others, women's housing needs. One of the issues that was identified during deliberations on risk factors in the review of the Integrated Victim Empowerment Strategy 2006, was the fact that most officials who were part of the inception of the programme moved on in terms of their career paths. Originally, nine full time programme managers were appointed (one manager per province). Some contracts were not reviewed and existing programmes within provincial departments of Social Development took responsibility for these contracts on a basis of 25% or 50% of the budget allocated to them in order to manage the programme. The one exception was Gauteng Province. Sustainability of the programme and services crippled the Victim Empowerment Programme. This assumption was supported by the findings of Strategy and Tactics on their Report on an Impact Analysis (2004) on the establishment of VEP projects by Departments, as well as projects by Community Based Organisations (CBOs) and Non-Governmental Organisations (NGOs). Nel & Kruger, in their publication, 'From Policy to Practice: Exploring Victim Empowerment Initiatives in South Africa,' quote Camerer & Nel, 1996, quoted in Nel & Kruger, (1999:18) stating: "Many role-players are still unaware of the details of the NCPS, let alone the VEP, and concern has been expressed in certain quarters regarding Welfare as the lead department, given their 'soft' image and lack of resources."

3.5.4 An Impact Analysis of the Victim Empowerment Programmes

The former national Department of Welfare (now Department of Social Development) received R3,3 million from the Reconstruction and Development Programme during 1999. These funds were distributed to organisations which had submitted approved business plans via their provincial departments of Social Development. A committee at national level approved the business plans in accordance with the submitted business plans and reported back to the provincial departments of Social Development on the successful organisations that received funds, eg victim support centres and shelters for abused women and their children.

A study, *Strategy and Tactics* (2004: 46-49), indicated that respondents raised issues about the role of both the National and Provincial Departments of Social Development during interviews with respondents on the issue of support for the Impact Analysis of Victim Empowerment Programmes. The respondents expressed that they had experienced very little interest in their work and projects from the Departments of Social Development in their areas of operation. Most respondents were of the opinion that there was no co-ordination at either provincial or national level and there was an awareness that projects operated in a vacuum and each project's members did things as they saw fit. Respondents were not sure what role either national or provincial offices ought to be playing with regards to VEP.

The *Strategy and Tactics* (2004:49) project further states that projects which they were able to contact were functioning well under the circumstances. Projects were rendering services which are extremely important, particularly taking into consideration the level of different forms of crimes and abuse taking place in the country. Further concerns which were raised are:

- Funding criteria of projects

- Interest in projects by both provincial departments and the national department
- Shortage of and provision for social workers and
- Guidelines on how to operate victim empowerment projects, which also include shelters and one-stop service centres for victims of abuse.

As mentioned above, the Victim Empowerment Programme operates inter-sectorally as illustrated in the National Policy Guidelines for Victim Empowerment (2009:22).

Despite all the endeavors of government to address issues of violence against women and children, the Victim Empowerment Policy is mute with regard to a balanced approach. This implies that perpetrators, and programmes for perpetrators, are not identified as a target group to bring about an attitude change in the prevention of gender-based violence. This statement, however, does not imply that there is nothing on the cards with regard to perpetrator programmes. It basically indicates that perpetrator programmes are not a priority area within the Department of Social Development and therefore perpetrator programmes are not co-ordinated.

One of the objectives within the first VEP Strategic Business Plan (1998) was to fast-track the Service Charter for Victims of Crime. This will be discussed in the next section.

3.6 Service Charter for Victims of Crime in South Africa

In the foreword to the Service Charter for Victims of Crime in South Africa (2004), the Minister of Justice and Constitutional Development, Mrs BS Mabandla states that the "Victims' Charter" is an important instrument in promoting justice for all. The Victims' Charter is compliant with the spirit of the South African Constitution, section 243, and the United Nations Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power. The Minister further states that the Victims' Charter and the minimum standards are important instruments

elaborating and consolidating rights and obligations relating to services applicable to victims and survivors of crime in South Africa.

It is of the utmost importance that the internationally accepted basic victims' rights, as agreed upon by the United Nations and in the South African Victims' Charter, be entrenched. They are as follows:

- The right to be treated with respect and dignity
- The right to offer information
- The right to receive information
- The right to legal advice
- The right to protection
- The right to compensation

The strategic themes for the implementation of the Victims' Charter are as follows:

- Eliminate secondary victimization
- Put the victim in the center of the Criminal Justice System
- Attain and maintain minimum standards
- Provision for victim's resources

The Service Charter is compliant with the rights of freedom which include:

- The right to life
- The right not to be subjected to torture or to cruel, inhuman or degrading treatment or punishments
- The right to equal protection according to humanitarian norms in times of international or internal armed conflict
- The right to liberty and security of person
- The right to equal protection under the law
- The right to equality in the family

- The right to the highest standard attainable of physical and mental health
- The right to just and favourable conditions of work

Table 3.1 International Rights recognized in the South African Constitution, the Service Charter for Victims of Crime and in the Domestic Violence Act, 116 of 1998

International Rights	Recognized In South African Constitution, the Service Charter or in the Domestic Violence Act
Right to lay a criminal complaint against the abuser	<p>Equal protection and benefit of the law- section 9 of the Constitution.</p> <p>Access to court – section 34 of Constitution [subject to qualification**]</p> <p>⇒ Confirmed in Domestic Violence Act</p> <p>Section 4. (b) the right to lodge a criminal complaint against the respondent</p>
Right to be informed about rights, different legal options and progress of case	<p>Access to information - section 32 of Constitution [subject to qualification**]</p> <p>Paragraph 3 of Charter</p> <p>⇒ Confirmed in section 2 and 4 (2) of the Domestic Violence Act</p> <p>Section 2: Duty to assist and inform complainant of rights</p> <p>Section 4 (2): If the complainant is not represented by a legal representative, the clerk of the court must inform the complainant:</p> <p>(a) of the relief available in terms of the Act</p> <p>(b) of the right to also lodge a criminal complaint</p>
Right to be advised on victims services, the right to receive information and the right to make own choices	<p>Equal protection and benefit of the law – section 9 of Constitution</p> <p>Paragraph 3 of Charter</p> <p>⇒ Confirmed in Domestic Violence Act</p> <p>Section 2 (a) assist the complainant as may be required in the circumstances, including assisting or making arrangements for the</p>

	<p>complainant to find a suitable shelter and to obtain medical treatment</p> <p>(b) hand a notice containing information as prescribed to the complainant in the official language of the complainant's choice</p> <p>(c) explain to the complainant the content of the notice in the prescribed manner, including the remedies at his or her disposal and the right to lodge a complaint</p>
Right to protection from further violence	<p>Right to freedom from violence – section 12 of Constitution</p> <p>Right to dignity – section 10 of Constitution</p> <p>Right to life – section 11 of Constitution</p> <p>Paragraph 5 of Charter</p> <p>Section 6 & 7 of the Domestic Violence Act</p> <p>Section 6: Issuing of protection order</p> <p>Section 7: Court's powers in respect of protection order</p>
Right to legal advice and legal representation	<p>Paragraph 4 of Charter</p> <p>⇒ Confirmed in Domestic Violence Act in Section 4 (2) and (4):</p> <p>(2)</p> <p>If the complainant is not represented by a legal representative, the clerk of the court must inform the complainant:</p> <p>(a) of the relief available in terms of the Act</p> <p>(b) of the right to also lodge a criminal complaint</p> <p>(4)</p> <p>Any minor, or any person on behalf of a minor, may apply to the court for a protection order without the assistance of a parent, guardian or any other person</p>
Right to apply for a protection order	<p>Right to freedom from violence – section 12 of Constitution</p> <p>Equal protection by the law – section 9 of</p>

	<p>Constitution</p> <p>Paragraph 5 of Charter</p> <p>⇒ Confirmed in Domestic Violence Act Section 6 (1) (b):</p> <p>The application contains <i>prima facie</i> evidence that the respondent has committed or is committing an act of domestic violence, the court must issue a protection order in the prescribed form</p>
<p>Right to apply to have firearms or dangerous weapons in possession of abuser confiscated</p>	<p>Right to freedom from violence – section 12 of Constitution</p> <p>Paragraph 5 of Charter</p> <p>⇒ Specifically set out in Domestic Violence Act Section 9 – Seizure of arms and dangerous weapons</p>
<p>Right to have case heard in private</p>	<p>Right to privacy – section 14 of Constitution</p> <p>Right to dignity – section 10 of Constitution</p> <p>Paragraph 1 of Charter</p> <p>⇒ Specifically set out in Domestic Violence Act Section 11: Attendance of proceedings and prohibition of publication of certain information</p>

Adapted from the Integrated Training on Domestic Violence Manual-Comparison Chapter (2002:3)

** The notes “subject to qualification” relate to the development of these rights either in subsequent legislation or in the broader context of the criminal justice system.

The Domestic Violence Act will be focused on in the following section.

3.7 The Domestic Violence Act (Act 116 of 1998)

In recent studies Artz & Smythe in Davis & Snyman (2005:131-139) embraced the role of the law in advancing victim’s rights. The ratification of a number of important and influential international instruments, as reflected in previous pages in this chapter, confirm in themselves a shift in the international consensus towards a victim-centered and human rights-oriented approach to victims of crime.

The South African Constitution (Act 108 of 1996) has provided a useful basis for the development of victim-based legislation and policies. The inclusion of the right to freedom from all forms of violence in Section 12 (1) (c) of the Constitution has, for example, been used as the legal platform for emerging legislation to combat violence in the form of the Domestic Violence Act, which was implemented on 15 December 1999.

Prior to 1999, The Prevention of Family Violence Act (Act 133 of 1993) was the first attempt by the legislature to deal specifically with family violence. Artz & Smythe in Davis & Snyman (2005:131-139), argues that the Prevention of Family Violence Act was limited in a number of respects. Only individuals who were married, by civil or customary law, or those in common-law marriages could access an interdict under this Act. Many people in relationships, such as dating couples not living together and same sex partners, had to find recourse in other, less accessible, legal remedies such as High Court interdicts. The Act also did not define "family violence", and justice officials exercised wide discretion in determining what behaviour constituted abuse. This resulted in different opinions between jurisdictions about who qualified for an interdict and who not. Artz & Smythe in Davis & Snyman (2005:131-139) further state that it was also not clear whether emotional or psychological abuse, which was not perpetrated in conjunction with physical harm, qualified as abuse under this Act. Family violence, accordingly, had no clear legal meaning and was left to the discretion of individual magistrates and judges, uninformed of the basic notions such as the cycle of violence or learned helplessness.

3.7.1 The purpose of the Domestic Violence Act

The purpose of the Domestic Violence Act (1998: 2) is to:

- Afford the victims of domestic violence the maximum protection from domestic abuse which the law can provide.

- Introduce measures which seek to ensure that the relevant organs of state give full effect to the provisions of this Act.
- Convey that the state is committed to the elimination of domestic violence.

The Act recognizes the following:

- Domestic violence is a serious social evil
- There is a high incidence of domestic violence within South African society
- Victims of domestic violence are among the most vulnerable members of society
- Domestic violence takes on many forms

Acts of domestic violence may be committed within a wide range of domestic relationships and the remedies currently available to the victims of domestic violence have sadly proved to be ineffective. Therefore, the Domestic Violence Act (1998:1-2) makes provision to address a wide range of different types of abuse as defined below.

3.7.2 Definition of domestic violence as in the Domestic Violence Act

Domestic violence is defined in the South African Domestic Violence Act, 1998 (116 of 1998) in terms of a broad definition of “domestic relationship” in which violence can occur, including the parent of a child or “persons who have or had parental responsibility for that child”, as well as sharing the same residence.

Section 1 of the Domestic Violence Act (1998:1-2) defines the act of domestic violence very broadly. Forms of abuse in terms of the Domestic Violence Act are as follows and may include some of the actions as stipulated under each sub-heading as reflected in the Integrated Domestic Violence Training Manual (2004:23–25).

Physical abuse:

- Shoving, slapping, punching, kicking, throttling, biting and beating up
- Assault with objects, guns, knives or any other dangerous weapons
- Threats to shoot or kill the victim
- Burning the victim with petrol, benzine or any other flammable substance
- Any act or threatened act of physical abuse to a person (including any of the above acts)

Sexual abuse:

- Rape, attempted rape, indecent assault
- Forcing the victim to perform sexual acts which she is uncomfortable with.
- Ongoing verbal abuse with sexual slurs such as bitch, whore, slut, etc
- Forcing the victim to watch pornography and/or enact the pornographic material
- Forcing the victim to have intercourse or perform sexual acts with friends, colleagues or strangers
- Unwanted infection with HIV and sexually transmitted diseases

Economic abuse:

- Sale of shared property, among others, livestock, matrimonial house or any premises without the consent of the victim
- Accessing a joint bank account for personal use without the consent of the victim
- Preventing the victim from being employed or earning an income
- Employing the victim without a salary
- Failure to pay maintenance

Emotional, verbal and psychological abuse:

- Constant insults, ridicule or name-calling

- Constant humiliation - privately and/or publicly
- Constantly showing obsessive possessiveness or jealousy, resulting in a serious invasion of the victim's privacy, liberty, integrity or security
- Sleep deprivation
- Ongoing accusations of infidelity
- Repeated threats of violence or death to cause emotional pain
- Constantly blaming the victim for all his problems

Intimidation:

- Sending written or verbal death threats to the victim
- Sending beheaded dolls, small coffins, dead flowers or dead pets to the victim

Harassment:

- Repeatedly watching the victim outside or near her house, workplace, school or business premises or any place where she is present
- Repeatedly loitering outside or near places which the victim frequents
- Repeatedly phoning the victim or causing any other person to phone her whether or not the caller speaks to the complainant

Stalking:

- Constantly approaching the victim and asking or demanding to talk to her against her will

Damage to property:

- Breaking a window or door to gain entry into the victim's house
- Deflating a/the tyre/s of victim's car
- Burning the complainant's and /or children's clothes or gifts which were bought for them
- Cutting, breaking or damaging (in any other manner) shared furniture
- Selling the victim's belongings without consent

Entry into complainant's residence without consent:

- Using a duplicate key to gain access may also constitute domestic violence

The Act further provides for any other controlling or abusive behaviour toward the complainant where such conduct harms, or has the potential of causing imminent harm to the complainant's safety, health and well-being.

3.7.3 Remedies provided for in the Domestic Violence Act to victims of domestic violence

The Act makes provision for remedies to be utilized in a domestic violence relationship as indicated above. The definition is comprehensive and makes provision for many forms of domestic violence and broadening the range of complainants. The Domestic Violence Act (116 of 1998) makes provision that anyone in a domestic relationship (subject to an act of domestic violence) may apply for a protection order. Artz & Smythe in Davis et al (2005:131-139) state that the protection order granted in terms of the Domestic Violence Act, is a civil order. While the protection order prohibits respondents (abusers) from committing certain acts of violence, the Domestic Violence Act criminalizes domestic violence nowhere. It only criminalizes the breach of the protection order and not the actions/behaviour specifically. When acts of domestic violence constitute recognized crimes (such as common assault, assault with the intent to do grievous bodily harm, indecent assault, rape, incest, attempted murder, malicious damage to property, pointing a firearm, *crimen injuria* and even the abuse of animals), criminal charges can be laid depending on the victim's financial circumstances and if she can afford the financial implications thereof.

In addition to the Act, specific duties/responsibilities are imposed on members of the South African Police Service (section 2 and 8). This provision is an attempt by the legislature to address the problem of translating paper law into effective

practice, and to overcome the effects of negative attitudes exhibited by some police officers to complaints of domestic violence. In this respect, the Domestic Violence Act places a duty on any police officer at the scene of a domestic violence complaint, to render assistance to the victims. Such assistance may, according to Section 2 (a), include help in finding suitable shelter and obtaining medical attention. This is the only reference to shelters in the Domestic Violence Act which researchers perceived as a gap. Artz & Smythe in Davis & Snyman (2005:131-139) further mention that failure to comply with the duties set out in the Act, or in the National Instruction and Policy Directives issued in terms of the Act, constitutes misconduct and must be reported to the Independent Complaints Directorate. The National Commissioner is obliged to submit reports to parliament every six months, regarding the number of complaints received against the police, disciplinary proceedings instituted as a result of those complaints and the outcomes of such proceedings.

The South African Cabinet has requested a consolidated approach with the implementation of the Domestic Violence Act and an Integrated Domestic Violence Strategy was developed by the then Secretary of the National Crime Prevention Strategy. Each Department took certain responsibilities to operationalise the requirements of the Domestic Violence Act. The National Department of Social Development developed a Policy Framework and Strategy for Shelters for Victims of Domestic Violence in South Africa (2003:2-14). The Shelter Strategy makes provision for the establishment of shelters for victims of domestic violence. The main aim is to protect, support and empower victims by breaking the cycle of domestic violence and ensuring the safety and security of the victim. In addition, the Department embarked on capacity building training programmes for service providers (officials in government and non-governmental organizations) to render more effective and efficient services with regard to the implementation of the Domestic Violence Act. The Department also developed a Resource Directory that

reflects a network of service providers in each province to avoid secondary victimization.

Despite all the legislation, it seems that the implementation of the Domestic Violence Act remains a challenge to the Department of Social Development, due to critical focus areas which vary from province to province. This includes minimum full-time VEP co-ordinators from 2001 to 2007, in order to manage the programme, but it suffers mainly from the lack of a political champion. The programme is managed nationally at the level of Director, who only commits 50% of her time to VEP. (Costing model of the Integrated VEP 2006). A fully fleshed Victim Empowerment Directorate was established during 2007. The focus of the Directorate is on issues of domestic violence, transnational and violent crimes and special projects, such as the management of donor funds.

Further critical problems experienced in the implementation of the Domestic Violence Act, are elaborated on by Artz & Smythe in Davis & Snyman (2005:140-141), for example:

- “Magistrates are reluctant to grant protection orders on the basis of sexual abuse, economic abuse, and psychological or emotional abuse, often requiring that physical abuse be present before they grant relief. Psychological and emotional abuse is often not considered “imminently harmful”. Although it is alleged that perpetrators have access to dangerous weapons in approximately 40% of cases, less than 5% of these are ordered by the court to have the weapon confiscated.
- The police remain reluctant to arrest someone who has breached the protection order unless there is “clear” evidence of physical violence, even though the Domestic Violence Act states that, if there is any evidence of domestic violence (not necessarily physical as reflected in the chapter under the Definition of Domestic Violence), the police must arrest the perpetrator. Artz &

Smythe in Davis & Snyman (2005:141) further states that members of the South African Police Services fail to inform victims to lay criminal charges against the perpetrator or assist them in obtaining a protection order. This is despite the fact that the attack on the victim may often amount to assault, rape or even attempted murder. Instead, police members are sending victims directly to the court. Ironically, only when the complainant lays a criminal charge against the perpetrator do the police members take them to see a medical practitioner. This means that no record is established of injuries sustained, which complicates matters to prove that these injuries were indeed sustained during an incident of domestic violence in later court proceedings. Furthermore, with many police statements, application forms and witness statements of poor quality, missing or even illegible, the situation becomes critical. Of substantial concern are allegations of corruption, especially where the police live in the community and is familiar with the accused.

Where the protection order is breached, the perpetrator is liable to spend up to a maximum of five years in prison. However, sentencing a breadwinner for breaching a protection order is extremely difficult for the courts to do and few have tried creative sentencing options such as "week-end detention", treatment programmes and community service".

Ethembeni (Place of Hope) Community Centre, De Aar in the Northern Province has an informal agreement between officials in the Magistrate Court and the Centre to immediately refer victims of domestic violence to the Community Centre, when they apply for a protection order. The Criminal Asset Recovery Account (CARA) Funds (2007:2) report on Ethembeni (Place of Hope) Community Centre states that the magistrate and prosecutor refer domestic violence cases to the Trauma Centre first, before the Court considers issuing a protection order. The Centre submits a report to the court after six weeks of intervention, with

regard to the progress pertaining to the intervention and further action regarding the case.

3.8 Some global legislation and promising practices and challenges for implementation

The United Nations Study of the Secretary-General (2006:101) states that good and promising practices have been developed by many countries to meet their obligations in terms of human rights to address violence against women. Innovative work has been done by many non-governmental women's organizations to find ways to end violence against women.

According to Artz & Smythe in Davis & Snyman (2005: 134) a UN Standard Guide Handbook for Policy Makers for Implementation, 1999, sets out guidelines and best practice. The handbook provides useful strategies and models for responsive victim-centered responses to crime, from both criminal justice personnel and other providers of social services.

Artz & Smythe in Davis & Snyman (2005:134) agrees that drawing on this international framework has provided the initiative towards the development of models and the enactment of appropriate legislation in comparative jurisdictions. The availability of legislation from other jurisdictions on which to model new laws, made the work of human rights activists in South Africa easier, while at the same time bolstering their position in advocating for similar reforms in this country.

In respect of domestic violence, an initiative by the United Nations Economic and Social Council resulted in a model framework for legislation on domestic violence, which was published in 1996 (United Nations, 1996). In drafting the Domestic Violence Act (Act 116 of 1998), the South African Law Reform Commission (1997:1-251) was able to draw on this model. They also used legislation from various Australian jurisdictions, New Zealand's Domestic Violence Act promulgated

in 1995, the Family Law Act in 1996 in England and Wales, and laws from a number of other American states, including the Minnesota Domestic Abuse Act (Minnesota Statutes Chapter 518B.01), promulgated in 1992. The United States of America, Washington, Press release (2006:1-3) signed The Violence Against Women Act. It is interesting that the United States of America called the Act Violence Against Women, whilst the South Africa Act is called the Domestic Violence Act. The Draft Integrated VE Policy (2007) refers to issues advancing women's and girls' rights. It seems that most countries that have ratified the said obligations, underline that women are the most vulnerable group in society and therefore require protection and support as and when needed.

The United Nations study (United Nations 2006:113) on violence against women.....provides a summary of the status of national laws worldwide on violence against women, which are as follows:

“Eighty-nine States currently have some legislative provisions that specifically address domestic violence. Of these, 60 States have specific domestic violence laws; seven have violence against women laws; one has a gender-neutral law against violence; 14 have specific provisions on domestic violence in their penal codes; five have civil procedures for the removal of perpetrators; and one addresses domestic violence through family law. Twelve of the States with specific domestic violence legislation refer to family-based violence rather than gender-based violence. There are 102 States that are not known to have any specific legal provisions on domestic violence. Twenty states have draft legislation on domestic violence in varying stages of development, with a further four states having expressed an intention to develop specific legislation, or provisions, on domestic violence.”

Legislation pertaining to domestic violence/family violence in some countries is as follows:

3.8.1 Domestic Violence Legislation in Canada

The Asia Specific Forum on Women, Law and Development (2001:13) states that in Canada, the federal government has the authority to draft legislation which will affect all Canadians and this includes the criminal law. Canada does not have a specific "family violence offence" act; an abuser can be charged with any applicable offence. Criminal charges could include assault, assault causing bodily harm, sexual assault, sexual assault causing bodily harm, sexual assault with a weapon, criminal harassment (sometimes called stalking), uttering threats, mischief, intimidation, forcible confinement, attempted murder and murder.

The Department of Justice, Canada (1995-1999:1-2) reflects that provincial governments make laws in areas of provincial jurisdiction including the provision of victim's services. The following four provinces have proclaimed specific legislation on family violence:

- ✓ Alberta: Protection Against Family Violence Act, 1 June 1999
 - ✓ Saskatchewan: Victims of Domestic Violence Act, 1 February 1995
 - ✓ Manitoba: Domestic Violence Stalking, Prevention, Protection and Compensation Act, 29 June 1998
 - ✓ Prince Edward Islands, Victims of Family Violence Act, 16 December 1996
- Yukon province has proclaimed specific legislation on family violence:
Yukon Territory's Family Violence, 11 December 1997

In addition to the above legislation, Ontario's Domestic Violence Protection Act has not yet been proclaimed.

3.8.2 The Violence Against Women's Act in the United States of America

Desk top research was conducted and found Biden (2006:1-3) that the United States of America, Washington, DC signed The Violence Against Women Act on 5 January 2006.

The President's Family Justice Centre Initiative (2007:1-4) showed that the Violence Against Women's Act of the UN States of America provides for comprehensive services and programmes to abused women, which are *among others*, the following:

- ✓ Help for victims: Hotline
- ✓ STOP Violence Against Women Formula Grants Programme. Grants to Indian Tribal Governments Programme
- ✓ Rural Domestic Violence, Dating Violence, Sexual Assault, Stalking, and Child Abuse Enforcement Assistance Programme
- ✓ Legal Assistance for Victims Grant Programme
- ✓ Grants to Reduce Violence Crimes Against Women on Campus
- ✓ Grants to Tribal Domestic Violence and Sexual Assault Coalitions
- ✓ Enhanced Training and Services to End Violence and Abuse of Women Later in Life Programme
- ✓ Education. Training and Enhanced Services to End Violence Against and Abuse of Women with disabilities
- ✓ Safe Havens: (shelters) Supervised Visitation and Safe Exchange Grant Programme
- ✓ Transitional Housing Assistance Grants Programme
- ✓ National Committee on Violence Against Women

The above-mentioned elements deal in one way or another with services and programmes to victims of violence. It is necessary to have these services and programmes available and established to avoid secondary victimization and to address the issue effectively.

3.8.3 Domestic Violence remedies/Legislation in Europe

According to Keltošová (2002a:12) report by the Council of Europe on equal opportunities to Women and Men recommendations includes, among others, the following:

- The Council of Europe should draft a series of actions responding to the need of harmonization of European national legislation to combat domestic violence and to enhance international co-operation in this field.
- Enhance co-operation between the Council of Europe and non-governmental organizations in order to establish a database of organizations and institutions dealing with domestic violence, legislation and statistics across Europe.
- Victims of domestic violence should be provided with free legal advice and assistance before taking legal action.
- Victims of domestic violence should be assisted by the establishment of residential centres, where women can receive psychological support and providing financial support to welfare associations and emergency services.
- Special financial support should be awarded to NGOs, as well as women's associations working with victims of domestic violence.
- Special social protection measures should be adopted or reinforced so that injuries caused to women and children by violent acts, are provided for under social protection schemes.
- Training of medical personnel should be ensured to enable them to identify victims of violence.

The report on equal opportunities to Women and Men, Keltošová (2002a:12) elaborates on Domestic Violence and good practices of the Council of Europe member States which are as follows:

3.8.4 Austria

Keltošová (2002b:13) states that the Federal Act on Protection against Violence in the Family was implemented in May 1997. The law on protection against violence offers victims of violence better protection, by virtue of the fact that it is the offender who has to leave the home. The police work in close collaboration with other stakeholders. An Intervention Centre against Domestic Violence was established as a secondary measure to ensure the efficient implementation of the legislation in order to provide protection against violence. The Federal Minister for Women's Affairs and Consumer Protection and the Federal Ministry of the Interior co-funded five provincial intervention agencies in capitals in Austria.

3.8.5 Belgium

Belgium's action plan to combat violence against women, Keltošová (2002b:13), comprises of prevention, punishment, victim support, and treatment reserved for offenders. This plan was adopted on 11 May 2001. Under Article 20 of the Royal Decree of 31 May 1995, doctors have a duty to report all cases where one of their patients has been a victim of abuse. Their duty to report is an exception to the confidentiality rule.

3.8.6 The Netherlands

The United Nations General Assembly (2007:1) stated that the Women's Anti-discrimination Committee examining Netherlands' Policies on Domestic Violence on 8 October 2007, reflects that the State Secretary for Health, Welfare and Sport had set up women's support centers and shelters in 35 municipalities. Victims' legal assistance bureaus, located throughout the country, provide free legal aid and help victims prepare criminal cases.

A national project, commissioned by The Netherlands' Government memorandum (2002:1-2) ('voorkomen en bestrijden huiselijk geweld'), became a government memorandum 'Private violence – Public Issue' ('Privé geweld – publieke zaak') and was tabled in Parliament on 12 April 2002. It was decided that an

interdepartmental consulting body will supervise the implementation of the activities from the memorandum and when and where necessary, develop new policies in this regard.

3.8.7 Finland

Finland addresses the issue of family violence in terms of the Act on Restraining Orders. The Act was implemented on 1 January 1999. The restraining order provides protection to life, health, freedom or peace of a person. Keltošová (2002b:14).

3.8.8 France

The French Interdepartmental Committee for Women's Rights and Equality was established on 8 March 2000, according to Keltošová (2002a:15). Their task was to evaluate the legislation in force and to carry out a comparative analysis with that of other European countries. They had to appraise current legal practice, and identify innovative actions adopted by some courts, in order to make these more widespread and to improve co-ordination between the various civil and criminal procedures.

3.8.9 Germany

In Germany, the Berlin Intervention Project Against Domestic Violence was initiated in 1995, according to Keltošová (2002a:14). The aim was to co-ordinate measures by all institutions and projects in order to facilitate better protection for abused women and the prosecution of perpetrators.

3.8.10 Latvia

The Non-governmental organisation "Skalbes" provides training on domestic violence for professionals. Subsequent to the training, task teams are established to work on the various legislative issues concerning domestic violence and to develop specific legislation regarding domestic violence. Keltošová (2002b:16)

3.8.11 Malta

Keltošová (2002a:16) mentioned in Malta, under the authority of the Ministry of Social Development, a Social Welfare Development Programme makes provision for, among others, the following:

- ✓ Domestic Violence Unit that provides specialized social workers who support and empower victims of domestic violence, in order to find accommodation in a shelter and to link the victims of abuse with other necessary services and advocate for changes in legislation.
- ✓ Support line 179 – free help line run by trained volunteers.
- ✓ Training of police officials in partnership with Malta Police Force.

3.8.12 Norway

Keltošová (2002:16) states that during 2000, a Programme of Action Against Domestic Violence was launched in Norway. A task team was established, comprising of stakeholders to co-ordinate the implementation of the programme. One of the focus areas is to improve the expertise and competence of personnel and occupational groups, that are likely to be approached by women and staff from shelters for women.

3.8.13 Portugal

Keltošová (2002:17) reflects that Law No 107/99 of 3 August 1999 provides a framework for the establishment of shelters for women victims of violence in Portugal.

3.8.14 Republic of Slovakia

In the Republic of Slovakia, the Act on Social Assistance contains prevention measures against domestic violence. The Act makes provision for counselling, legal protection and social services. Keltošová (2002:17-18) states that at present, there are 23 shelters which can accommodate 247 abused women with their children.

3.8.15 Spain

Certain measures have been implemented in Spain in order to simplify and improve legal procedures with regard to domestic violence prosecutions in the criminal justice system. No trace could be found with regard to shelters for victims of abuse in Spain. According to Keltošová (2002:18), it is expected of the country to include a specific section on violence against women in their annual report.

3.8.16 Sweden

Keltošová (2002:18 & 19) mentioned that in Sweden a new offence has been introduced into the Penal Code, namely "gross violation of a woman's integrity". This implies that if a man commits certain criminal acts within the framework of domestic violence, he will be sentenced for gross violation of the women's integrity, rather than for each single offence which he has committed. The result is that the entire situation of the abused woman will be taken into account. No trace could be found with regard to shelters for victims of abuse.

3.8.17 Switzerland

Switzerland embarked on a national information campaign: Putting an end to violence against women in the home. Keltošová (2002:18)

3.8.18 Turkey

In Turkey the Prevention of Domestic Violence Law No 4320 deals with the protection of the family in a domestic violence relationship. It was implemented on 17 January 1998. Keltošová (2002:19 & 20) A distinguishing element of the measures within this act, is the issuing of a separation order preventing the perpetrators from approaching the family home, obliging them to pay the living costs of other members of the family, preventing them from harassing family members via means of communication or damaging the belongings of family members. The State Ministry Responsible for Women and the Family has distributed information booklets to 80 provinces in Turkey.

3.8.19 United Kingdom

The United Kingdom's remedies are reflected in the Domestic Violence, Crime and Victims Act, 2004. (2004:1773-1779) This Act covers, among others, evidence and procedures with regard to domestic violence in England, Wales and Northern Ireland. Keltošová (2002:20)

The Act defines a "vulnerable adult" as a person aged 16 years or older, whose ability to protect himself from violence, abuse or neglect is significantly impaired through physical or mental disability or illness, through old age or otherwise.

The Act further defines a "child" as a person under the age of 16 years.

"Serious" harm means harm that amounts to grievous bodily harm for the purposes of the Offences against the Person Act 1861 (c:00).

The Act makes provision in Section 56 (2004:1818) for the payment of grants in assisting victims, witnesses or other persons affected by offences. In addition to the mentioned remedies, the Family Law Act of 1996 allows cohabitants, home-sharers and former home sharers to apply for non-molestation and other Court orders regulating the occupation of the family home. Same sex cohabitants are included, but have fewer rights as associate persons "than opposite-sex couples, being as "cohabitants under the Act". According to the South Africa Law Commission, Project 118, Report on Domestic Partnerships, March (2006: 189 & 182). The Civil Partnerships Bill received Royal Assent on 18 November 2004 and came into force on 5 December 2005. It covers the entire United Kingdom.

3.8.20 Northern Ireland

A domestic violence Regional Forum was established in September 1995 to consolidate the main statutory and voluntary interests, as stated by Keltošová (2002:20). The Forum co-ordinates actions as set out in the policy framework. The main focus is:

- Establishing local inter-agency groups in each Health and Social Services Community Trust.
- Awareness campaigns, capacity building programmes for professionals, treatment programmes for first time offenders and perpetrators, action to improve research and establish an information data base.

Northern Ireland produced a publication called: Stopping Crime Stats with You. It provides practical advice to women to assist them in protecting themselves. They developed a Six Steps to Protect Your Home, which includes advice on domestic security and help lines to provide support.

3.8.21 Scotland

Keltošová (2002:20) states that, in Scotland, a report was published in March 1998, under the title Service Provision to Women Experiencing Domestic Violence in Scotland. A Scottish partnership (comprised of representative organizations dealing with domestic violence) was established in 1998 to develop:

- An intervention strategy on domestic violence, taking into account the impact of domestic violence on children and young people.
- Detailed workplan with timescale, cost standards and priority levels of services for women experiencing domestic violence in order to encourage consistent service delivery throughout Scotland, as well as a monitoring framework.

3.8.22 Belarus

According to Amnesty International Press Release (2006:1-4) there were nearly 3,000 women registered as victims of violence in Belarus. Amnesty International Nederland stated that there is a need in Belarus for shelters to accommodate women as victims of domestic violence. It was confirmed by Amnesty International that the government of Belarus is not doing enough to protect the basic rights of women in relation to domestic violence.

The latest report on Belarus: Domestic violence – more than a private scandal - highlights the valuable work of the Belarus NGOs and in the state sector. However, it was found that despite the measurements that government put in place, both practical and legislatively interventions and provisions are still inadequate.

Summary

The chapter outlines the United Nations (UN) Universal Declaration of Human Rights from inception during 1948, and further developments of this nature until 2007. Human Rights movements indicate that women's rights have been transformed into law reform globally. South Africa is a signatory.

The United States of America signed The Violence Against Women Act on 5 January 2006, as reflected in 3.8 of this chapter at the heading, Some global legislation and promising practices and challenges for implementation. This Act is primarily a source of funding for domestic violence agencies in the United States of America. The National Coalition Against Domestic Violence, Denver, states that there is no national registration for shelters in the USA. Some states may require registration, but shelters are mainly nonprofit organisations with guidelines imposed by their funders. Interestingly, in Austria, the Federal Act on Protection against Violence in the Family, stipulates among others, that protection against violence offers victims of violence better protection if the offender has to leave the home. Where grant systems are in place and high rates of unemployment do not play as significant a role as is the case in South Africa, the assumption is made that women and their children will feel secure to a certain extent. They, at least, have with a roof over their heads and need not rely on shelters. In Northern Ireland the government embarked on a programme for first time offenders and perpetrators as a preventative measure in order to educate the offenders and perpetrators.

It is clear from this literature review that endeavors to improve services to victims of abuse are ongoing, as an example of grants, hotlines and shelters indicate. As far as can be ascertained, some shelters have been established for victims of abuse in Berlin (Germany) and Malta. In the Netherlands the State Secretary for Health, Welfare and Sport set up women's support centers and shelters in 35 municipalities.

It seems that the implementation of an effective legal and social system to enhance victim's rights, remains a challenge at political and management levels. Effective enforcement of legislation requires adequate financial and human resources, as well as motivated, empathic individuals and activist groups who care in one way or the other about domestic violence and address the needs concomitant thereto.

In the following chapter, the registration requirements for non-governmental organizations in rendering services at shelters for victims of abuse in South Africa and internationally, as well as the national Department of Social Development Service Delivery Model of South Africa will be examined.

CHAPTER 4

Registration procedures for shelters for victims of abuse: internationally and South Africa

Introduction

The purpose of this chapter is to reflect on the role of the Non-Governmental Organisations (NGOs) in South Africa in the provision and management of shelters for victims of abuse, as well as the role of government. Some international practices will also be presented. Researcher attempts to highlight the procedures and requirements of the state, which service providers should comply with.

There is a prominent presence of NGOs in South Africa. These NGOs operate shelters for victims of abuse in partnership with the Department of Social Development. This Department manages these partnerships by specific registration procedures for NGOs. Some of the requirements are Minimum Standards and the Integrated Service Delivery Model. The chapter further looks at the establishment of shelters over the last decade and the location thereof in line with the provincial population estimates. We further look at intervention methods for victims of abuse in line with life strategies based on theory of Du Toit et al. This theory is based on 19 propositions of Rogers Client-centred therapy. The purpose is to empower victims of abuse to restore and build their self-image. We will first look at the role of non-governmental organisations.

4.1 Non-Governmental Organisations

The Codes of Good Practice for South African Non-profit Organisations (1997:9) defines that a non-profit organisation (also known as Non-Governmental Organisation, Community Based Organisation, Civil Society Organisation, Public Benefit Organisation, Trust or Foundation, Charity, and Religious

Body/Institution), is a collection of people who come together for a common purpose, and agree to formalize a programme to fulfil this purpose. If there are any profits after the financial year, the funds are available to the benefit of the purpose and not to the office bearers.

The Global Civil Society (2004:110) reflects that South Africa's Non-profit Organisations have been shaped by two forces born out of the political arena, namely:

- Corporative tradition of the Dutch settlers that gave civic associations a prominent role in the delivery of public welfare services
- Self-help spirit of the indigenous people

It is well known that, under the apartheid regime (from 1948 to 1994), the white population benefitted most from public welfare services and the black population was to a certain extent discriminated against, as far as equal benefits and access to services were concerned. For example, pensions for black people were less than for whites; the forced establishment of townships in rural and deep rural areas; limited established infrastructures in urban areas for serving black people; limited transport in rural areas; no or limited shops in black areas; limited and separate public transport as well as inadequate water and electricity supply. The result thereof was that the black people established their own networks in their communities with or without limited government funding.

South Africa has a large civil society sector which is typified by programmes and services to the most vulnerable groups. One of the strongest elements of civil society is their advocacy role in the country. This sector independently established services to victims of violence, eg shelters for abused women and their children. Thirty nine (39) shelters were established prior to 1999 without any financial support from the government. The government acknowledges that domestic violence is a crucial factor within the South African society and

promulgated the Domestic Violence Act, 116 of 1998 on 15 December 1999. This particular legislation does not provide for any benefits in respect of organisations rendering services to victims of abuse. These service providers rely significantly on subsidies from government, without any standardised requirements as to how to structure and manage shelters. The Department of Social Development is responsible for the registration of Non-profit Organisations, as will be outlined below.

4.2 Registration requirements

4.2.1 Registration requirements in South Africa

The Department of Social Development Strategic Plan 2007-2010 (2007:2-17) states: "The social problems which democratic South Africa have to solve have a strong relationship to, and association with, poverty and unemployment.

The Department of Social Development continues to build and strengthen its strategic interventions in the areas of comprehensive social security, social welfare services. These key strategic areas of intervention are part of the overall government-wide objective of eradicating poverty, promoting social inclusion and ensuring social cohesion." Domestic violence is perceived as one of the core inter-departmental intervention strategies and is seen as one effect of poverty and unemployment that should be eradicated.

The Non-Profit Organisations Act 71 of 1997 is managed by the national Department of Social Development. The Code of Good Practice for South African Non-profit Organisations (NPOs) (1997:7) encourages and supports non-profit organisations in their contributions towards meeting the diverse needs of the population of the Republic of South Africa, such as shelters for victims of abuse, by:

- ✓ "Creating an environment in which nonprofit organisations can be productive and effective;

- ✓ Developing the abilities of nonprofit organisations to become effective partners with government and the private sector in the upliftment and care of South African communities and environments; and
- ✓ Encouraging non-profit organisations to accept the responsibilities of compliance with high standards of practice in the following matters:
 - ❖ Good governance, effective management, optimization of resources, successful fundraising, productive relationships with government, beneficiary communities, donors, sponsors, and the general public, responsible administration of their organisations and ethical behaviour.”

It is expected of Non-profit Organisations to register with the Directorate: Non-profit Organisations, National Department of Social Development. The organisation submits an application for registration as a Non-profit Organisation per standardized registration form, supported by the submission of the constitution of the organisation. The successful organisation receives a certificate of registration with a registration number from the Director: Non-profit Organisations. The Codes of Good Practice for South African Non-profit Organisations (1997:8) define a constitution as: “The formal document capturing the founding statement, vision and broad objectives of a NPO. It encompasses all the procedures and disciplines required for the orderly governance and operation of the organization. In the case of registered Trusts or Foundations this includes Trust Deeds in terms of the Trust Property Control Act of 1988, and in the case of registered Section 21 Companies the Memorandum of Articles of Association.”

It is expected of the registered organisation to comply with the following requirements on an annual basis:

- Submit annual reports to the Department of Social Development

- Submit Audited Financial Statements within nine months after the closing date of the financial year of the organisation to the Department of Social Development

When a non-profit organisation has been nominated for funds from the National Department of Social Development, the organisation should also comply with the following:

- ✓ Complete and submit a Business Plan as outlined in the national Department of Social Development Financial Awards Policy
- ✓ Complete and submit the Assurance and Conditions forms in terms of Section 38 (1) (J) of the Public Finance Management Act 1 of 1999
- ✓ Confirmation of banking details – Entity Form

In terms of Section 38 (1) (J) of the Public Finance Management Act 1 of 1999, the Department of Social Development requires a written assurance, that the organisation's entity implements effective, efficient and transparent financial management and internal control systems. The successful organisation engages with the latter in a Memorandum of Understanding for the purpose of spending plan and quality assurance.

The Fund-Raising Act, 1978, provides for control of the collection of contributions from the public and for the establishment of various relief funds. The relief fund chapter was repealed in 1997 by the Non-profit Organisations Act, 71 of 1997. The Department of Social Development is in the process of amending the remaining part of the Act.

According to Mr Bok (personal interview), of the Department of Social Development, a Section 21 Company is a company established for public purpose, though the income or property may not be shared amongst office bearers (directors), except as reasonable compensation for services rendered.

To this end the Section 21 Company qualifies for registration under the Non-profit Organisations Act. It should be noted that a Section 21 company may choose to register (or not to register) as a non-profit organization, since registration as an NPO is voluntary. Registration for NPO status is administered by the Non-profit Organisations Directorate with the National Department of Social Development. Section 21 companies register with the Companies and Intellectual Properties Registration Office (CIPRO), which is a registration facility at the Department of Trade and Industry.

An Impact Assessment of the NPO Act (2005:139) states that the difference between registration versus non-registration of NGOs, is that prior to registration, these entities are referred to as non-profit organizations. When they apply for registration and their registration is successful, they are referred to as registered non-profit organisations. Should an organisation apply for funding from the Department of Social Development, it must be registered as a Non-profit Organisation and comply with all the said requirements.

4.2.2 Registration requirements of shelters in some other countries

Researcher contacted the International Social Services (ISS) in some countries regarding the question of registration requirements of shelters in their respective countries. Responses were received from ISS German Branch and the ISS Netherlands Branch. They stated respectively (by e-mail) as follows on 8 and 10 July 2008:

In Germany safe houses for victims of abuse do not really need registration nor authorization. The welfare organisation that sets up and supports a safe house is normally a registered association. Some safe houses are supported by municipalities. In the past some safe houses were financed by the region in which they were situated. The region asked for annual statistics and reports to decide about further funding, but they never introduced any obligatory

standards. It is the registered associations themselves who nowadays develop some guidelines for the safe houses. This means that each organisation wanting to establish a safe house, has its own standards.

The German ISS Office further mentioned that there are also some autonomous safe houses for victims of abuse. They are not supported by municipalities, welfare organisations or other associations. They also do not form part of the umbrella organisation '*Frauenhauskoordination E.V.*' (Women House Co-ordination E.V.) Their interests are represented by yet another umbrella organisation called Zentrale Informationsstelle Autonomer Frauenhäuser (SIF) (Central Information Center for Autonomous Women Houses.). These autonomous safe houses are also not registered.

The response from ISS – Nederlands is similar to the German responses. There is no central register of shelters for victims of abuse in the Netherlands. Most of the shelters are private institutions and subsidized by municipalities or care institutions. There are, furthermore, no special conditions they need to comply with.

Edna Frantela, Programme Services Co-ordinator (efrantela@ncadv.org) from the National Coalition Against Domestic Violence (NCADV) Denver USA, stated per e-mail that the Violence Against Women Act is the primary source of funding for domestic violence agencies in the United States. There is no national registration for shelters in the USA, however, some states may require registration, but shelters are mainly non-profit organisations with guidelines imposed by their funders.

The Board of Federation of Canadian Municipalities (FCM) adopted a Model Municipal Charter. It set out a framework to provide for the powers, duties, fiscal tools, rights and liabilities of a municipal government that offers the Charter Cities certain powers and responsibilities, that are not given to other

municipalities in the province. In Canada, there are six Charter Cities: Saint John, New Brunswick, Montreal, Winnipeg, Vancouver, Lloydminster and Toronto. Silva (2005:9-27) states that a Municipal Government Act (MGS) acknowledges the City's authority to enter into agreements with other governments. This includes the federal government. The Act advocates the aim of joint goals and objectives or messages between municipalities and other governments or non-government organisations in a consultative manner. It also includes Social Plans for the cities. In South Africa provincial governments could adapt a model Municipal Charter which could set out agreements with shelters in various provinces. By adapting a Municipal Charter approach for shelters in South Africa, the responsibility could be shared to subsidize and manage the sustainability of shelters on municipal level. According to news highlights on television and radio broadcast, most municipalities in South Africa are close to insolvency. The management of municipalities remains a challenge in the 'new' South Africa and it might take time to advocate for this action.

4.3 Shelters for victims of abuse in South Africa

The South African Cabinet has requested a consolidated approach with the implementation of the Domestic Violence Act during 2008 and for this purpose an inter-departmental strategy was developed. The national Department of Social Development was assigned to investigate the issue of shelters for victims of abuse. This request resulted in the development of the Policy Framework and Strategy for Shelters for Victims of Domestic Violence in South Africa. Groenewald (2006: 46) states that the document provides a "strategy for the establishing of safe shelters for victims of domestic violence." The main aim is to prevent secondary victimisation, to break the cycle of domestic violence and to ensure the safety and security of the victim. The Policy document outlines government's concerns regarding domestic violence.

Shelters for the prevention of domestic violence are highlighted in the Domestic Violence Act as a protective measure for victims of domestic violence. In South Africa, shelters are operated mainly by non-governmental organisations, focusing on vulnerable groups such as women and their children.

In preparation for the development of a strategy on shelters, the national Department of Social Development conducted a Rapid Appraisal of Shelters for Abused Women and their Children during 2000. One of the findings was that there were only 39 shelters in the country, distributed for a total population of 44,819,782. (Statistics South Africa - 2009). There were in 2000, no shelters for abused women and their children in the following provinces:

- Limpopo
- North West
- Free State

With a follow-up questionnaire during 2002, the national Department of Social Development determined that three (3) additional shelters had been established in the Country, one in each of the following provinces, namely:

- Gauteng
- Mpumalanga
- Northern Cape

A follow-up questionnaire during January 2005, established that a further 27 shelters had been established in the Country, with the result that there were 86 shelters for victims of abuse operating at that particular time. There was at least one shelter in each of the nine provinces. The Free State Province had established 10 shelters at that time.

During 2008, it was established that there are 96 known shelters in the country. These shelters form part of this research. However, no verification was done by

means of site visits in provinces due to budgetary constraints. The following map of South Africa presents the nine provinces indicating the number of shelters in each province.

Figure 4.1 Map of 9 provinces in South Africa and number of shelters for victims of abuse per province



Adapted from www.earth.co.za on 22 August 2009

Figure 4.1 indicates the 9 provinces and number of shelters in each province. The provinces are presented in alphabetical order. In the Eastern Cape Province – fourteen (14) shelters, Free State Province – twelve (12) shelters, Gauteng Province – twenty two (22) shelters, KwaZulu-Natal Province - thirteen

(13) shelters, Limpopo Province - seven (7) shelters, Mpumalanga Province - four (4) shelters, North West Province - one (1) shelter, Northern Cape Province – (3) shelters and Western Cape Province - twenty (20) shelters. The total number of shelters in the Country is only 96 for a population of 34 610 414. The provincial population estimates for women and children indicate are insufficient services to the most vulnerable group of society.

The following table outlines the provincial population estimates for women and children.

Table 4.1 Provincial population estimates for women and children

Province	Age	Girls	Boys	Sub-total children	Female adults	Total	Number of shelters
Eastern Cape	0-19	1 505 500	1 924 164	3 429 664	0	3 429 664	14
	20-80+	0	0	0	1 955 100	1 955 100	
Sub-total		1 505 500	1 924 164	3 429 664	1 955 100	5 384 764	
Free State	0-19	602 000	598 600	1 200 600	0	1 200 600	12
	20-80+	0	0	0	912 700	912 700	
Sub-total		602 000	598 600	1 200 600	912 700	2 113 300	
Gauteng	0-19	1 802 000	1 832 700	3 634 700	0	3 634 700	22
	20-80+	0	0	0	3 464 100	3 464 100	
Sub-total		1 802 000	1 832 700	3 634 700	3 464 100	7 098 800	
KwaZulu-Natal	0-19	2 359 100	2 373 800	4 732 900	0	4 732 900	13
	20-80+	0	0	0	3 112 200	3 112 200	
Sub-total		2 359 100	2 373 800	4 732 900	3 112 200	7 845 100	
Limpopo	0-19	1 245 800	1 297 400	2 543 200	0	2 543 200	7
	20-80+	0	0	0	1 486 300	1 486 300	
Sub-total		1 245 800	1 297 400	2 543 200	1 486 300	4 029 500	
Mpumalanga	0-19	819 800	820 000	1 639 800	0	1 639 800	4
	20-80+	0	0	0	1 043 700	1 043 700	
Sub-total		819 800	820 000	1 639 800	1 043 700	2 683 500	
Northern Cape	0-19	242 100	245 000	487 100	0	487 100	3
	20-80+	0	0	0	346 300	346 300	
Sub-total		242 100	245 000	487 100	346 300	833 400	
North West	0-19	719 600	702 500	1 422 100	0	1 422 100	1
	20-80+	0	0	0	1 031 600	1 031 600	
Sub-total		719 600	702 500	1 422 100	1 031 600	2 453 700	
Western Cape	0-19	999 400	988 500	1 987 900	0	1 987 900	20
	20-80+	0	0	0	180 450	180 450	
Sub-total		999 400	988 500	1 987 900	180 450	2 168 350	
Total		10 295 300	10 782 664	21 077 964	13 532 450	34 610 414	96

Adapted from Statistics South Africa Mid-year population estimates, 2009. www.statssa.gov.za

There are only 96 shelters in the country for a population 34 610 414 women and children. These services to the most vulnerable group of society are insufficient.

Table 4.1 illustrates that there are only fourteen (14) shelters for a population of 5 384 764 in Eastern Cape Province, twelve (12) shelters in Free State Province for 2 113 300 women and children, twenty one (22) shelters for 7 098 800 women and children in Gauteng Province, thirteen (13) shelters in KwaZulu-Natal Province for 7 845 100 women and children, seven (7) shelters in Limpopo Province for 4 029 500 women and children, four (4) shelters in Mpumalanga Province for 2 683 500 women and children, three (3) shelters in Northern Cape Province for 833 400 women and children, one (1) shelter in North West Province for 2 453 700 women and children and twenty (20) shelters in the Western Cape Province for 2 168 350 women and children.

4.4 Minimum standards for shelters for victims of abuse in South Africa

Groenewald (2006: 84) states that "The purpose of Minimum Standards (2004:5-6) is to establish a set of "bottom line" goals for service delivery in victim empowerment. The function of the Minimum Standards is, *amongst others*, the following:

- Firstly, minimum standards will enable service providers to recognize developmental areas and effect the appropriate and specific changes.
- Secondly, minimum standards will ensure that services are rendered in a specific, planned and effective manner.
- Thirdly, minimum standards will ensure that services are monitored effectively in a manner, which promotes quality and guides change and development in service delivery.
- Fourthly, minimum standards, in conjunction with practice guidelines, will give specific direction to Human Resource Development initiatives, institutions/-projects and organisations."

The standards at the shelter and during their stay should comply with the following Minimum Standards as reflected in Minimum Standards (2005:5-6):

Standard: Engagement/admission at the shelter

Victims of domestic violence are received in a manner (and into a climate) of care and safety. This minimises trauma and maximises developmental opportunity during admission processes.

Standard: Safety and Security

Victims of domestic violence receive services in a safe environment in which they are protected from physical, social and emotional harm, or threat of harm, from self and others.

Standard: Rights of Victims of Domestic Violence

Victims of domestic violence are given information about their rights (as listed in this document) and responsibilities within the programme, in a manner and form which takes into account their age, capacity, and linguistic heritage.

Standard: Complaints

Victims of domestic violence are free to express dissatisfaction with the service provided to them, and their concerns and complaints are addressed seriously, without delay or reprisal.

Standard: Physical Environment

Victims of domestic violence live in a safe, healthy, well-maintained environment, that provides appropriate access to the community (as permitted in terms of restrictiveness) and also meets their needs in terms of privacy, safety and well-being.

Standard: Emergency and Safety Practices

All reasonable provisions are made to ensure that victims and staff are safe from the risk of fire, accidents and other hazards.

Standard: Health Care

Victims of domestic violence have access to and receive adequate health care.

Standard: Developmental Milieu and Climate

Victims of domestic violence experience an environment in which their spirit, dignity, individuality and development is respected and nurtured.

Standard: Care Plan

Each victim of domestic violence has a Care Plan which has been developed on the basis of a developmental assessment and which aims to provide life-long relationships within their family or appropriate alternative, and re-integration in the community within the shortest possible time-frame.

Standard: Individual Development Plan (IDP)

Each victim of domestic violence has a written individual development plan (IDP).

Standard: Therapeutic Programmes

Each victim of domestic violence in need of additional therapeutic support and/or special services is unconditionally provided with services and/or programmes and is assisted to make effective use thereof.

Standard: Education

Each victim of domestic violence (with special reference to their children) is unconditionally provided with appropriate and relevant education.

Standard: Disengagement

Victims of domestic violence are provided with the appropriate rituals, programmes and support to enable their effective transition into their family and community, ensuring successful integration.

Government expects shelter managers to comply with the Minimum Standards and therefore government should put financial resources and mechanisms in place to enable the managers to adhere thereto.

4.5 Integrated Service Delivery Model

The purpose of the Integrated Service Delivery Model (2005:9) is to improve all developmental social welfare services in South Africa. It clearly determines the nature, scope, extent and level of work that is required to constitute the Services Delivery Model towards transformation in a developmental approach.

The latter was launched by the Deputy Minister of the national Department of Social Development during October 2005. The main aim is to have a broad, comprehensive range of developmental social welfare services. These services should be sustainable and reflect integration.

Integrated Service Delivery Model (2005:14) defines a developmental paradigm as being built on the following imperatives:

- “Social processes that bring about changes in relationships so that the poor, vulnerable and marginalized can gain increased control over their lives, and access to and control over resources.
- The transformation of attitudes, institutions and structures.
- Influencing the formulation and implementation of appropriate policies at micro, meso and macro level.
- Social processes which support people’s potential, indigenous/local knowledge and expertise in pursuance of their own development.
- Continued reorientation of social services sector personnel toward the development paradigm.”

The Department of Social Development renders services according to the Integrated Service Delivery Model (2006:16-20), by means of three broad programmes:

- Social Security
- Social Welfare Services
- Community Development

With regard to victims of abuse who may be accommodated in shelters, a knowledge of the Social Security programme is imperative for service providers in order to guide and advise the victims to apply for social security, should they qualify. It is assumed that most victims of violence, such as women, have children who can enter the social security system and benefit from it.

The integration of services addresses the following key areas:

- Early identification and emergency relief
- Assessment of target groups, capturing information on the database and referral for appropriate services
- Profiling of beneficiaries and communities of origin for identification of opportunities for sustainable socio-economic development
- Planning and implementation of exit strategies at all levels
- Monitoring and outcome evaluation

The model refers to four elements of intervention, namely: Prevention, Early intervention (non-statutory), statutory intervention/residential/alternative care and Reconstruction and Aftercare. For the purpose of this study, it seems that all levels may be applicable to the issue of victims of abuse in the proposed guidelines for a shelter service delivery model which coincide with the minimum standards.

It is evident from the above information in Chapter 4, that shelters in South Africa are mainly run by NGOs and can comply with the requirements of the Non-profit Organisations Act 71 of 1997. It is compulsory for NGOs to be registered if they apply for Government funds. Some shelters also register as a Section 21 company at Companies and Intellectual Properties Registration Office (CIPRO), it is a registration facility at the Department of Trade and Industry.

The latter provides these organizations with status as legal entities and international donors would then be more likely to provide them with funds.

Registration as a non-profit organisation remains a voluntary act.

In some other countries there is no obligation for registration or authorization and these shelters seem to be totally autonomous. It is clear that shelters are known as safe houses and are not registered in the Netherlands and in Germany. However, it seems that safe houses are subsidized by municipalities or care institutions. The National Coalition Against Domestic Violence, in Denver (USA) indicate that the Violence Against Women Act is the primary source of funding for domestic violence agencies in the United States. There is in South Africa no funding, per se, provided for in legislation, not even in the Domestic Violence Act, 116 of 1998. A major challenge for South Africa is for applicable government departments and non-governmental organisations to enter into a consultative relationship. They need this for the planning of the establishment and sustainability of shelters in the designing of Plans for the provinces, as mentioned in the Model Municipal Charter of Canada. This is outlined in Chapter 4 number 4.2.2 - Social Plans for the cities.

There are only 96 known shelters in South Africa and nine (9) Government One-stop Centers. Some of the One-stop Centers mainly provide one (1) to three (3) nights' accommodation in a crisis situation. It is not even quite clear as to whether all of the known 96 shelters qualify as shelters that can accommodate victims of abuse, for a period from 2 weeks to 6 months, as the need dictates.

This concludes the requirements from government on the issue of shelters in South Africa.

4.6 Some shelters in the United States of America (USA)

A recent study conducted by Groenewald (2006: 50-58) avails information regarding some shelters for abused women in the USA. It provides an understanding of how shelters operate in a first world country. According to Quotes/Stats to Vote On (2003:1-3) there are 1, 500 shelters for battered women in the United States. Many of these shelters routinely deny their services to victims of same-sex battering. Statistics reflect that 1, 510, 455 women and 834, 732 men are victims of physical violence by an intimate partner. Costello (2003:2) states that short term (6-12 weeks) psycho-educational batterer-intervention programmes had helped some batterers to stop immediate physical violence, but were inadequate in stopping abuse over time. She further indicates that some batterers became more sophisticated in their psychological abuse and intimidation after attending these programmes.

Table 4.2 on page 112 - 116 presents a comparison to highlight the similarities and differences between shelters in the United States of America and South Africa. Resources consulted for compiling Table 4.2 were obtained from –

- ✓ Lupri (2004:1-3), Groenewald (2006:51-57), Compass community services (2006:1-4) and Rapid Appraisal on Shelters for Abused Women and their Children in South Africa (2002).

Table 4.2 Some programmes in shelters in the United States of America and in South Africa

United States of America	South Africa
<p><u>Safe houses</u> These are private homes in which owners volunteer to house battered women and their children on a short-term temporary basis. (1-3 nights)</p>	<p><u>Safe houses</u> Provincial counterparts within the Victim Empowerment Programme were encouraged to identify Safe houses as an interim measure to protect abused women and their children from further abuse. (duration 1–5 nights)</p>
<p><u>Shelters</u> Minnesota Coalition for Battered Women (2003:1-2) shelter provides 24-hour emergency crisis intervention and temporary shelter. (1-60 days, depending on the need)</p>	<p><u>Shelters</u> Temporary accommodation: This offers the abused women time to recover from the abuse and consider options for changing her situation without the immediate threat of assault. (1 week to 6 months)</p>

United States of America	South Africa
<p><u><i>Therapeutic services</i></u></p> <p>Individual counselling for women and girls</p> <p>Batterers – Re-education/treatment programmes</p> <p>Parenting time centres</p>	<p><u><i>Therapeutic services</i></u></p> <p>Some shelters do not have counselors at the shelters and therefore engage with professional services in the community. Some shelters provide the following therapeutic services:</p> <p><u><i>Individual counselling for women</i></u> – to deal with the emotional issues of women and the impact of abuse on their lives.</p> <p><u><i>Group sessions for women</i></u> – this form of intervention enables women to provide one another with support and learn from one another's experiences. It also helps build the support system that they so desperately need at that stage.</p> <p><u><i>Group therapy sessions for the children</i></u> – the children spend quality time with a therapist to work through their feelings and the impact of the abuse.</p> <p><u><i>Family therapy sessions for the women and children</i></u> – these sessions focus mainly on enabling abused women to address their feelings in such a manner that the children understand and vice versa.</p>

United States of America	South Africa
<p><u>Programmes</u></p> <p>➤ <i>Developmental programmes</i> Financial Management and household management as well as cooking and cleaning skills.</p> <p>Helping battered women to identify and act on steps toward realising goals in their lives, overcome obstacles and achieve personal success.</p>	<p><u>Programmes</u></p> <p>➤ <i>Developmental Programmes</i> Writing of curriculum vitae, pottery work, art work, bead work, catering, gardening, candle and soap making.</p> <p>Building self-esteem and coming to terms with themselves.</p>
<p>➤ <u>Empowerment programmes</u> Self-defense classes which enable them to protect themselves Job creation to generate own income</p> <p>Develop a safety plan in conjunction with the battered woman Hotline/Crisis telephone number</p>	<p>➤ <u>Empowerment programmes</u> Skills development Literacy programmes</p> <p>Develop a safety plan in conjunction with the abused woman. The National Stop Gender Violence Toll-free Helpline 0800 150 150</p>
<p>➤ <u>Capacity building</u> Training of service providers Affiliation with network of shelters</p>	<p>➤ <u>Capacity building</u> Training of service providers</p>

United States of America	South Africa
<p>➤ <i>Support</i></p> <p>Temporary accommodation. Dismantling the isolation that surrounds most women and girls. Affirmation of women and girls that their experiences are important.</p> <p>Providing mentoring and self-esteem building</p>	<p>➤ <i>Support</i></p> <p>Temporary accommodation Support her recovery and decision-making process with all resources at their disposal. Assessment group sessions. These group sessions are mainly to discuss the logistical and practical issues which women have to deal with on a daily basis, among others, finding a job and transport arrangements to work/school.</p>
<p>➤ <u>Legal advice</u></p> <p>Legal and systems advocacy and accompaniment. (Legal advocates provide civil, criminal, family, juvenile, and tribal court advocacy).</p> <ul style="list-style-type: none"> <input type="checkbox"/> Support groups <input type="checkbox"/> Children's advocacy <input type="checkbox"/> Information and referral <input type="checkbox"/> Transportation 	<p>➤ <u>Legal advice</u></p> <p>Consultation with legal adviser/s on options for decision making regarding the Domestic Violence Act, maintenance/child support grant and issues of divorce.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Court support and court preparation <input type="checkbox"/> Support groups <input type="checkbox"/> Information and referral <input type="checkbox"/> Transportation

United States of America	South Africa
<p>➤ <u><i>Community education</i></u></p> <p>Educate communities (Information sessions)</p> <p>Training of community professionals</p>	<p>➤ <u><i>Community education</i></u></p> <p>Outreach programmes to communities and programmes within the shelter/s in commemoration of national and international Women's Days</p> <p>Educational workshops, talks, seminars and school outreach programmes</p> <p>Training programmes</p>
International programmes	National programmes
<p>Advocate for permanent housing and getting jobs to support their children</p>	<p>Transitional housing - temporary accommodation</p> <p>Communal housing can be defined as an affordable rental form of social housing accommodation.</p> <p>Social housing is defined as affordable, high quality and well-located subsidized housing managed by viable, sustainable, independent institutions on participatory management principles. (For further clarity see page 116)</p>
<p>State wide programmes</p>	<p>The 16 Days of Activism on No Violence against Women and Children-25 November to 10 December</p> <p>365 Days National Action Plan against Gender-based Violence in South Africa, National and International Days</p> <p>The Engagement of Men and Boys in the Prevention of Gender-based Violence</p>
<p>Transitional shelters have a housing specialist on staff to assist women in locating a permanent residence.</p>	<p>Do not exist</p>

With regard to Table 4.2, certain services as indicated in the table are elaborated upon below to present a better understanding of the content of the services.

- Hospital/Clinic Advocacy Programmes. Programmes established within hospitals or clinics to provide advocacy for battered women identified by medical service providers in the delivery of health care services.
- Parenting Time Centers. These are safe locations for exchange of children for visitation and/or supervised visitation. Programmes receive court referrals for supervised visitation. Some programmes offer parenting education.
- Batterers Re-Education/Treatment Programmes. These programmes are established independent from, or as part of a shelter, community advocacy programme, or intervention project to provide re-education, treatment, or intervention with perpetrators of domestic assaults crimes. Most programmes operate as a component of an intervention project, receiving court referrals as a condition of a stayed sentence. Some of the programmes meet the culturally competent advocacy and also the basic needs of women from various backgrounds.
- Statewide programmes. Minnesota Coalition for Battered Women. Programmes or projects established to advocate on a statewide level on behalf of battered women and their children. These include some with a focus on a particular community, such as a cultural specific programme.
- Transitional shelters. Some of the transitional shelters has a housing specialist on staff to assist women in locating a permanent residence. The purpose thereof is to make the transition easier. Once they do find housing, shelter staff members work with women who acquire independent living skills, such as financial management and household management.

New developments for vulnerable groups such as victims of abuse are reflected in the Minutes of the Transitional and Special Needs Forum, held at the Social Housing Foundation Offices in Johannesburg, on 23 May 2006.

The meeting defined the following housing options:

- **Transitional housing** is temporary accommodation in and around the inner city for people who are in transition between homelessness and permanent accommodation. Short-term tenure and empowerment training are key characteristics of transitional housing. The accommodation is managed by an institution and subsidized through government housing subsidies.
- **Communal housing** can be defined as an affordable rental form of social housing accommodation. Long-term tenure and shared communal facilities are key characteristics. Communal housing projects are subsidized through government housing subsidies and are managed by an institution.
- **Social housing** is defined as affordable, high quality and well-located subsidized housing managed by viable, sustainable, independent institutions on participatory management principles. Social housing is aimed at low-to-moderate income families and provides different tenure options, with the exception of immediate individual ownership.

These housing options will enable victims of abuse to apply for affordable housing and will enable them to put mechanisms in place for sustainable livelihood. They will also provide them with the option not to return to the abusive relationship if that is their preference. The need to regulate affordable housing for victims of abuse is still a challenge in South Africa. This is especially true where a system can be put in place to register those victims to apply for affordable housing and have ownership of the house. This can contribute toward a sustainable livelihood.

4.7 Life strategies for abused women

Life strategies for abused women should be one of the core intervention strategies to assist them during the healing process. The purpose is to enable abused women to adapt to new challenges, should it be to continue with the

same partner in the abusive relationship or independently on their own without the previous partner. There are many reasons why abused women tolerate abusive relationships, as was outlined in Chapter 3. However, to give justice to the value of human beings in a continuously changing world, the point of departure should also address the potential developmental changing growth of the victim who is being abused.

One theory about Person Centred Communicaiton as outlined by Du Toit, Grobler & Schenck (1998:4, 15-24) is based on Rogers' Client-centered therapy for intervention and which is structured by nineteen (19) propositions. The nineteen (19) propositions are significant relevant to intervention with victims of abuse. The following prepositions are applicable:

- Proposition 1: Human experiences on a conscious and unconscious level
'Every individual exists in a continually changing world of experience of which he is the centre.' (Rogers 1987:483)

The interpretation thereof is that each individual's life experiences are unique and is only knowable to the victim of abuse. This means that outsiders (such as service providers) can only form an idea of what the victim of abuse experienced in life, as they disclose personal life experiences.

- Proposition 5: Needs and behavior

'Behaviour is basically the goal-directed attempt of the organism to satisfy its needs as experienced in the field as perceived.' (Rogers 1987:491)

According to Du Toit et al's (1998: 14-15) interpretation to proposition 5 is that behaviour is purposefully driven by individuals to satisfy their needs and therefore individual needs motivate their behaviour. Therefore service providers should be alert that all behaviour patters from victims of abuse have some

motive, reason or goal and once their underlying need is understood, the specific behaviour becomes understandable.

- Proposition 6: Emotions

'Emotions accompanies and in general facilitates such goal-directed behaviour, the kind of emotion being related to the seeking versus the consummatory aspects of the behavior, and the intensity of the emotion being related to the perceived significance of the behavior for the maintenance and enhancement of the organism.' (Rogers 1987:492)

The interpretation of Proposition 6 in the concept of victims of abuse can stir different emotions in victims. Emotions can be, among others, to visualize being at home again with the perpetrator and be subject to abuse again, or without the perpetrator and without financial gain to sustain their immediate needs.

- Proposition 8: The self

'A portion of the total perceptual field gradually becomes differentiated as the self.' (Rogers 1987:497)

The self means the victim of abuse's perception of who he/she is with their unique experiences. Du Toit et al (1998:21) argue that despite life experiences that contributed towards change of the self, a part of the self always remains. The service provider should ensure that changes, such as different perceptions about abuse, do not harm- but strengthen- the victim.

- Proposition 9 & 10: The self, significant others and values

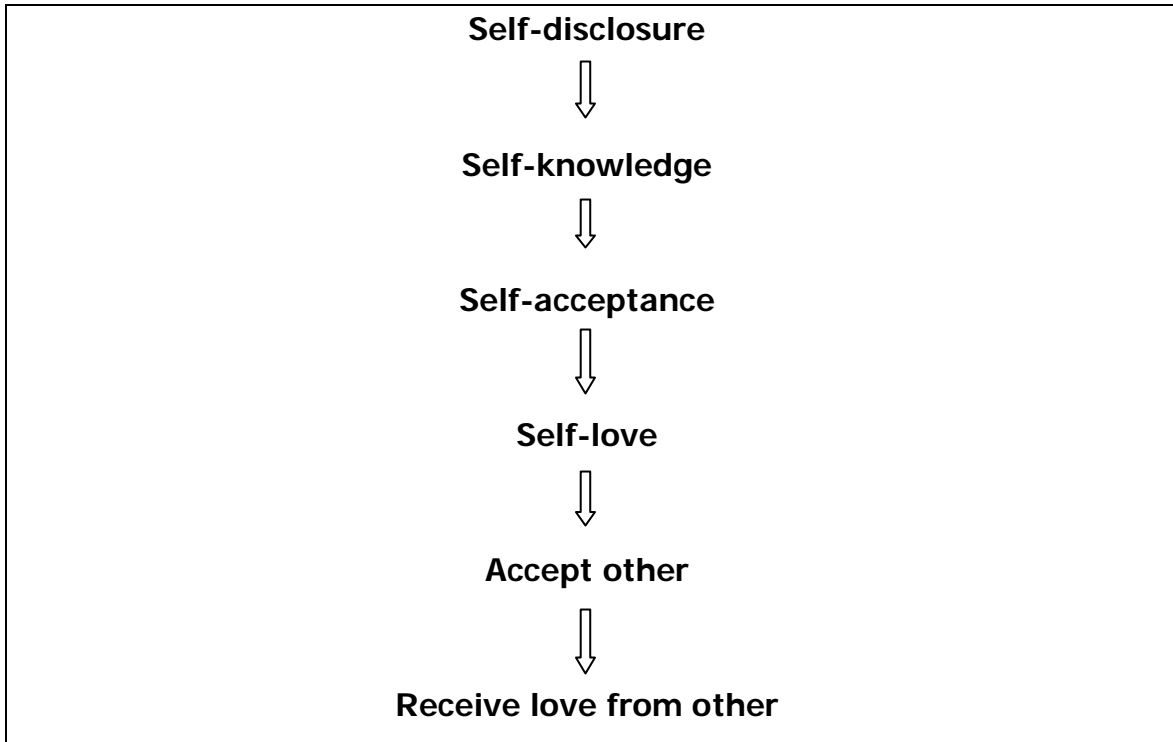
'As a result of interaction with the environment, and particularly as a result of evaluational interaction with others, the structure of the self is formed – an organised, fluid, but consistent conceptual pattern of perceptions of characteristics and relationships "I" or the "me" together with values attached to these concepts.' (Rogers 1987:498)

- Proposition 10 – 'The values attached to experiences, and the values which are a part of the self structure, in some instances are values experienced directly

by the organism, and in some instances are values introjected or taken over from others, but perceived in distorted fashion as if they had been experienced directly.' (Rogers 1987:498)

The interpretation of proposition 9 is that the self is shaped through interaction with the environment and particularly with other people. Therefore the changed environment for a victim of abuse during their stay in a shelter and their exposure to other victims of abuse as well as staff members, can result in new perceptions and interactions. Interaction with one another is a natural flow of the environment where they will be exposed to other values and may also adapt those values of other people.

The assumption is that the self-image of victims of abuse is being destroyed to a certain extent through the continuous abuse in one form or another as discussed in Chapter 2. Nevertheless, whatever form of abuse, the impact is on the self, implying that the emotional self is being damaged. The physical self can get stitches, ointment and a plaster or a tablet for the pain, but to enable the victim to recover from the emotional pain, is a challenge for service providers. Through interventions by service providers (eg social workers, psychologists and medical practitioners) a personal development plan, with a core component of reconstruction/restoration with the self, could bring self growth. The following process chart demonstrates the development of the self-image towards healing and maturity.

Table 4:3 Process chart to self-image development

Manual for Marriage Preparation and Marriage Enrichment (2007:26)

Each intervention strategy by a service provider is based on a specific theory and the intention is not to elaborate on various theories in this chapter, but to indicate that service providers should assist the victims of abuse to grow to self-actualisation. D'Adamo et al (2001:1) adapted from his father, James D'Adamo, a poem that reflects the uniqueness of each individual based on a person's own blood type which researcher adapted, as follows:

I believed that no two people on the face of the earth were alike;

No two people have the same finger prints,

hair prints,

lips prints, or voice prints.

No two blades of grass or snowflakes are alike. Because I felt that all people were different from one another, I did not think it was logical that

they should be treated the same. It was clear to me that since each person was housed in a special body with different strengths and weaknesses that each person's needs are unique. Therefore each person should be treated in a unique manner according to the holistic approach.

Therefore each victim of abuse should have his/her own life strategy. Part of the strategy should include personal development and capacity building programmes. For example, the victim of abuse should know her/his rights. The right to be treated with respect and dignity. The victim should personalise this right and translate the 'right' meaningfully. This should happen so that the recipient of the message can understand what it means when the victim says to the perpetrator that he/she has no right to treat her/him as he/she does.

Based on the above-mentioned life experiences and future self planning, the service provider should assist the victim in the development of life strategies which are based on expectations, confidence and self-actualisation. One aspect of the life strategy should be a personal safety plan. This plan will be discussed in Chapter 6.

Summary

There are shelters for victims of abuse in South Africa, as well as one-stop service centers which address the immediate needs of the victims of violence. The Government of South Africa, together with the United Nations Office on Drugs and Crime, established one-stop centers with international donor funds to counteract violence against women and children. The indication is that there are nowhere near enough shelters, or one-stop service centres in the country to address the needs of victims of abuse - especially in rural and deep rural areas.

There are furthermore no compulsory legal registration requirements for shelters in South Africa to comply with. This presents a significant void in the present organisation and quality control surrounding shelters for victims of violence. The

Minimum Standards for Shelters as developed by the Department of Social Development, which are supposed to be enforced and adhered to by all service providers, actually only seem adhered to by some service providers.

A recent development is the requirement by government that all services in the Social Development sector should comply with the national Department of Social Development Service Delivery Model.

In the international arena, registration procedures are not compulsory in some countries, for example in the Netherlands and in Germany. Safe houses are subsidized by municipalities or care institutions. The National Coalition Against Domestic Violence, Denver (USA), indicated that the Violence Against Women Act is the primary source of funding for domestic violence agencies in the United States.

A variety of programmes in some shelters internationally has been identified such as: Enrichment programmes for families, therapeutic intervention programmes, parenting time centres, re-education programmes for batterers with the aim to unite, strengthen or to reach mutual agreements with regard to the next step in the relationship.

Chapter 5 will outline the research findings with regard to shelters in South Africa. These will form part of the proposed guidelines for a shelter service delivery model for victims of abuse, and will be presented in Chapter 6.

CHAPTER 5

Research findings of shelters for victims of abuse in South Africa

Introduction

Chapter 5 presents the empirical research findings on shelters for victims of abuse in South Africa.

This research focused on the assessment of the experiences of nine (9) Provincial Victim Empowerment Programme (VEP) Co-ordinators (100%) and 34 (35%) shelter managers. Two shelters on the consolidated list did not comply with the requirements of the definition, meaning that they only provide short term accommodation in a crisis situation for one to seven nights and was therefore disregarded. Therefore 32 shelters' (33%) questionnaires form part of the empirical research findings. The findings will be presented in three sections – Section A, Section B and Section C.

Section A. Research findings: Provincial VEP Co-ordinators (see 5.2)

Provincial Victim Empowerment Co-ordinators who are responsible for the management, development, approval and sustainability of services within the Victim Empowerment Programme.

Section B. Research results from shelter managers (see 5.3)

Shelter managers or social workers who are working in shelters for victims of abuse.

This chapter comprises mainly of the responses from the above-mentioned sectors and serves as an empirical basis for developing guidelines. These guidelines will serve as a shelter service delivery model for victims of abuse, as proposed in Chapter 6.

Section C. Piloting of the proposed shelter service delivery model for victims of abuse (see 5.4)

Usindiso Ministries, Johannesburg and Stellenbosch Safe House, Stellenbosch were identified shelters to pilot the guidelines for a shelter service delivery model for victims of abuse. The pilot study commenced during May 2009 and ended during September 2009.

5.1 Research method to obtain research data

As already outlined in Chapter 1, the research data were obtained by means of three questionnaires sent to the nine (9) Provincial VEP Co-ordinators, 96 shelter managers and two shelters that pilot the proposed guidelines.

Three self-administered questionnaires were developed to serve as a research tool to obtain data. The first questionnaire was developed for the nine (9) provincial VEP Co-ordinators for completion. The second questionnaire was developed for shelter managers for completion. A third questionnaire was developed for two shelters that participated in the piloting of the proposed model: Guidelines for a shelter service delivery model for victims of abuse.

5.1.1 Questionnaires

5.1.1.1 Questionnaire A-1: Questionnaire for provincial VEP Co-ordinators (See Appendix K)

The provincial VEP (Victim Empowerment Programme) Co-ordinators were identified as participants in this research, based on their provincial mandate to manage the Victim Empowerment Programme. They are the lead government sector for VEP in their perspective provinces and report back regarding the progress made on the programme. The report is presented to the National Department of Social Development's VEP Management Forum every quarter. According to the National Policy Guidelines for Victim Empowerment (2009:18-19) the Provincial Victim Empowerment Co-ordinators are responsible for the

management of the Provincial Victim Empowerment Management Forums, Local Victim Empowerment Forums and the management of partnerships with non-governmental organisations. They are the ideal people to participate in the research, based on their mandate to manage the VEP. (see Appendix F)

The questionnaire was e-mailed to the nine (9) provincial VEP Co-ordinators on 29 February 2008. (see Appendix K) Despite the slow response in completion of the questionnaires and continuous reminders, all questionnaires sent to the nine (9) VEP co-ordinators were received by 20 June 2008.

5.1.1.2 Questionnaire B-1: Questionnaire for shelter managers (See Appendix L)

The second questionnaire was designed for shelter managers. The population comprises of 96 shelters in South Africa. (See Appendix N) A shelter data base was compiled from September to October 2008. The data base reflects that there are 96 shelters in South Africa. The data base was consolidated, based on the lists of shelters of the Provincial VEP Co-ordinators, the list of shelters of the National Shelter Movement Forum and the National Directory on Services for Victims of Crime and Violence.

The research sampling methodology was non-probability, convenience sampling - meaning the probability of selection cannot be estimated and it is difficult to determine the representativeness of the sample. The sample therefore comprises of the available participants. (Grinnel 1997:215-216). This implies that the consolidated list of shelters reflects 96 shelters, but there was no guarantee that they existed (see Population Framework as Appendix N). No site visits were conducted to establish if there are more, or less, shelters than on the lists. This was due to the cost implications of having to visit these shelters that are spread all over South Africa. It was established that some shelters in provinces are not known to the Provincial VEP Co-ordinators. The draft original

list was consolidated and reflects 132 shelters. After verification, it was established that 36 of them cater for other vulnerable groups such as homeless, pregnant women and Aids patients. The final population framework reflects that there are 96 shelters, excluding One-stop Centers. Some One-stop Centers provide overnight accommodation for a few nights and others, such as Saartjie Baartman Centre, Western Cape Province and Ikhaya Latemba One Stop Centre, Braamfontein, Gauteng Province provide accommodation for months. The One-stop Centers are mainly run by Government with the exception of Saartjie Baartman Centre. Therefore all One-stop Service Centers do not form part of the research. However, it was decided to include the One-stop Centers in the list of shelters for victims of abuse for those who are interested in the field of study. (See Appendix O)

The questionnaire was e-mailed to Ms Fugard after consent had telephonically been reached that she would manage the distribution of the questionnaire through the National Shelter Movement's Provincial Co-ordinators. This was done towards the end of October 2008. Due to slow or no responses in receiving completed questionnaires, researcher decided to approach the National Shelter Movement Provincial Co-ordinators to establish if they experience any constrains in co-ordinating the completion of the questionnaires. The result of this intervention was that 60% indicated by telephone that they would not be in a position to distribute the questionnaires during October/November 2008. They were involved in preparations for the 16 Days of Activism Campaign on No Violence against Women and Children that started on 25 November and continued till 10 December. Researcher decided to distribute the questionnaire to those shelters which had e-mail addresses and facsimiles. Twenty (20) questionnaires were posted and 74 were e-mailed during November and December 2008. The research was completed during May 2009. Only 34 shelters (35%) out of the 96 shelters participated in the research. Two shelters' questionnaires were disregarded.

5.1.1.3 Administration of questionnaires

Researcher established a register for the nine (9) provincial VEP Co-ordinators, a register for the 96 shelters in South Africa and the two (2) piloting shelters with the purpose of managing the dissemination and responses from participants.

5.1.1.4 Data presentation

Researcher utilized the Statistical Program for Social Science (SPSS) (quantitative) system and the Atlas TI (qualitative) system to arrange and order data in graphic and tabular form (figures and tables) and indicating means, medians, modes and percentages. The scale of measurement is nominal.

The presentation of the data presents a visual overview of what is being measured. It also indicates what the situation is in provinces with regard to the registration of shelters for victims of abuse in South Africa, as well as the management of shelters with regard to service delivery and provision of services.

5.1.1.5 Further communications

Further communication took place by means of telephone conversations with regard to the follow-up on uncertainties, eg illegible handwriting and requests for submission of the completed questionnaires. The first questionnaire represents a probability sample (Grinnel 1997:208) where every member within the population has a known probability of being selected for the sample. It can, therefore, be established that the sample is representative of the population from which it was drawn. Section A of this research represents the responses of all nine (9) Provincial VEP Co-ordinators (the entire population).

Researcher conducted regular telephonic follow-up conversations with the Shelter Movement Forum Provincial Co-ordinators to fast track the completion and submission of the questionnaires. Researcher also telephonically contacted

several shelter managers who submitted the questionnaires to verify information that was either incomplete or not clear. Some handwritten completed questionnaires which were faxed to researcher, were unclear on a variety of aspects.

5.1.1.6 Operational definition of a shelter

The operational definition of a shelter is indicated in all three questionnaires. The purpose thereof was for participants to understand the meaning of the term 'shelter', so as to enable them to determine whether they met the requirements of the definition and if they qualify to complete the questionnaire.

The said definition reads as follows:

According to the Department of Social Development Policy Framework and Strategy for Shelters for Victims of Domestic Violence (2003:5): "a shelter is a residential facility providing short-term intervention in a crisis situation (two weeks up to approximately six months as the need dictates). This intervention includes meeting basic needs (protection, food, clothing), as well as support, counseling and skills development, amongst others. The intervention further advocates the rights of the victims and strengthening of the victim's capacity."

Section A

5.2 Research findings for Provincial VEP Co-ordinators

The Provincial VEP Co-ordinators function on Assistant Director level and report to the Deputy Director within a broader government structure. The provincial VEP forms part of other programmes in a Directorate, such as: HIV & Aids, Gender, Families and Social Crime Prevention Programmes. The implication thereof is that Provincial VEP Co-ordinators have mutual responsibilities of more than one programme in their respective provinces to manage and can only spend a certain percentage of their time on the VEP. The result is that VEP is not top

priority in the provincial government structures. The roles and responsibilities are very good, but not realistic in the view of the said information on VEP. (See roles and responsibilities in Terms of Reference - Appendix F)

Their responses to the questionnaire will be presented next.

5.2.1 Provincial Victim Empowerment Programme Co-ordinators' responses

Questionnaire A-1: Questionnaire to provincial VEP Co-ordinators (See Appendix K)

The research question to be addressed in this section is: "How do Provincial VEP Co-ordinators manage shelters for victims of abuse in provinces." The following main elements in the completed questionnaire will be looked at, namely:

- Registration information of the departments responsible for the managing of shelters in their provinces
- Information on the registration of shelters for victims of abuse
- Subsidization matters pertaining to shelters
- Social work services at shelters
- Contributions and concerns towards the development of guidelines for a shelter service delivery model for victims of abuse

5.2.1.1 Registration information of the departments responsible for the managing of shelters in their provinces

The Department of Social Development is the leading department in managing and providing victim support services to victims of abuse. The National Department of Social Development is responsible for legislation initiatives, policy development, norms and minimum standards and guidelines for various services to vulnerable groups. One of the vulnerable groups is victims of violence. The Provincial Departments of Social Development are responsible for the

implementation of legislation, policy, strategies, norms, minimum standards and guidelines.

Table 5.1 illustrates the submission of the completed questionnaires by provincial VEP Co-ordinators.

Table 5.1 Provinces and date of completed questionnaires received (N=9)

No	Province	Date completed questionnaires were received
1	Eastern Cape	5 June 2008
2	Free State	20 June 2008
3	Gauteng	14 March 2008
4	KwaZulu-Natal	4 June 2008
5	Limpopo	20 June 2008
6	Mpumalanga	14 March 2008
7	North West	20 June 2008
8	Northern Cape	20 June 2008
9	Western Cape	20 June 2008

Table 5.1 illustrates that Gauteng and Mpumalanga Provinces submitted their completed questionnaires on 14 March 2008. All the other provinces submitted during June 2008. This implies that 100% respondents participated in the research.

5.2.1.2 Shelter registration requirements in provinces

One of the objectives of the research was to determine provincial registration requirements of shelters for victims of abuse. Table 5.2 reflects, in alphabetical order, the provincial registration procedures for shelters for victims of abuse.

Table 5.2 Registration requirements (N=9)

Province	Required requirements
Eastern Cape	Non-Profit Organisation Certificate
Free State	Did not answer the question
Gauteng	Non-Profit Organisation Certificate, Environmental Health Certificate/Permit, copy of the building plan, Contract with owner of building, Inspection Report, Admission criteria, Weekly schedule programme for women and children and a weekly menu
KwaZulu-Natal	Non-Profit Organisation Certificate, Constitution, Business Plan, Social Worker's Report, Environmental Health Inspector's Report and programmes and services at the shelter
Limpopo	Non-Profit Organisation Certificate
Mpumalanga	Non-Profit Organisation Certificate, Constitution and should meet the Minimum Standards for shelters
Northern Cape	Non-Profit Organisation Certificate and should comply with Minimum Standards for Shelters. (The Province conducts regular follow-up with the shelter to establish if the shelter met the set requirements as established between the province and the shelter according to the Minimum Standards for Shelters)
North West	Non-Profit Organisation Certificate
Western Cape	Did not answer the question. However, during a site visit at Malibonge shelter, Oudtshoorn, a monitoring and evaluation team conducted an assessment at the shelter during 2007 and it is assumed that the method is still in place

Table 5.2 illustrates that the requirements for rendering services at a shelter in Gauteng province are more comprehensive when compared to the other provinces. It is evident that the requirements to run a shelter are based on registration as a non-profit organisation, which entails a constitution that outlines the management structure, the vision, objectives of the service of the organisation and annual audited financial statements. The Free State Province and Western Cape Province did not answer the question.

The main focus for shelters to be regarded as registered, is to submit their Non-Profit Organisation's (NPO) certificate to the provincial department, with the exception of Gauteng Province which put the following measures in place:

- ✓ An application form requesting approval from the provincial department to function as a shelter for victims of abuse was developed
- ✓ Capacity building and training of shelter staff must be included in the application
- ✓ The Province provides guidance and support to shelters in terms of how to complete a form, link shelters with other Departments such as Corporate Governance and Traditional Affairs and to apply for a Health Permit
- ✓ Application form for registration as a NPO is provided
- ✓ Inspection report as completed by the regional offices

The Provincial VEP Co-ordinators were questioned on how many shelters were 'regarded' as registered in the provinces during March 2008.

Table 5.3 Number of shelters 'regarded' as registered according to provincial VEP Co-ordinators (N=9)

Province	Number of registered shelters in provinces	Total
Eastern Cape	9	9
Free State	12	12
Gauteng	18	18
KwaZulu-Natal	13	13
Limpopo	7	7
Mpumalanga	3	3
Northern Cape	5	5
North West	1	1
Western Cape	9	9
Total (9)	77	77

Table 5.3 reflects the provincial registered shelters: Gauteng Province registered eighteen (18) shelters, KwaZulu-Natal Province thirteen (13) shelters followed by the Free State Province with twelve (12) shelters. Eastern Cape Province and Western Cape Provinces with nine (9) shelters each, Limpopo Province seven (7), Northern Cape Province with five (5) shelters, Mpumalanga three (3) shelters and followed by North West Province with one (1) shelter. Eastern Cape and North West Provinces also indicated that they utilize safe houses as identified in the provinces.

Table 5.3 reflects that 77 shelters are perceived to be registered, therefore nineteen (19) shelters that are on the consolidated list (see Appendix N) are not

regarded as registered according to the Provincial VEP Co-ordinators. It is clear whether the provincial VEP Co-ordinators are aware of the additional 19 shelters.

The Eastern Cape Province and North West Province indicated that they also utilize the services of safe houses in communities for crisis intervention. These accommodate victims of abuse for a short period of time, such as for one or two nights. A safe house is a house in the community that makes a room available to accommodate a victim in a crisis situation.

Shelters are mainly run by non-governmental organisations. It is questionable what the government's contribution is towards the running of the shelters.

5.2.1.3 Subsidization matters pertaining to shelters

For clarity purposes a brief summary of subsidization policy of government is presented to the reader so as to better understand the responses as presented in Table 5.4. The Department of Social Development's Policy on Financial Awards to Service Providers (2008:20) makes amongst others, provision for six (6) types of financing when purchasing services, namely:

- Seed financing: Where services are in the early stages of development and are not yet able to qualify for financing according to the set criteria, this type of financing may be considered.
- Capital financing: This type of financing is for non-consumable items such as furniture, equipment and maintenance. This type of financing may also be considered for the development of infrastructure, subject to the compliance with legislative requirements in terms of ownership.
- Venture financing: This type of financing is a one-off start-up financing.
- Partial financing: This type of financing applies in instances where only part of a broader service is approved for financing.
- Shared financing: This financing occurs when different funders decide to jointly fund a service or to fund different parts of a comprehensive service.

The question was posed in the questionnaire to Provincial VEP Co-ordinators as to how they fund shelters run by non-governmental organisations. Table 5.4 provides the answer.

It must however be noted that the respondents do not necessarily identify funding according to the 6 funding options as outlined in the above. Respondents used funding categories applicable to their own provincial funding options. This however causes difficulties in comparing and analyzing funding strategies.

Table 5.4 Kind of financial awards to non-governmental organisations (N=9)

Province	Kind of funds allocated to shelters
Eastern Cape	Partial funding. Funding mainly programmes such as skills development and income generating programmes Contributed towards each shelter R150 000 per year Once-off capital funding for furniture Also contributed toward stipends for housemothers R1 500 per housemother, 1 or 2 per shelter Volunteers: R700
Free State	Programme funding
Gauteng	Once-off capital funding for furniture and equipment is paid when shelters are initially funded Monthly claims per person per night @ R30.00 <u>Drop-ins</u> : Per person per night @ R20.00
KwaZulu-Natal	Funding only per victim per night @ R31.50
Limpopo	Seed funding: R30,000 per shelter annually
Mpumalanga	All four shelters in the province are government shelters and therefore no subsidizing matters applicable. Researcher was informed during a provincial workshop that the province contribute towards Badplaas Shelter R70.00 per night per victim and Middelburg Victim Support Centre

	R150.00 per night per victim as reported to researcher on 29 October 2009
North West	Capital funding: For the purchases of a Kombi in 2007 and claims per night per victim
Northern Cape	Funding posts (development workers) Programme funding and administrative costs based on business plans
Western Cape	Programme funding: Example: R75 000 per month for Saartjie Baartman shelter

Table 5.4 illustrates that between 2004 to 2006 KwaZulu-Natal Province contributed to unit costs in the amount of R27.00 per person per day and during 2007, R31.50. Gauteng Province contributed R26.00 during 2006 and increased the funding to R30.00 during 2007. In addition to these funds, Gauteng Province also provides for Drop-ins, meaning that if a person needs accommodation, the shelter can accommodate the person for a night at R15.60 per woman per night (during 2006) and increased the amount to R20.00 per woman per night in 2007. Monthly registers with claim forms must be submitted to the province on a regular basis for transfer of funds.

Eastern Cape and Western Cape Provinces contributed towards programme funding for shelters. Free State Province funded services at shelters. Limpopo Province provides seed funding. Mpumalanga Province manages only three (3) Government shelters. According to Annexure N, Known shelters in provinces, there are six (6) shelters in Mpumalanga Province. This means that three (3) shelters were not known to the Province on completion of the questionnaire. That was confirmed during October 2009 as researcher was informed about Badplaas Shelter and Middelburg Victim Support Centre. North West Province only has one (1) shelter and has contributed towards services at the shelter since 2007, followed by Northern Cape Province that funded posts (community development workers), administrative posts and programme funding. All funds are based on the assessments of business plans. The question arose why the Northern Cape Province provide funds for community development workers as

part of the shelter funding. The assumption is that the community workers are responsible for outreach programmes that might include issues of family violence.

The Public Finance Management Act 1 of 1999 regulates government funds. It puts accountability measures for these funds in place.

The following question was asked to Provincial VEP Co-ordinators to identify whether there is a need to establish criteria for funding shelters in their respective provinces. Figure 5.1 depicts the answers.

Figure 5.1 Is there a need in provinces to establish criteria for funding shelters? (N=9)

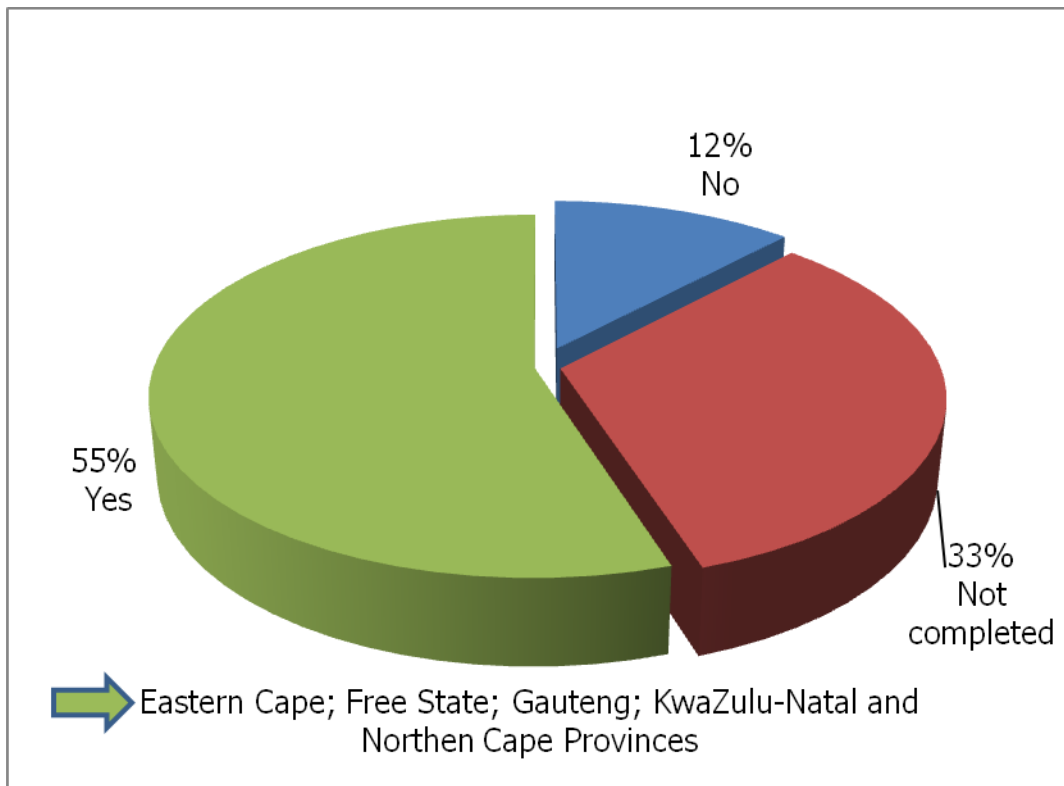


Figure 5.1 reflects that 55% of provinces indicated that there is a need to establish criteria for funding shelters. These provinces are Eastern Cape, Free State, Gauteng and KwaZulu-Natal Province. Twelve percent (12%) indicated

these criteria are required. The assumption is that the only three (3) shelters in Mpumalanga Province are regarded as government shelters. The information was provided by the Provincial VEP Co-ordinator. Thirty three (33%) of the provinces did not answer the question, namely Limpopo, North West and Western Cape Provinces. The assumption is that Limpopo province has only used seed funding as the criteria for funding shelters for the last few years. A once-off amount of R30,000 per shelter looks like an easy administrative task. One amount is divided according to the number of shelters and the funds are transferred without accountability measures. North West Province has only funded the one and only shelter in the province since 2007. This took place after the national Department of Social Development had strengthened the shelter in the Province with special funds received from Cabinet and allocated to the Criminal Asset Recovery Account (CARA) Funds. Western Cape Province gave no reason for not responding to the question.

5.2.1.4 Accountability

The Guide on Performance Management for Social Development Departments (2007:8) mentioned that "Responsibility, authority and accountability should be congruent." The authority to implement a project and to apply the necessary resources to achieve the objectives and associated performance standards, must be delegated to the same manager on whom the responsibility for that key performance area has been conferred. In these instances the provincial VEP Co-ordinators, with their seniors, are responsible for the accountability of provincial budgets allocated to the partnerships with Non-governmental Organisations. These should be used for Victim Empowerment programmes and services in shelters for victims of abuse. The question to the provincial VEP Co-ordinators was: "What procedures are in place to monitor the spending of the monies allocated to the shelter/s in your province?" The responses were as follows:

Table 5.5: Procedures to monitor the spending of funds allocated to shelters in provinces (N=9)

PROVINCE	PROCEDURES
Eastern Cape	Item base, relevant to programme as outlined in a business plan. The shelters are required to submit monthly and quarterly reports on the progress on the spending of the funds. The province transfer funds in phases (first phase to the amount of R75 000). Submit financial statements.
Free State	A monthly Income and Expenditure Statement is required. The Public Private Partnerships (PPP) unit in the Department of Social Development, Free State Province monitors the financial spending.
Gauteng	It is required of shelters to submit monthly registers with claim forms for the transfer of funds. Submission of quarterly progress reports on the financial expenditure. Case audits, onsite visits and a Development Quality Assurance (DQA) are conducted for monitoring and evaluation purposes to ensure both effectiveness and efficient service delivery and transformation in services. Funding programmes for example: Usindiso Ministries received R1,152,763 during 2007 plus R30 per person per day.
KwaZulu-Natal	Submission of monthly reports. Monitoring units in the Department engage with onsite visits and conduct a report on the spending plans.
Limpopo	Did not answer the question.
Mpumalanga	There is a service level agreement. Audited statements. Monitoring and evaluation process.
North West	On site visits to monitor and evaluate the programme.
Northern Cape	On site visits to monitor and evaluate the programme.
Western Cape	Monitoring and evaluation team visit the shelters to conduct reports on the spending of the funds.

It is clear from Table 5.5 that 8 provinces do have structures and procedures in place to monitor the spending of funds allocated to shelters. Limpopo Province did not answer the question. The assumption is that they do not monitor the

expenditure allocated to the shelters and therefore allocated only seed funding to the amount of R30,000 per shelter per year.

The Eastern Cape Province monitors the spending of funds according to the relevant programme, as outlined in a business plan and per item. Monthly and quarterly spending reports must be submitted, together with financial statements. The Province transfers funds to the shelters in phases. It is perceived as a good management practice, in the sense of providing better controlling mechanisms if there is any mismanagement of funds.

A monthly income and expenditure statement is required and the Departmental Public Private Partnerships (PPP) and officials monitor the financial spending.

Gauteng Province indicated in Table 5.3 that they have eighteen (18) shelters registered. This is the largest number of shelters from all provinces. These subsidized shelters should submit monthly registers - with claim forms - for the transfer of funds, as well as quarterly progress reports on the financial expenditure. The Province also conducts case audits, onsite visits and a Development Quality Assurance (DQA) team monitors and evaluates the effectiveness, efficient service delivery and transformation in services. Gauteng Province subsidise large amounts of money and it seems that it has a solid system in place for accountability of funds.

KwaZulu-Natal Province only subsidizes R31.50 per victim per night during 2008/09 Financial Year. Such a subsidy is not a sufficient contribution towards the running cost of shelters, when compared to the high inflation rate. Researcher was informed by the KwaZulu-Natal Provincial VEP Co-ordinator (during a Workshop on 6 October 2009), that the R32.50 was increased to R49.00 per victim per shelter during 2009. The increase is significant. Shelter managers are expected to submit monthly progress reports on the number of victims accommodated. These funds do not include the children of the victim.

Monitoring units in the Department engage with on-site visits and make an assessment.

Limpopo Province did not answer the question and the assumption is made that the Province does not have a monitor and evaluation system in place. They could also improve on their funding criteria by the utilization of other forms of funding, except seed funding.

Mpumalanga Province indicated that they have a service level agreement, request audited financial statements and a monitoring and evaluation system in place. The VEP Co-ordinator indicated in Table 5.3 that the Province only has three (3) Government shelters and no shelters run by non-governmental organisations.

North West, Northern Cape and Western Cape Provinces conduct on-site visits to monitor and evaluate the programmes in the shelters.

Western Cape Province engages with on-site visits at shelters and provide leadership to shelters, if the shelter needs corrective action. The Province develops, along with the shelter, a 'plan' to address corrective action. (Researcher experienced this intervention when visiting a shelter in Oudtshoorn during 2007.)

It is clear from the above mentioned accountability measures that provinces have monitoring and evaluation mechanisms in place, with the exception of Limpopo Province, which did not answer the question.

In the following section, the Provincial VEP Co-ordinators were asked on the employment of full time social workers at shelters for victims of abuse. The answers to this important question are presented on the next page.

5.2.1.5 Social work services at shelters

Victims of abuse experience many challenges in their lives and having to seek protection at a shelter, is a major traumatic experience for women and their children. The reality is that they must at some stage leave a shelter and integrate into society again. The shelters therefore have a mutual purpose of not only protecting the victim from the perpetrator, but also to enable the victims to go through a healing process. The process should enable them to get in touch with their own feelings again, in order to make informed decisions about their future. Professional counselling services are important in the healing process and therefore the question was posted to the Provincial VEP Co-ordinators, is a full time social work needed at a shelter?

Figure 5.2 Is a full time social worker needed at a shelter? (n=6)

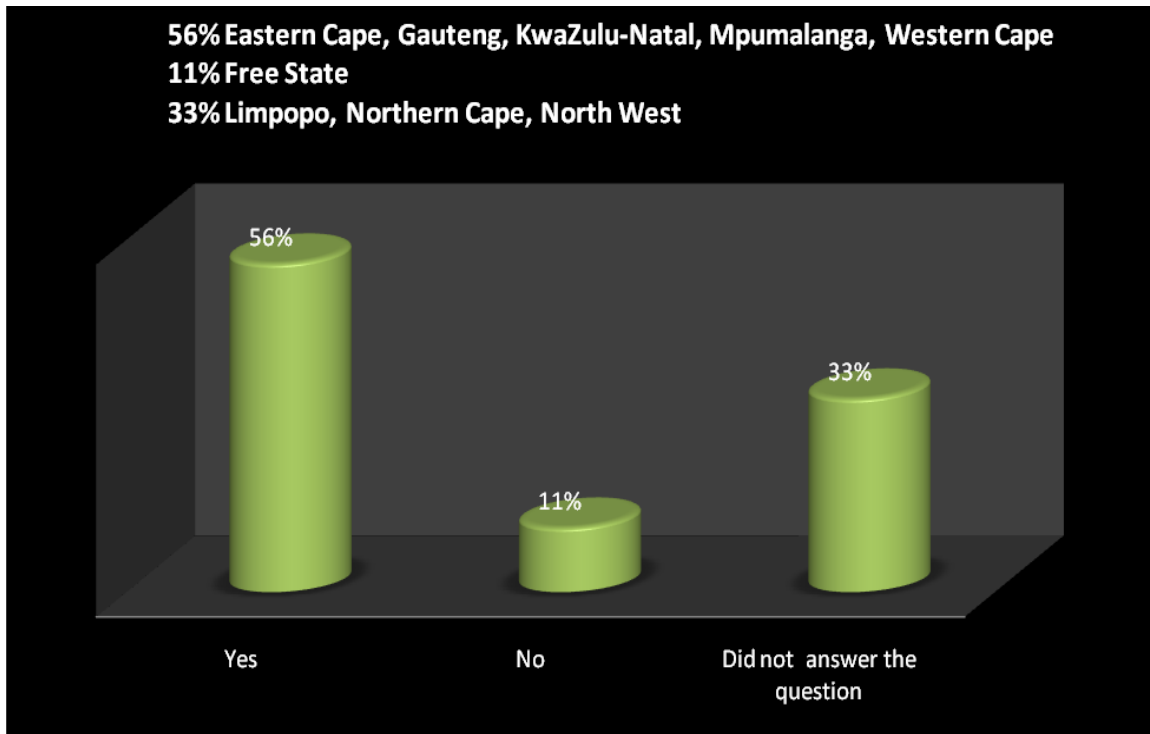


Figure 5.2 reflects the need of the social worker services at shelters in six (6) provinces. Gauteng Province motivated that women and their children arrive at the shelter traumatized, affected and abused. They have an emotional crisis due to abuse which they have experienced in their families. It is therefore essential

that shelters should have full time social workers. The social worker will make assessments; render intensive social work services (counselling, holistic and therapeutic programmes for both abused women and children). Social workers are responsible for facilitating the development of Care Plans and Individual Development Plans (IDP) for each client. KwaZulu-Natal, Western Cape and Eastern Cape Provinces are in agreement with the latter, that social work services are important at shelters, due to the complexity of the phenomenon. They understand the required professional interventions in dealing with victims of abuse and their children and refer the clients to other professions as and when needed. Eastern Cape Province added that the Province also assists with the development of an Organisational Development Plan (ODP) to ensure that the interests of victims are taken care off.

North West, Northern Cape and Limpopo Provinces did not respond to the question and the assumption is that those shelters utilize lay counsellors and refer clients to 'outside' professional services, as and when needed. Northern Cape Province indicated that in their case they appoint development workers who form part of the staff component. The question arose why they are utilizing the services of development workers in the shelters, or if the shelters are utilizing them as part of their outreach programmes to communities. It is a well known fact that there is a shortage of social workers in South Africa. This is not the ideal situation. The Free State Province indicated that the social worker should be linked to the shelter to monitor and evaluate the services. There is no indication of the necessity for professional interventions required and this is a major concern. The assumption is that the Free State Province is satisfied with the services as rendered by the shelters with part time social workers, or referrals to social service professionals in the communities. Victims of abuse need professional intervention in order to support, protect and empower them. They need the most effective and efficient manner in order so that they are able

to reintegrate into society. The issue of professional social workers will be addressed in Chapter 7.

5.2.1.6 Guidelines for a shelter service delivery model for victims of abuse

The aim of the study is to propose the development of guidelines for a shelter service delivery model for victims of abuse. This should be utilized by social service providers based on the research findings. It is therefore important to obtain the view of the Provincial VEP Co-ordinators on their contributions and concerns towards the development of a model. The following came to light.

Table 5.6 Concerns and contributions towards the development of a shelter model (n=4)

Province	Concern	Contribution
Eastern Cape	The infrastructures at shelters are at present inadequate. Shelters need norms	We need a model such as Uitenhage – Kwanobuhle government shelter
Free State	Shelter guidelines should be based on a best practice model	The Province should identify the best practice model
	The present funding is insufficient for shelters	The funds allocated should correlate with the model
	The model should take into consideration the compensation of employees	The budget should be in line with the professional compensation of employees
Gauteng	The lack of ability and skills of committee members to manage and govern shelters	None
	Lack of financial skills. Lack of accommodation for the older boy with his mother. The family model should be explored	None
	There is no legislative requirement for shelters to register as compared to Child Care that legislates the registration of shelters for street children	None
Northern Cape	None	Department of Social Development needs a unified model for funding shelters

Table 5.6 indicates that only four provinces completed this section of the questionnaire regarding the concerns and contributions in the development of a shelter model. Eastern Cape Province is primarily concerned about inadequate infrastructure in shelters and the need to establish norms. They identified Kwanobuhle Government Shelter, Uitenhage, as a good model. Kwanobuhle Government Shelter is centralized in a previously disadvantaged community in a township just outside Uitenhage. This model comprises of two entry points. One entry point serves as a community outreach centre and the other entry point, for the purposes of a shelter under one roof. Kwanobuhle Government Shelter has an income generating programme in the form of a cafeteria. This cafeteria serves as a skills development programme for victims of abuse. This model is exclusive and is managed by the Government of the Eastern Cape Province and did not participate in the research. Government shelters were not requested to participate in view of the extensive differences in how government shelters and Non-Governmental Organisations (shelters) are financed. Government shelters are 100% financed by Government Funds whereas NGO's depends on subsidies and fund raising. This difference in funding was anticipated to have a significant influence on answering the questionnaire questions as well as management and management styles.

From the total of 105 shelters in South Africa only nine are Governmental One-stop Services with a shelter attached to it. Therefore by far the majority (96) of the shelters are established and managed by NGOs. It is therefore logical that the NGO sector is the major service delivery system and merits research to develop guidelines for future development of services.

The Free State Province highlighted that the province should identify the best practice model and the matter of insufficient funding should be addressed. They further recommended that the remuneration of staff should be aligned with the professional compensation of employees in the public sector. Gauteng Province

raised concern about the incompetence of committee members and the need for improved financial skills. The lack of accommodation for older boys in shelters is of great concern, especially when government policies advocate that family members should stay together as far as possible. Gauteng Province also raised concern about the absence of legislative requirements to register shelters for victims of abuse. The Northern Cape Province is in favour of standardized funding criteria.

This concludes the section of the findings of the Provincial Victim Empowerment Programme Co-ordinators. The following section presents the research results for shelter managers.

Section B

5.3 Research findings from shelter managers

This section represents the research results for shelter managers

5.3.1 Questionnaire 2. Shelter managers (See Appendix L)

The research question to be addressed in this section is: "How do the shelters that are managed by Non-Governmental Organisations function?" The following main elements in the completed questionnaire will be looked at, namely:

- Registration information of the shelters
- Background information on the establishment of each shelter
- Management of shelter
- Focus group to be accommodated in shelters
- Educational programmes for children during their stay in the shelters
- Services and programmes for victims of abuse in shelters
- Financial resources
- Recommendation for elements to be covered in the proposed guidelines for a shelter model

5.3.2 Data base for shelters in nine provinces

The data base for the sample of 32 (33%) shelters is presented in Table 5.9.

Table 5.7 List of shelter sampling and infrastructure (n=32)

No	Name and location of shelter	Registration as NPO and year of establishment	Women	Children	Rooms	Toilets	Bath/shower	Total no of beds
1	Living Waters. East London	023-670 1998	28	20	21	7	9	48
2	Mother of Hope. Port Elizabeth	004-615 1988	8	10	3	1	1	18
3	The Haven. Port Elizabeth	004-615 1994	25	-	6	4	3	25
4	UNCEDO Loomama. Motherwell	004-615 2008	6	-	2	1	2	6
5	Gold Fields Family Advice Organisation. Welkom	017-566 2003	20	-	3	2	2	20
6	Serobe Crisis Center. Bloemfontein	015-355 2002	15	-	4	1	1	15
7	Tshepong Ya Rona Shelter. Bethlehem	002-670 Did not answer the question	12	-	4	1	1	12
8	A Re Ageng Social Services. Bekkersdal	027-492 2008	16	-	9	2	1	16
9	Beth Shan. Pretoria	102-787 1997	15	-	5	1	1	15
10	Eldorado Park Women's Forum. Eldorado Park	019-372 2002	18	-	4	2	3	18
11	Mali Martin Polokegong Centre. Bronkhorstspuit	033-805 2003	25	-	18	7	8	25
12	Mercy House. Pretoria	014-682 2000	17	4	5	5	5	21

13	Nissa Institute for Women's Development. Lenasia	004-410 1994	22	-	5	4	3	22
14	Usindiso Ministries. Johannesburg	027-723 2003	80	35	31	10	10	115
15	Ester House. Pietermaritzburg	027-101 2001	40	-	3	3	3	40
16	Ethembeni Crisis Care Centre. KwaNdengezi	040-377 2002	8	8	2	3	3	16
17	Sinethemba Shelter. Ifafa	035-231 2003	10	5	4	2	2	15
18	Child Welfare Shelter for Women and Children. Polokwani	001-670 1996	16	-	3	2	2	16
19	Far North Network on Family Violence. Thohoyandou	027-101 2006	8	10	3	1	2	18
20	Levubu Victim Empowerment. Levubu	047-821 2000	20	10	5	3	6	30
21	South African Vroue Federasie – Huis Maroela. Phalaborwa	001-515 2002	12	-	5	3	3	12
22	Badplaas Shelter. Badplaas	046-927 2006	16	-	5	3	3	16
23	Middelburg Victim Support Centre. Middelburg	032-141 1997	9	-	3	3	3	9
24	Etehembeni Community and Trauma Shelter. De Aar	040-377 2002	6	4	3	2	2	10
25	Tamar Shelter Society. Kimberley	Lack of page 2006	12	-	4	3	3	12
26	Grace Help Centre. Moinooi	031-333 2003	25	-	4	4	4	25
27	Creating Effective Families Shelter. Mosselbay	010-933 1997	12	-	4	3	4	12

28	Dusk to Dawn Haven. Ravensmead	027-371 2003	14	17	7	3	4	31
29	Sisters Incorporated. Kenilworth	003-160 1994	20	18	10	5	7	38
30	St Annes. Woodstock	002-947 1998	13	-	5	3	4	13
31	Stellenbosch Safe House. Stellenbosch	050-482 2008	8	6	6	2	2	14
32	United Sanctuary Against Abuse. Atlantis	030-491 2002	10	8	3	3	3	18
Total	32	32	566	155	213	106	119	721

Table 5.7 shows that 32 shelters can accommodate a total of 566 adult victims and 155 children at any given time. This gives us a total of 721 beds. Those shelters that indicated only adults, also accommodate children by utilizing mattresses for the children to sleep on. The exception is Nissa Institute for Women's Development. It does not allow any child to sleep on a mattress on the floor. It is not clear from the research how many children can sleep on mattresses in the shelters. It is known from verbal responses from some shelter managers that no women go to a shelter without their child/ren.

The study found that there are 199 rooms in 32 shelters. Those rooms can accommodate 721 victims, with an average of 4 persons per room. The square meter per room is, however, not available. There are 105 toilet facilities for seven (7) victims per toilet and 110 bath- and shower facilities for an average of seven (7) victims per bath/shower. The assumption is that the latter should be sufficient for the 721 victims in the shelters.

The sample (33%) includes shelters from all nine (9) provinces. The purpose of the next table is to explain how many shelters per province form the sample of the research, as well as which shelter is found in which province - according to the previous table, Table 5.7.

Table 5.8 Breakdown of sample per province and percentage of sample (n=32)

Province	Number of shelters per province (see 5.7)	% per province
Eastern Cape	1, 2, 3, 4	12.50
Free State	5, 6, 7	9.37
Gauteng	8, 9, 10, 11, 12, 13, 14	21.88
KwaZulu-Natal	15, 16, 17	9.37
Limpopo	18, 19, 20, 21	12.50
Mpumalanga	22, 23	6.25
Northern Cape	24, 25	6.25
North West	26	3.13
Western Cape	27, 28, 29, 30, 31, 32	18.75
Total	32	100%

Table 5.8 demonstrates the number of shelters per location as well as the percentage. It is important to mention that Yokhuselo Haven is the umbrella body for three shelters that reflect the same NPO number in Table 5.9, namely:

- Mother of Hope, Port Elizabeth
- The Haven, Port Elizabeth
- Uncedo Loomama, Port Elizabeth

Table 5.9 further indicates that prior to 1994 (during 1988) one (1) shelter was established and between 1994 and 2008, the following numbers of shelters were established, namely:

Table 5.9 Number of shelters established in provinces (n=32)

Year	Number of shelters established in Provinces	Number of shelters (see Table 5.7)
1988	One shelter in Eastern cape	2
1994	One shelter in each of the following provinces: Eastern Cape, Gauteng and Western Cape	3, 13, 29
1996	One shelter in Limpopo	18
1997	One shelter in each of the following provinces: Gauteng, Mpumalanga and Western Cape	9,23, 27
1998	One shelter in Eastern Cape and Western Cape	21,30
2000	One shelter in Gauteng and Limpopo	12, 20
2001	One shelter in KwaZulu-Natal	15
2002	One shelter in each of the following provinces: Gauteng, KwaZulu-Natal, Limpopo, Northern Cape and Western Cape	6,10, 16, 21, 24, 32
2003	Shelters in each of the following provinces: Free State, Gauteng, KwaZulu-Natal, North West and Western Cape	5,11, 14, 17, 26, 28
2006	One shelter in each of the following provinces: Limpopo, Northern Cape and Mpumalanga	19, 22, 25
2008	One shelter in each of the following provinces: Eastern Cape, Gauteng and Western Cape	4, 8, 31
NB. Tshepong Ya Rona Shelter (7), Bethlehem question was not completed		
Total 32		

It is also important to note that Living Waters (1), East London extended its focus from 1994 onwards to accommodate victims of violence. Prior to that, since 1959, it has been a safe place for pregnant girls/women.

Six (6) shelters were established during 2002 and another six (6) during 2003. The reason might be due to the Policy Framework and Strategy for Shelters for Victims of Domestic Violence in South Africa. This was launched during 2003.

In Table 5.10 researcher reflects the financial expenditure and human resources of the 32 shelters. The focus is on how many staff members are employed at the shelters, compared with how many victims each shelter can accommodate. The salaries of the staff are also indicated. Researcher further looks at Government contribution towards the shelters over a period of three financial years (2005 to 2008), unit cost per day per person, unit cost per month and the total expenditure per month per shelter.

Table 5.10 Staff and finances at shelters (n=32)

No	Shelter	Salaries per month *R	Staff	Unit cost per day R	Unit cost per month R	Government contribution R			No of victims	Total expenditure per month R (2007/08)
						2005/06	2006/07	2007/08		
Eastern Cape Province (n=4)										
1	Living Waters. East London	65,000	15	65,00	780	unknown	500,000	600,000	48	115,000
2	Mother of Hope. Port Elizabeth	unknown	1	unknown	unknown	0	0	0	18	No set budget
3	The Haven. Port Elizabeth	unknown	1	unknown	unknown	0	0	0	25	No set budget
4	UNCEDO Loomama. Motherwell	unknown	1	unknown	unknown	0	0	0	6	No set budget
Sub-total	4	65,000	18	65,00	780	0	500,000	600,000	97	115,000
Free State Province (n=3)										
5	Gold Fields Family Advice Organisation. Welkom	8,500	4	208,34	2,500	130,000	130,000	130,000	20	15,000
6	Serobe Crisis Center. Bloemfontein	5,000	2	40,00	1,200	109,000	114,736	122,000	15	17,210
7	Tshepong Ya Rona Shelter. Bethlehem	7,000	4	150,00	4,800	90,000	102,000	126,000	12	14,700
Sub-total	3	20,500	10	398,34	8,500	329,000	346,736	378,000	47	46,910

Gauteng Province (n=7)										
8	A Re Ageng Social Services. Bekkersdal	65,000	13	50,00	1,550	0	700,000	815,760	16	124,416
9	Beth Shan. Pretoria	21,000	6	100,00	3,100	0	140,400	548,331	15	47,500
10	Eldorado Park. Women's Forum	68,500	6	60,00	960	unknown	285,877	450,600	18	80,000
11	Mali Martin Polokegong Centre. Bronkhorstspuit	40,000	8	126,00	3,780	773,000	773,000	773,000	25	86,600
12	Mercy House. Pretoria	39,800	7	100,00	3,000	0	94,531	340,956	21	61,230
13	Nissa Institute for Women's Development. Lenasia	38,847	3	88,00	2,633	373,657	166,531	188,021	22	57,500
14	Usindiso Ministries. Johannesburg	42,000	15	30,00	915	1,277,282	1,423,540	1,152,763	115	81,000
Sub-total	7	315,147	58	554,00	15,938	2,423,939	4,583,879	4,269,431	232	538,246
KwaZulu-Natal Province (n=3)										
15	Ester House. Pietermaritzburg	8,250	5	33,00	1,320	0	459,900	481,800	40	40,000
16	Ethembeni Crisis Care Centre. KwaNdengezi	11,000	5	33,00	990	54,000	64,800	71,280	16	25,000
17	Sinethemba Shelter. Ifafa	7,000	6	100,00	3,000	40,075	53,405	80,446	15	14,800
Sub-total	3	26,250	16	166,00	5,310	94,075	578,105	633,526	71	79,800
Limpopo Province (n=4)										
18	Child Welfare Shelter for Women and Children.	15,000	5	100,00	3,000	unknown	unknown	200,000	16	29,700

	Polokwani									
19	Far North Network on Family Violence. Thohoyandou	7,000	6	100,00	3,000	0	0	50,000	18	13,720
20	Levubu Victim Empowerment. Levubu	7,200	5	25,00	775	0	30,000	40,000	30	16,900
21	South African Vroue Federasie-Huis Maroela. Phalaborwa	3,800	4	0	0	0	0	0	12	0
Sub-total	4	33,000	20	225,00	6,775	0	30,000	290,000	76	60,320
Mpumalanga Province (n=2)										
22	Middelburg Victim Support Centre. Middelburg	25,000	5	40,00	360	0	14,000	200,000	9	19,908
23	Badplaas Shelter. Badplaas	0	0	30,00	10,800	0	500,000	306,000	16	38,000
Sub-total	2	25,000	5	70,00	11,160	0	514,000	506,000	25	57,908
Northern Cape Province (n=2)										
24	Etehembeni Community and Trauma Shelter. De Aar	5,100	1	75,00	884	0	0	0	10	7,625
25	Tamar Shelter Society. Kimberley	5,304	3	60,00	1,860	52,029	54,636	77,914	12	45,304
Sub-total	2	10,404	4	135,00	2,744	52,029	54,636	77,914	22	52,929
North West Province (n=1)										
26	Grace Help Centre. Mooiwoo	35,500	9	120,00	3,720	0	0	133,000	25	125,549

Sub-total	1	35,500	9	120,00	3,720	0	0	133,000	25	125,549
Western Cape Province (n=6)										
27	Creating Effective Families Shelter. Mosselbay	14,500	5	50,00	1,500	0	11,833	11,833	12	20,500
28	Dusk to Dawn Haven. Ravensmead	38,000	8	40,00	400	0	0	0	31	64,800
29	Sisters Incorporated. Kenilworth	57,515	10	98,26	2,679	120,490	120,490	120,490	38	73,833
30	St Annes Home. Woodstock	63,085	11	175,00	2,100	100,202	98,924	101,894	13	115,081
31	Stellenbosch Safe House. Stellenbosch	25,000	5	115,00	3,571	0	0	0	14	75,050
32	United Sanctuary Against Abuse. Atlantis	36,350	8	20,00	600	2,750	5,500	5,500	18	59,000
Sub-total	6	234,450	47	498,26	10,850	223,442	236,747	239,717	126	408,264
Grand total	32	765,001	187	2,231,60	65,777	3,122,485	6,644,703	7,127,588	721	1,484,926

Table 5.10 outlines the finances (income, expenditure pertaining to staff members and victims of abuse) of the 32 shelters that accommodate a total of 721 victims. There are 187 staff members at the 32 shelters. Four shelters (numbers 2, 3, 4 and 24) only have one staff member and shelter 23 has no full time staff. The shelter function with the help of volunteers only. The first four shelters cater for 59 victims and shelter number 23 for sixteen (16) victims, without a full time staff member. Shelter no 23 functions with volunteers only - as we will discuss in Figure 5.3. Shelters 2, 3, 4, and 21 did not have a monthly budget. They reflected in the questionnaire that they rely mostly on donations to survive and to provide in the daily needs of the most vulnerable people. The average unit cost contribution per day per victim in a shelter is R3.12. This poses a challenge for the South African Government that promotes partnerships with Non-Governmental Organisations. It is necessary to take care of the most vulnerable people in society, such as women and their children.

Government financial contribution towards shelters for a financial cycle of three years, was as follows:

2005/06
R3,122,492

Seven (7) shelters (see shelters number 2, 3, 4, 21, 24, 28 & 31) did not receive funding from government as mentioned above. This does not imply that they did, or did not, submit a business plan for funding to the provincial departments.

Five (5) shelters indicated that they do not have a set budget for food for the victims in the shelters (2, 3, 4, 17 & 21). Far North Network on family Violence, Thohoyandou (19) stated that daily nutrition remains a challenge for the shelter. They further indicated that the housemothers prepare daily meals from what is available per day and do not have menus. The South African Vroue-Federasie, Huis Maroela, Phalaborwa depends on charity and daily and monthly donations to feed the victims. Their food contributions are from Checkers and Pick and Pay

supermarkets in town. The South African Vroue-Federasie social workers, who oversee to the psycho-social well being of the victims of domestic violence are at the premises of Huis Maroela. These social workers also render services to the broader community in Phalaborwa.

5.3.3 Volunteer services at shelters

It is obvious that with limited staff in shelters, the value of volunteers should not be under estimated. No question was asked on the utilization of volunteers at shelters for victims of abuse. Some shelters mentioned the number of volunteers in their shelters. This is shown in Figure 5.3, to follow.

Figure 5.3 Volunteer services at shelters (n=32)

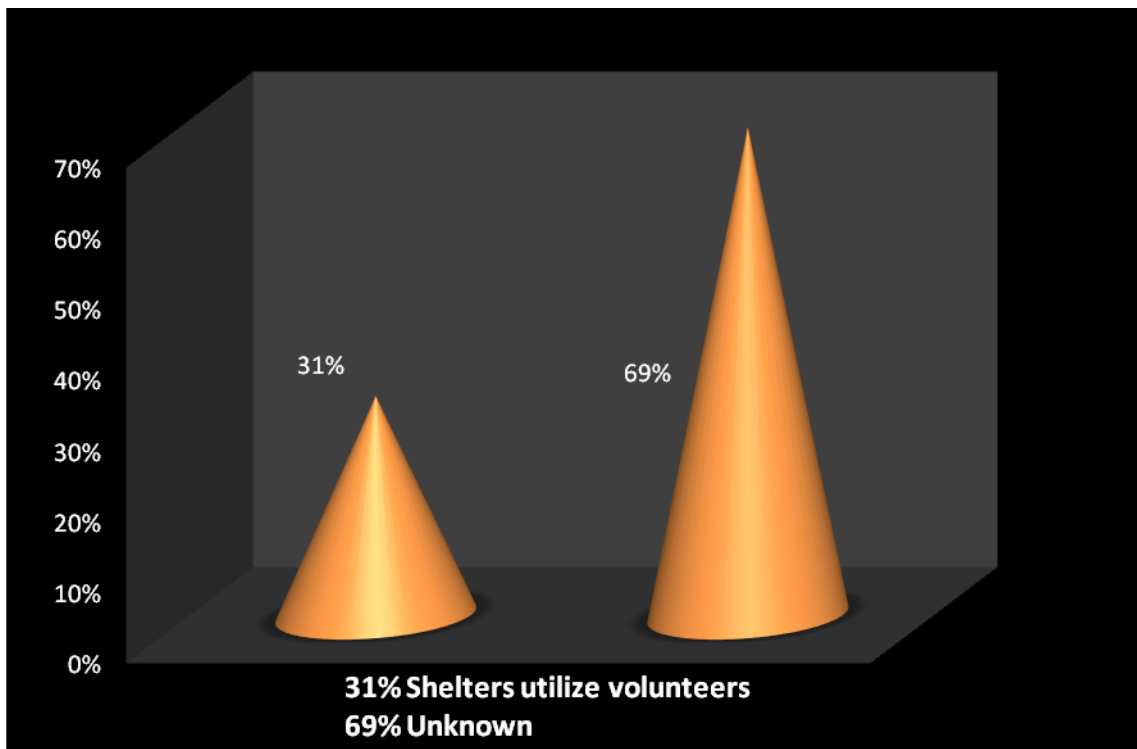


Figure 5.3 reflects 31% (1, 2, 3, 4, 12, 19, 22, 24, 29, 30) utilizing volunteer services at their shelters. Sisters Incorporated, Kenilworth (29) work with 40 volunteers, which is significant. This is followed by Yokhuselo Haven, East London, the umbrella body for Mother of Hope two (2), The Haven three (3) and Undedo Loomama four (4) with 30 volunteers and Living Waters, East London

with 20 volunteers. Badplaas shelter, Badplaas (22) work with twelve (12) volunteers, Etehembeni Community and Outreach Centre, De Aar (24) with six (6) volunteers, Far North Network on Family Violence, Thohoyandou (19) work with three (3) volunteers followed by Mercy House, Pretoria (12) with one (1) volunteer. The other shelters did not reflect volunteer services in their questionnaires. (See Appendix N) The interpretation is that those shelters that reflected the utilization of volunteers experience the value of volunteers in their services. Etehembeni Community and Outreach Centre, De Aar (24), give stipends to volunteers at R1 000 per volunteer per month. The Northern Cape Province previously nominated some of the volunteers to attend workshops at the National Department of Social Development Victim Empowerment Programme initiatives. It is evident from ten (10) shelters (31%) shelters utilizing 116 volunteers, that their contribution towards the services at shelters for victims of abuse is significant. House of Mercy, Pretoria received Government funds to the amount of R2,500 for one volunteer per month.

It is found that there are no compatible amount between Gauteng and Northern Cape Provinces for stipends volunteers. Some shelters do not have social workers as part of their staff component. They rely mostly on the services of the manager of the shelter or on volunteers. The Social Service Professional Act 1978, as amended, requires social workers to comply with the Code of Ethics for social work profession. Working in the service field of domestic violence requires specific knowledge on the phenomena in order to address the needs of victims professionally and effectively. Therefore, it should be compulsory for social auxiliary workers and volunteers to receive appropriate training in victim support.

It will be very interesting to conduct research on how many volunteers are working in shelters and obtain their educational profile and field of interest. It will then be possible to assist some of them in career path development in the victim Empowerment Programme.

Table 5.11 outlines the changes that shelter managers will consider when establishing a new shelter.

5.3.4 Changes in approach if required to establish a new shelter

The focus of this sub-section is to learn from the experiences of shelter managers in managing shelters for victims of abuse. They provide their views regarding their financial responsibilities and staff resources. They also indicate what changes they would put in place and give proposed solutions, should they be required to establish a new shelter. Table 5.11 presents a summary of the main requirements mentioned by managers. It is presented in alphabetical order and for each shelter.

Table 5.11 Changes in approach if required to establish a new shelter (n=32)

Province	Changes as indicated by shelter managers in provinces
Eastern Cape	Legislation: Change the Domestic Violence Act so that the abuser can be removed from the family in order for the family not to be destitute regarding housing.
Free State	Training programmes: Training programmes for counsellors on emotional support and de-briefing and how they can assist the victims of domestic violence in a holistic approach.
Gauteng	Policy: Change the admission criteria of shelters in order for boys to be accommodated with their mother and other brothers and sisters at the same shelter. The shelter criteria should accommodate boys till the age of 14. The mother is responsible to take full care of her children during their stay at the shelter. If the child is in need of care and protection, consider alternative options to place the child in a children's facility in accordance to the Children's Act 38 of 2005 (section not implemented yet – November 2009). A child, who did not meet the criteria of a shelter, should be referred to a designated social worker to open a court case. Programmes:

	<p>Conduct a needs assessment first to establish the needs of the direct victim including their children. Establish family units in shelters to keep the members of the family together.</p> <p><u>Buildings and infrastructure:</u> An appropriate building is essential. A more homely building would be preferred instead of domatrics or single rooms in a shelter.</p> <p>Advocate for a second phase housing to accommodate women who are in the position to leave the shelter to function on their own.</p> <p><u>Human resources:</u> Advocate for sufficient staff in shelters, with their own job descriptions and own work plans. At present, due to a shortage of staff in shelters, it is expected from one staff member to be responsible for mutual tasks in the shelters.</p>
Limpopo	<p><u>Training programme:</u> There is a great need for a training programme for counsellors. This training programme should transfer skills and knowledge to counsellors in victim empowerment and trauma support.</p> <p>Another need is a training programme for counsellors at shelters to educate victims, especially women and children, who are living with scars of abuse. They are traumatized for almost the rest of their lives due to domestic violence. Related programmes can empower them to make informed decisions for their future, based on options.</p>
KwaZulu-Natal	<p><u>Buildings and infrastructure:</u> Establish a 'bridging home' for women, meaning advocate for a second stage house scheme where they can live after leaving the shelter, instead of going back to the perpetrator and be exposed to the same home environment of abuse.</p> <p>Shelters have lately been requested to accommodate foreigners, such as women from Zimbabwe. Due to the limited space in shelters as well as the short period of stay at the shelter, they need another type of accommodation such as a second stage housing scheme. (NB All people in South Africa are protected under the existing laws of the South African Government, even if</p>

	they are not citizens of South Africa.)
Mpumalanga	No comments
Northern Cape	<p><u>Policy:</u> To have a manual on what domestic violence is and how the shelter can empower victims. The need to understand the cycle of violence by staff is imperative and to transfer the knowledge the victims.</p> <p><u>Partnerships:</u> The involvement of more roleplayers in order to establish or improve funding allocation for the shelter.</p> <p>Establish a shelter for victims of domestic violence in each rural area.</p>
North West	<p><u>Policy:</u> Policies and procedures and minimum standards.</p> <p>Family and community centered focus.</p> <p>Always be open to suggestions to improve services and programmes.</p>
Western Cape	<p><u>Policy:</u> Start with Policy and Procedure Manual for managing shelters.</p> <p><u>Financial resources:</u> Make sure there are enough finances to run the shelter for at least one year.</p> <p><u>Human resources:</u> Appoint the right people at management level.</p> <p>Employ staff with a passion for the work.</p> <p>Get more men involved for shelter activities.</p> <p><u>Programmes:</u> Ensure family programmes. Improve services to address the potential threat to the family. Effective youth programme.</p> <p><u>Services:</u> Full time occupational therapist in order to train victims of abuse with a specific occupational skill.</p> <p>A shelter is a very expensive service, but a space for abused women to calm down, work through their trauma and restore their dignity.</p> <p><u>Partnerships</u></p> <p>The struggle for assistance from government.</p>

The need to review and change the Domestic Violence Act was raised by the Eastern Cape Province in order to enable women to remain in their houses and for the perpetrators to be removed from homes. It is clear from Table 5.11 that managers would like to have a procedure manual. This manual should enable the

shelters to manage victims of abuse, how to conduct a needs assessment and all remedies available to the victims to protect them from further abuse. The need for training programmes was identified by Free State and Limpopo Provinces. Shelters on victim support and trauma counselling are also needed, as well as a programme for service providers to intervene effectively with victims of abuse.

The Gauteng shelters feel that they will change their approach, if required to establish a new shelter. They will first look at the infrastructure of the building. They need to establish family units, connected to family programmes, in order to keep the family together as a unit.

Gauteng Province shelters strongly feel that the admission criteria for boys should be reconsidered so that boys of all ages can be accommodated with their mothers. If the mother cannot control the behaviour of her boy then alternative options should be looked at. The case can also be referred to a designated social worker for further intervention.

The matter of sufficient staff at shelters was highlighted. Gauteng and KwaZulu-Natal shelters mentioned the issue of second stage housing (transit house) to accommodate women, who are in the position to leave the shelters and function on their own. There are only two second stage housing models known to researcher, namely Lana's Lodge, who caters for victims of Mother of Hope, The Haven and UNCEDO Loomama shelters in Port Elizabeth, and Saartjie Baartman Shelter in Cape Town. Lana's Lodge provides computer literacy classes to women in their shelters as part of their skills development programme. Lana's Lodge does not receive any funding from government and runs three shelters. There is also the second stage house under their umbrella organisation, namely Yokhuselo Haven Organisation. This does not imply that Yokhuselo Haven Organisation did, or did not, submit business plans for these shelters to be funded. However, it is significant that they cater for 49 victims at their three shelters. They do not

receive any financial contribution from Government, but feel that they are making a difference.

The need to establish shelters in deep rural areas will be considered by the Northern Cape shelters.

The shelters in Gauteng and Western Cape provinces will advocate for more staff. A financial contribution from the provincial government departments is needed in order to sustain the services.

It is clear from the proposed solutions from shelter managers that they have to plan well in advance when they want to establish a shelter. They will have to scrutinize the infrastructure of the building to see if it meets their needs for accommodating family members who are victims of abuse. They have to establish a second stage housing to accommodate victims who went through the shelter programme successfully and who are ready to leave the shelter to function independently. This suggestion is significant and should be achieved through the interaction of the National Department of Social Development, National Shelter Movement and the Department of Human Settlement to be addressed in future. The shelter managers could first lobby for staff salaries at the Provincial Departments of Social Development. They would like to have a procedure manual in place. The manual should explain the steps to follow in case management of victims of abuse, a shelter intake policy, training manuals for staff and for victims of abuse. The purpose thereof should be to empower them with knowledge on domestic violence and the remedies should enable them to make informed decision about their future. They stressed that they also need skills development programmes, connected to income generating programmes, so that they can sustain themselves.

The shelter managers identified the following challenges in managing their shelters.

5.3.5 Challenges facing managing shelters

The focus of this sub-section is to identify the challenges for shelter managers when they have to manage their shelters in the present economic climate with the high inflation rate, the high food prices, the great demand for social service professionals and the shortage of social workers. The section elaborates on finances to run the shelter, educational needs of victims, training needs of staff members, programmes and services in shelters, as well as partnerships.

Table 5.12 presents a summary of the main factors mentioned by managers. It is given in alphabetical order and according to provinces.

Table 5.12 Challenges facing managing shelters (n=32)

Province	Challenges
Eastern Cape	<p>Finances: Living Waters Shelter, East London received R600,000 (previous financial year R500,000) from the Provincial Department of Social Development in the last financial year. They feel that they do not have any challenges.</p> <p>Yokhuselo Haven Organisation runs Mother of Hope shelter, The Haven shelter and UNCEDO Loomama shelter (2, 3 & 4 in Table 5.2). They indicated that they run these shelters very sufficiently. They are in the process to establish another shelter in previously disadvantaged area in a Township close to Port Elizabeth. They will operate the shelter in the same way as the other 3 shelters - with one housemother - and utilize the services of FAMSA for counselling the victims.</p>
Free State	Not answered.
Gauteng	<p>Finances: The shelters in Gauteng Province indicated that the shelter funding from the Department of Social Development is far too little to meet the shelter's needs.</p> <p>They further indicated that there are no jobs for women and thus it is difficult for the women to move on with their lives without jobs.</p>

Education:

Women have little or no education at all. Skills development is the core service.

Policy:

The shelters have lately been confronted with victims of abuse who went from one shelter to the other and are known as 'shelter hoppers.' The shelters would like to see a policy in place on how to deal with these people in the province.

Some shelters are also confronted with victims of abuse who are dependent on prescription medication and who have drinking habits.

Programmes:

The challenge is that programmes for children of the victims of abuse should be based on a needs assessment in the shelter. It is obvious that children from abusive relationships also need intervention from a qualified profession, such as a social worker.

Another challenge is to get abused women to move on with their lives. Skills development programmes should empower women to reach for new horizons, without the dependency on the perpetrator.

Programmes in shelters should also cater for referral to substance abuse organisations, even on out-patient treatment basis after the victim had gone through a detoxification treatment at a provincial hospital. Therefore it is advisable that the shelters build a support network to treat victims with an alcohol problem, over-the-counter medication and other substances.

Human resources: Employ staff with passion and not necessarily with the qualifications. The assumption is that some shelters experienced that staff with qualifications, do not necessarily have the passion for the specific working environment where they are confronted daily with the most traumatized people in society. When shelters recruit staff, they should highlight in their job specifications that the incumbent should have the required qualification and passion for the specific phenomenon.

Management: The shelter manager is responsible for managing the shelter with the victims of abuse, but has an insufficient staff component. They feel that the

	<p>responsibility is huge and they are accountable for all aspects with regard to the shelter itself. The victims, on the other hand, need support, safety, security and daily programmes. They also accompany the victims to courts and therefore mentioned they are responsible for 'whatever' happens in the shelter during their absence.</p> <p>Another challenge is the continuous changes in government formats of statistics, progress reports and time frames to submit the required information. The administration thereof is a full time job for one staff member. They proposed a standardized format and the establishment of a knowledge management system. Lack of human resources and limited time for administration are major challenges for shelters.</p> <p>Another challenge is that other shelters do not follow required procedures.</p>
Limpopo	<p><u>Finances:</u> The greatest challenge is raising enough funds to maintain the shelter and to have enough funds to run the administration component of the shelters, such as funds for transport, stationery, telephone, fax, etc.</p> <p>Furthermore, they need to have sufficient funds to provide in the daily needs of the victims that include, among others, nutrition.</p> <p><u>Capacity building:</u> Turnover of staff as they need to enrol for short courses to improve their understanding and approach on victim empowerment issues and office administration.</p>
KwaZulu-Natal	<p><u>Services:</u> The greatest challenge is the long waiting list for court dates for the prosecution to take place. This is in regard to domestic violence cases and maintenance applications.</p> <p>Another challenge is the intervention of social workers to visit the women in the shelters, while the women and children are staying there.</p>

	<p>Although the staff at the shelter is being trained by Lifeline, the shelter experiences that some victims prefer to get counselling elsewhere.</p> <p><u>Training:</u> Enable all staff to be trained. Government should make funds available for skills training.</p> <p><u>Finances:</u> The Department of Social Development's funding is not enough. The Department should balance the funding to shelters to be in line with the amount Government allows for one prisoner per day (R210). The shelter receives R33.50 during the Financial Year 2008/09. Please take note that KwaZulu-Natal increased the amount to R49.00 during 2009.</p>
Mpumalanga	No comments.
Northern Cape	<p><u>Partnerships:</u> Seek participation of various community structures.</p> <p><u>Capacity building:</u> Training on capacity building, financial management of programmes and operational budget for shelter maintenance and volunteers' stipends.</p>
North West	<p><u>Programmes:</u> The challenge is to implement more therapeutic programmes, skills development and computer training.</p> <p><u>Finances:</u> This shelter needs more funds to implement more effective programmes.</p>
Western Cape	<p><u>Finances:</u> The greatest challenges for shelters in the Western Cape are to meet financial expenditures per month.</p> <p>Government should provide finances for training, awareness programmes, outreach programmes, development of staff programmes and transport for victims.</p> <p>The challenges are to have funds for projects.</p> <p><u>Human resources:</u> The challenges are to have sufficient staff/volunteers in place, when staff are on leave or ill, so that the shelter can function effectively.</p> <p>The recruitment and employment of suitable staff is a challenge. It is a constant challenge to find the right</p>

	<p>people for the job because of financial restraint. Shelters cannot compete with the open market by offering appropriate and comparative salaries.</p> <p><u>Programmes and services:</u> Advocate for programmes and services manual in all shelters.</p>
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Table 5.12 outlined the challenges that shelter managers face. These are as follows:

Policy

The shelters have lately been confronted with victims of abuse who went from one shelter to another. These people are known as 'shelter hoppers.' The shelters would like to see a policy in place on how to deal with these people in the provinces. Through a partnership between the national and provincial Departments of Social Development and the National Shelter Movement, this issue can be discussed in a forum. A decision can be reached on how to deal with this need effectively. A policy can also be developed with shelter managers for victims who 'hop' from one shelter to another.

A national protocol can contribute towards the accessibility of provincial hospitals to provide detoxification treatment to victims with a dependency challenge. These victims can attend out-patient treatment services, while they are in the shelter. This can be arranged by the shelter with the other stakeholders. A further requirement is court dates and court preparation. The National Prosecuting Authority can identify prosecutors in the different courts, who can work closely with the shelter managers. In this way, they can fast track court dates and court processes. Shelters can identify the courts in the National Directory of Services for Victims of Crime and Violence and reach out to the local prosecutors to establish a working relationship.

Programmes and Services

Another challenge is a procedure manual for the management of victims of abuse in shelters to enable the shelters to be more focused in their programmes and services to victims.

A uniform standard of reporting format to Government on the spending of monies and clients being served, is also required. These templates should be developed and implemented.

Finances

The Department of Social Development's Policy on Financial Awards to Service Providers (2008: 20) makes, among others, provision for purchasing services from non-governmental organisations. The assumption is that shelter managers need training in the completion of a business plan. The plan should reflect a three year planning cycle on their objectives to be achieved. This entails training programmes for staff and victims, awareness and outreach programmes in the communities and running cost for the shelters, also including the salaries of staff at the shelters. It is clear that staff and appropriate finances are required to enable the shelters to function more sustainably. Therefore it is recommended that the National Department of Social Development should submit a proposal to the Chief Financial Officer (who functions on a Deputy Director-General level) Forum, to serve as an item on their agenda. This is needed in order to reach an agreement for funding shelters in a uniform manner throughout the Country.

5.3.6 Management, programmes and services for victims of abuse at shelters

This sub-section outlines the management of shelters for victims of abuse. This management includes the composition of the boards, procedure manuals at shelters, shelter policies and target groups. It also includes the duration of stay at shelters, educational programmes for women and children, counselling services

and social workers, and psychological services at shelters. The composition of board members, followed by shelters policy procedures at shelters, can be found next.

Figure 5.4 Composition of board members (n=32)

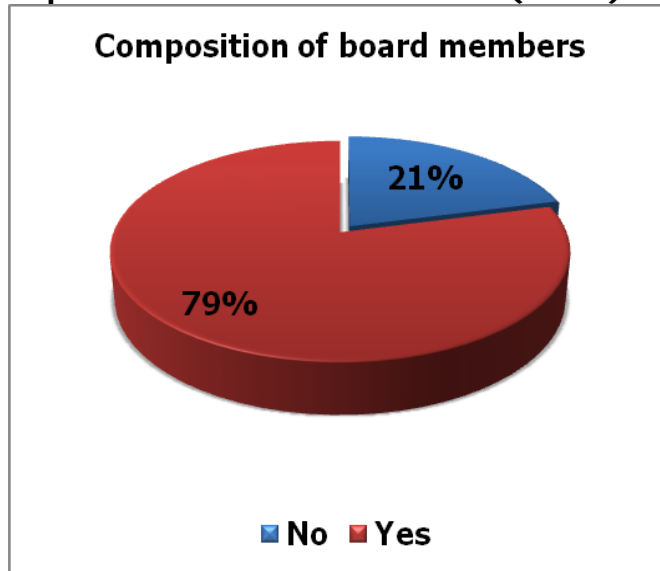


Figure 5.4 illustrates that all shelters function with a management board. These management boards are responsible to oversee the shelter's main and ancillary objectives. All board members of the latter are full time members and involved in the activities of the shelters on a daily basis. Only 21% of the shelters indicated that they do not have Vice Chairpersons. The assumption is made that in the absence of a Chairperson, the members of the board appoint a chairperson for the meeting. The normal procedures are that a Vice Chairperson should be appointed by the Board during their annual meetings. The shelters did not indicate the challenge with regard to the composition of the boards or the appointment of Vice Chairpersons. Some shelters might not understand the implication thereof or do not know the value of a Vice Chairperson on their Board. Amongst the members of the boards are:

Medical doctors, prosecutors, accountants, an advocate, members of the community, pastors, social workers, nurses, retail managers, counsellors,

community youth development workers, teachers, members of police and members of municipalities.

Under the heading 'Other members' in the questionnaire, social auxiliary workers, counsellors and social workers (with only observer status during meetings), were indicated.

5.3.7 Procedure manuals at shelters

There are different perceptions regarding the content of a procedure manual for shelters. The idea of having a procedure manual was adapted from Sisters Incorporated (shelter 29 in Table 5.2) that developed a manual with the title: "The A-Z of opening and running a shelter."

The question was post to the shelter managers: "Does the shelter have policies and guidelines in place?" The shelters were asked to submit the manuals to the researcher. The results of this exercise are presented below.

Table 5.13 Guidelines and policies in place at shelters (n=32)

Item	Shelters	Not in place (no of shelters)	In place %
Intake form for victim/s	0	0	100
Exit form	11,14,16,15,18	5	84
Indemnity form	11,14,16,21,22	5	84
House rules	0	0	100
Staff: Job descriptions	17, 21	2	94
Duty list for victims of abuse	21	1	97
Daily menu	3,17,18,21	4	88
Weekly menu	3,6,11,17,18,21	6	81
Individual development plan for each victim	11,21,22	3	91
First aid kit	1,11,12	3	91
Fire extinguisher	1,3,11,12, 16	5	84
Medical care services/clinic/sister	1,2,6,11,12,18	6	81
Display of important telephone numbers next to	6,12,21	3	91

the telephone			
Housemother	11,13,22	3	91
A private room for interviews	12	1	97
Total	46	46	90%

Table 3.13 illustrates that 90% of shelters have some kind of procedure manual and guidelines in place. However, the submitted manuals only comprise of a few pages and are not perceived as comprehensive procedure manuals except for one shelter, Sisters Incorporated (shelter 29 in Table 5.2). This manual has a comprehensive framework only, meaning that the manual reflects only headings and no comprehensive content to the headings.

All shelters indicated that intake forms and house rules are in place. The majority 31 (97%) of shelters has duty lists for victims and a private room for counselling services (97%). Shelter 12 uses a bedroom for counselling services. This is not perceived as a conducive environment. Job descriptions are 94% in place at shelters. Only three shelters (9%) indicated that they do not have housemothers. Shelter 13 has functioned without a housemother since its establishment. The shelter is directly linked to Nissa Institute for Women's Development Organisation. There is a dedicated staff to support and counsel the victims in the shelter. The Organisation also manages satellite offices in the surrounding areas of Lenasia. The decision is based on the shelter opinion that victims of abuse do not have housemothers at their own homes. The primary victim of abuse is an adult and therefore needs no supervision. Shelter 22 functions only with volunteers and this is of great concern in view of supervision, accountability and the overall management of the shelter. Eighty eight percent (88%) of shelters do not have a daily menu and 81% no weekly menu. Eighty four percent (84%) of shelters have no exit forms or indemnity forms in place at the shelters. Eighty one percent (81%) have no precautions in respect of medical care services/clinic/sister at the shelter. However, shelter 6 indicated that they are close to the clinic and utilize the services as and when needed. Clinics are not

open 24-hours a day and it is recommended that all shelters should have a comprehensive first aid kit. These are for emergency cases, as managed by the night housemothers. A short course in first aid could be recommended for housemothers in order for them to attend to emergency treatment.

5.3.8 Shelters' policies

All shelters have some type of 'policies/procedures/admission criteria/contract' in place to regulate the duration and stay at shelters and the focus groups to be accommodated or not. These groups include women, men and their children/or children without a parent), who might need accommodation. With regard to the duration of stay at shelters, most shelters are flexible. Decisions are based on the victim's progress in the shelter and also on each individual's needs. The issue of gender among shelters, has for many years, mainly centered around women as victims of abuse. Shelters were established for the most vulnerable groups in society, those that are confronted with domestic violence relationships, such as women and their children. It is evident from the research that the majority of shelters accommodate women and their children.

The shelters in this sample offer only temporary accommodation and services to victims of abuse and the victims have to leave the shelters after a period of time. That period of time as stipulated in the shelter's policy on duration of accommodation is reflected in Figure 5.5.

Figure 5.5 Duration of stay at shelter (n=32)

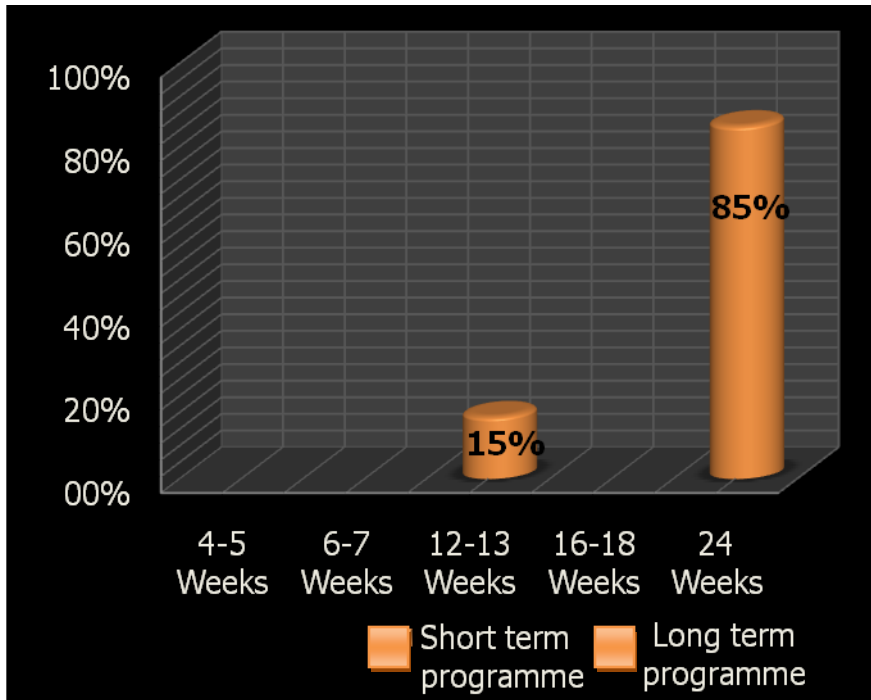


Figure 5.5 reflects that 85% of the shelters accommodate victims of abuse for a period of one (1) to 24 weeks, depending on the need of the victims. This is perceived as a long term programme. A short term programme is perceived as accommodation linked with the relevant programmes at shelters for a period of two (2) to twelve (12) weeks. NISSA's (13) programme is for a period of 4-5 weeks, Tshepong Ya Rona Shelter (7), Levubu (20) and Tamar shelter (25) for 6-7 weeks. Child Welfare Polokwane (18) and United Sanctuary (32) serve for a period of 12-13 weeks. Mother of Hope (2), Dusk to Dawn Haven (28) serve for a period of 16 – 18 weeks. The unmentioned shelters serve as are long term shelters eg 24 weeks.

Victims can extend their stay at Beth Shan (9) shelter for longer than 24 weeks, if they are still in a counselling programme with the social worker and do not have any source of income to leave the shelter. A further exception is made for victims who have just obtained a job so that they can stay in the shelter for a longer

time. This will enable them to adjust to the new working environment and to become financially independent. This policy in Beth Shan's Shelter is significant.

The tendency amongst some shelters is to accommodate children alone, without a parent, in terms of Form 4 of the Children's Act. Shelters such as Moinooi Shelter (26), North West Province, Sinathemba Shelter (17), KwaZulu-Natal Province and Child Welfare (18) Limpopo Province, provide shelter to children without parents accompanying them. They are brought to a shelter by a police officer or a social worker. They need to be placed in a temporary Place of Safety pending an investigation in terms of the Child Care Act, 74 of 1983. (The new Children's Act 38 of 2005, is not implemented yet). These children stay for an average period of 11-13 weeks, pending the Children's Court inquiry. This matter should be addressed as an item on the agenda of the National VEP Management Team and the Forum of the Heads of the Department of Social Development. They need to reach a mutual agreement on the placement of children who are in need of care and protection. It is obvious that Child Welfare first sentiment is with children.

Figure 5.6 Shelter policies to accommodate victims of abuse per gender (adults and children) (n=32)

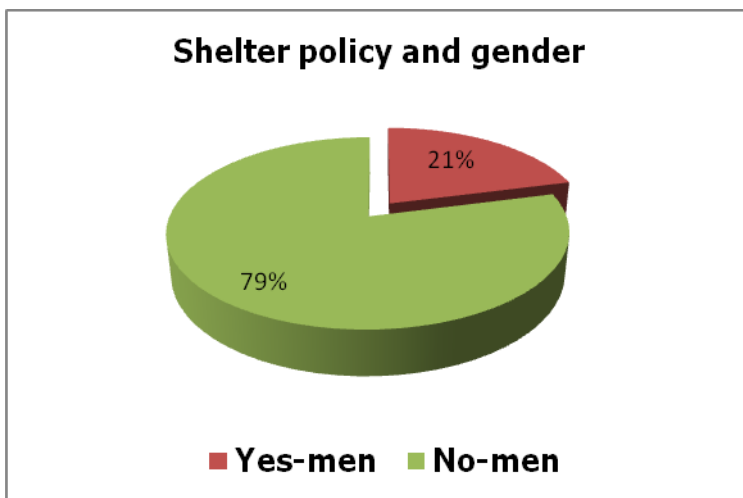


Figure 5.6 reflects that 21% of shelters (15, 20) also accommodates men as part of their programme. Seventy nine (79%) of shelters does not accommodate men at all.

In addition to the above, it is important to take note that Living Waters (1) accommodates no children between 0-three (3) years, Usindiso Ministries (14) accommodates no boys over eight (8) years, Beth Shan (9), Sisters Incorporated (29) and Grace Help Centre 26) no boys over ten (10) years of age, United Sanctuary (32) and Sinathemba Shelter (17) accommodate boys up to twelve (12) years with a Form 4.

Far North (19) shelter accommodates no children between fifteen to eighteen (15-18) years of age. Grace Help Centre (26) is the only shelter that indicates the reason for not accommodating boys over 10 years. The reason is that most of the boys are victims of sexual abuse and rape and therefore need special intervention. Those children need therapeutic services and specialized programmes to enable them to restore their self image and retain their dignity. The exposure to sexual abuse and rape can result in symptoms such as aggression, outburst, vandalism, with-drawal and other unwanted behaviour. Children who experienced sexual abuse and rape might develop sexually dysfunctional behaviour. This may cause a risk for the other victims of abuse in the shelter.

The consequences of the dysfunctional behaviour in the shelter by children and their mothers who cannot control their children can result in further abuse. This dysfunctional modelling and behaviour may/have a negative influence on the other victims in the shelters. This wrong placement of these children is in itself a traumatic experience that causes further trauma based on the reason for being admitted in the shelter. Therefore the screening process at intake/admission to the shelter is very important and should be done by a social worker. It is

important that shelters should review their policies to accommodate women and their children in a therapeutic environment where there is easy access to social workers. A recommendation from Gauteng Province, in Table 5.11, states that family infrastructure units at shelters could be ideal for these children who need the supervision of their mothers.

5.3.9 Educational programmes for children at shelters

The primary focus of shelters for victims of abuse is to provide immediate protection, support and empowerment programmes to adult victims. However, most women arrive at shelters with their children. In the best interest of the children, school programmes should form part of the shelters' programmes.

Figure 5.7 Educational programmes for children at shelters (n=32)

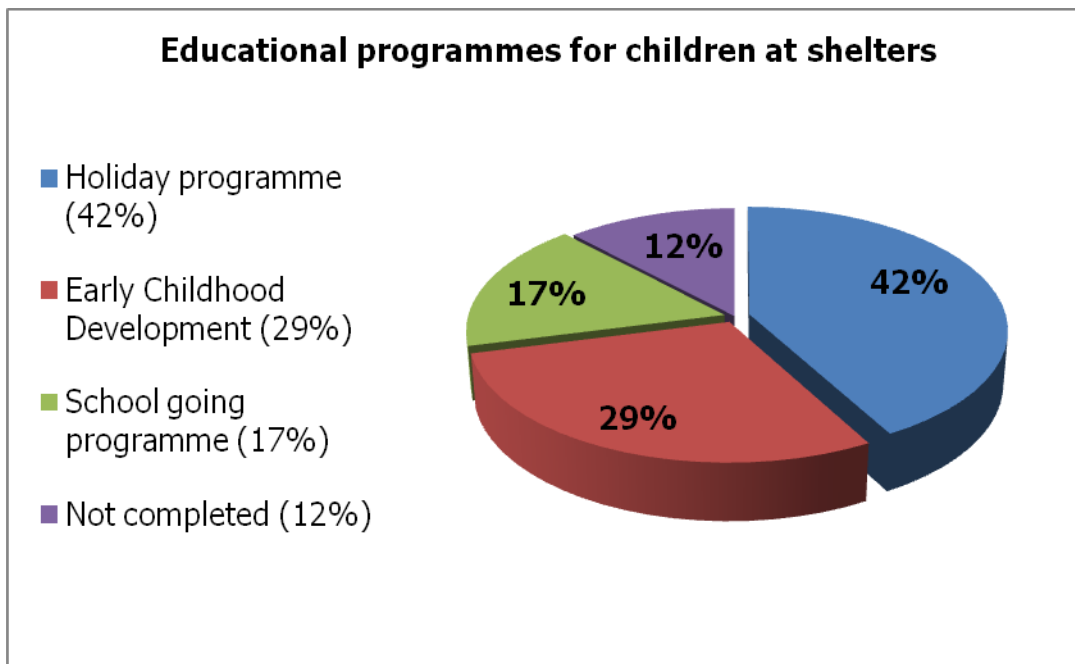


Figure 5.7 reflects that only 17% of shelters has a school programme in place ensuring that school going children attend school in the local communities. The Minimum Standards for Shelters (2004:3-12) proposed that all shelters should

provide space where children in shelters can attend to their school work. The questions arose if there is any supervision during study times, or any assistance for children in shelters who have to do school homework. Shelter managers should always be aware that the best interest of the child is paramount and therefore the immediate and long term needs of the children should be addressed in the shelters. This statement includes guidance and supervision with school work. Forty-two percent (42%) of shelters indicated that they have a school holiday programme for children at the shelter. Some shelters indicated that they join the holiday programmes at the local church or community centre. Twenty nine percent (29%) of the shelters indicated that they have an Early Childhood Development (ECD) programme, either at the shelter or at a service point in the community. The shelters paid the fees for the children at the ECD programme in the community. It is not clear from the answer what the cost implications for the shelters are? Twelve percent (12%) of shelters did not answer the question.

5.3.10 Counselling services

Victims of abuse arrive at shelters traumatized and some victims are totally disorientated, confused, heartbroken, angry, under the influence of some substance abuse and discouraged by life. All shelters render support services to victims in shelters. The quality of the service is unknown but what is known, is the passion for victims of abuse, women and their children, are often the most vulnerable people in society. Counselling services at the shelters should be a must for victims, in order to come to terms with themselves, work through trauma experiences and enable them to restore their dignity.

Figure 5.8 Counselling services to victims of abuse at shelters (n=32)

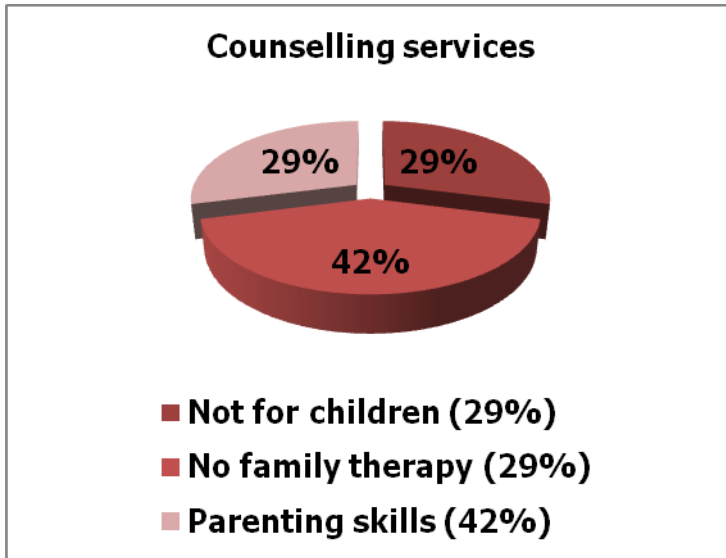


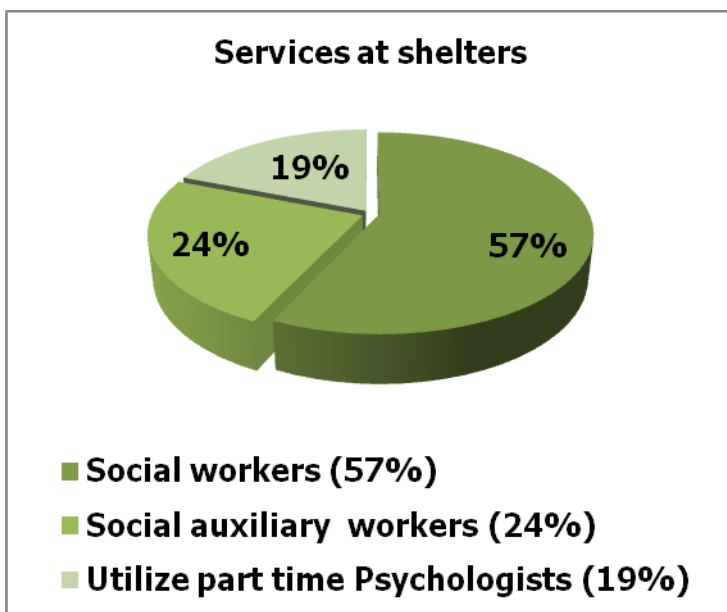
Figure 5.8 illustrates that 42% of shelters indicated that they refer victims of abuse for counselling services in the community, such as Families South Africa (FAMSA) or other professional registered welfare organisations. Twenty nine percent (29%) of shelters indicated that they have no programmes for children and another 29% of shelters indicated that they have no parenting programmes. These shelters mainly refer the victims to pastors, social workers and social auxiliary workers. Therapy for children is important. It has to enable them to work through their emotions and the impact of the abuse on their lives. Shelter managers should be encouraged to put mechanisms and services in place for therapy sessions for women and their children. These should enable the women to address emotions in such a manner that the children's emotions can be healed. The relationships between the mother and her child/dren and the children and their mother can be strengthened.

It seems that counselling services for women is the main priority for shelter managers. It should, however, be a practice that the children of victims of abuse should have equal access to counselling and therapeutic services, as managed by the shelter. If these services are not available in the shelter, then they should

arrange counselling and therapeutic sessions with a registered welfare organisation.

The following question was asked to shelter managers: "Do you utilise the services of a psychologist, social worker and social auxiliary worker?" The answers are reflected in Figure 5.9.

Figure 5.9 Social workers, social auxiliary workers and psychological services at shelters (n=32)



As reflected in Figure 5.9, 57% of shelters has a social worker/s as part of their staff component. Living Waters in East London (1) and Mercy House, Pretoria (12) have two social workers each. Only 24% of shelters utilise the services of social auxiliary workers only. Usindiso Ministries in Johannesburg (14) have four (4) social auxiliary workers and two student social workers, who function under the supervision of a qualified registered social worker. They are mainly responsible for the day-to-day administration work connected to clients and support services to the victims and social workers. At Mali Martin Polokegong Centre, Bronkhorstspuit (11), a social worker is also the manager of the shelter and works together with one child care worker only. This results in a serious

shortage of staff to oversee all the needs in the shelter. This particular child care worker is responsible for the implementation of the daily Early Childhood Development Programme and also takes the lead in preparation for the main meal at the shelter.

It is clear that as only six (6) Provincial VEP Co-ordinators stress the importance of social work services at shelters, the other remaining provinces such as Limpopo, Northern Cape and North West should be seriously challenged to make provision for social work services. We especially refer to at the comments from shelter 24, which is: "Social workers in Government are few, and they are always overworked and are not really keen to render services at shelters." Nineteen percent (19%) of shelters utilises part time psychologists at shelters or refers the victims to psychologists in the community.

Privacy and confidentiality are some of the principles of social work and therefore the question was posted: "Do shelters have private rooms to interview victims of abuse?"

Figure 5.10 Interviews: Privacy and confidentiality (n=32)

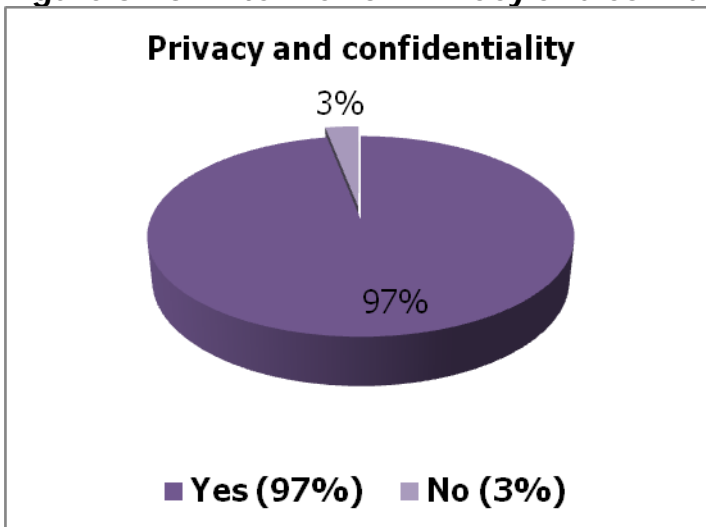


Figure 5.10 outlines that 97% of shelters has private rooms to interview victims of abuse. Three percent (3%) of shelters indicated that they do not have an office

for interviews and therefore utilize a bedroom for counselling a victim of abuse in relative privacy. This shelter (17) is in the process of building two extra rooms and will establish one room for interviews.

The Service Charter for Victims of Crime in South Africa provides the consolidation of the present legal framework based on the Constitution of South Africa, Act 106 of 1996. This Service Charter entrenches the seven rights as outlined in Chapter 3, number 3.6 that reflect the victims' rights and how the victims can experience the services at shelters. The victims' rights to privacy are set out in the first right, that is: "The rights to be treated with respect and dignity". Victims should always experience that their privacy is protected and should always be reassured of the principle of confidentiality.

Government officials are obliged, according to Government Batho Pele Principles, to always put "people first". Therefore, all programmes in South Africa should be aligned with Victims Rights. The question was posed to shelter managers if their services include Victims Rights.

Figure 5.11 Rights of victims upheld in shelters (n=32)

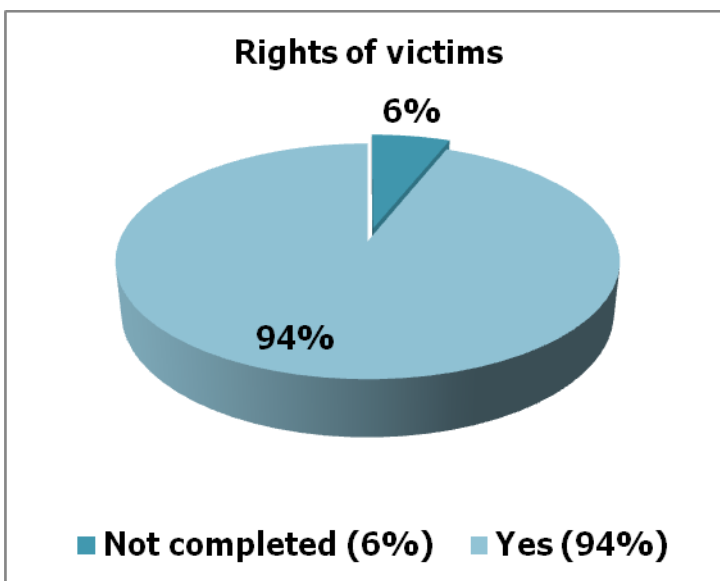


Figure 5.11 indicates that 94% of the shelters complies with Victim's Rights, which include to be treated with fairness and with respect for their dignity and privacy, the right to offer information, the right to receive information, the right to protection and the right to assistance. Only 6% of shelters needs to put systems in place to uphold the required Rights of Victims. This includes mainly the right to information that is not visible in two shelters. Shelter managers can provide all victims with a pamphlet on their rights, when they enter the shelter. It is also important to have a list of emergency telephone numbers next to the phone to be used if and when needed.

Shelter managers were asked: "Do you inform the victims of their rights in relation to options regarding the legal aid board, as well as the right to legal advice in a language and in a manner which they understand?"

Figure 5.12 Right to legal advice (n=32)



Figure 5.12 indicates that 72% of the shelters informs the victims of their rights. They indicate options with regard to services at the legal aid board as well as the right to legal advice in a language and in a manner which they understand. Twenty eight percent (28%) of shelters encounters problems in accessing legal advice. Some shelters encounter problems with the South African Police Services

and the National Prosecuting Authority, in order to co-operate in the best interests of the victim. Mali Martin Polokegong Centre (11) reported: "The Legal aid is not very helpful in rural areas." The shelter has to take the victims to Pretoria for adequate assistance. This is an hour's drive from the shelter. Some shelters further complain about the legal documents that are only in English and Afrikaans. An interpreter from the shelter should then also accompany the social workers to enable the social worker and the victims to understand the full purpose of the intervention. They also have to ensure that they achieve the objective of the intervention. Some shelters are fortunate. They have social work services that can assist the victims in understanding the legal processes and can explain the frustrations they encounter to the victims. Some shelters indicated that the victims said they understood the explanation of the 'legal issues', but later the social workers found that the victims did not understand and they had to re-address the issues.

We will discuss in the next section the findings of shelter managers pertaining to programmes offered at shelters.

5.3.11 Programmes at shelters

Programmes form part of services at shelters as indicated earlier in this chapter. (see 5.14) Some Provincial Departments of Social Development³ contributed financially towards these programmes.

Shelters mainly offer five kinds of programmes:

- Social skills programmes: Communication, self-esteem programmes, Victim's Rights and the Domestic Violence Act remedies.
- Children's programmes: Early Childhood Development Programmes, school going programmes and holiday programmes.
- Skills development: Domestic work in the shelter, gardening, painting, etc.
(see 5.12)

³ The Department of Social Development names are different in most provinces. For the purposes of this study we refer to Social Development

- Devotion programmes: Sing songs, inspired words, prayer, poems, reading, etc.
- Relaxation programmes: Exercises, walking, soccer playing and talking.
- Community outreach programmes: Most shelters devoted their time to inform communities, women's organizations, clubs and schools about issues on domestic violence and the remedies connected thereto.

Figure 5.13 Communication strategies as part of social skills programmes (n=32)

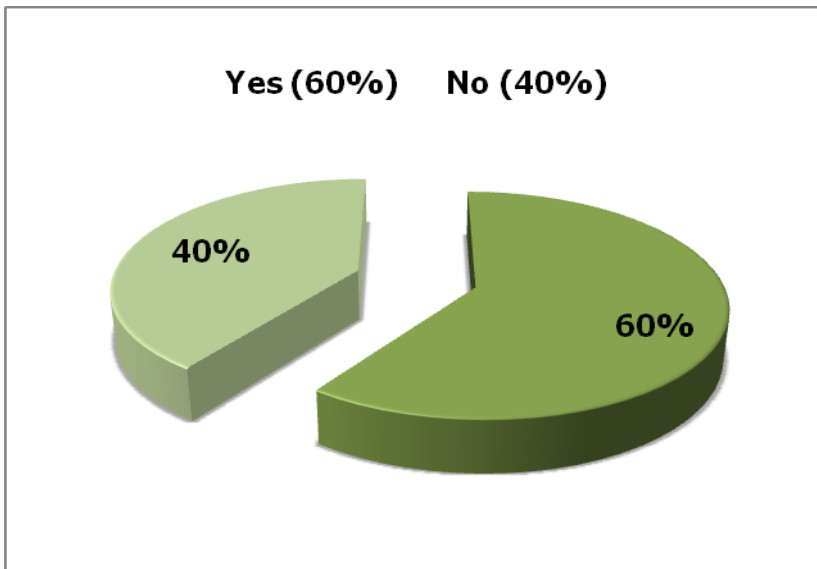


Figure 5.13 indicates that 60% of shelters has communication programmes in place for the victims of abuse to enhance their communication skills. The skills are needed in order to resolve conflict and to rebuild the victims' self-esteem. Forty percent (40%) of shelters does not have such programmes in place. The integral component of victim support is victim empowerment that includes the shelters' empowerment of victims of abuse (adults and their children). Communication strategies are therefore a vitally important component of the programme. The assumption is that all victims of abuse experienced extreme conflict in all sort of forms, such as: physically, mentally, emotionally, financially, etc. Communication programmes in shelters are important as a method of

conveying messages in order to listen, to be listened to and to understand what is said. It is necessary to ensure that the right message is received in order to minimize possible conflict. Hands on experiences of domestic violence incidences form part of victims' lives and their frame of reference. If they were only victimized by slapping, clapping, kicking combined with brutal words, then the assumption is that they will have a low self-image and need to be introduced to other communication methods and strategies of intervention. In other words, the victims should be strengthened as they are exposed to their rights and gain self respect again. For example, they should be educated on the cycle of violence and the impact thereof. In order to achieve this outcome, the social worker should strategize communication programmes as part of their service so that the victims are able to make informed decisions about their situation and their future. Some shelters indicated that they even send victims to workshops on their rights in communities to ensure that the victims are empowered.

Recreational programmes at shelters form part of activities in shelters. The purpose is to stimulate, transfer skills, build relationships and assist them to gaining confidence in themselves. Furthermore, they expose victims to a balanced approach to life in order to build confidence in recreational programmes, as well as manage their time and build their self-esteem in recreational activities.

Table 5.14 Recreational programmes for victims of abuse in shelters (n=28)

Table 5.14 presents a summary of recreational programmes at 88% of the shelters. Some shelters only have one or two programmes
<ul style="list-style-type: none"> √Watching videos/DVDs as a form of recreation √Commemoration of Women's Days (March, August and November-December each year). Some shelters allowed victims, with their consent, to share their experiences during events in communities and even on the radio during interviews on this phenomenon. √Music, needle work and reading √Jewelry making: There is a national endeavour to train all shelters on jewelry making as initiated by Sisters Incorporated Shelter (29). The shelter

received donor funding for this project. The shelter exports the jewelry to other countries.

- √Sewing classes, dream boards, fabric painting
- √Gardening and outings
- √Knitting and bead work
- √Arts and crafts, pottery, woodwork and painting
- √Skills training to get jobs as house managers
- √Counselling, accommodating victims, self-help programmes
- √Training skills in all areas of life eg computer literacy
- √Bead work and knitting
- √Standard on cleanliness, 'personal hygiene'
- √Education: build self-esteem
- √Life skills education
- √Soap factory
- √Literacy programmes
- √Vegetable garden
- √Outings – sight-seeing, visit museums, etc

Table 5.14 reflects some recreational programmes at shelters. The shelters that responded to this question indicated one (1), two (2) or four (4) recreational programmes. Twelve percent (12%) did not answer the question and the reason therefore is unknown. It may also be assumed that they do not offer any recreational programmes.

Shelters are temporary services, an escape and hiding place from abuse. The purpose of the Exit Programme is to prepare the victim in a systematic manner to start thinking about tomorrow. Therefore the shelter managers were asked if the Exit strategy forms part of their programmes and services.

Figure 5.14 Exit programmes for victims at shelters (n=32)

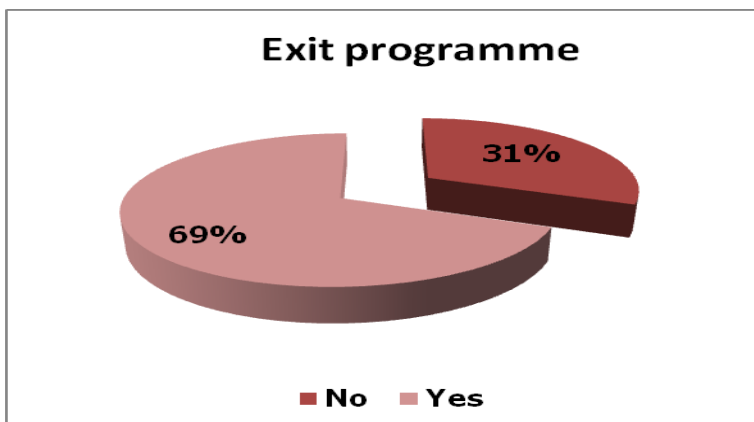


Figure 5.14 illustrates that 69% of shelters has an exit strategy in place for victims of abuse in preparing them to reintegrate into the community, but 31% does not have an exit strategy. The question arose on how do they prepare the victims to reintegrate into society again. An exit strategy should form part of the holistic plan for each victim of abuse in the shelter. The main purpose of the exit strategy is to empower victims in line with their needs and aspirations. They have to reintegrate into society in a safe manner, where they can live their lives free from abuse. The development of a safety plan should form part of the exit strategy and should be introduced to the victims in the early stages after their intake at the shelter. The purpose thereof is to prepare the victim emotionally to start thinking about the future and indicate measures to be taken in order to exit the shelter. The exit strategy is not a once-off consultation session and it is recommended that the more they are exposed to structural thinking, the more the exit from the shelter will become a reality.

Twenty percent (20%) of shelters indicated that they make follow-up calls and /or visit the victims of abuse after they have left the shelter. This is good practice, but unfortunately rendered by relatively few shelters. It should be advocated that victims should feel free to come to the shelter if in need of counselling services and if they have no access to other services of this nature. This will enable them to have confidence to approach the services at the shelters whenever needed.

It is therefore important to provide victims with contact numbers and names of service providers in their immediate home environment where they are going to relocate themselves. The National Directory on Services for Victims of Crime and Violence is a good source of the network of services available in the Country.

5.3.12 Monitoring and evaluation of services at shelters

According to the National Policy Guidelines for Victim Empowerment (2009:30)

of the Department of Social Development, monitoring is a continuing function that aims primarily at providing managers and key stakeholders with regular feedback and early indications of progress, or lack thereof, in the achievement of intended results.

Evaluation is a time bound exercise attempting to assess - systematically and objectively - the relevance, performance and success of ongoing and completed programmes. Evaluation is undertaken selectively so as to answer specific questions for guiding programme managers. It provides information on whether underlying theories and assumptions (used in programme development) were valid, ie what works and what does not work and why? Evaluation commonly aims to determine relevance, efficiency, effectiveness, impact and sustainability. Therefore shelter managers should evaluate their services and programmes on an ongoing basis to establish the view of the victims on the services and programmes for improvement and corrective action.

The question was asked whether shelters utilize a monitoring and evaluation tool to monitor and evaluate their services and programmes that is mandatory for good management. The results are as follows.

Figure 5.15 Utilising a monitoring and evaluation tool (M&E) (n=32)

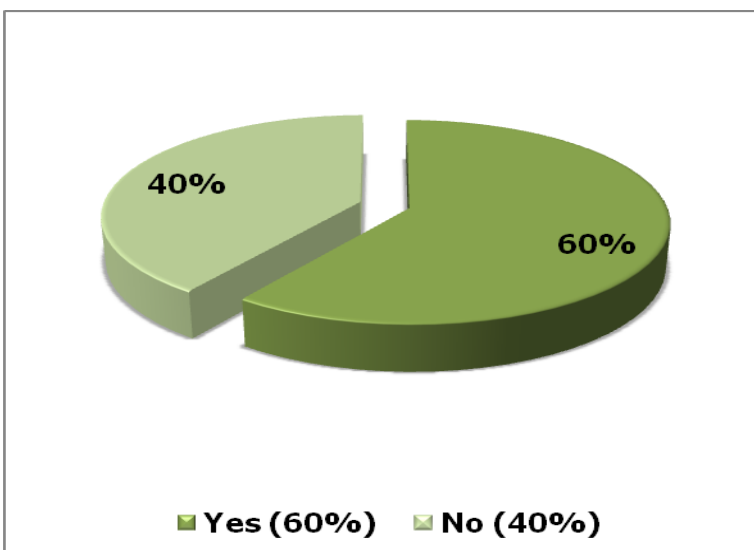


Figure 5.15 reflects shelters' responses in relation to the utilisation of a monitoring and evaluation tool to determine how the victims of abuse experienced the services at the shelters. Sixty percent (60%) indicated that they have a monitoring and evaluation tool in place, compared with 40% that does not have a monitoring and evaluation tool in place. Most shelters indicated that they have a verbal report back session from the victims after a programme was conducted. They use this session to evaluate the effectiveness of the programme. Some shelters indicated that they experience that some group members have different levels of understanding the subject content, meaning that some are slow and others are quicker in understanding the concepts.

Most shelters do have an evaluation form for victims to complete when leaving the shelter. Those victims who cannot read or write are assisted in completing the questionnaire. Some of the questions are the same in the evaluation questionnaires, which are as follows.

"How have you been experience the service that you received?

Are you satisfied with the services at the shelter?

What was the bedding and meals provided like?

Comment on how the shelter can improve on its services?"

The questions are on the basic issues in shelters and with regard to what they have learned about the themes and their experiences during their stay at the shelter. This is covered during a verbal exit interview with the victims. No shelter indicated any monitoring and evaluation exercise with children when leaving the shelter. Children's experiences and opinions are also important and therefore monitoring and evaluation should form part of the programme in shelters. Shelters can consider putting a box in the shelter where victims can raise anonymous concerns or express their appreciation on certain issues. Such opinions can help the staff at the shelter to improve services.

5.3.13 Department of Social Development's Integrated Service Delivery Model and Minimum Standards for Shelters

The National Department of Social Development's Integrated Service Delivery Model (2005) and the Minimum Standards for Shelters as in the Policy Framework and Strategy for Shelters for Victims of Domestic Violence in South Africa (2003), is a framework for the victim empowerment service providers. In the absence of legislation for victim empowerment services, such as the registration of shelters, shelter managers are requested to comply with the requirements as outlined in the mentioned documents.

Shelter managers were asked if they were aware of these documents. Sixty percent (60%) confirmed that they have the Minimum Standards. Some of them commented and regarding it as a good/comprehensive document. Others criticized the Department of Social Development for not consulting them during the development of the document. They further stated that Government wanted to impose standards for services, but its financial contribution was minimal. Furthermore, Government should simplify documents in order for the lay person to easily understand the content. Forty percent (40%) was not aware of the document and most indicated that they would like a copy.

With regard to the question on the Integrated Service Delivery Model, 60% of the shelters indicated that they would like to receive a copy. Although they are aware of the document some of them mentioned that they had misplaced the document and needed to have another look at the content.

The last question in the questionnaire to shelter managers, was that they had to indicate what elements they would like to see in developing a shelter model for the future.

5.3.14 Proposed elements for guidelines for a shelter service delivery model for victims of abuse

The question that was put to the shelter managers reads as follows: "From your valuable experience in working with victims of abuse within shelters, what would you like to see covered in a shelter service delivery model for victims of abuse."

The following was mentioned.

Table 5.15 Inputs from shelter managers to take into consideration in developing a shelter model for victims of abuse (n=25)

INPUTS	INPUTS
<p>FUNDING</p> <p>More funds allocated to shelters for running costs, programmes and services. (Skills training programmes)</p> <p>Funded posts for social service providers at shelters, social workers, psychologists, social auxiliary workers, child care workers and occupational therapists</p> <p>Funds should be equivalent to the amount the government contributed towards prisoners' programmes.</p> <p>Fund care givers at shelters</p> <p>A uniform stipend criteria for volunteers</p>	<p>POLICY</p> <p>Children of the victims, especially the accommodation of boys who were abused and raped, should be looked at critically.</p> <p>Social service providers at all shelters: Full time or part time</p> <p>Accommodate Child Care workers to oversee the children's needs, supervision, and guidance with school work</p> <p>Accommodate Child Care workers to oversee the children's needs, supervision, and guidance with school work</p> <p>Develop a shelter volunteer policy</p>
<p>EARLY CHILDHOOD DEVELOPMENT PROGRAMME:</p> <p>Government to fund the establishment of crèches at shelters</p> <p>Government to provide fees for children who attend private crèches in communities</p>	<p>TRAINING:</p> <p>Training for service providers on victim support and trauma counselling</p> <p>Debriefing skills for service providers in order to assist the victims of domestic violence with the traumatic experience</p> <p>Financial management for shelter staff</p>

	Coping mechanisms for service providers
SECOND STAGE HOUSING: Initiate a process to establish second stage housing scheme for victims who are ready to leave the shelter but do not have work or any source of income.	Guidelines on a person centred, strength based and systems approach towards self development and psycho-social well-being
COURT SUPPORT SERVICES: Guidelines on court processes Guidelines on how to represent the victim of abuse in court Court preparation	PROGRAMMES: How does the cycle of violence work? What do victims' rights entail, versus their responsibility?

The proposed shelter service delivery model was developed, based on the research as outlined in Chapter 5. The piloting took place at Usindiso Ministries, Johannesburg and Stellenbosch Safe House, Stellenbosch. These shelters were identified to pilot the guidelines for a shelter service delivery model for victims of abuse. The pilot study commenced during May 2009 and ended during September 2009.

Section C

5.4 Piloting of the proposed shelter service delivery model for victims of abuse

This piloting phase of the Guidelines for a Shelter Service Delivery Model comprises of the responses of two social workers working in shelters. These Guidelines were presented to them, together with a questionnaire (Appendix M. Questionnaire C-1: Piloting phase).

The outline of the piloting phase is as follows: Starting the pilot study, entry point of the pilot study and soliciting comments in the proposed Guidelines, which were as follows:

5.4.1 Piloting

The literature review and the findings of Chapter 5 informed the proposed Guidelines for a Shelter Service Delivery Model for Victims of Abuse, as presented in Chapter 6.

5.4.1.1 Entry point

Usindiso Ministries, Johannesburg and Stellenbosch Safe House, Stellenbosch were the shelters identified to pilot the guidelines for a Shelter Service Delivery Model for Victims of Abuse. The pilot study commenced during May 2009 and ended during September 2009. A self developed monitoring and evaluation tool was developed for social service providers to test the model. (see Appendix M) Researcher only had telephone discussions and intervention by e-mail with the social worker at Stellenbosch Safe House, Western Cape Province. This was due to the location and financial implication that prohibited researcher to in person visit the shelter. Researcher visited Usindiso Ministries Social Worker and explained the model to her to clarify any uncertainties. It was agreed, with both social workers, that they would pilot the model, based on the proposed programmes and services and Appendixes. The professional individual counselling and group work is based on a theory that is unknown to them.

These programmes comprise of the different phases of the mourning process, forms of domestic violence and a rights-based approach, myths surrounding gender-based violence, the cycle of violence. They also include power and control wheel, communication strategies, childcare, options for victims to consider as to when the act of domestic violence is committed, HIV and AIDS, exit strategy and Basic Conditions of the Employment Act, 1997: Popular Summary.

5.4.1.2 Findings of piloting

The following scale, with rating numbers from 0 -5 and X as Don't know, were connected to each question in the questionnaire. The scale was adopted from the Department of Social Development and the United Nations Office on Drugs and Crime (2009) Research Questionnaire on Capacity Building and Training, as follows:

0=Not at all necessary

1=Limited use

2=Somewhat useful

3=Somewhat important

4= Important

5=Absolutely important

X=Don't know

The social workers' responses on services and programmes in the proposed Guidelines, were as follows:

5.4.1.3 Responses from social workers on the Guidelines

The responses of the two social workers, on how they experienced the Guidelines on Services and Programmes in shelters, are next.

Table 5.16 Responses from social workers on the Guidelines: Services and Programmes (N=2)

The percentages at the end of each column in table 5.17 refer to the value allocated to the categories: 1=limited use (20%), 2=somewhat useful (40%), 3=somewhat important (60%), 4=important (80%) & 5=absolutely important (100%)

Services and Programmes	Stellenbosch Safe House, Stellenbosch	Usindiso Ministries, Johannesburg
A. Services		
Counselling	The guidelines are especially important if the counsellor is not a social worker.	The guidelines on counselling service with victims of abuse are absolutely important to restore their dignity and sense of worth. Victims' Rights, in line with the code of ethics, are important to enable them to feel supported and fast track the healing process is absolutely important.
Intervention with the victim of abuse	Good guidelines. Maybe more ideas on how the victim might react?	The guidelines to intervene with victims to strengthen their coping mechanisms currently and to be empowered to handle future problems if recurring are absolutely important.
Working with the family	Somewhat important	Victims should be seen as part of the family system and need to be reunited with the family while they are in the shelter because sheltering is temporary. Victims need their families as future support to rely on. This is absolutely important.
Natural reactions amongst counsellors in working with the victims of abuse	This guideline is necessary to know in order to identify the reactions and to deal effectively with them	It is absolutely important for counsellors to manage their own reactions to unfolding client situations. Group and individual supervision sessions are also used for debriefing, to eradicate transmissions of own feelings through own experiences.
Ice-breakers	These ice-breakers are somewhat useful	These ice-breakers are absolutely important for relaxation, to promote participation and stimulate

		conversation. Victims become tense and uncomfortable and need to be made to feel at ease in the group conversations.
Sub-total %	76%	100%
B. Programmes		
Phases of the mourning process	The phases of the mourning process are absolutely important. The type of victims in the shelter sometimes reacts better to pictures.	Absolutely important for victims to identify where they are in terms of the phases connected to the abuse. Normally they discuss these phases on individual level and in the group it yields positive results.
Forms of domestic violence and a rights-based approach	Absolutely important. Good baseline and translate the information to illustrations. The victims can identify better with illustrations.	Victims are familiar with physical and sexual abuse. The guidelines expose the social worker and the victims to the other forms of abuse. This is perceived as a learning curve.
Myths surrounding gender-based violence	Absolutely important	This programme on myths surrounding gender-based violence is absolutely important in order for the worker to know the myths so that it does not cloud her judgement of things.
The cycle of violence	Absolutely important, but need more illustrations on the cycle	It is of absolute importance for the worker to be aware of the different phases in the cycle of violence, so as to identify with the feelings and behaviours observed and most importantly, to know what interventions to apply.
Power and control wheel	Absolutely important, a good illustration and very useful	It is of absolute importance for the social worker to be aware and to help victims to identify which methods were applied during accordance at the homes, in order to assist the victims during intervention.
Communication strategies	Absolutely important.	Absolutely important and insight full.
Childcare	Important to find healing	The childcare programme is

	in the process of intervention	perceived as essential. The needs assessment is critical in order to address the child's needs. Intervention should be on Children's Rights. Therapeutic services to children are crucial. An Early Childhood Development programme is absolutely important for the stimulation of children of the victims.
Options for victims to consider as to when the act of domestic violence is committed	Absolutely important to decide which option to choose	The summarized options, as a programme, are absolutely important and assist the social worker to inform the victims on the options and processes when taking action. Are they seeking for police assistance, applying for a protection order, medical assistance, etc
HIV and AIDS	Absolutely important	Absolutely important and aligned with the programmes.
Exit strategy	Absolutely important for victims to find answers to questions as well as healing in the process.	Although the exit date is known to the victim and the staff, the exit strategy as outlined is ideally implementable, especially the Safety Plan with the list of all resources for the victim to handle future occurrences.
Developmental opportunities and reintegration into society	Absolutely important for victims to find answers to questions such as: From here-where to, and with what consequences?	Reintegration into society is of absolutely importance and the victim's preparedness to access all available resources and support systems. Reintegration without developmental opportunities may not be realized for many victims of abuse. The Safety Plan is a very handy and useful instrument.
Sub-total	89%	100%
Total	83%	100%

Table 18 outlined the results of the experiences of two qualified and registered social workers, responsible for the management of shelters. The results, as outlined above, indicate that both social workers perceived the Guidelines for a Shelter Service Delivery Model as appropriate and useful in their shelters. Stellenbosch Safe House gave 76% as a sub-average for the section on Services, compared with Usindiso Ministries' 100%. The reason might be that Stellenbosch Safe House only accommodates fourteen (14) victims at a time and manages fourteen (14) victims with comfort. compared with Usindiso Ministries, that can accommodate 115 victims. Usindiso Ministries render services in the shelter with social auxiliary workers and social work students. Stellenbosch Safe House indicated that the guidelines on counselling services are important, if the counsellor is not a social worker. The guidelines on working with the family is somewhat important, but did not elaborate on the reasons why the intervention is not absolutely important. The guidelines are effective on the intervention with the victim. However, the social worker would like more ideas in the guidelines on the different reactions of victims during this intervention.

Programmes: On the proposed programmes in the Guidelines, Stellenbosch Safe House gave an average of 83% for the usefulness and appropriateness of the programmes, compared to Usindiso Ministries' 100%. Stellenbosch Safe House would like more illustrations in relation to the programmes. These should simplify the programme so that the victims can easily identify with the content of the programme.

5.4.1.3.1 Usefulness of Appendixes

In answer to the question regarding the usefulness of the following Appendixes, the answers were as follows.

Table 5.17 Usefulness of Appendixes (N=2)

Appendix	Stellenbosch Safe House, Stellenbosch	Usindiso Ministries, Johannesburg
Admission and shelter intake form	Absolutely important	Absolutely important
General assessment	Absolutely important	Absolutely important
Needs assessment	Absolutely important	Absolutely important
Admission support	Important	Absolutely important
Referral letter (Example)	Somewhat important	Absolutely important
Indemnity form	Absolutely important	Absolutely important
Exit Form	Somewhat useful	Absolutely important
Development opportunities	Absolutely important	Absolutely important
Basic Conditions of Employment Act, 1997: Popular Summary	Somewhat important	Absolutely important
Sub-total %	82%	100%
Total %	84%	100%

Table 5.17 outlined the usefulness of Appendixes. Stellenbosch Safe House perceived the referral letter as somewhat important, the exit form – somewhat useful and the Basic Conditions of the Employment Act - somewhat useful. Usindiso Ministries found these absolutely useful.

5.4.1.3.2 Monitoring and Evaluation Tool

In answer to the question regarding the usefulness of the Monitoring and Evaluation tool, their responses were as follows. (see Appendix M)

Table 5.18 Monitoring and Evaluation Tool

Monitoring and Evaluation tool		
Monitoring and Evaluation	Stellenbosch Safe House, Stellenbosch	Usindiso Ministries, Johannesburg
Tool for shelters	100%	100%
Tool for victims	100%	100%
Sub-total	100%	100%
The following total presents the usefulness of Services, Programmes, Appendixes and the Monitoring and Evaluation Tool		
Total	92%	100%

Monitoring and Evaluation Tool: Both shelters agree that the tool is effective for the purposes of monitoring and evaluation the standards and to determine gaps and challenges. On the tool for victims, the tool measures what it is supposed to measure and therefore, is approved by both shelters.

The shelters allocated an average percentage of 92% - 100% for the proposed guidelines' effectiveness in their perspective shelters.

Summary

The aim of the research is to assess the experiences of Provincial VEP Co-ordinators and shelter managers responsible for the registration and management of shelters for victims of abuse in South Africa. It is clear from the data that there

are major differences between the nine (9) Provincial VEP Co-ordinators' funding criteria for shelters in the different provinces. Some provinces provide seed funding, programme funding and other provinces provide funds per victim per day. Some provinces contributed towards the funding of posts, programmes and running costs. Seven (7) shelters (22%) from the study indicated that they do not receive any funds from the Government. Four (4) shelters (13%) mentioned that they do not have a budget for nutrition for the victims. One shelter relies totally on the goodwill of food supply stores in their area and another shelter indicated that food for the victims is a major challenge. The need for standardized funding criteria is imperative, but provinces are autonomous. They can spend their budget according to their own criteria and priority areas of services within the provincial Department of Social Development.

However, the National Department of Social Development can influence policy changes through the National Victim Empowerment Programme Management Forum or the national Chief Financial Officer's Forum, where provincial counterparts are represented. Funding remains a challenge in the management of shelters for victims of abuse.

There are, furthermore, major differences between the number of shelters for victims of abuse in the country. This is according to the nine (9) provincial VEP Co-ordinator's list of 77 shelters, the National shelter Movement's list of 132 shelters (during October 2008) and the 96 shelters reflected in the Population Framework of this research, excluding Government's nine (9) One-stop Service Centers of which some of them also provide long term accommodation, programmes and services. The Provincial VEP co-ordinators should verify the Population Framework of shelters and submit an audit of shelters annually to the National Department of Social Development Victim Empowerment Programme in order for the latter to be informed of the number of shelters in the Country.

The registration procedures in provinces also vary from province to province. One province may just request the shelters to comply with one requirement - such as to be registered according to the NPO Act. Other requirements, among others, are to submit an:

- Application form for registration
- Environmental Health Certificate/Permit
- Non-Profit Organisation Certificate
- Admission Criteria
- Weekly schedule/programme for women and children
- Weekly menu
- Copy of building plan and lease of contract with owner
- Inspection report
- Compliance with the Minimum Standards for shelters or a plan to comply with that which should include timeframes and activities

There is an urgent need to address the issue of governance, by regulating the registration, de-registration, accreditation and re-accreditation in line with norms for shelter services and shelter service providers.

It is clear from the data that there is no separate legislation to register shelters for victims of abuse in South Africa. This makes it difficult for the Provincial Departments of Social Development to impose on shelters to comply with minimum standards. Shelters also have to comply with the Integrated Service Delivery Model, monitoring and evaluation and other registration requirements. Sixty (60%) of shelters indicated that they do not have the Integrated Service Delivery Model and would like to acquire the document.

Some shelters also accommodate children without a parent as in a place of safety. These children are in need of care and protection and shelters serve as a Place of Safety. Only 17% of shelters has a school programme and 42% indicated that they have a school holiday programme. The situation of the 83% of children,

who might not be attending school, causes great concern. Only one shelter employed a child care worker and limited shelters employed social auxiliary workers. There are 112 volunteers at ten shelters. The minority receive stipends. There are only social workers who are responsible for the professional counselling of victims (adults and their children) at 46% of shelters. A child in need of care and protection needs intensive counselling services. These require time to work with the child through their trauma and pain and to assess the circumstances of the child and of the parents/guardian etc, in order to act in the best interest of the child. Twenty nine (29%) of shelters indicated that they do not provide counselling services to children in the shelters and 29% also indicated that there is no family therapy. Thirty two shelters accommodate 155 children and 566 adults in the shelters. Forty-six percent (46%) of shelters employed social workers. It is a concern that the majority of shelters do not have professional counsellors in all shelters for the victims of abuse.

It is clear from the data, in relation to the Guidelines for Early Childhood Development Program (ECD), that information dissemination remains a challenge amongst service providers. It deals with the latest developments on the programme and remedies available to service providers who run the programme and also those who would like to establish an ECD program. The Guidelines states that any person, organisation or community, which intends to set up an early childhood development centre, just need to register with the provincial Department. Subsidy may be paid to enable them to meet the minimum standards within a specific time frame. A step-by-step guideline is available on request. A shelter Newsletter could be a channel of communication to inform shelters about the latest developments that can benefit their services.

The need for comprehensive guidelines for a shelter service delivery model for victims of abuse was expressed by the majority of Provincial VEP Co-ordinators and shelter managers. At present, most shelters have induction packages for

screening purposes and for their administration. However, the induction packages only have a framework. These are not perceived as comprehensive enough to issue to a new social worker or social auxiliary worker who has to manage the victims of violence in the shelters with confidence. It appears that the only clear guideline that exists is the 'Intake Form and house rules.' It is important to mention that most shelters develop their own manuals on relevant and interesting topics they perceived as being important. The proposed model for shelters, as developed in this research, was tested by means of a pilot study in which two shelters, that were included in the research sample, participated. The results of the pilot study are presented in Section C of Chapter 5. Chapter 6 will present the proposed guidelines for a shelter service delivery model for victims of abuse, based on the data reported in Chapter 5.

CHAPTER 6

Guidelines for a shelter service delivery model for victims of abuse in South Africa

Introduction

This Chapter proposes guidelines for a shelter service delivery model for victims of abuse that can be utilized by social service providers. The guidelines contain information on programmes, services and management actions, that will be discussed three-folded.

First, services: The guidelines propose counselling services to victims of domestic violence (women and their children), intervention phases to be considered and guidelines on working with family members of the victim. The guidelines provide, some natural reactions amongst counsellors in experiencing the worst forms of abuse of victims, coping strategies for counsellors, as well as ice breakers.

Second, programmes: These programmes comprise of the different phases of the mourning process, forms of domestic violence and a rights-based approach. They include myths surrounding gender-based violence, the cycle of violence, power and control wheel, communication strategies, childcare, options for victims to consider as to when the act of domestic violence is committed, HIV and AIDS and an exit strategy.

Third, Management: Management involves human (staff) and financial (income and expenditure) resources, annual meetings with interested parties and members of the community. It provides a monitoring and evaluation tool based on the minimum standards for shelter managers to evaluate their performances, according to the set standards and an evaluation tool for the recipients of the service.

The main focus of the projected guidelines is to enhance service delivery by means of effective and efficient management, such as: Services, programmes and management actions in shelters. There is no shortcut when dealing with victims of abuse, due to the

uniqueness of each individual and her/his personal life experiences, as referred to by Du Toit et al (1998:1-73). The main objectives of intervention are to provide care, support and protection and to empower those who were caught up in relationships fraught with gender-based violence. This can be achieved by sharing real life experiences, exposure to life experiences of other victims of violence, and to internalize and adapt these for personal enrichment. However, the major challenge for social service providers as facilitators, is to demonstrate understanding of the victim holistically, based on social service providers' values of respect, individualization, right to self-determination and confidentiality. Said values will form part of this chapter.

The purpose of the guidelines is to provide service providers with a structural format for intervention with the victim of abuse and their family members. The purpose is for victims to come to terms with themselves and create a personal vision for the future, without abuse, or to take a firm stand against such actions. The model is based on a person-centered approach to assist victims of violence, within a developmental model, to attain effective living. This reminds researcher of the words of Emerson (1836:1)

“What lies behind us and what lies before us are tiny matters compared to what lies within us”.

6.1 Guidelines for a shelter service delivery model for victims of abuse

For the purpose of this research, guidelines for a shelter, a service delivery model for victims of abuse refers to a residential facility which provides accommodation and services to victims of abuse in a developmental, holistic and integrated approach to enhance their psycho-social well-being.

The proposed guidelines for a shelter service delivery model for victims of abuse are based on the research data presented in Chapter 6, as well as inter alia on the literature

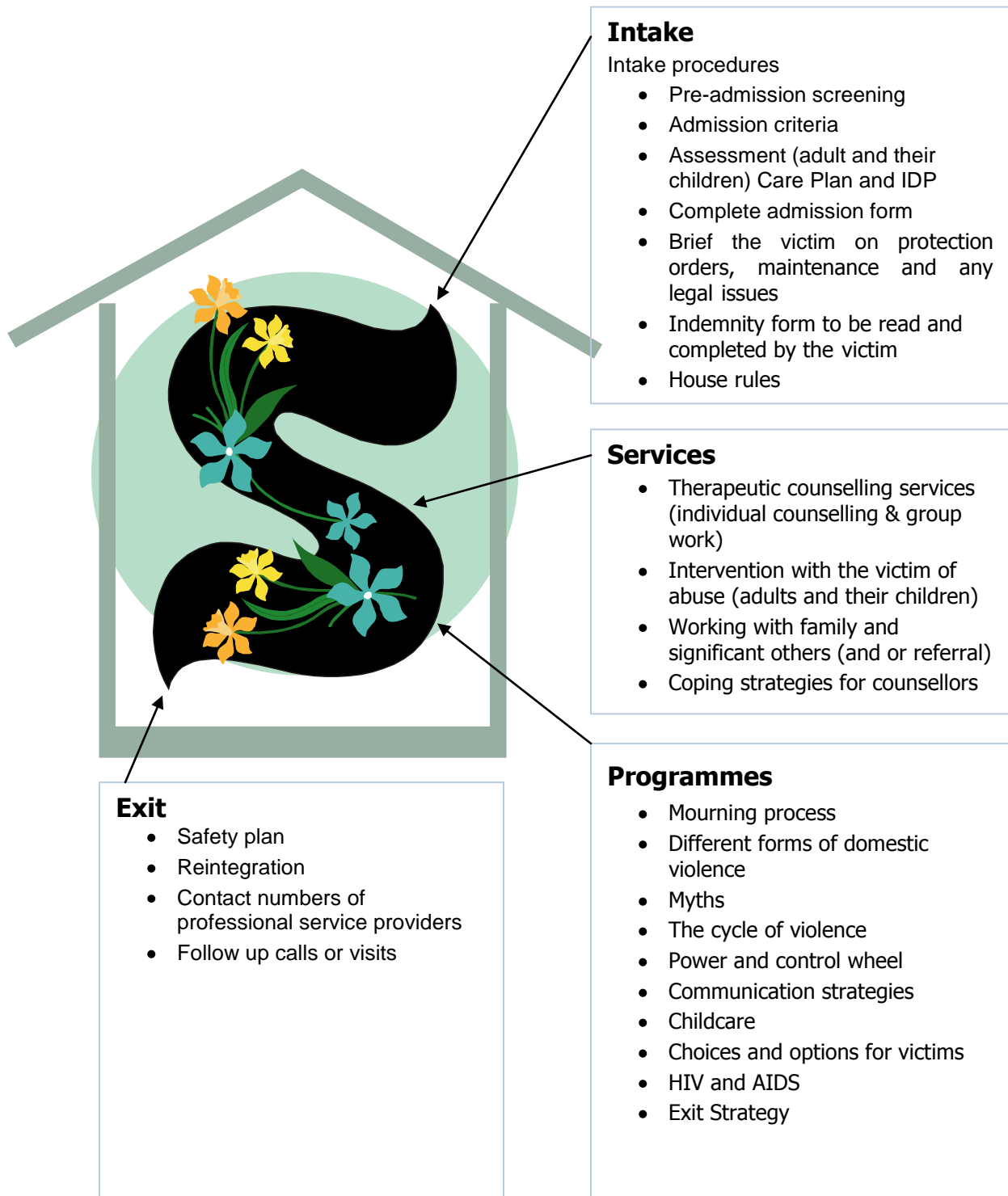
review, with special focus on some programmes in shelters in the United States of America and in South Africa, as presented in Chapter 4.

The proposed guidelines for a shelter service delivery model for victims of abuse comprise of three phases, as discussed in section 6.2.

6.2 Intake, programmes and services, and exit strategy

For the purpose of this study, researcher will focus on the intake procedures at the shelter, the programmes and services offered at the shelter, self-care measures for service providers, and preparation for the victim of abuse to reintegrate into society. Key principles for working safely and ethically with victims of violence are inter alia, to understand and protect their rights, always act to protect people's safety (residents and staff), provide appropriate safety, protect privacy and confidentiality. These principles should provide culturally appropriate services, as well as professional and ethical services - meaning that the service providers should not promise help if they cannot deliver. UNICEF (2006:36)

Figure 6.1 Shelter service delivery model for victims of abuse



The guidelines for a shelter service delivery model for victims of abuse comprise three phases:

- Intake phase
- Programmes and services
- Exit strategy

These three phases also address psycho-social issues of the victims and self-care of service providers.

6.2.1 Intake

It is recommended that the management of the shelter should establish its own shelter policy for the institution. This should include the establishment of admission criteria and intake procedures. A Procedure Manual includes the practical steps taken to realize the shelter policy. The intake procedures are adapted from "The A-Z of opening and running a shelter" developed by the Sisters Incorporated (2006:44-45) and are as follows:

1. Shelters should negotiate for funds to appoint a social worker as part of their staff component. If this is not possible, it needs to be ensured that all victims (women and their children) have access to social work services in the community to provide them with counselling services. These victims will need assistance to adjust to the temporary living arrangements in shelters and to enable the victims to work through their loss and emotions.
2. Create own intake procedures. The first step should be a pre-admission screening process, where the service provider will establish if the victim is a victim of abuse.
3. Duration of stay: This reflects the period which the shelter can accommodate the victim in the shelter, eg three (3) months or six (6) months.
4. The interest of children of victims in the shelter is paramount. The victim should be informed that responsibility for the child/ren is, at all times, that of the parent. This implies that the parent should take care of the child at all times and

negotiate with other residents in the shelter, should the victim be away from the shelter for a period of time. In the absence of the parent, proper arrangements are to be made with other residents for the care for the child. Arrangements could be made in terms of an hour or hours. The victim should inform the staff member on duty of their absence. He/she should indicate who agreed to take care of the children.

5. Shelter to develop procedures on how to deal with challenges, among others:
 - If the mother of the child/ren becomes ill, who will take care of the children?
 - If the mother of the child/ren is hospitalized, who will take care of them?
 - If the mother needs to visit the clinic, medical doctor, legal adviser, court, police, investigating officer, and/or social worker, who will take care of the child/ren?
 - If the mother secures a temporary job, who will take care of the child/ren?
6. The social worker/or social service provider meets with each victim and completes an admission form. (Appendix A)
7. Indemnity form to be read and completed by the victim. It is important for management to establish what the shelter would like to indemnify the organisation from. Take time to explain the details of the form to the victim if the victim cannot read or write. Make sure it is in the language which the victim feels comfortable with. (Refer to Appendix G for example)
8. It is suggested that each child and victim (mother) be assessed at the shelter to identify their personal needs and to develop an Individual Development Plan (IDP) to address their development needs. (Refer to General assessment: Appendix B and Needs assessment: Appendix C for examples).
9. The Children's Act 35 of 2005, as amended, makes provision for a shared care order. This implies that there can be different care givers at the same time, such as; a child and youth care centre and a parent. This entails that while the child is in the care of a parent, the child should also attend a developmental programme

in the child and youth care centre. This section of the Act has not yet been implemented and will come into effect once the regulations are approved.

10. The social worker will arrange for a toiletry bag, a towel and - if necessary - issue clothes to the victim.
11. The social worker will liaise with the South African Police Services should personal possessions need to be collected from the residence.
12. The social worker will advise on protection orders, maintenance and any legal issues.
13. Once accepted, finalize the admission form.
14. Once the victim is in agreement to stay at the shelter, the social worker opens a file. The social worker introduces the victim to the housemother on duty.
15. The housemother takes the victim through the rules of the shelter and signs (together with the victim), on the form that the victim understands the content of the rules. This signed and dated form should be placed in the victim's personal file. The shelter rules should be displayed in the shelter where all victims can regularly orientate themselves again, when they are uncertain about some of the rules.
16. The housemother introduces the victim to other residents and orientates the victim in respect of all the activities at the shelter (where to get tea and coffee, ironing etc).
17. It is recommended that shelters should ensure that house rules are developed and indicate which remedies the shelter will implement when the victim breaches these rules. Grounds for dismissal, as adapted from www.sisters.org.za, are also explained, such as:
 - Theft
 - Drinking of alcohol
 - Taking non-prescribed drugs
 - Physical violence
18. Conflict resolution measures should be in place, eg:
 - Staff to staff

- Staff to resident
- Resident to staff
- Resident/s to resident/s

The following section will deal with proposed services and programmes at shelters.

6.2.2 Services and Programmes at Shelters

6.2.2.1 Services

It is important that services at the shelter (or connected to the shelter) will ensure that counselling services are offered by an expert, such as a social worker and/or social auxiliary worker. A social auxiliary worker should work under the supervision of a social worker. It is also important to ensure that there are job descriptions for all staff members at the shelter. The shelters must focus on the importance of rendering counselling services to victims. This should include intervention with the victim and family members and coping strategies for professional service providers. The importance of ice-breakers during group sessions should be stressed.

6.2.2.2 Counselling services for adults and their children

Intervention with the victim of domestic violence and family members

Specific outcome: Enable the victim and family members to make informed decisions about their future

Counselling services to victims of domestic violence should be made available to enable the victim to engage with structured counselling. This model will not be prescriptive, but it is suggested that Du Toit et al's (1989:3-110) theory in line with Person Centered Counselling, be applied with regards to case work and group work. It is imperative that the counsellor explains to the victims that it is their choice to participate in the counselling or group work sessions, although it is perceived in their best interest to do so. The social worker values and assumptions with regard to respect of a person,

means...“a meaningful demonstration of the counselor’s acceptance of the client as a person who is competent to direct himself”. This assumption reflects an attitude and belief that every person is worthy of our respect and esteem. This complements the rights of victims as reflected in the Service Charter for Victims of Crime in South Africa (2005), and in particular, the right to be treated with fairness and respect for their dignity and privacy.

Respect in practical terms means to be there for the victim, to listen carefully, try to understand and accept what the victim reveals during intervention. These values should enable the victim to feel respected, worthy and accepted. The main purpose is to enable victims to make informed decisions about their future, while working through painful experiences as part of the healing process. Some shelters do not make provision for social work services, but rather options for lay counsellors who might have experienced the same situation as the victim is now experiencing. Lay counsellors should, however, have access to qualified social workers or counsellors for supervision and consultation at all times. Lay counsellors should, at all times, be protected from being sued etc by clients. Therefore supervision and consultation is important. Professional services should enable the counsellor to support the victim in this difficult time of her/his life, in order to come to terms with themselves during the intervention and therapeutic phases.

6.2.2.3 Intervention with the victim of abuse

The following guidelines can be utilized during the intervention sessions.

Adapted from: Davimes (2003:16-20)

Introductory Phase

- Introduce yourself. Give the victim a card with your name and contact details.
- Explain your role as a social worker or counsellor for the duration of the stay in the shelter.

- Discuss and clarify confidentiality. Confirm with the victim that the information they disclose is private and confidentiality will be maintained. The information will only be disclosed with the permission of the victim, when and if required.
- Ascertain what their needs and aims are. (Refer to Appendix C for example).
- Explain what you are NOT there to do. The victim will make his/her own choices based on the programme and services they have been exposed to. These will serve for personal growth and to develop their own life strategies.

Fact Finding Phase

- Ask the victim to tell her/his story. Take brief notes on the victim's story in order to reflect the incident/s in the correct sequence for record purposes.
- Ask brief, factual questions - the aim of which is to achieve a clear and correct sequence of the facts and events. A social worker needs to build the case in order to present a report, eg to court, on the family circumstances as and when required.

Thought Phase

- Focus on the decisions and thought processes, eg "What were your first thoughts when the abuse happened at first?"
- What did you do during the incident to protect yourself and/or your child/ren and or relatives? How did you decide on this?
- What was your first impression of what was going on?
- When did you discover that the abuse was establishing a pattern? How did you feel?
- What did you see, smell, hear, taste, and touch?
- These sensory impressions form the basis of intrusive images and thought processes. These may be very disruptive in the post impact period.

Feeling Phase

- Explore emotions which were experienced before, during and after the abuse
- Respond to emotions with empathy
- Help the victims verbalize and define their emotions

Reframing Guilt

- It is important to explore the self-blame and guilt as well as the thought processes behind these emotions and thoughts.
- Explore what they think they could have done differently, if at all.

Symptom Phase

- Find out which symptoms they are experiencing, eg psychological, behavioural and physical, such as shock, denial, anger, guilt, helplessness, grief, sleeping disorder, eating disorder, etc.
- Attempt to deal with emotions, but do not minimize emotions such as aggression, guilt, depression, withdrawal, body pain, etc. These feelings can change from session to session, but the counsellor will recognize that. As the victim is exposed to the content of the programme, she/he will gain knowledge which should empower the victim/s. Some emotions might be influenced by the new knowledge and inform possible options. It may result in the victim's own viewpoints developing within a few (six) weeks.
- It is perceived that due to the nature of gender-based violence, with its causes and consequences, the victim might need therapeutic services from a psychologist for post- traumatic stress disorder (PTSD). PTSD is characterized by intrusive re-experience of the traumatic event, avoidance of stimuli relating to the traumatic event and high levels of anxiety and/or fear. On the other hand, the victim may demonstrate total apathy. This also requires the services of a psychologist in order to deal with the lasting and recognizable psychological state that involves severe distress, disability, significant danger and/or loss of freedom. While it is also referred to as a mental illness or mental disorder, the use of the term 'psychological disorder' is generally accepted.

Re-entry Phase

The purpose of the re-entry phase in counselling is to explore the meaning which the victim attaches to each person during the different phases below. This re-entry phase should be based on the needs of the victim and therefore it is not necessary to continue with intensive counselling. The main purpose is to reach a closure point with the

victim, which will form part of the discussions during counselling sessions in preparation for terminating services. If the re-entry phase is necessary, then the following guidelines are proposed.

- Determine how she/he is coping at present in the shelter environment and discuss a plan for implementing positive coping mechanisms.
- Determine (with the victim) how to mobilize support systems based on the results of after the intervention as described previously. The support systems could be to avail yourself of another person, such as a volunteer to support you, (the victim), at court to apply for a protection order, ID, or to accompany the victim, to sell her beadwork or scones/biscuits in the community. The mobilization of support systems will be based on needs that are identified and could include referral to a psychologist, prosecutor, minister of religion or traditional healer.
- It is recommended that the shelter establishes a data base of other service providers in the community, or the community closest to the shelter, to link the victim to other resources, if necessary. The National Institute for Crime Prevention and Reintegration of Offenders (NICRO) developed a diversion Programme for Perpetrators of Intimate Partner Violence (2000). This programme could be explored in order to assist the perpetrator with his/her behaviour problems and to adapt new strategies for personal management of emotions and anger. Victims in the shelter should take note of this programme if they are interested and identify whether their partner/spouse/husband could benefit from such a programme.

6.2.2.4 Working with family members of the victim

The victim does not live in isolation, although the victim might experience such a feeling. The family members or significant others could play a major role in the healing process of the victim. This could also indicate that the victim experiences feelings of rejection by family members or significant others. Therefore, the social worker should

establish the possibility to re-unite the victim with the family or other members of the extended family.

The social worker at the shelter should establish whether she/he should refer the case to a social worker, or other professional in the community where the family is resident, or whether she/he is going to render services. When rendering services to the family and other family members such as the extended family, the following elements should be considered:

Intake

- Introduce yourself. Explain your role as social worker
- Discuss and clarify confidentiality
- Explore the family's experiences after being informed about the abusive event
- Investigate their fears, concerns and worries as well as their expectations about the victim's behaviour. The golden rule is never to underestimate the victim's situation
- Explore themes of concern

Ventilation

- The purpose of the ventilation is to help the family and or significant others to understand their own reactions to what has happened. Therefore, the social worker should attend to the following: Assist the family member/s to deal with feelings of shock, denial, anger, guilt, helplessness and grief, by being empathic (reflecting feelings) and supportive.
- Help them share their experiences and feelings about the event, duration and the impact on the victim and the family members.
- Accept their aggression, fears and denials.
- Support the family in terms of their own needs, wishes and expectations, as far as possible.

As the social worker intervenes with the family members and significant others it is important for the worker to understand what kind of interactions she/he could expect from the family or significant others.

6.2.2.5 Natural reactions of family members

Social service providers should be aware of some natural reactions and feelings amongst family members, who witnessed gender-based violence. These feelings might include the following:

- Experiencing a sense of hopelessness and powerlessness
- Experiencing fear for the perpetrator
- Experiencing anxiety to take law in own hands
- Trying to take it away by denying or helping to 'forget'
- Experiencing anger for example: I am going to kill him, you will see
- Experiencing guilt for example: It is my fault, if I have just done that.....
- Increasing relationship problems and challenges
- The tendency to say: "I will never forgive him for his behavior"

6.2.2.6 Natural reactions amongst counsellors in working with victims of abuse

Natural reactions amongst counsellors in working with victims of abuse could result in professional burn-out. It is recommended that these natural reactions, such as self blame, for example: It is my fault, I should have done that.....

Service providers who counsel victims of gender-based violence should plan monthly, quarterly or six monthly debriefing sessions with their supervisor in order to deal with their feelings and manage their own stress levels. Social workers and lay counselors, who are working in the field of gender-based violence could experience a variety of different forms of violence. (Refer to page 25) Some experiences could be fatal for victims who had witnessed abuse, for example, where a father killed his wife's dog "to get her..... or shot her in the face with a gun and

damaged her face permanently. These examples of behaviour and exposure could also have an influence on the social service provider's emotions and could cause feelings of anxiety, shock, discomfort, unfairness of life, and even anger. Therefore it is imperative for the social service provider to be in contact with her/his feelings, in order to work through the feelings and ensure that the feelings and emotions are dealt with. Supervisors should encourage their peers to engage in regular debriefing sessions, individually or in a group situation. This may enable the social workers to work through their conscious and unconscious feelings. Table 6.1 reflects natural reactions among counsellors dealing with victims of abuse.

Table 6.1 Natural reactions among counsellors

- ❖ **Helplessness**
- ❖ **Sense of fear and anxiety**
- ❖ **Sense of unfairness and injustice**
- ❖ **Rage and anger**
- ❖ **Sorrow and grief**
- ❖ **Intrusive images**
- ❖ **Self reproach and guilt**
- ❖ **Better appreciation of loved ones**
- ❖ **Identifying with the victims**
- ❖ **Anger toward victims**
- ❖ **Fear of the perpetrators (rape/murder)**

Adapted from Davimes (2003:20-21)

Counsellor burnout and secondary (vicarious) traumatisation is natural and should be taken very seriously at both an individual and organisational level. It is also important to encourage social service providers to adopt a healthy life style and a balanced approach, as reflected in the Coping Strategies for Counsellors in Table 6.2.

Table 6.2 Coping strategies for counsellors

- **Self care (nutrition, exercise, stress management, relaxation)**
- **Mutual support**
- **Debriefing the debriefer**
- **Ongoing training**
- **Regular supervision**
- **Regulating exposure**
- **Organisational structure and protocol**

During a debriefing session with staff, the supervisor could encourage the social service providers to commit themselves to self-care, by reading the commitment below and endorsing it. This could be meaningful and the impact thereof can be evaluated during the next debriefing session.

COMMITMENT TO SELF-CARE FOR SOCIAL SERVICE PROVIDERS

Icommit to taking care of myself in the following ways:

- 1.**
- 2.**
- 3.**
- 4.**
- 5.**

Signed:

Date:

Witness:

Davimes (2003:66)

This concludes counselling services to victims of abuse in shelters.

In the next section we introduce some ice-breakers for social workers to consider using during group sessions. Some ice-breakers may only last for one minute, which will serve as a body break. The aim is to stretch the body and/or to create a lighter moment amongst the victims of abuse. Ice-breakers can also form part of the therapeutic and educational programme. The next section deals with some ice-breaking exercises for therapeutic purposes - from Tantsi (1993).

6.2.3 Ice-breakers

Tantsi (1993: 3, 5, 12 & 14-15) introduces ice-breakers as part of a programme. Ice-breakers supposedly contribute towards lighter moments, building trust and enhancing social cohesion.

The social worker or counsellor can choose from the following games:

6.2.3.1 The Name game (total time: 40 minutes)

Make 5 large name tags using the following:

1. Bully, fear me
2. Shy, ignore me
3. Expert, ask me everything
4. Clown, laugh at me
5. Scapegoat, blame me

Method

Select 5 people and give each a name tag. No one is allowed to look at their tag. Stick the tag on to their back, or on to a hat. Request the group to observe silently. Give the group strict instructions to react to the person in terms of the name tag. Give the group a topical subject to discuss. After discussion, ask members if they can guess what the name tag is. Ask what it felt like being treated in a certain way. Discuss how the responses of others influence our behaviour.

Expected outcomes:

Develops insight and self-awareness

Creates awareness of own behavior in terms of others

Encourages communication

Develops awareness regarding the expectations others have of us

6.2.3.2 Blindfold game (total time: 40 minutes)

1. Divide group into pairs
2. One partner to blindfold the other
3. Emphasise NO CHEATING
4. Each sighted partner to lead blindfolded partner outside for a meandering walk
5. Blind person is allowed to ask questions and be assisted physically by partner
6. When destination is reached, partners to exchange places
7. Return to starting point, via the same route
8. On return ask how it felt to rely on someone else to get you to places safely
9. Discuss whether it would have been easier if the person leading had not been a friend

Expected outcomes

Encourages participation and discussion

Creates awareness re handicaps of others

Develops trust and bonding

Develops insight into the needs/fears of others

Creates awareness of the value of friends

(As a comparison the same exercise can be used, but the second time round, no one is allowed to say a word and no physical help, -other than a hand under the elbow- is permitted. Discussion then focuses on the role played by trust. Once again compare whether being with a friend will make a difference. The comparison will be done in respect of following..... and not with a friend guiding the blindfolded person.)

6.2.3.3 Role reversal (total time: 40 minutes)

1. Each group member to sit quietly on their own and attempt to put themselves into someone else's shoes (eg parents/sister/brother/friend/child)
 2. Break into sub-groups and discuss a relevant topic while pretending to be that person (parents/sister/brother/friend /child)
 3. Share what it felt like looking at things from another person's point of view
- NB: The social worker selects topics appropriate to the objective of the session.

Expected outcomes:

Encourages communication and participation

Creates awareness of the attitudes and feelings of others

Widens perception

Develops insight and understanding - Creates awareness of values and expectations of others

6.2.3.4 Spider web (total time: 40 minutes)

1. Social worker holds the end of a length of wool
2. Group members select a topic to discuss
3. Social worker initiates discussion by throwing the ball of wool to a member
4. Each time someone says something, the wool is thrown to them, with the person throwing holding the end
5. At the end of the discussion each person counts how many ends he/she has
6. The wool creates a web as it is thrown from one person to another

Expected outcomes:

Stimulates conversation

Encourages greater participation

Highlights those who communicate the least/most

(Activity can be varied and used to bring relatively unengaged members into the group by reversing the order. The ball of wool has to be thrown at a person and then the

group member has to speak. The social worker is in a stronger leadership role in this version.)

6.2.3.5 Basic human needs (total time: 40 minutes)

1. Ask the group to identify emotional needs (love, security, sense of worth etc)
2. Write words on the board
3. Discuss each need by obtaining examples from members themselves
4. Compare the needs of different societies (eg primitive societies versus modern, Nuclear family versus extended family)
5. Bring discussion to a personalized level
6. Focus on how own needs are/not being met
7. End session by explaining that it is vital to identify these needs and be aware of them as they affect a person's feelings, mood and behaviour.

Expected outcomes:

Helps individuals focus on themselves

Creates an awareness of self and others

Creates awareness of the difference between physical and emotional needs

This sub-section deals with proposed guidelines on counselling services to victims of domestic violence. It further proposed (to the social worker), intervention phases to be considered and guidelines on working with family members of the victim. It further deals with some natural reactions among counsellors in experiencing the worst forms of abuse of victims, coping strategies for counsellors and ice-breakers.

6.2.4 Services

An integral component of victim support is victim empowerment, which includes options for the shelter to empower victims of abuse. This includes exposure to life experiences of other victims of abuse during their stay in the shelters, as well as educational programmes on gender-based violence, in line with their rights.

We will first discuss the theory of Du Toit et al (1998) for person centered group work and how to facilitate the group process. The group work should enable the victims of abuse to enhance abilities to self-disclosure, self-knowledge, self-acceptance, self-love, accept others and receive love from others. This will not happen automatically. The social worker should take the leadership as facilitator to add value by helping the members of the group to move from vague desires to quite specific personal goals. Egan (1998: 242). One example of self-disclosure according to Corey (2002:394), is: 'One thing about me that people would be surprised to know is.....' The self-disclosure is perceived as self- growth. The desired outcome is that victims of abuse will be able to grow from a victim of abuse, to a survivor of abuse. The following theory will form a baseline for intervention in group work.

6.2.4.1 Group work

The social worker undertaking group work, should be well trained in group processes before undertaking group work with a therapeutic intention. In preparation for group work, we will focus on the different groups, as well as process and practice in a combination of different theories. The first part will deal with therapeutic groups. The second part will deal with open groups in 6.2.4.5.3, Educational group work.

In preparation for therapeutic groups, the social worker should attend to the guidelines as outlined by Corey & Corey (1997:52-58). They refer to the Association for Specialists in Group Work (ASGW) and highlight that the social worker as an ethical agent, should take the processes of ethical responsibility seriously. The purpose of the guidelines is to

stimulate reflection, self-examination, discussion of issues and practices that influence human behavior. The guidelines always have ethical implications.

Step one. Orientation and providing information

The social worker should provide as much information as possible to the proposed group members. Information should deal with goal and objectives of the group work and entrance procedures. It should create no unrealistic expectations, deal with voluntary consultation sessions between group sessions and encourage members to participate.

Step two. Screening of members. The screening of members entails selecting members whose needs and goals are compatible with the goals of the group. The method of screening can be among others: individual interview, group interview of prospective group members and requesting the potential members to complete a written questionnaire.

Step three. Confidentiality and respect. The social worker protects group members by defining clearly what confidentiality means and requires from the members' perception, as well as from the social worker's perception. One rule of confidentiality could be that, as and when a member self-discloses issues, the content of the details should remain in the group. No-one should be allowed to disclose details outside the group work sessions.

Step four. Voluntary participation. Members should decide for themselves to participate and to follow the rules of the group.

Step five. Leaving a group. One of the rules for the group work can be to have the provision for a group member to terminate in an effective way. This is one of the rights of victims of abuse.

Step six. Coercion and pressure. The social worker should protect members' rights against physical threats, intimidation, coercion and undue peer pressure, insofar as is reasonably possible.

Step seven. Imposing own values on group members. The social worker ensures the development and awareness of her own and group members' values and needs and the potential impact they have on the interventions likely to be made.

Step eight. Equitable treatment. Social workers ensure that each group member is individually and equally treated.

Step nine. Dual relationships. Social workers avoid dual relationships that might impair objectivity and professional judgement.

Step ten. Use of techniques. The social worker should ensure that she is well equipped and familiar with the group techniques she wants to apply during group sessions and should use the techniques for group purposes.

Step eleven. Goal development. Social workers ensure the development of the personal goals of each member and the group as a whole.

Step twelve. Consultation. The social worker ensures that she makes herself available to the members of the group who want to engage with consultation sessions between group sessions.

Step fourteen. Termination from the group. The social worker should ensure that the issue of termination is unpacked in the rules of the group. Therefore each member and the group as a whole, will be informed on procedures on when and what to do when they wish to terminate. It is a good idea for the social worker to establish learning curves after each group session for the group as a whole and for the individual group member.

Step fifteen. Referrals. Referrals are important when the needs of the victim cannot be met in the specific group at the shelter. The social worker should inform the member of the group if her/his needs can be met by another service provider in the community and assist with referral.

Step sixteen. Professional development. Social workers acknowledge that professional growth is continuous, ongoing and developmental throughout their career. They should ensure that they keep abreast of research findings and new developments as applied to groups.

Group work intervention should be based on theory. Therefore we will discuss the theory of Roger's Client-centered therapy next.

6.2.4.2 Nineteen propositions for thinking about people in group work

In Chapter 4, we underline the theory of Du Toit et al (1998:4,27-89) that is based on Roger's Client-centered therapy for intervention. This intervention is based on Roger's propositions pertaining to the individual. The Propositions are the critical theoretical perspectives that drive Roger's theory and give structure to the intervention.

The propositions are dealt with in seven main themes:

- Unique experiences and perceptions of people
- Specific experiences
- The development of the self
- Unsymbolised experiences
- Wholeness and self-determination
- Conditions for facilitation
- The process of change

The propositions presented above, form the framework for intervention with victims of abuse within shelters. Each theme below presents different propositions, which we will discuss briefly.

Theme A: Unique experiences and perceptions of people

Proposition 1: Human experiences on the conscious and unconscious level

'Every individual exists in a continually changing world of experience of which he is the centre.'

Proposition 2: Human perceptions

'The organism reacts to the field as it is experienced and perceived. This field is, for the individual, reality.'

Theme B: Specific experiences

Proposition 5: Needs and behaviour

'Behavior is basically the goal-directed attempt of the organism to satisfy its needs as experience in the field as perceived.'

Proposition 6: Emotions

'Emotions accompanies and in general facilitates such goal-directed behavior, the kind of emotion being related to the seeking versus the consummatory aspects of the behavior, and the intensity of the emotion being related to the perceived significance of the behavior for the maintenance and enhancement of the organism.'

Theme C: The development of the self

Proposition 8: The self

'A portion of the individual's perceptual field gradually becomes differentiated as the self.'

Proposition 9: The significant others who influence the development of the self

'As a result of the interaction with the environment, and particularly as a result of evaluational interaction with others, the structure of the self is formed – an organized, fluid, but consistent conceptual pattern of perceptions of characteristics and relationships of the "I" or the "me" together with values attached to these concepts.'

Proposition 10: Values, own and adopted from other people

'The values attached to experiences, and the values which are a part of the self structure, in some instances are values experienced directly by the organism, and in some instances are values introjected or taken over from others, but perceived in distorted fashion as if they had been experienced directly.'

Proposition 12: Self and behaviour

'Most of the ways of having which are adopted by the organism are those which are consistent with the concept of self.'

Theme D: Unsymbolised experiences

Proposition 11: Dealing with experiences on a conscious and unconscious level

'The human being deals with much of his experiences by means of the symbols attached to it. The symbols enable him to manipulate elements of his experiences in relation to one another, to project himself into new situations, to make many predictions about his phenomenal world.'

Proposition 13: Behaviour and unconscious experiences

'Behaviour may, in some instances, be brought about by organic experiences and needs which have not been symbolized. Such behavior may be inconsistent with the structure of the self, but in such instances, the behaviour is not "owned" by the individual.'

Proposition 14: Stress

'Psychological maladjustment exists when the organism denies to awareness significant sensory and visceral experiences, which consequently are not symbolized and organized into the gestalt of the self-structure. When this situation exists, there is a basic or potential psychological tension.'

Proposition 16: Defense of self

'Any experience which is inconsistent with the organization or structure of self will be perceived as a threat, and the more of these perceptions there are, the more rigidly that self-structure is organised to maintain itself.'

Theme E: Wholeness and self-determination

Proposition 3: Wholeness/unity

'The organism reacts as an organized whole to this phenomenal field.'

Proposition 4: Self-determination

'The organism has one basic tendency and striving – to actualize, maintain, and enhance the experiencing organism.'

Theme F: Conditions for facilitation

Rogers (1987:115), as in Du Toit et al (1998:55), stresses the conditions for facilitation, 'Individuals have within themselves vast resources for self-understanding.....' He refers to propositions (seven) 7 and seventeen (17) in this regard.

Proposition 7: Frames of reference

'The best vantage point for understanding behavior is from the internal frame of reference of the individual himself.'

Proposition 17: Conditions for helping

'Under certain conditions, involving primarily complete absence of any threat to the self-structure, experiences which are inconsistent with it may be perceived, and examined, and the structure of self revised to assimilate and include such experiences.'

Theme G: The process of change

Proposition 15: Reconstruction of self

'Psychological adjustment exists when the concept of the self is such that all the sensory and visceral experiences of the organism are, or may be assimilated on a symbolic level into a consistent relationship with the concept of self.'

Proposition 18: Acceptance of self and others

'When the individual perceives and accepts into one consistent and integrated system all his sensory and visceral experiences then he is necessarily more understanding of others and is more accepting of others as separate individuals.'

Proposition 19: Developing an own value system

'As the individual perceives and accepts into his self-structure more of his organic experiences, he finds that he is replacing his present value system – based so largely upon introjections which have been distortedly symbolized – with a continuing organismic valuing process.'

The application of the above-mentioned themes, connected to the different propositions will contribute to the preparation for the group worker. This is needed to facilitate group work and intervene with the theory that the victim/s has/have own unique and specific experiences in intimate relationships where gender-based violence occur. This is the main reason why they are in the shelters in the first place. The purpose is to create an enabling environment, where the victim/s can experience social cohesion and participate by sharing own experiences in order for them to develop the self and adapt new values from group members, or to enhance unsymbolised dormant values. It is assumed that gender-based violence destroys some part of the self and that contributes towards a low self-image. Therefore, the assumption is that the group work should contribute towards self-growth over a period of time and as the unsymbolised experiences are symbolized, healing takes place. This process should enable the victim/s, (as healing took place), to enrich themselves, to accept themselves, to accept others and to identify with new values in order to make informed decisions about now and their future. This assumption is in line with their right to be treated with respect at all times. They have a right to respect from the social workers, respect from each other in the shelters and respect from intimate partners and family members.

In the next sub-heading we will elaborate on the values of the social worker in her capacity of the group facilitator.

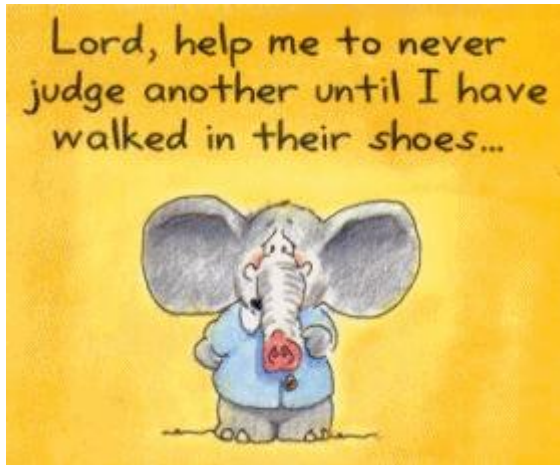
6.2.4.3 Values of humankind for the social worker as group facilitator

The group facilitator's values of respect, individualism, self-determination and confidentiality are applicable here, in line with the values of attentiveness, listening and

empathy for the group process. Du Toit et al (1998:80-181) state that, according to Gordon (in Rogers 1987:388), the group facilitator should perceive the group as an organisation that exists for its members. It offers members the opportunity to express themselves in the way they want to satisfy their needs. The facilitator shows respect when the he/she accepts the values of the group members and also accepts the differences, such as cultural diversity. Egan (1998:43) argues that if the facilitator believes in the dignity of the group member and prizes caring as a value, the group member will develop norms or standards that will be expressed in his/her behaviour in the helping session. "The assumptions and beliefs held by the clients about themselves, the people in their social settings, the world around them, and the helping process itself, interact with their values to generate norms that drive patterns of behavior both in their daily lives and in the helping relationship."

Egan (1998:59) argues that basic communication skills for social workers are essential tools for both relationship building and constructive change. These communication skills entrench the social worker's perception of the individual; how the social worker perceived her own world and those of the victims. We will first highlight the Person-centred Communication and elaborate on the communication skills such as: Listening, confidentiality, attentiveness, empathy and advanced empathy.

Du Toit et al (1998:4-10) state that individualism refers to proposition 1 and 2. Each individual's experiences and perceptions of life and the self are unique and therefore, the social worker (as facilitator), needs to genuinely accept each individual with his unique strengths and weaknesses. The needs, behaviour (proposition 5), emotions (proposition 6), the self (proposition 8) and values (proposition 10) of the victim of abuse in shelters are unique. Du Toit et al (1998:89) further state that Corey (1990:201), argues that thoughts, feelings, beliefs, convictions, attitudes and actions are all expressions of the uniqueness of the individual.



Self-determination relates to proposition 4. Self-determination entails that victims of abuse can speak on their own behalf, express their needs and propose solutions to the needs as they perceive them. It is proposed by Du Toit et al (1998:96), as supported by Glassman and Kates (1990:176) and Rogers' theory, that group members cannot be forced to change their behaviour or to participate in a group programme that does not interest them. It is therefore recommended that the social worker, as the group facilitator, introduces the concept of group work to the new members who enter the shelter for victims of abuse. This serves as preparation to join the group sessions when they want to. It is, however, recommended that the purpose of group work, time, and day in the week that is scheduled for group work and other activities, should be presented to each victim. This introduction of group work should take place as soon as possible after intake, so that the victim may consider her participation.

Confidentiality is a basic principle of social work and forms part of the ethical code as outlined in the guidelines in section 6.2.4.1, step four. According to proposition eleven (11) and seventeen (17), the facilitator should create a climate to reaffirm that all life experiences and personal painful experiences are confidential at all times. It is important for the group situation to take note that it is inappropriate to expect group members to reveal personal information in the group situation too soon. Always get the consent of a member or of a group as a whole first, when it comes to personal life experiences of victims of abuse. The members should feel comfortable in the group as

and when they want to disclose personal experiences. One of the principles of the group should be to keep confidential information within the group as a whole. The result thereof will be that they trust the group process and will respect the members and themselves.

The social worker should use skills of attentiveness, listening and empathy as outlined by Du Toit et al (1998:117-185), to facilitate group work. Attentiveness refers to communication, where the social worker attends, verbally and non-verbally, to the victim of abuse and to the group as a whole. The social worker as facilitator should listen what the members say and stay focused. Do not ask closed questions, talk too much, give advice too soon or force members to talk.

Listening is a skill of critical importance in all forms of human communication. Listening (in group work) is to help the members, as well as the facilitator to explore and understand the ideas, feelings and intentions of the speaker. The social worker's belief is that the group is capable of improving its situation by communication. Therefore the group process is important through communication. It is important that the group members should pay attention to what a member says and the member should feel that she is understood, for example: 'What I hear you are saying.....', 'Correct me if I am wrong, you feel'..... or 'So, you feel.....' "The value of this kind of communication is that the members will stay in the communication process. It will help the group members to understand one another's frame of reference and also bring them closer together...." Du Toit et al (1998:135)

Empathy refers to the ability to hear and to understand what the victim of abuse conveys and to communicate such understanding verbally and non-verbally. The social worker should stay neutral, and have a non-judgmental attitude, complete acceptance, genuine care, openness, and a desire to understand the frame of reference of each victim. The social worker should be aware of her own frame of reference, own challenges and own emotions. This will enable the social worker to be touched by the

emotions of the victims. The group members should feel safe in the group (proposition 16) and must feel accepted and understood. By applying empathy, you work on people's emotions (proposition 6), needs, behaviour and the self (proposition 5).

Advanced empathy entails the identification of the implied message as the victim/s of abuse communicate. Unsymbolised experiences refer to the unawareness of the own needs during the group working session. It is therefore important for the social worker to respond in an appropriate and meaningful way to the victim and to the group as a whole. Themes should be identified and the worker should connect islands.

6.2.4.4 Open group

The main purpose of the open group is to empower the victims of abuse with educational programmes. Shelters experience a great demand for their services, based on the needs of victims of domestic violence. For the purpose of programmes within shelters, the open-group method is recommended - based on the number of victims of abuse moving into the shelter and exiting the shelter.

According to Corey (2002:132), it is essential that, throughout the group work process, the social worker (as the facilitator) should model that she takes work seriously. She should show that she is interested in each victim and the group as a whole. The members will see her willingness to think about the group, as a sign that she cares about them.

6.2.4.5 Group working session

The following two sub-sections are to orientate the social worker in preparation for the group work. These include the equipment in preparation for the group work sessions and the themes for the sessions.

6.2.4.5.1 Equipment: What the social worker as facilitator will need

Generally, the following equipment may be required for your session:

- ◆ Material: Black board and crayons or flipchart and flipchart pens (different colours)

- ◇ Coloured paper in different colours: Small squares for the participants to write on and pencils/pens
- ◇ TV, Video, adaptors and extension lead
- ◇ Case scenario (on the topic which is another method and is optional)
- ◇ Refreshments

Subject knowledge:

- ◇ Knowledge: The social worker should orientate herself prior to the group work on the content of the theme
- ◇ Group work and group process
- ◇ Evaluation form for each member of the group

6.2.4.5.2 Themes for the social worker to consider for group work

The first group work session serves to get to know one another and to establish the needs of the members of the group. The social worker establishes the developmental needs of the members, by requesting them to write their needs down on a piece of paper. Inform them not to reflect any name on the paper, as the themes will be developed and reflect the needs of the group as a whole. Collect the needs and present the needs on a board according to themes that are visible to all members. Apply the nominal group technique. The nominal group technique is a face-to-face group process technique for gaining consensus on the themes to discuss during the group work. Each member of the group identifies his/her own priority areas, on a scale from one (1) to five (5). The facilitator finalises the evaluation of the group themes with the group.

The social worker could incorporate intervention themes for the focus group (victims of abuse), in this phase. These interventions could be aimed at getting the victims to do what the social worker thinks is best for them. The social worker should establish if the victims of abuse understand. She should process and verify if there are any uncertainties. She can ask questions such as: Do you understand? Are there any

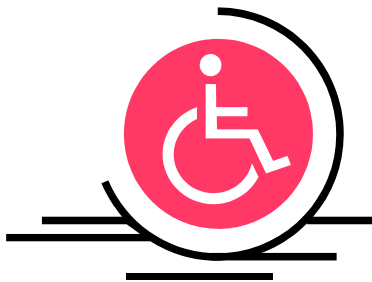
uncertainties? She should explain and respond to any uncertainties raised by the members.

The themes for the social worker to consider for group work serve as guidelines. The different group work programmes are comprised of, but are not limited to:

- Phases of the mourning process
- Forms of domestic violence
- Myths surrounding gender-based violence
- The cycle of violence
- The power and control wheel
- Communication strategies
- Childcare
- Group work with children who were exposed to gender-based violence
- Processes of choice: When an act of domestic violence is committed
- HIV and AIDS
- Development opportunities

The programmes will be discussed in the sequence as indicated above.

The social worker as facilitator should be very flexible, neutral and not judgmental. She should be very sensitive to cultural diversity and to special needs of group members, eg disabilities and illiteracy, throughout the group sessions.



6.2.4.5.3 Planning and organising the open group

The social worker should ensure that all the victims in the shelter know the starting time for the session, on which day during the week it falls, the venue and the duration of the group session.

Welcome everyone to the group and request the members to introduce themselves.

Inform them that the group session will be open (or closed) and explain the difference between an open and a closed group.

- Set group rules. Write the rules on the flipchart
- Review the rules and ask the members if they are satisfied with the rules

If the victims are more than eight (8), it is recommended that the social worker should establish smaller groups within the group, to maximize group members' participation and to establish group cohesion.



Introduce the session and explain to the members the theme of discussion of each session and the expected outcome.

Give attention to group participation and members' interaction. It is recommended that five (5) members of the group have a role and responsibility in the group. Furthermore, the members should rotate weekly to enable each member to have exposure to a role and responsibility. Let them appoint a leader, a facilitator, a scribe, a timer and a runner. Explain the rules. In order to maximize the learning, do the following:

- Discuss the topic/theme

- Explain what is expected from the group/s
- Use Visual Aids
- Illustrate with examples
- Ensure members' involvement and participation
- Practical exercises such as role plays, poems, building of education 'puzzels' and songs
- The social worker should ensure that she consolidate and summarizing each group session in closure
- Invite members who would like an individual session with the social worker to arrange a session where they can deal with unsymbolized and or symbolized experiences, according to their needs

6.3 Programmes

This sub-section of Chapter 6 comprises of different programmes for the social worker to utilize as guidelines for educational purposes. This should enrich herself, as well as transfer knowledge to the victims of abuse in the shelter. So many victims of abuse find themselves depressed due to their circumstances. It was therefore decided to introduce the phases of the mourning process as one of the programmes. This might be beneficial to them.

6.3.1 Programme 1. Phases of the mourning process (example)

Specific outcome: To expose and educate the victim on the different phases of the mourning process

The social worker can use this information for a group educational session, as adapted from Kübler-Ross (1969:1-2). This cycle describes stages of grief that might be useful to victims of abuse, who experience emotions linked to grief. These emotions are due to the unexpected shock of abuse and the trauma related thereto. The grieving process will therefore enable the victim and those around him/her, to be better

equipped to deal with the varying emotions that the grief-stricken person will experience.

Prepare the open group by explaining to them that as victims of abuse are admitted to the shelters, they will also have the opportunity to join the existing group. Address any uncertainties as indicated by the members of the group.

Introduce the topic: Phases of the mourning process

Ask the participants what is their expectation to learn today. You may allow them to talk to the person next to them to discuss the theme first. (This will enable them to be at ease with themselves.) Remember that every person is not necessarily comfortable in expressing his or her thoughts in the group. Use your group techniques and be aware of group dynamics. If you followed the roles and responsibilities, as outlined in this chapter, the group members should move quickly through the different phases of groups. These phases are adapted from Matlhaela (2009:72-73) and are as follows:

Forming phase: Group members are divided into group/s. At this stage there is not much interaction. Group members have a high dependency on leader for guidance.

Storming phase: Decisions not easy, eg: Who should speak? Members begin to relax. There might be power struggles.

Norming phase: A leader is appointed. Roles and responsibilities are clear. Members of the group start to engage more.

Performing phase: Common goals can be achieved. Learning can be maximized. Disagreements are resolved by team.

Mention to the participants that 'all of us' in the session are going to learn from one another today. The intention is not to embarrass a person, but to transfer knowledge, so that we can strengthen ourselves and one another. If we are open to gain

knowledge and, participate in the healing process, we can be restored and each individual can become a vital resource to their communities.

The following emotions can aid the understanding of dealing with post-traumatic stress reactions, as well as the grieving process simultaneously. Most people experience a number of stages in the grieving process. These stages do not necessarily occur in a particular sequence and people may alternate between certain stages in one day, one week, one month, one year or even longer. These emotions are illustrated in line with Du Toit et al (1998: 3-222), as based on Rogers' Client-centered therapy as outlined in Chapter 6.

Figure 6.2 illustrates the stages in the mourning process.

Figure 6.2 Stages of the mourning process

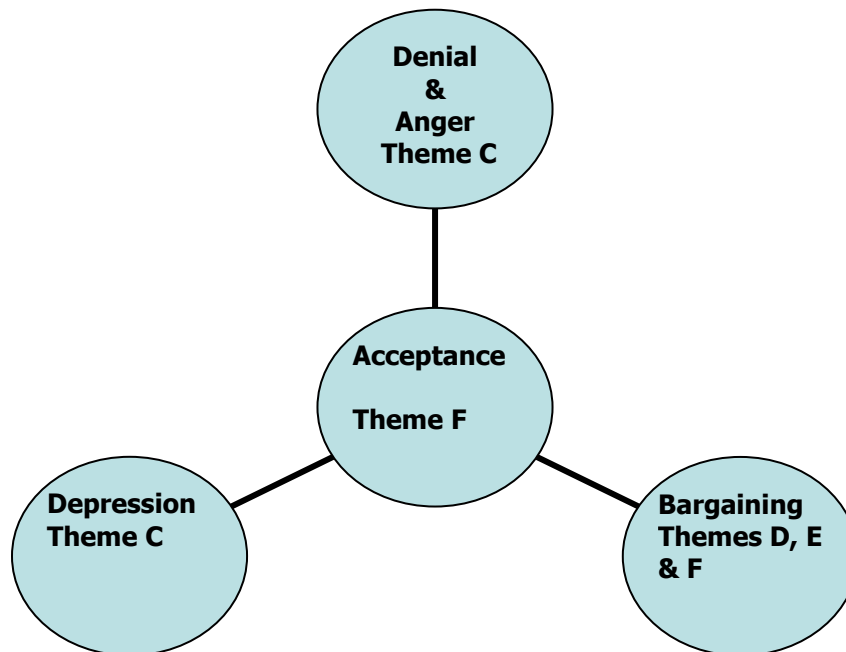


Figure 6.2 reflects the stages of the mourning process aligned with Rogers' Client-centered therapy. The stages are discussed below.

Theme C: Unsymbolized experiences
Denial

In an attempt to put the concept of denial in context, the analogy of losing a loved one may be used. Losing a loved one in this scenario is losing the perpetrator. These emotions could be the same as when loved one dies.

The death of a loved one is often followed by an inevitable shock reaction. This shock can be experienced as disbelief, numbness, calmness, apathy, disorganization or a feeling of unreality. At this stage the person appears to refuse to accept or to acknowledge what has happened. The symbols enable him to manipulate elements of his experiences in relation to one another, to project himself into new situations. This may be evident in what they say, for example: "This can't be true, s/he will be home soon."

Denial protects the bereaved person from experiencing too much pain at a given time. The person may deny the fact of the loss and may behave as if the loved one is still present. S/he may also act as if the loved one was not important.

Anger

The grieving person may display anger, which ranges from irritability to angry outbursts. Such behavior may be inconsistent with the structure of the self, but in such instances, the behaviour is not "owned" by the individual. The anger may also be directed towards others, those who are perceived to have caused the death, him/herself or God. There may also be strong feelings of guilt and anger towards the self. A bereaved person may experience guilt about thoughts or actions related to the death. Guilt may be evoked by experiences of not feeling numb, or because of regret about things not said or done.

Theme D, E and F: Wholeness and self-determination, conditions for facilitation and process of change
Bargaining

At this stage the person is beginning to acknowledge the loss. In an attempt to reverse/change the situation, they may attempt to do certain things or strike a deal with God, family or friends, for example: "I will never abuse my wife/ girlfriend if she agrees to come home again".

Theme C: Unsymbolised experiences
Depression

Feelings of emptiness, intense longing, emotional pain, despair and helplessness can set in once the person realises the full impact of the loss. (Loss of personal belongings such as her/his own living environment for example, house, neighbours and the community). The victim can experience depression, which manifests with symptoms such as withdrawal, impaired sleep and loss of appetite.

Theme F: Process of change
Acceptance

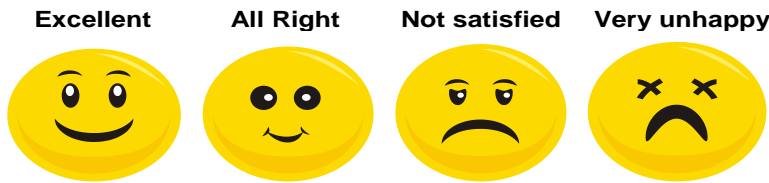
Acceptance is identified as the stage when the victim is able to let go. Acceptance implies that life must continue. There may be a sense of having vented the pain and grief and of now having learned to live with what has happened and to take up a new life in which the perpetrator has no part. This is a long and painful process of setbacks and progress, with episodes of grief at particular times, such as anniversaries, the first Christmas alone and/or New Year's Eve. Accommodating the loss requires a release of the intensity of grief, so that one's energy can be redirected towards moving on and healing.

Allow the group members to elaborate on certain emotions, how they identified them and what this new information means to them. In conclusion, summarise the group work for this session.

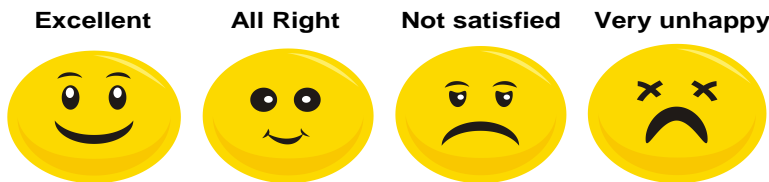
Lastly, evaluate the open group session. Introduce to them the evaluation form. Take them through question by question. Ask the group members to complete the evaluation form that the facilitator prepared prior to the session. Inform them that the facilitator would like to improve on the work for further purposes and their contributions are valuable. Indicate to them that there is no name attached to the form and their honesty will be helpful. The evaluation form is next.

Evaluation form (example)³

- a. Facial expression of each member, indicating how they perceived the session



- b. How did you feel to be part of this group session?



I learned mostly today that: 	I still need to learn more about: 	I will have difficulty in applying:
What I disliked about the group is: 	What might make the group work more effective is: 	If I were asked by a close friend how I would rate this group, I would say: <i>(1 excellent, 2 all right, 3 not satisfied, 4 very unhappy)</i>

Evaluation adapted from the Department of Social Development and UNODC Train- the-Trainer Workshops, 2009

6.3.2 Programme 2. Forms of domestic violence

Specific outcome: To educate the victims on the different forms of domestic violence

Section 1 of the Domestic Violence Act, Act 116 of 1998 (1998:1-2) defines the act of domestic violence very broadly as reflected in Chapter 3, 3.7.1, from page 65 onwards.

It is important for victims of domestic violence to know the difference between the forms of violence that the Act provides for. These are:

Physical abuse; Sexual abuse; Economic abuse; Emotional, Verbal and Psychological abuse; Intimidation; Harassment; Stalking; Damage to property; and Entry into complainant's residence without consent.

The Act further provides remedies for any other controlling or abusive behaviour towards the complainant, where such conduct harms or has the potential of causing imminent harm to the complainant's safety, health and well-being. It is recommended that the social worker orientates herself with the content of the Victims' Rights and maybe link Victims' Rights with the different forms of domestic violence during the session/s. The rights are:

- The right to be treated with fairness and with respect for dignity and privacy
- The right to offer information
- The right to receive information
- The right to protection
- The right to assistance
- The right to compensation
- The right to restitution
- Discrimination

It is recommended that the shelter provides each victim with a Victim's Charter that is available from most departments in the Justice Crime Prevention Structure. This includes the Department of Social Development.

Introduce the topic: Outcome - Different forms of domestic violence

Ask the participants what is their intention to learn today. You may allow them to talk to the person next to them to discuss the theme first. (This will enable them to be at ease with themselves). Remember that every person is not necessarily comfortable in expressing their thoughts in the group. Use your group techniques and be aware of group dynamics.

Mention to the participants that 'all of us' in the session are going to learn from one another today. The intention is not to embarrass a person, but to transfer knowledge, so that we can strengthen ourselves and one another. This intention is, furthermore, to inform communities (at a later stage) on the knowledge gained.

It is suggested that these different forms can be explored in open group working sessions. The social worker or social auxiliary worker can be creative and allow the group to discuss these forms. They can also make a collage of their actual life experiences, as well as the desired one. This programme can run over a few sessions, depending on the levels of understanding of members of the group. It is expected that most of them should be aware of physical abuse. The other forms can be a challenge and a learning curve.

Another method could be to type or write all the different forms on a flipchart as headings. Provide a box with the different sub-sections as outlined in Chapter 3, (from page 71 onwards), and as they draw a sub-section, discuss it as a group. Insert that sub-section under the appropriate heading.

Let the rapporteur/s report back to the larger group, in order to help the facilitator to consolidate and close the group work session. Ask the group members to complete the evaluation form.

6.3.3 Programme 3. Myths surrounding gender-based violence

Specific outcome: To educate the victim on the different myths surrounding gender-based violence

Some myths surrounding gender-based violence are outlined in Chapter 2, page 24 onwards, as adapted from Padayachee et al (1998: 15-18).

Introduce the topic: Myths surrounding gender-based violence.

Introduce the concept of a myth by demonstrating it to them, for example: "Only fat people are friendly." Let the group give their views regarding myths, until they understand the concept.

Let the group discuss how they perceived gender-based violence, by demonstrating myths and facts. Some of the myths and facts are as follows:

Myth

Only poor women, uneducated and black women are abused

Fact

Abuse happens throughout all economic classes, uneducated and all cultures

Myth

Batterers are mentally ill

Fact

Batterers are not mentally ill. This behaviour is totally out of control and excuses for the batterers' behaviour are unjustified and unacceptable

Myth

Battered women deserve to be beaten

Fact

No person needs to be beaten. Although, in some cultural groups it is a norm to discipline a partner by beating her if the partner is disrespectful and disobedient. The question arose from here, what can the service provider and the victims do to inform communities about their rights? Let the group propose recommendations if they are ready for that at this stage.

Myth

Battered women enjoy to be beaten

Fact

Who enjoys it to be beaten?

Myth

Children need their fathers even if they are violent

Fact

The examples of fathers who are batterers, have a lifelong negative effect on children who witnessed the violence against their mother, or experienced the violence themselves. The consequences thereof can be devastating. These children can live in constant fear.

Allow the group members to elaborate on the myths surrounding gender-based violence. Let the rapporteur/s report back to the larger group so that the facilitator can consolidate and close the group work session.

Remember to include all contributions that were not captured in this programme, in order to expand the information in the guidelines for a shelter service delivery model.

New myths
.....
.....
.....

Consolidate and summarize the group work session.

Ask the group members to complete the Evaluation form.

6.3.4 Programme 4. The cycle of violence

Specific outcome: To introduce the victims to the cycle of violence

According to the Integrated Training on Domestic Violence Manual (2004:27), the cycle of violence can occur more than once in a single abusive relationship. The “cycle of violence” in a violent relationship consists of three phases: (Walker 1979:55-70), as reflected in Chapter 2, page 28 and onwards.

- **The tension-building phase**
- **The acute battering episode**
- **The aftermath: Loving respite**

It is important for social service providers to take note that each stage lasts a different length of time in different relationships. The total cycle has its own duration, from a few hours, to a year or more, to complete.

Introduce the topic: The cycle of violence and the expected outcome.

Introduce the concept of a cycle by demonstrating to them, for example: A round watch. You also have other forms like a square; one that stands, one that hangs against a wall or wrist watch, around your neck, and the one that is known to every one is the one you can put around your arm. Show them the watch on your arm. The participants should easily identify an example of a watch.



The watch is round and you reset the watch to the time of the day. There is always just twelve (12) hours per day. It does not matter if you would like to sleep all day and night - the time will always be the same – twelve (12) hours per day, twelve (12) per night. The cycle of violence therefore also has a beginning (the tension- building phase), the dangerous phase (acute battering phase), and an ending time (the aftermath: Loving phase/making up phase). Let them elaborate how long they think a honeymoon lasts? The assumption is that we will all agree that a honeymoon does not last forever. It might last for twelve (12) hours or x twelve (12) hours, or for twelve (12) hours x 12 months, or even for a year or years. After this illustration, the participants should understand the concept of the honeymoon phase.

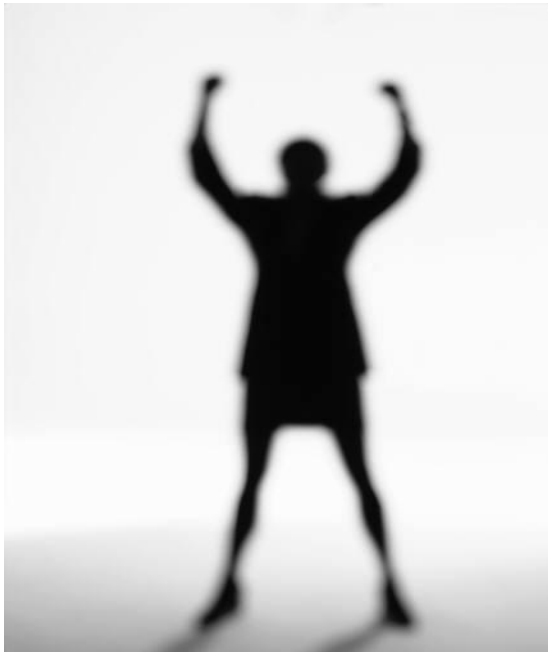
Ask the participants if they would like to know more about the cycle of violence and what the cycle really entails. Many memories could come to mind during this session. Therefore, focus on the cycle and not necessarily on their own experiences in the cycle of violence. Accept disclosure if some of the members want to disclose and let the group support the member in the group. This is an open group and 'trust' among the group members might not yet be established.

Mention to the participants that 'all of us' in the session are going to learn from one another today. Collectively, we do have more than 100 years of real life experiences. The intention is not to embarrass a person, but to transfer knowledge that we can strengthen ourselves and one another. We need to know and understand the cycle of violence in order for us to identify phases thereof. This is to enable us to make informed decisions

at the first signs of the phases, as and when these appear again in an intimate relationship.

If you, as the facilitator, identify tension in some of the members, remember to use lighter moments, such as ice-breakers in the programme. You may ask the group members to stand and do a light exercise, as demonstrated on the next page.

“Let us all stand. Lift up your arms and stretch them next to your ears. Shake the arms and exercise the fingers. Slowly turn your head to the right side, then to the middle and then to the left side - slowly. Be comfortable in what you are doing. Thank you. Sit down.”



Allow the group members to elaborate on the cycle of violence to clarify any uncertainties. Establish if they conceptualize the different phases in the cycle of violence.

Learning curve for the group as a whole:

- 1.....
- 2.....

- 3.....
- 4.....
- 5.....

Let the rapporteur/s report back to the larger group, so that the facilitator can consolidate and close the group work session. Ask the group members to complete the Evaluation form.

Remember to include all contributions that were not captured in this programme, in order to expand the information in the guidelines for a shelter service delivery model.

New myths

.....

.....

.....

6.3.5 Programme 5. Power and Control Wheel

The Power and Control wheel will enable the group members to reaffirm what was discussed during the cycle of violence and broaden their perceptions about gender-based violence. Pence & Paymar (1993:1-3)

The power and control wheel is a helpful diagram to bring about an understanding of the pattern of abusive and violent behaviour in an intimate relationship. This relationship is used by the perpetrator to establish and maintain control over his partner. The wheel comprises of the following elements, namely: Using coercion and threats, using intimidation, using emotional abuse, using intimidation, minimizing, denying and blaming, using children, using male privilege, using economic abuse. These are broadly outlined in the Power and Control Wheel on the pages to follow. Department of Social Development & Department of Social Work and Criminology. Pence & Paymar (1993:1-3)

Introduce the topic: The power and control wheel

The social worker as facilitator should establish the desired outcomes of the group. You may allow them to talk to the person next to them first, in order to discuss the theme, what it entails and what not. Remember that every person is not necessarily comfortable in expressing their thoughts in the group and the elements of the theme might be intimidating. Therefore, be alert to the members' feelings of symbolized and unsymbolized experiences and manage the session therapeutically and educationally, as the need dictates.

Mention to the participants that 'all of us' in the session are going to learn from one another today. The intention is not to embarrass a person, but to transfer knowledge, so that we can strengthen ourselves and one another.

Figure 6.3 Power and control wheel



The power and control wheel should enable victims to identify the most common method/s that was applicable in their own lives during their stay in their homes where the assumed abuse occurred. The social worker might consider using the face-to-face method and asking each group to unpack a sub-section of the control wheel. The social worker can also build in different feelings. Give the group as a whole pieces of paper with different feelings written on them, and let them display these next to the elements. This will enable the members to get in touch with their feelings.

Examples: I hated him, I feel sorry for the children, I wanted to kill him, I felt guilty, I felt like a slave, I felt like a pig, I felt useless, I felt unwanted, I felt rejected, I was in so much pain I could not feel anything – I just wanted to die, I felt crazy, I felt hurt, I felt alone, etc.

The results of the different groups should be very interesting, specifically to diverse cultures. This session will be a real learning curve. Let the group rapporteurs report back according to the wheel elements such as:

- Easily identified:
1. Using coercion and threats
 2. Using intimidation
 3. Using emotional abuse
 4. Using intimidation
 5. Minimizing denying and blaming
 6. Using children
 7. Using male privilege
 8. Using economic abuse

Learning curve for the group as a whole:

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....

Consolidate and summarize the group work session.

Ask the group members to complete the Evaluation form.

Invite those who would like to have an individual session with the social worker to make an appointment. The two of you (social worker and victim of abuse) can deal with emotions and feelings in such a session.

6.3.6 Programme 6. Communication Strategies

All the proposed programmes for group work form part of self communication and communication with others.

The whole intention is to restore the self and to empower the victim of abuse to become a survivor. Communication entails verbal and non-verbal communication eg thinking, talking, eye contact, body language and listening. The group facilitator should be aware that in some cultures it is perceived as respectful not to make eye contact. First establish how the individual and group as a whole perceive communication and reflect that on the flipchart.

In the Department of Social Development & Department of Social Work and Criminology, (2007:145) the difference in the communication style of men and women, is that women are often emotional talkers. Women probe for greater understanding and often refer to emotions, compared to men who are often rational and factual talkers. They want to accomplish a purpose and exert control. It is recommended that the group/s must decide if they agree or disagree. Let the group members divide into their groups and elaborate on the latter and request the group rapporteurs to report back.

The victims of abuse are experts in matters of abuse according to the different ways in which they experienced abuse. Maybe some of them could not call the abuse by name, but could (after the group sessions) identify a broader range of abuse. The question

arose if they are aware of conflict resolution styles. These we would like to introduce next. These conflict resolution styles are outlined in the Department of Social Development & Department of Social Work and Criminology (2007:149-151).

Effective conflict resolution enhances the personal and collective growth as a couple and leads to increased understanding between the couple. The style is, however, based on the personalities and temperament types. Let the group members unpack their style of communication individually and/or face-to-face. The facilitator can make copies of the style and hand it out to each group. The styles are as follows:

THE TURTLE



The turtle withdraws from conflict and hopes that the conflict will fade away. During this phase of conflict resolution, the spouse will remain silent and withdraw from the partner. This behaviour can take days and even weeks. Therefore, the spouses with the owl and the fox styles can consider taking the lead in the relationship. They can negotiate on the issues, in order for the partner to participate and not to be excluded. Give each individual person a fair chance to be respected for their dignity. The turtle also gets a view on issues that cause conflict.

THE TEDDY BEAR



The teddy bear is soft and gentle. She/he always submit and gives in. The teddy bear does not have a voice of its own. The teddy bear can learn to be firm even if it is soft and gentle. Create space in the communication relationship so that the spouses view

point can also be heard. Each person has a view point on any matter even if only to say: For now I really do not know, but can we discuss it later? I just want to apply my mind to the possible solutions. This approach could bring more respect to the relationship.

THE SHARK



The shark attacks and always wants to win. This scenario between two people, the one a shark and the other a teddy bear or a turtle, can be devastating. During a conflict situation the shark only wants to attack and the only person who is important, is the 'shark'. In such a relationship, the shark will not be able to listen to the view point of the spouse. This behaviour can, however, change with the necessary professional intervention and exposure to communication skills in order to establish personal growth.

THE OWL



The owl wants to 'cut down to the bone.' The owl is only satisfied when all issues, from both partners are put on the table for extensive discussions. The owl then starts with negotiations. The owl prefers a win-win situation.

THE FOX



The fox prefers to compromise by sacrificing some of its own ideas and expecting the same from the other person. The fox also prefers a win-win situation, but the route differs from that of the owl.

Handling conflict is a skill and therefore group members need to know their styles of communication in order to decide if they would like a win-win situation, in order to deal effectively with conflict in an intimate relationship. The members of the group can also communicate the knowledge gained in the group session, to their children.

After identifying each individual style in the group, they can be creative and present a role play to the broader group that can serve as an ice-breaker.

The social worker should attend to the following:

- Consolidate and summarize the group work session
- Ask the group members to complete the Evaluation form
- Thank the group members for their participation

6.3.7 Programme 7. Childcare

Specific outcome: To make social workers aware of the rights of children. This knowledge should enable them to take the best interest of the child into consideration at all times and to transfer the knowledge to the mothers in shelters

The purpose of the Childcare programme is to ensure that service providers are aware of children's rights and that they always take the best interest of the child into consideration during their stay in the shelter. According to Padayachee (1997:66) these children were exposed to witnessing the violence against their mother most of the time, or have experienced the violence themselves. Therefore, it is recommended that the social worker conducts an assessment with each child individually, when they are admitted to the shelter. The purpose thereof is to determine the children's needs and put

programmes and services in place. This is done to address the needs in a children's rights based approach, and in their best interest.

Children's Rights

It is important for social workers and shelter managers to be informed of children's rights. These are enshrined in the Bill of Rights of the Constitution 108 of 1996. Section 28 (1) specifies the rights, among others, as follows:

- Right to a name and nationality from birth
- Right to have a family or parental care or appropriate alternative care
- Right to basic nutrition, shelter, basic health care and social services
- Right to be protected from maltreatment, neglect, abuse and degradation
- Right to be protected from exploitative labour practices and not to be required or permitted to perform work that is not age appropriate
- Right to only be detained as a matter of last resort and even then be detained for a short period and be kept separately from adults
- Right to be treated in an age appropriate manner
- Right to have a legal practitioner assigned to him/her by the state
- Right not to have his/her well-being, education, physical, mental, spiritual, moral or social development placed at risk

The best interest of the child standard

The Children's Act, 38 of 2005, as well as the National Policy Framework (NPF), require that the best interest of the child standard should be applied at all times.

It is evident, based on the findings in Chapter 5, that some shelters for victims of abuse do not accommodate boys from age eight (8) to twelve (12) years, irrespective of an initial assessment. It is therefore highly recommended that the victim, with her children, should at all times be accommodated at the shelter. If it is apparent that the victim cannot take responsibility for her child/ren, it is recommended that the child/ren be referred to a designated social worker at a welfare organization. The social worker

should investigate the case and determine whether the child/ren is/are in need of care and protection. (Section 288 of the Children's Act)

- Pending investigation a child may be placed in temporary safe care, such as a place of safety in a residential facility or with family members or with a family in a community

Section 152 (1-5) of the Children's Act makes provision for a designated social worker and a police official to remove a child to temporary safe care without a court order.

Section 155 outlined the Children's Court process. This is imperative for the social worker in order to prepare herself, the child and family members of the child, so that they may be informed of the processes and possible changes in their lives.

Group work



The facilitator needs to introduce the theme of the group work; Children's rights. Let the different groups unpack some of the rights in order to cover all the rights. Indicate the time frame for the session. Let the rapporteurs report back. Address any questions during the session and allow the social worker to consolidate and summarize the group work session.

Ask the group members to complete the Evaluation form.

6.3.8 Programme 8. Group work with children who were exposed to gender-based violence

It is assumed that children who were exposed to or witnessed gender-based violence to such an extent that the mother had to leave the house, have a great deal anger in themselves and other unresolved issues. Therefore, it is recommended that the social worker establishes a close group with these children, in order to address their personal needs. This is done so that they are able to work through the feelings and emotions.

Organising the group

Corey & Corey (2002:199-301) argue that many children experience anger and resolve conflicts without aggression. There are, however, those children who experience anger and need social work interaction in case management as well as group work. Therefore, it is recommended that the social worker needs to select the members for the group with care. The identified children should join the group work. They should be able to learn from one another and help one another develop and strengthen skills to manage their own anger and conflict. The outcome should be to enable these children to become role models, who will be able to assist other children in similar situations. The duration of the group session should not exceed eight (8) working sessions.

Group goals

The themes for the social worker to consider for group work serve as guidelines. The different group work programmes comprise of, but are not limited to:

- Provide information on the rights of the child
- Provide and explain attitudes on conflict management
- Increase skills in identifying and managing self anger
- Increase awareness of diversion programmes and diversity issues
- Increases ability to identify feelings and to deal with emotions
- Introduce effective ways to resolve conflict

The social worker should identify what children should know eg every child needs to know his/her rights. It is proposed that the social worker should hand out a brochure of the children's rights to each child. They should know that every human being differs from another and that each child is unique. Children are very special and has a right to be nurtured, loved, protected and cared for. Their best interest is at the heart of the shelter. Every person on earth becomes angry. It is in order to feel angry. What matters is - how do we deal with the anger?

Group format

The social worker should ensure that the children who join the group should know the starting time for the session, on which day it will take place, the venue and the duration of the group session.

Welcome every child to the group and allow them to get to know one another.

Establish group rules. Let the children develop the rules.

Establish expectations for the individual and the group as a whole.

Explain the purpose of the group and the skills the children will learn and practice.

Appoint a leader, facilitator, a runner, a timer, a scribe and a rapporteur. Explain their roles and responsibilities and emphasise the meaning of a closed group. Members are not allowed to disclose personal issues to those who are not part of the group. All issues on disclosure remain in the group.



Prepare the children on how many group sessions will take place. Inform them and remind them during each meeting that, for example, today is session one (1), meaning that we are left with five (5) additional sessions. This will assist them in preparation for the final group session and closure. Request them to complete an evaluation form, after

each session, on how they perceived the sessions and what they would like to learn more about.

Corey & Corey (2002:300-301) found the following activities to be effective in promoting understanding and effective resolution of conflict situations when with children in group work:

- 'The children create a "conflict web" and a "peace web" by brainstorming words and feelings associated with both. We discuss the differences and implications for each.
- The children make a list of "what makes me angry." Using a "thermometer" visual, they discuss the "degrees" they feel for each situation ranging from a low level of anger all the way up to a boiling point. They realize that even the same problem can be perceived and elicit a different reaction from everyone. We then discuss "ways to cool down," and the children develop a list of what works for them to calm down when they are angry and before they lose control.
- The difference between listening and hearing is explored, and the children practice effective listening skills such as maintaining eye contact, not interrupting, and reflecting back what they hear another person saying.'
Assist the group to develop "I" messages.
- It is proposed that each group session should start with the appointment of the roles and responsibilities of group members and ensure that the group appoints other members in different roles. Let the runner run for colour paper or a pen to keep him busy and show that his role is also important. The time watcher must also know the duration of the session.
- Corey & Corey (2002:301) further mentioned that creating a "toolbox" activity is used to identify a variety of tools and skills that they have in solving problems. Examples are listening skills, eye contact, sharing, taking turns in roles and responsibilities, taking turns in discussions and expressing ideas, apologizing, using humor and compromising.

- Corey & Corey (2002:301) further referred to the video 'Songs for Peacemakers' that the group watched and discussed afterwards. They also discussed that each member plays in taking responsibilities for his/her own behaviour in solving problems.

The final meeting

The last session is a review and wrap up of the group work and group process. It summarizes what knowledge they have gained and how they are going to take the knowledge and skills forward. The skills are needed to make a difference in the lives of those around them in solving conflict situations. It will be a good idea to give them a type of token to remember this time in their lives where they were exposed and in contact with themselves and others.

6.3.9 Programme 9. Options available to victims of abuse when the act of domestic violence is committed

It is important for social workers to understand the remedies provided for in the Domestic Violence Act. The Integrated Training Manual on Domestic Violence (2004: 52-75) summarizes options for victims to consider, regarding on the various components of the Domestic Violence Act. This information will ensure transfer of correct information and understanding the processes. It will also ensure being prepared when taking action in seeking police assistance, deciding to lay a criminal charge, applying for a protection order, seeking medical assistance and/or in need of a shelter. The different options are as follows.

Option 1 : Victim seeks police assistance and decides to lay a criminal charge

Stages and protocols
<p>The victim lays a charge</p> <ul style="list-style-type: none"> - The victim can phone the police for assistance - The victim can go to the police station to lay a charge and complete a

statement of the family situation
Police attend to charge <ul style="list-style-type: none"> - The police decide whether or not to arrest based on the charge - Assist the victim: Explain the victim's their rights. If the victim is in need of a shelter, then the police must take the victim to a shelter. If the victim is in need of medical treatment, the police must take the victim to a doctor
Suspect arrested: bail considered/opposed
Investigation of case against abuser
Decision whether or not to prosecute
Criminal trial
Accused convicted – gather information prior to sentencing
Sentencing

Option 2: Victim applies for a Protection Order

Stages and protocols
a) The victim goes to court to apply for protection order or b) Person with material interest in well-being of the victim applies on her behalf
Court considers application
Court decision: <ul style="list-style-type: none"> - Interim protection order granted or - Notice to respondent to be in court on return date
Protection order/ notice served on perpetrator and copies served on victim
Return date: magistrate decides about final protection order (may conduct hearing)
Serving 'final' protection order on the perpetrator
Copy of protection order sent to police station selected by victim
Court may order seizure of firearm or dangerous weapons from the perpetrator
Breach of order: Victim reports to South African Police Services (SAPS) for failure to comply with the Domestic Violence Act or the South African National Instructions as stipulated in the mentioned Act
South African Police Service decides: <ul style="list-style-type: none"> - Arrest respondent if imminent harm or

- Issue notice to the perpetrator to appear in court
Note: the next stage is the criminal prosecution of the respondent for alleged contravention of the protection order. The stages of the criminal trial have been listed above under 'Option 1' and will therefore not be repeated here.
Complaint against member of the South African Police (SAPS) for failure to comply with Act or National Instructions

Option 3: Victim Seeks Medical Assistance

Stages and protocols
Complainant seeks medical attention
Medical examination and treatment
Collection of medico-legal evidence for use in criminal case or application for protection order
The complainant can be referred to other support structures as the need dictates (eg counselling services, legal services, sheltering, social work intervention, application for maintenance, medical assistance, etc)

The above mentioned options provide a framework of procedures to follow when a victim of domestic violence is in the shelter. The options will enable the victim to make an informed decision, should she wish to lay a criminal charge or requires a protection order.

6.3.10 PROGRAMME 10. HIV AND AIDS

Victims of domestic violence are vulnerable to exposure to HIV and AIDS. It is important for all service providers to be informed about the biological, psychological and social implications of HIV and AIDS. It is recommended that the social worker negotiates with a sister at a clinic, in order to present this information session to the victims in the shelter.

Adapted from "No experience necessary": The Internal trafficking of Persons in South Africa. 2008. International Organisation for Migration. Pretoria

WHY DO WE NEED TO KNOW ABOUT HIV AND AIDS?

The number of people becoming infected with HIV, the virus that causes AIDS, is still increasing. Anyone can be infected with HIV, regardless of social class, nationality, race,

religion or sexual orientation. Everyone needs to be informed about HIV and AIDS, so that they know how to protect themselves and others. The best way to create an environment of compassion and understanding and to fight discrimination and fear, is to provide precise information about HIV and AIDS in the following manner.

Group work: Introduce the theme: HIV & AIDS

Request the group members to identify sub-themes based on the main theme. These sub-themes can include, but are not limited to, the following:

What is HIV?

What is AIDS?

How does a person become infected with HIV?

How can one protect oneself against HIV?

What about HIV testing?

Pre-test and post-test HIV counselling

HIV & AIDS vulnerability of children

Write the main sub-themes on flipcharts. You might consider making the content on each sub-theme available on small pieces of paper that you place in a basket, a paper bag or hat. Let each member draw a paper and let them read the content to the group. Let the group decide where (under which theme) the content belongs. Let them display it on the flipchart or board. Allow members to ask questions. Encourage group interaction. For example:

What is HIV?

HIV stands for Human Immunodeficiency Virus

HIV is transmitted sexually and through blood between people.

Discuss: How?

Persons who are infected with HIV remain infectious for life. Even when they look and feel healthy, they can transmit the virus to others. What can I do to protect myself and others?

HIV infection is not AIDS, but it can lead to AIDS

Persons who are infected with HIV remain infectious for life. Even when they look and feel healthy, they can transmit the virus to others

HIV infection is a permanent infection, for which there is no cure or vaccine yet

The facilitator can continue, with the sub-themes below, as illustrated above.

You can even consider cutting the sub-sections, and placing it in balloons. Each group member can take one balloon, share the information with the group and stick the sub-sections to the flipchart.

What is AIDS?

- When HIV enters the body, it damages the immune system that normally protects us from infections
- AIDS is the abbreviation for Acquired Immune Deficiency Syndrome, which is a group (syndrome) of possible diseases that can result from infection with HIV
- Most people with HIV will eventually develop AIDS. A person may be infected with HIV for a very long time, even many years, before the immune system is so weakened, or “deficient”, that it cannot fight off infections as it used to, and AIDS begins.

How does a person become infected with HIV?

- The main mode of HIV transmission is through unprotected sex with someone who is infected.
- This virus is also passed from one person to another through injections, for example by re-using an infected syringe. HIV can also be transmitted through transfusions of contaminated blood or blood products, although this mode of transmission has become extremely rare in countries able to systematically test donor blood.
- Infected pregnant women can pass HIV to their babies during pregnancy or delivery, as well as through breast feeding.
- One can be infected with HIV through the use of non-sterile cutting instruments such as needles, knives and razors when blood is drawn.

HIV cannot be transmitted through everyday contact with infected people. It cannot be transmitted by using the same toilet or shower, shaking hands, sharing dishes and utensils, using the same telephones, or sharing clothing with an infected person. One cannot become infected through sweat, tears, sneezes, coughs, or urine. HIV is not transmitted through insect bites, such as mosquito bites. No one has ever been infected with HIV by hugging someone who lives with the virus.

How can one protect oneself against HIV?

HIV infections through sexual contact can be avoided by:

- abstaining from penetrative sexual intercourse
- having sex with only one partner, who is not infected and who does not have sex with anyone else
- using condoms properly
- making sure that any needles, syringes and any other instruments used in a process that draws blood, are either unused or sterilized

What about HIV testing?

It is possible to find out if one has been infected with HIV through a blood test. People who know their HIV status can protect themselves and their partners, can take appropriate care of their health and make more informed decisions about the future. Knowing one is HIV positive, may also have negative consequences, such as increased stress and uncertainty, difficulty in making and maintaining relationships, the burden of maintaining a secret if the result is not discussed with another person, and possible stigma and discrimination if one does discuss the result. In addition, being HIV positive may entail a number of restrictions, for example on immigration and freedom of movement, on employment and on health insurance. The decision to have an HIV test, should thus be carefully considered, and should be voluntary.

Pre-test and post-test HIV counselling

Professional counselling must be made available before an HIV test is carried out. Informed consent is also required prior to an HIV test. Post-test counselling should also be made available to all individuals. Those who test positive for HIV, must be provided with competent and sensitive post-test counselling, in as many sessions and for as long as required. The ultimate aims in providing pre- and post-test HIV/AIDS counselling are to ensure that:

- All victims of violence fully understand the meaning of a test result
- All HIV positive victims of violence are fully aware of the necessity to avoid transmission of the virus to other individuals
- HIV-positive persons know how to avoid transmitting the virus to other individuals

HIV & AIDS vulnerability of children

Children's social position puts them at high risk of being raped and sexually abused, which in turn may make them vulnerable to HIV infection. All over the world, the fear of HIV/AIDS has encouraged men to seek sexual partners among younger women, whom

they presume to be less liable to be HIV infected. The myth that having sex with a virgin will cure HIV, AIDS or other Sexual Transmitted Infections (STIs), has been reported. Sexually exploited children are also at a higher risk of acquiring HIV, especially when they have repeated STIs and/or untreated STIs. Children should be offered pre- and post-test HIV counselling appropriate to their age by individuals trained to work with children. As for adults, all HIV testing must be voluntary and accompanied by appropriate informed consent procedures.

6.3.11 Programme 11. Exit strategy

An exit strategy for each victim should form part of the holistic plan of the shelter. The main purpose of the exit strategy is to empower the victim in line with the victim's needs and aspirations. Furthermore, to involve the family and broader support structures as an integral part of the holistic plan.

The social worker and shelter manager should take the following elements into consideration (Adapted from *The A-Z of Opening and Running a Shelter*) (2006:45)

1. The date of exit is known to the staff at the shelter as agreed with the victim. The housemother assists the victim to pack and depart. The room must be clean. The victim must hand over the keys to the housemother at departure.
2. The social worker will give the resident an exit form to complete and return (Appendix G).
3. The social worker will ensure that the victim has an exit strategy with all relevant telephone numbers, in case of emergency, which she can use as and when needed. This is reflected in the Safety Plan which follows.

6.3.12 Programme 12. Safety Plan

Specific outcome: Develop a Safety Plan for the victim of abuse as part of the exit strategy

Safety planning requires a constant dialogue between the victim and the service provider. It is important for the social service provider to enable the victim of abuse to identify her/his own safety needs and construct a personal safety plan.

(Adapted from the Integrated Training on Domestic Violence, 2005:122-136)

Role of the social service provider:

- Ensure that the safety plan is tailored to the victim's own current circumstances
- Base the safety plan on realistic geographical resources which are easily accessible to the victim
- Ensure that you are experienced and knowledgeable about the legal remedies and social services available in the area, before you attempt to assist in drawing up a safety plan

Components of an effective Safety Plan

- Focus on the victim's own experiences
- Validate the victim's survival skills and the safety planning of the past, if any

Determine:

What strategies did the victim employ in the past?

What worked, and why did it work?

What did not work, and why not?

What strategies would the victim feel comfortable with and why?

What is different this time?

- Help the victim identify all risks, and present him/her with additional strategies or options. Keep in mind that:
 - Victims' lives are complex and vary from person to person and situation to situation. What may work for one victim may not work for another.

- Safety needs may change from day to day or situation to situation.
- Consider the following factors:
 - ∞ Lack of education
 - ∞ Mental and physical abilities
 - ∞ Geographic location
 - ∞ Lack of financial resources (poverty)
 - ∞ Language barriers
 - ∞ Sexual orientation
 - ∞ Cultural and religious beliefs

Services providers should display sensitivity towards any mistreatment by government departments. These may include threats of losing children, or insensitive attitudes when approaching officials to explore options in managing the victims and their children's own lives. These are usually the cause of skepticism.

Essential elements of a Safety Plan

The essential elements of a Safety Plan include a number of aspects that the service provider should take into consideration when developing effective safety plans. These elements are listed below:

- Past experiences with safety planning and protection strategies
- Awareness of the perpetrator's behaviour
- Use of all available legal protection means/orders
- Actions which the victim must take in the event of the breach of a protection order
- List of names of people in the victim's support network, who are likely to provide immediate help in time of emergency
- Availability of resources which can assist the victim and his/her children or relatives

- Assessment of the victim's environment to include safety features at home and other routine places, e.g. work, church, shopping malls, gymnasium etc
- Plans of safety for children and others during routine activities
- Access to information regarding full assessment of needs, counseling and other necessary services
- Process to review and update safety plan at regular intervals

Example of a personalized Safety Plan

Source: Office of the Attorney, City of San Diego, California, 1990 as adapted from the Integrated Training on Domestic Violence (2005: 133-134)

My Personal Safety Plan

Name: _____

Date: _____

The following are the steps which I can take to plan for my safety and to prepare myself for the possibility of further violence. Although I do not have control over the abuser's violence, I do have a choice about how to respond to him/her and how to best get my children and myself to safety.

1. If I decide to leave I will.....
(Practice how you will get out of your home safely. Which doors, windows, lifts, stairs, or fire escapes would you use?)
2. I can keep my purse/key/s of the house/car ready and put them (place)..... in order to leave quickly
3. I can tell (name 2 people) _____ and _____ about the violence and ask them to call the police if they hear noises of a fight coming from my home
4. I will teach my children how to get to the nearest telephone and use it to call the police or any office or person from my support network list

5. I will useas my safety code word or number with my children and my friends so they can call for external help
6. If I have to leave my home, I will go
(Decide on this even if you do not think that there will be a next time)
If I cannot go to the above location, then I can go to.....or.....)
7. When I expect that we are going to have an argument, I will try to move to a space which is at lower risk such as.....
(Try to avoid arguments in the bathroom, garage, kitchen, near rooms or in rooms without access to an outside door)
8. I will keep copies of important documents at
(Identification documents, protection order)
9. If my partner destroys my protection order, I must get another copy from the Clerk of the court
10. I can inform(neighbour),(pastor),(friend) that the abuser does not live with me anymore and that they should call the police if they see him near my home
11. The one thing I can do really well is
(write, cook, bake, garden, etc)
12. I will find out whether or not there is some way I can use my skill in my community to earn some money
13. Telephone numbers I need to know:

Police station
Community Police Forum
Ambulance
Community organisation
Traditional leader
Street committee
Work
Boss /supervisor

Minister of religion
 Friend
 Neighbour/s

The National Stop Gender Violence Toll-free Helpline 0800 150 150

Other

The above-mentioned programmes serve as guidelines, from which the social worker can choose for group work and group participation. The guidelines are based on the theory of Du Toit et al (1998: 4,27-89) and refer to Roger's Client-centered therapy. It provides social workers with the orientation of preparation for group work and what it entails, their values and the modeling of the group facilitator.

The guidelines comprise of programmes on the mourning process and what it entails, with regard to emotions and feelings, on a conscious and unconscious level. It also covers forms of domestic violence versus a rights-based approach, myths surrounding gender-based violence and the cycle of violence. It covers power and control wheel, communication strategies, childcare, options for victims to consider, as to when the act of domestic violence is committed, HIV and AIDS and an exit strategy.

In the following sub-section we discuss matters pertaining to shelter managers.

6.4 Management

Management of shelters requires good governance. The main tasks of management, according to Kroon (2000:111-523) are:

Planning, organisation, activation and control. Additional management tasks, in order to execute the latter, are decision making, communication, motivation, co-ordination, delegation, discipline. Another important element of management is monitoring and evaluation. The aim thereof is to manage the shelters effectively

and efficiently. Funding is one of the main elements in managing shelters. There are certain entities for Civil Society Organisations (CSOs) to apply for funding for certain elements for their services, programmes and or projects in the shelters and/or in the community. Taken the vulnerability of victims of abuse in consideration, it is imperative that shelters should be in a position to conduct their operations effectively. Shelters are encouraged to register with the National Department of Social Development Non-profit Directorate in terms of Act 71 of 1997. The implications hereof will be discussed next.

6.4.1 Partnerships

Government advocates good partnerships with non-profit organisations and therefore encourages non-profit organisations to accept the responsibility of compliance with high standards. Registration as a service provider, in order to render services as a shelter, has the following options available:

Option 1: Non-Profit Organisation (NPO) registering with the Department of Social Development in accordance with the Non-profit Organizations Act, 71 of 1997, section 13. According to the model for Application for Registration by Non-profit Organisations of the Department of Social Development 2000, registration is voluntary. If the Non-profit Organisation complies with the requirements for registration, then the Director for Non-profit Organizations will enter its name in a register and send a certificate of registration. This application enables shelters to submit business plans to the provincial departments of Social Development, requesting funding for certain objectives connected to estimated cost of activities. The specific departments engage with the shelter in terms of a Memorandum of Agreement/Understanding. It stipulates how they will spend the funds allocated to the shelters and remedies connected thereto, if the shelters do not comply with the agreement. They can also apply for funding from the National Development Agency (NDA). The Minister of Social Development administers these requests.

Option 2: Public Benefit Organization (PBO) registering with South African Revenue Services as a Public benefit organisation for tax benefits, and/or

Option 3: Section 21 Company registering with the Department of Trade and Industry.

The advantages and disadvantages are as follows:

Advantages: The Body corporate

Exists in its own right, separately from its members

- Continue to exist even when its membership changes and there are different office bearers
- Be able to own property and other possessions
- Be able to sue and be sued in its own name

Disadvantages: Narrative (written) Report

The Narrative Report comprises of three sections that describe the organisation's activities during the previous twelve months, namely:

- Basic details about the organisation on the form provided. (Street and postal addresses, Organisation's Office Bearers 'Persons who hold positions of authority and responsibility within the Organisation. These are the members of the Governing Board or Controlling committee')
- Job titles of each staff member, gender and race
- Basic skills or services of the Organisation: (Example: Counselling, activism, managing, fundraising, monitoring, sheltering)
- The shelter's major achievements over the past year
- List of important meetings held by the shelter during the past year
- Financial Report – income and expenditure. This report must be approved by the Office Bearers before it is submitted to the National Department of Social Development.

Should the organisation have registered in terms of the requirements for a Section 21 Company and proposes to apply for funds from the Department of Social Development, it should also be registered as a non-profit organisation.

6.4.2 The structure of the shelter

When a person or organisation proposes to establish a shelter, the location, size of the building, the grounds and general characteristics should be taken into consideration. Strategize around these attributes to achieve the objective, for example, to establish a shelter for victims of abuse.

According to Sisters Incorporated (2006:54-56) good governance encompasses effective management of financial and human resources. This implies that the shelter should look at the structure of the building and the potential thereof, should extension be necessary. Aspects that the manager should consider before opening the shelter, are as follows:

- How many women and children can the shelter accommodate?
- Single or double storey?
- If double storey, it is imperative for the manager to consider extra security measures in front of the windows and or balcony, in order to protect victims who may be at risk at the shelter (jumping from windows, etc)
- Wheelchair access for persons with disabilities or who are on crutches

All victims at shelters, including adults with care-dependent children, should have their own bed, cupboard, bedding and towels. Bathrooms (bath or showers) and toilets should provide the victims with privacy, ensuring that soap and toilet roll holders are displayed. Toilet paper should be available and the toilets in good working condition. Consideration should be given to the inclusion of a lounge/TV room, large dining room table, laundry, kitchen, games room and a skills training room/centre/computer room, crèche and play area for children.

The offices or staff amenities should include a separate room and living area for the housemother (bedroom and en suite bathroom). The following offices are imperative: Manager's office, social worker's office, counselling room, waiting room and a private toilet for the staff members.

A major component of managing a shelter is human resources and the elements connected thereto, which are as follows.

6.4.3 Human resources

Human resource management is imperative in an organisational structure and comprises of various elements, eg job descriptions. The manager should ensure that all staff members at the shelter have job descriptions and a personnel file. Consideration should be given to the following: relief staff, organisation of staff training and staff supervision, having regular meetings (good practice would be a meeting each morning for 30 minutes). Staff are to complete a confidentiality agreement, a copy of each staff member's ID and personal contact details, a daily attendance register reflecting leave and sick leave. A separate file should be kept for the leave and sick leave forms.

In general, a shelter may require the following staff members: a manager, an assistant manager, personal assistant to the manager, receptionist, social worker, social auxiliary worker, day housemother, night housemother, and a relief housemother for relief weekends. It also needs a child care worker, kitchen supervisor (residents to assist in kitchen as part of their duties) and a skills trainer to transfer skills to the victims in the shelter. This is the ideal model for the staff component. Most of the shelters do not have the luxury of a full staff component as illustrated in Chapter 5. To establish and manage a shelter is a big and expensive challenge.

A major component is financial management, which will be discussed next.

6.4.4 Financial resources

The question which arises is: "How much funding will be needed to operate a shelter and where will finances be sourced from?"

Useful tips for the development of a budget for the shelter

Useful tips for the development of a budget for the shelter are, among others the following:

- ✓ Draft a realistic budget based on projected costs
- ✓ Ensure that, among others, food, toiletries, medication and a first aid kit are provided for
- ✓ Prepare a monthly report for the management committee
- ✓ Do your annual audit and prepare all books for auditor
- ✓ Exercise stringent control over all funds received and acknowledge receipt of the funds/goods in kind, by means of a letter of acknowledgement to the donor
- ✓ Keep a petty cash float

Which aspects to take into consideration when developing a budget for a shelter:

The following aspects are imperative when developing a budget for a shelter, namely:

- ✓ Staff salaries
- ✓ Telephone and cell phones. Policy connected thereto
- ✓ Rent, rates, insurance and municipal services (water, electricity and sanitation)
- ✓ Food and cleaning material
- ✓ Stationary
- ✓ Maintenance of grounds and buildings
- ✓ Medical and dental bills, medication

- ✓ Petrol for staff (only when car is used for shelter's work)
- ✓ Security services

Draft and submit a funding proposal to potential funders.

Arrange for open days and invite the corporate sector. The aim is to introduce them to the services and programmes in shelters for the most vulnerable, such as women and their children. Furthermore, request the corporate sector to sponsor them or to contribute towards equipment and running costs of the shelter/s, as part of their social responsibility.

Market your services – ensure that there is a strategy in place to advertise services. If possible, appoint a fundraiser.

6.4.5 Annual General Meeting

The annual general meeting of the shelter is a possible way to engage all board members and other chosen guests. Procedures can be as follows:

Ensure that all members of the Board and selected guests are in receipt of a Notice of the proposed meeting and Draft Agenda, at least fourteen (14) working days prior to the meeting. Some items on the agenda could be:

- Welcome and introduction
- Apologies (circulate an attendance list)
- Adopt previous minutes
- Financial report by treasurer
- Chairpersons report
- Social workers report
- Managers report on the home
- Acknowledgement of outgoing office bearers
- Election of office bearers and councillors
- Guest speaker

- Entertainment: song/dance/drama
- Presentations
- Refreshments or a formal breakfast, lunch and dinner

In Chapter 4, the Minimum Standards for Shelters for Victims of Abuse was outlined. Based on the Minimum Standards, a monitoring and evaluation tool was developed, which will be presented next.

6.4.6 Monitoring and Evaluation Tool for Shelters for Victims of Abuse

The monitoring tool will enable the shelter manager to monitor and evaluate their services and programmes as mandatory for good management. Researcher developed the tool based on the Minimum Standards for Service Delivery in Victim Empowerment, (2004) and adapted from Groenewald (2006: 149-152).

The monitoring tool comprises of twelve (12) minimum standards as discussed in the previous sub-heading in Chapter 4, 4.4. Each standard has certain elements that the shelter should measure according to the proposed tool. The summarized minimum standards will be presented in two sections, namely section A and B.

Section A presents the following minimum standards:

Admission to the shelter.

- Safety and security is a priority at the shelter
- Rights of victims are essential within the shelter
- Physical environment in good order in the shelter
- Emergency and safety practices in place in the shelter
- Victims of abuse have access to and receive adequate health care within or arranged by the shelter
- Adequate health care
- Care Plan
- Individual Developmental Plan (IDP)
- Therapeutic services and programmes in place

- Education - Victims of abuse are provided with appropriate education opportunities
- Exit strategy

Section B presents a monitoring tool for recipients of the service at the shelters.

Instruction on how to use the tool:

The first part of the tool is an illustration on how to use the tool. After circling each specific section in the tool, the service provider should be able to score each row, and then each section which should score each subsection to a percentage. This exercise should enable the service provider to identify weaknesses and strengths. These will inform and encourage effective and efficient service delivery in the shelter.

Illustration of the monitoring and evaluation tool: Section A presents the tool on minimum standards for shelter managers

Adapted from Constructing an Attitude Scale by Likert Procedure (Dryer: 130-135)
Scale: knowledge, attitude and perceptions

Example: Circle the number in each row that you score yourself. Translate the number to a percentage (%) as follows:

5 = 100%, 4 = 80%, 3 = 60%, 2 = 40% and 1 = 20%

Rate the following items according to this scale:

5= Aims achieved

4= Great deal of effort made to achieve the standard

3= Aims not achieved

2= Little effort made to achieve the standard

1= No effort made to achieve the standard

2.1 Admission to the shelter (Intake): Caring and management are some of our highest priorities in the shelter	Each row %	Scale				
2.1.1 Intake form in place and completed for each victim	40%	5	4	3	2	1
2.1.2 Orientation programme in place at the shelter	60%	5	4	3	2	1
2.1.3 An introduction to the personnel, case manager and or counselor	80%	5	4	3	2	1
2.1.4 Information regarding expectations from the victim in the shelter (rules)	100%	5	4	3	2	1
2.1.5 Information on Rights	80%	5	4	3	2	1

Responsibilities	60%	5	4	3	2	1
Complaint procedures	40%	5	4	3	2	1
2.1.6 Contract between the shelter and the victims with regard to their stay in the shelter	60%	5	4	3	2	1
Sub-total for admission to the shelter	65%	26 out of 40 (5x8=40)				

Explanation: 2.1 Admission to the centre

2.1 comprises off 8 elements to monitor and evaluate. This is connected to the % as indicated in each row. Therefore calculate the % in each row as follows:

- 5= 100% Aims achieved
- 4= 80% Great deal of effort made to achieve the standard
- 3= 60% Aims not achieved
- 2= 40% Little effort made to achieve the standard
- 1= 20% No effort made to achieve the standard

Add points together in each row and convert to % and then divide by 8 elements. For example: Total 520 points divided by 8, equals 65%.

The data illustrate that your shelter complies with 65% of the expected minimum standards criteria. Room for improvement is 35%.

THE COMPREHENSIVE TOOL IS PRESENTED NEXT

Monitoring and Evaluation Tool - Shelters for Victims of Abuse

Rate the following items according to this scale:

- 5= Aims achieved
- 4= Great deal of effort made to achieve the standard
- 3= Aims not achieved
- 2= Little effort made to achieve the standard
- 1= No effort made to achieve the standard

2.1 Admission to the shelter (Intake): Caring and management are some of our highest priorities in the shelter	Each row %	Scale
2.1.1 Intake form in place and completed for each victim	%	5 4 3 2 1
2.1.2 Orientation programme in place at the shelter	%	5 4 3 2 1
2.1.3 An introduction to the personnel, case manager and or counselor	%	5 4 3 2 1
2.1.4 Information regarding expectations from the victim in the shelter (rules)	%	5 4 3 2 1

2.1.5 Information on Rights	%	5	4	3	2	1
Responsibilities	%	5	4	3	2	1
Complaint procedures	%	5	4	3	2	1
2.1.6 Contract between the shelter and the victims with regard to their stay in the shelter	%	5	4	3	2	1
Sub-total for admission to the shelter	%					
2.2 Safety and security is a priority at the shelter	Each row %	Scale				
2.2.1 Good security system in place (fencing and or security on premises)	%	5	4	3	2	1
2.2.2 Emergency numbers are displayed within the shelter	%	5	4	3	2	1
2.2.3 Register for incidents in place	%	5	4	3	2	1
2.2.4 No firearms or other weapons on premises of shelter (screening)	%	5	4	3	2	1
Sub-total for safety and security is a priority at the shelter	%					
2.3 Rights of victims are essential at the shelter	Each row %	Scale				
2.3.1 Information on victim's rights is communicated and available in information and electronic material (eg pamphlets and videos)	%	5	4	3	2	1
2.3.2 Victims of abuse are given information to access legal advice agencies	%	5	4	3	2	1
2.3.3 Minimum Standard: Complaints are managed within the shelter	%					
2.3.4 Complaints procedures are in place	%	5	4	3	2	1
Sub-total for rights of victims are essential at the shelter	%					
2.4 Physical environment in good order in the shelter	Each row %	Scale				
2.4.1 Physical environment offered to victims - Safe physical environment	%	5	4	3	2	1
2.4.2 Privacy (eg own bed and own private space for clothing and possessions)	%	5	4	3	2	1
2.4.3 Establishment of shelter	%	5	4	3	2	1
Decision making (eg personal space)	%	5	4	3	2	1
Possessions (eg clothes)	%	5	4	3	2	1
2.4.4 Basic amenities are in good working order	%	5	4	3	2	1

(eg ablution facilities in working condition and clean)		
Sub-total for physical environment in good order in the shelter	%	
2.5 Emergency and safety practices in place in the shelter	Each row %	Scale
2.5.1 Fire precautions and emergency procedures in place (eg availability of fire hose, medications and poisonous material are kept locked)	%	5 4 3 2 1
Sub-total for emergency and safety practices in place in the shelter	%	
2.6 Victims of abuse have access to and receive adequate health care at or arranged by the shelter	Each row %	Scale
2.6.1 Universal precautions at shelter (Hepatitis B, HIV and AIDS)	%	5 4 3 2 1
2.6.2 Victims' complaints about safety are addressed (Complaints procedures in place)	%	5 4 3 2 1
2.6.3 House rules in place	%	5 4 3 2 1
Sub-total for victims of abuse have access to and receive adequate health care at or arranged by the shelter	%	
2.7. Adequate health care	Each row %	Scale
2.7.1 Access to medical care	%	5 4 3 2 1
2.7.2 Drug control/supervision	%	5 4 3 2 1
2.7.3 Information sessions on sexuality etc	%	5 4 3 2 1
2.7.4 HIV Pre- and post test counseling	%	5 4 3 2 1
2.7.5 Confidentiality regarding health status assured	%	5 4 3 2 1
2.7.6 Mental health care	%	5 4 3 2 1
2.7.7 Developmental milieu and climate	%	
2.7.8 Identify victims' personal strengths	%	5 4 3 2 1
2.7.9 Victims participate in decision making processes and give feedback about the programmes at the shelter	%	5 4 3 2 1
2.7.10 Victims give feedback about the programmes at the shelter	%	5 4 3 2 1

2.7.11 Healthy relationships are encouraged between victims and staff members	%	5	4	3	2	1
Sub-total for adequate health care	%					
2.8 Care plan	Each row %	Scale				
2.8.1 Assessment	%	5	4	3	2	1
2.8.2 Identify strengths and developmental needs	%	5	4	3	2	1
2.8.3 Each victim of abuse has a Care Plan and a copy thereof	%	5	4	3	2	1
2.8.4 Care Plan is reviewed regularly	%	5	4	3	2	1
Sub-total for care plan	%					
2.9. Individual Developmental Plan (IDP)	Each row %	Scale				
2.9.1 Each victim of human trafficking has a written individual developmental plan	%	5	4	3	2	1
2.9.2 The IDP is regularly reviewed and adapted to meet the changing needs of the victim	%	5	4	3	2	1
Sub-total for Individual Developmental Plan (IDP)	%					
2.10 Therapeutic services and programmes in place	%	Scale				
2.10.1 Victims receive therapeutic support and/or special services	%	5	4	3	2	1
2.10.2 Victims are given information about the goals, period of time and expected outcomes of all therapeutic programmes	%	5	4	3	2	1
2.10.3 Victims are motivated to make use of therapeutic programmes	%	5	4	3	2	1
Sub-total for therapeutic services and programmes in place	%					
2.11 Education - Victims of abuse are provided with appropriate and relevant education	Each row %	Scale				
2.11.1 Service provider ensures that school going children of victims of abuse attend school	%	5	4	3	2	1
2.11.2 Shelter management build relationships with schools	%	5	4	3	2	1
2.11.3 Shelter management put measures in place	%	5	4	3	2	1

to prevent discrimination against children at schools		
2.11.4 Children at the shelter are provided with adequate resources and space to attend to their school work	%	5 4 3 2 1
<i>Sub-total for Education - Victims of abuse are provided with appropriate and relevant education</i>	%	
<i>2.12 Exit strategy</i>	<i>Each row %</i>	<i>Scale</i>
2.12.1 Service provider involves victims in decision making regarding their immediate and long-term future	%	5 4 3 2 1
2.12.2 Service provider ensures that victims are given sufficient information about resources within their future community (contact details)	%	5 4 3 2 1
2.12.3 Service providers ensure that each victim of abuse has a Protection Plan and an Individual Development Plan. They are also provided with contact numbers of services to take with them should they need assistance after disengagement	%	5 4 3 2 1
<i>Sub-total for Exit strategy</i>	%	
<i>Total score and %</i>		
<i>Remarks:</i>		
<i>Date:</i>		
<i>Areas for improvement</i>		
<i>Immediate</i>		
•		
<i>Midterm</i>		
•		
<i>Long term</i>		
•		

It is also important to evaluate the services from the perspective of the recipients of the service. The following scale can provide an indication to the service provider of how the victim perceived their services at the shelter.

SECTION B

MONITORING TOOL FOR RECIPIENTS OF THE SERVICE AT THE SHELTERS FOR VICTIMS OF ABUSE

6.4.7 Monitoring tool for recipients of the service at the shelters

In Section B we evaluate the recipients of the service at the shelters for victim of abuse. The first part of the tool is an illustration on how to use the tool. The service provider should prepare the victim to evaluate the service. Request the victim to read the question and circle each question in the tool according to her view, from 1 to 4. Four (4) equals 100%, three (3) equals 75%, two (2) equals 50% and one (1) equals 25%. Calculate the percentages that are reflected in each row and divided the percentages into the number of questions. This example consists of twelve (12) questions.

If the victim of abuse is illiterate or visually impaired, it is suggested that the social worker supports the victim in the completion of the tool.

This exercise should enable the shelter manager to identify developmental areas that will inform and encourage effective and efficient service delivery at the shelter.

Example: Circle the number in each row that the victim scores. Translate the number to a percentage (%) as follows:		
4 = 100%, 3 = 75%, 2 = 50% and 1 = 25%		
Rate the following items according to this scale and draw a circle around your choice:		
4=Strongly agree 3=Agree 2=Disagree 1=Strongly disagree		
1 When I entered the shelter	%	Scale
1.1 I felt comfortable (socially safe)	75	4 3 2 1

1.2	I felt cared for	100	4	3	2	1
1.3	I received the name and contact number/s of the social worker responsible for case management	25	4	3	2	1
1.4	I received emergency telephone numbers (hospital, clinic and police)	50	4	3	2	1
1.5	I signed a contract with the service provider	100	4	3	2	1
1.6	I was given a date for a follow-up counselling session	25	4	3	2	1
1.7	I attended counselling services	50	4	3	2	1
1.8	I attended group work sessions	50	4	3	2	1
1.9	I was aware of the cycle of violence (The tension-building phase, the acute battering episode and the aftermath: Loving respite/honeymoon phase)	75	4	3	2	1
1.10	We developed a safety plan	50	4	3	2	1
1.11	I was empowered. I know my rights	100	4	3	2	1
1.12	How would you rate the overall stay at the shelter?	50	4	3	2	1
Total		63%	29 out of 48 (12x4=48)			

Adapted from Constructing an Attitude Scale by Likert Procedure (Dryer: 130-135)
Scale: knowledge, attitude and perceptions

Explanation: 2.2 Recipients of the service at the shelters for victims of abuse

2.2 comprises off 12 elements to monitor and evaluate the services from the experience of the recipients in the shelter. Each row is connected to a % and a scale from 1-4, as indicated above. Therefore calculate the % in each row as follows:

4= 100% Strongly agree

3= 75% Agree

2= 50% Disagree

1= 25% Strongly disagree

Add points together and convert to % and then divide by 12 elements. For example:
Total 750 points divided by 12, equals 63%.

The data illustrate that the recipients of the service at the shelter scored 63%. Room for improvement is 37%.

The outcome of the evaluation tool will enable the service provider at the shelter to evaluate the services from the perception of the recipients.

Monitoring tool for recipients of the service at the shelters

Rate the following items according to this scale and draw a circle around your choice:		
4=Strongly agree 3=Agree 2=Disagree 1=Strongly disagree		
Translate the number in each row to a percentage (%) as follows:		
4 = 100%, 3 = 75%, 2 = 50% and 1 = 25%		
The highest score in each row is 4 - that equals 100%. There are 12 rows. Calculate as follows: 12 x 4 = 48. 48 equals 100%		
1 When I entered the shelter	%	Scale
1.3 I felt comfortable (socially safe)	%	4 3 2 1
1.4 I felt cared for	%	4 3 2 1
1.3 I received the name and contact number/s of the social worker responsible for case management	%	4 3 2 1
1.4 I received emergency telephone numbers (hospital, clinic and police)	%	4 3 2 1
1.5 I signed a contract with the service provider	%	4 3 2 1
1.6 I was given a date for a follow-up counselling session	%	4 3 2 1
1.7 I attended counselling services	%	4 3 2 1
1.8 I attended group work sessions	%	4 3 2 1
1.10 I was aware of the cycle of violence (The tension-building phase, the acute battering episode, and the aftermath: Loving respite/honeymoon phase)	%	4 3 2 1
1.10 We developed a safety plan	%	4 3 2 1
1.11 I was empowered. I know my rights	%	4 3 2 1

1.12	How would you rate the overall stay at the shelter?	%	4	3	2	1
Total		%				

Summary

The proposed guidelines for a shelter service delivery model for victims of abuse focused on three key components, namely Intake, Services and Programmes, and an Exit Strategy. The main focus of these guidelines is to enable shelter managers and social workers, or other staff involved in service delivery to victims, to operate in a structured manner. This will improve effective and efficient service delivery to the recipients of the service, namely victims of abuse and their children. The guidelines focus on the intake procedures at the shelter, by orientating the victim of abuse to the shelter environment, establishing the needs of victims and developing an independent development plan. The guidelines further enable the service provider with a structured counselling intervention method with the victim and family members.

Researcher also identified themes by means of which victims will be empowered to identify high risk situations and which should enable them to be pro-active in their approach to protect them from further abuse. This may be achieved by jointly developing the Safety Plan in preparation for the victim's reintegration into society, utilising a victims' rights-based approach.

This model is not a quick fix method to solve problems, but should rather be seen as a developmental opportunity for victims of abuse for emotional and cognitive growth. This is necessary in preparing for today and facing tomorrow with more confidence. This model will further enable service providers to monitor their service, enabling them to put measures in place to improve their services and programmes at the shelter, in order to meet the required standard.

CHAPTER 7

Conclusions and Recommendations

Introduction

The rationale for conducting this empirical research was based on the research of Groenewald (2006:126-127) who identified the need for a shelter service delivery model for victims of abuse in South Africa. The study found that there is a need for a standardised shelter service delivery model for victims of domestic violence.

The aim of the present research was to assess the experiences of stakeholders responsible for the registration and management of shelters for victims of abuse in South Africa with the view of developing a shelter service delivery model. The conclusions are presented and followed by a more detailed discussion on the realization of the research objectives. The recommendations are also provided.

7.1 Conclusions

The following conclusions, emanating from the study, can be made.

7.1.1 The total number of shelters in the Country is only 96 for a population of 34 610 414 women and children. These shelters are mainly run by Non-governmental Organisations. (see Figure 4.1, page 103) In the Eastern Cape Province – fourteen (14) shelters, Free State Province - twelve (12) shelters, Gauteng Province – twenty two (22) shelters, KwaZulu-Natal Province - thirteen (13) shelters, Limpopo Province - seven (7) shelters, Mpumalanga Province - four (4) shelters, North West Province - one (1) shelter, Northern Cape Province - three (3) shelters and Western Cape Province – twenty (20) shelters. (see Figure 4.1 on page 103)

The Provincial VEP Co-ordinators indicated that they have 77 shelters on their registers (2008), compared to the 96 from the study. It is not clear if the Provincial VEP Co-ordinators are aware of the 19 shelters, but do not regard them as shelters for some reason, or other. This was not clear from the research.

There are only nine (9) One-stop Centres in the country. These were established by Government to counteract violence against women and their children. These One-stop Centres are in the following provinces. In the Eastern Cape Province two - (2), Gauteng Province - one (1), Mpumalanga Province - three (3), Northern Cape Province - one (1), North West Province - one (1), and Western Cape Province - one (1). Some of the one-stop centres also provide accommodation, services and programmes for victims of abuse for a period of three to six months as the need dictates. Some of the One-stop Centres were established in partnership with the United Nations Office on Drugs and Crime (UNODC) Regional Office for Southern Africa in order to increase human security. The partnership between South Africa and the UNODC was extended to establish One-stop Centres in Gauteng, KwaZulu-Natal and Limpopo Provinces during the 2009 – 2010. The purpose of a One-stop Centre is to provide expert holistic intervention services to abused women and their children. (see Appendix O)

The indication is that there are nowhere near enough shelters, or one-stop service centers in the country to address the needs of victims of abuse - especially in rural and deep rural areas.

7.1.2 There is no legislation that governs the registration of shelters for victims of abuse in South Africa. This presents a significant void in the present organisation and quality control surrounding shelters for victims of violence. The national Department of Social Development's Minimum Standards for Shelters

and the Service Delivery Model actually only seem adhered to by some service providers.

In the international arena, registration procedures are not compulsory in some countries, for example in the Netherlands and in Germany. Safe houses are subsidized by municipalities or care institutions. The National Coalition Against Domestic Violence, Denver (USA), indicated that the Violence Against Women Act is the primary source of funding for domestic violence agencies in the United States.

It is evident that Provincial Victim Empowerment Co-ordinators have different criteria for perceiving shelters as registered. Their main focus is to request shelters to submit their Non- Profit Organisations (NPO) certificate to the provincial department. The exception is Gauteng Province that put more requirements in place. These are:

- ✓ An application form requesting approval from the provincial department to function as a shelter for victims of abuse was developed
- ✓ Capacity building and training of shelter staff must be included in the application
- ✓ The Province provides guidance and support to shelters in terms of how to complete a form, link shelters with other Departments, such as Corporate Governance and Traditional Affairs for application of a Health Permit
- ✓ Application form for registration as a NPO is provided
- ✓ Inspection report as completed by the regional offices

7.1.3 It is evident that each province (and even regions in one province) apply different funding standards to shelters. Limpopo Province is issuing seed funding of R30,000 per year, other provinces provide from R26.00 to R150.00 per victim per day. This fragmentation underlines the need for a uniform funding standard and the sustainability connected thereto. Shelters are in agreement that the

service is a very expensive one, but it also provides a space for abused women to calm down, and an opportunity to work through their trauma and restore their dignity.

Seven shelters (7) out of the 32 that forms the sample of the study, did not receive funding from government over the past three years whether this non-funding was due to submission or not submission of a business plan is not clear. They reflected in the questionnaire that they rely mostly on donations to survive and to provide in the daily needs of the most vulnerable group.

7.1.4 Most VEP Co-ordinators agree that social work services are fundamental at shelters. Victims arrived at shelters traumatized by the abuse and having to seek protection at a shelter, is a traumatic experience for a women and children in itself. These services are temporary at shelters. The reality is that women and their children should at some stage leave the shelter and make a living elsewhere. The concern is, however, the lack of housing opportunities and job creation possibilities for women, which cause that women remain economically dependent on the perpetrator. This scenario remains a challenge. It is therefore essential that shelters should have full time social workers. The social worker will do assessments and render intensive social work services (counselling, holistic and therapeutic programmes for both abused women and their children). Social workers are responsible to facilitate the development of Care Plans and Individual Development Plans (IDP) for each client and prepare them to reintegrate into society. (see Figure 5.8, page 182)

Only 57% of shelters utilizes the services of qualified social workers. (see Figure 5.9, page 183) Twenty four (24%) of them employed social auxiliary workers as support services to the social worker while working with victims of domestic violence. Thirty one percent of the shelters utilizes volunteers, some provide stipends and others function without stipends. One shelter operates with

volunteers only. The social worker from the Department in Carolina, Mpumalanga Province, attends to the psycho-social well-being of the victims at Badplaas shelter.

7.1.5 Some social workers and police officials take children who are in need of care and protection to shelters that serve as places of safety. (KwaZulu-Natal and North West Provinces) These shelters do not have social workers to intervene with the children. The Government social workers manage these clients. The concern from one shelter was as follows: "Social workers in Government are few, and they are always overworked and are not really keen to render services at shelters."

The practice at some shelters is not to accommodate boys from 8 years of age and older. The reason being that most of the boys are victims of sexual abuse and rape and therefore need special intervention services and programmes that they cannot offer in the shelters. This is due to a lack of therapeutic services and specialized programmes for these children. Shelter managers should always be aware that the best interest of the child is paramount and therefore the immediate, short and long term needs of the children should be addressed in the shelters by professional service providers. Most shelters in Gauteng Province feel that the admission criteria for boys should be reconsidered, so that boys of all ages can be accommodated with their mothers. The Provincial VEP Co-ordinator also recommended that the infrastructure of shelters should be reviewed in order to make provision for family units. This will allow the mother and child/ren to be together during their stay at shelters.

The situation of 83% of children, who might not be attending school, causes great concern. (see Figure 5.7, page 180)

7.1.6 Most shelters met the victims' rights as outlined in the Service Charter of Victims of Crime. These include the right to be treated with respect and dignity, the right to provide information, the right to receive information, the right to assistance, the right to protection and the right to legal advice. Most shelters have offices for interviews with the exception of 3%. (see Figure 5.10, page 184) These shelters utilize a bedroom for counselling victims of abuse in relative privacy and therefore uphold the principles of social work of privacy and confidentiality. Seventy two percent (72%) of the shelters informs the victims of their rights. They indicate options with regard to services at the legal board, as well as the right to legal advice in a language and in a manner which they understand. Twenty eight percent (28%) of shelters encounters problems in accessing legal advice. (see Figure 5.12, page 186) Some shelters encounter problems with the South African Police Services and the Department of Justice and Constitutional Development (National Prosecuting Authority - prosecutors and magistrates), in order to co-operate in the best interest of the victim. A further frustration for some shelters is the long waiting list. They have to wait for court dates for the prosecution to take place on domestic violence and maintenance applications. One shelter mentioned that: "The legal Aid is not very helpful in rural areas," documents are only available in English and Afrikaans. An interpreter from the shelter should then also accompany the social workers to enable the social worker and the victims to understand the full purpose of the intervention. The processes are frustrating. It was found that 6% of shelters needed to put measures in place to inform the victims of their rights.

7.1.7 The study found that 60% of shelters has programmes in place for the victims of abuse to enhance their communication skills. (see Figure 5.13, page 188) These skills are needed to enhance conflict resolutions and to rebuild the victims' self-esteem in order to empower the victim to live a life of quality.

7.1.8 Recreational programmes should be part of programmes offered at shelters. These shelters that responded to this question, indicated one, two or four recreational programmes. Twelve percent (12%) did not answer the question and the reason therefore is unknown. (see Table 5.14, page 189-190) It may also be assumed that they do not offer any recreational programmes. Sisters Incorporated received donor funds to train victims of abuse in shelters (in all nine (9) provinces) in jewelry making. The jewelry is then exported to other countries.

7.1.9 Shelters are temporary services, an escape and hiding place from abuse. The reality is that women and their children should, at some stage, leave a shelter and make a living elsewhere. The lack of own housing opportunities, transitional houses, and limited job opportunities enforce women to be more economically dependent on the perpetrator. This remains a challenge. The purpose of the Exit Strategy is to prepare the victim, in a systematic manner, to start thinking about tomorrow. The study found that 69% of shelters has an exit strategy in place for victims of abuse. (see Figure 5.14, page 190) This prepares them to reintegrate into the community, but 31% does not have an exit strategy. An exit strategy should form part of the holistic plan for each victim of abuse in the shelter. The main purpose of the exit strategy is to empower victims in line with their needs and aspirations to reintegrate into society. This can be done in a safe manner so that they can live their lives free from abuse. The development of a safety plan should form part of the exit strategy and should be introduced to the victims in the early stages after their intake at the shelter. The purpose thereof is to prepare the victim emotionally to start thinking about the future and indicate measures to be taken in order to exit the shelter. The exit strategy is not a once-off consultation session and it is recommended that, the more they are exposed to the structural thinking, the more the exit from the shelter will become a reality.

7.1.10 Shelter managers indicated their need to be trained in the completion of business plans. They need to know how to apply for funding, train counsellors on how to transfer skills and knowledge in victim empowerment and trauma support. They also need instruction in office administration and skills development.

7.1.11 Shelter managers experience constraints with the submission of different formats of the same data to Government. The need for a standardized information management system (on non-financial data per month) to regional offices, provincial offices and national level should be implemented to assist them with unnecessarily demands on data and to reduce administration. This measurement will enable the National Department of Social Development to respond to Parliamentary Questions immediately and in an effective manner.

7.1.12 Shelter managers confirmed that they would like to have a Procedure Manual in place. The manual should explain the steps to follow in case management of victims of abuse, a shelter intake policy, training manuals for staff and for victims of abuse. (see Table 5.15, page 195) The purpose should be to empower them with knowledge on domestic violence and the remedies connected thereto. This knowledge should enable them to make informed decisions about their future. They stressed that they also need skills development programmes, connected to income generating programmes, in order to sustain themselves.

The following sub-section outlines the **three main objectives** of the study, namely:

- To provide a literature survey on gender-based violence for assessment of the service rendering of shelters and find some directions for changes in legislation compared to registration procedures

-To determine the existing registration procedures for shelters in the nine (9) provinces in South Africa. Furthermore, to develop national procedures for the registration of shelters for victims of abuse

-To develop a standardised shelter service delivery model. This refers to a residential facility that provides temporary accommodation and services to victims of abuse in a developmental, holistic and integrated approach in order to restore and enhance the psycho-social well-being of the victim.

These objectives were achieved as outlined below.

7.2 OBJECTIVES

Objective 1

To provide a literature survey on gender-based violence for assessment of the service rendering of shelters and find some directions for changes in legislation compared to registration procedures

Chapter two (2) of the research outlined a literature review on gender-based violence to bring about an understanding of what is meant by gender and gender-based violence. It referred to the root causes of patriarchy, the broader scope to take into consideration in gender-based violence prevention strategies and myths surrounding gender-based violence. It outlined the cycle of violence, reasons for women to remain in the same abusive situation, explanations as to why abused women may also abuse their children, physical and psychological manifestations of domestic violence in children. New risk situations are also included: Consequences for separation, endeavours of the South African Government in fighting gender-based violence, and the needs of victims and benefits of victim empowerment programmes and support services.

The issues raised in this chapter indicate the complexity of the phenomenon of abusive relationship. Some remedies of the South African Government to address gender-based violence, have also been scrutinized.

Objective 2

To determine the existing registration procedures for shelters in the nine (9) provinces in South Africa. Furthermore, to develop national procedures for the registration for shelters for victims of abuse

Chapter four (4) outlined the legislative framework of the South African government for registration procedures for non-governmental organisations, as well as some international requirements for registration of non-governmental organisations.

It is evident that there are no standardized registration requirements for shelters, due to the lack of legislation for Victim Empowerment services. Based on the research, a good model is used by Gauteng Province. It has the following requirements, namely:

- Application form for registration
- Environmental Health Certificate/Permit
- Non Profit Organisation Certificate
- Admission Criteria
- Weekly schedule/programme for women and children
- Weekly menu
- Copy of building plan and lease of contract with owner
- Inspection report
- Compliance with the Minimum Standards for shelters or a plan to comply with that which should include timeframes and activities

There are 96 shelters for victims of abuse in South Africa, as well as nine (9) One-stop Service Centres which address the immediate needs of the victims of violence, as stated in Chapter 3. (see Figure 4.1 & appendix O)

The South Africa Government established, together with the 'United Nations Office on Drugs and Crime', One-stop centres with international donor funds in order to counteract violence against women and children. The indication is that there are nowhere near enough shelters, or One-stop Service Centres in the country to address the needs of victims of abuse - especially in rural and deep rural areas.

This Chapter further deals with enrichment programmes for families. It reflects that, as part of the American model, there are, within the therapeutic intervention programmes, parenting time centres and re-education programmes for batterers. The aim is to unite, strengthen or to reach mutual agreements with regards to the next step in the relationship.

This chapter further enables the reader to have a clear understanding of programmes within shelters, eg therapeutic services, empowerment, support programmes, legal advice and developmental services. It is interesting to note that a housing specialist is assigned to assist women within shelters in the USA. They need the assistance with housing opportunities when leaving the shelter. This aspect is currently still lacking in the South African Housing procedures (since April 2009: Department of Human Settlement Affairs).

Objective 3

To develop a standardised shelter service delivery model. This refers to a residential facility that provides temporary accommodation and services to victims of abuse in a developmental, holistic and integrated approach in order to restore and enhance the psych-social well-being of the victim.

Chapter 6 deals with proposed Guidelines for a Shelter Service Delivery Model for Victims of Abuse. The tested Guidelines proposed three key components, viz.

Intake, Services and Programmes and an Exit Strategy. The main focus of this model is to enable social workers to operate in a structured manner, which will improve effective and efficient service delivery to the recipients of the service, namely victims of abuse and their children. This proposed guideline provides practical guidelines, (starting from intake to the shelter) by orientating the victims of abuse to the shelter environment, establishing the needs of victims and developing an independent development plan. The model further enables the service provider to use a structured counselling intervention method with the victim and family members.

The research also identified themes by means of which victims will be empowered to identify high risk situations and which should enable them to be proactive in their approach to protect themselves from further abuse. This may be achieved by jointly developing the Safety Plan in preparation for the victims' reintegration into society and utilising a victims' rights-based approach.

This model is not a quick-fix method to solve problems, but should rather be seen as a developmental opportunity for assisting victims of abuse towards emotional and cognitive growth in preparing for today and face tomorrow with more confidence. This model will further enable service providers to monitor their services. This will enable them to put measures in place to improve their services and programmes in the shelter, and focus on meeting the required standard.

7.3 Recommendations

Added to the recommendation a suggestion is made as to who or what body should take responsibility to implement the recommendation. The following recommendations linked to and targeted implementation structures.

7.3.1 The Department of Justice and Constitutional Development:

It is recommended that audit of all research on the implementation of the Domestic Violence Act 116 of 1998, should be conducted. Adjustments with an inter-departmental and inter-sectoral approach should be sought, in order to address gaps in the existing legislation framework.

The Domestic Violence Act 116 of 1998, should be amended ensuring that the roles and responsibilities of the Department of Social Development and the Department of Health are included in serving victims of domestic violence.

7.3.2 The Department of Social Development:

In the amendment of the Domestic Violence Act 116 of 1998, the Department of Social Development should ensure registration procedures for shelters. This should include the accreditation, registration and de-registration of shelters and One-stop Centres, connected to sustainable standardized funding for services and programmes that address the needs of victims and their children, should be ensured. Norms for the shelters, minimum standards, programmes rendered by accredited shelters for victims of domestic violence and standardized funding criteria should be included.

An assessment tool should form part of the regulations. Adults and their children should be assessed and, based on the assessment, the child/en should be admitted and referred to other service providers, where a more focused intervention is needed in order to keep the family (as a unit as far as possible) together.

In the amendment of the Act services of social workers, and social auxiliary workers should be included and the position of volunteers connected to stipends, should also be ensured.

- 7.3.3 The national Department of Social Development: Directorate Victim Empowerment Programme** should negotiate for funds for shelters. As and when funds are available from Government, such as the Criminal Asset Recovery Account (CARA) Funds and the European Union Funds, a process should be in place to identify shelters. A sequence of priority shelters to be strengthened connected to a time frame of at least three years, should be developed. The establishing of family units, in shelters where the parent and children can be united and where the parent can control their children in a homely environment, should definitely be considered.
- 7.3.4 The national Department of Social Development: Directorate Victim Empowerment Programme** should negotiate with the Department of Human Settlement to form part of an inter-departmental task team. Develop Terms of Reference, with roles and responsibilities, in order to seek solutions in developing a housing scheme for victims who function effectively and who are ready to reintegrate into society. The purpose is to give the survivor of abuse an own home.
- 7.3.5 The national Department of Social Development: Directorate Victim Empowerment Programme** should establish a Shelter Task Team (via the Victim Empowerment Management Forum) to develop a standardized funding criteria for non-governmental organisations that manage shelters for victims of abuse. The proposed standardized funding criteria should be presented to the Chief Financial Officer at the National Department of Social Development to serve as an item on the Provincial Forum Agenda.
- 7.3.6 The national Department of Social Development: Directorate Victim Empowerment Programme** should establish a non-financial

data base with provincial counterparts. The data base should reflect statistics on how many shelters, the location of shelters, how many victims of abuse (adults and children) are accommodated, how many victims leave the shelters on a quarterly basis and the source of integration.

7.3.7 The national Department of Social Development: Directorate Victim Empowerment Programme should include an objective in the revised shelter strategy for the establishment of shelters and One-stop Centres in rural and deep-rural areas.

7.3.8 The national Department of Social Development: Directorate Victim Empowerment Programme should through the National Shelter Movement network orientate themselves with the proposed Guidelines for a Shelter Service Delivery Model for Victims of Abuse. The guidelines can be presented at the next Consultative Stakeholders Summit.

7.3.9 Researcher will provide feedback on the research to the provincial VEP Co-ordinators and to the shelters who participated in the research and who formed the sample of the research by e-mail and or post the proposed guidelines. Shelter service providers should include their own experiences on programmes and services. This could become a best practice guideline.

7.3.10 The national Department of Social Development: Directorate Victim Empowerment Programme should include in the Communication Strategy a Newsletter to shelter managers. Shelter managers should be informed of the National Department of Social Development's Early Childhood Development Programme (ECD), in order to establish ECDs at shelters and access the financial resources needed.

- 7.3.11 The national Department of Social Development: Directorate Victim Empowerment Programme** should ensure that their capacity building programmes include the completion of business plans to obtain funding, administration skills for staff in shelters and a short course in first aid should be recommended for housemothers, so that they are able to attend to emergency treatment. The training programme on trauma support and victim empowerment that is aligned with Unit Standards, should be registered with the South African Qualification Authority for social workers, social auxiliary workers and volunteers in the domestic violence service field. (The outcome-based should cover different techniques such as group working sessions, group work and even face-to-face sessions. The members in the group are then able to explain certain concepts and broaden the same understanding of critical learning) The Health and Welfare Seta (HWSETA) should be consulted, as a stakeholder, to ensure accreditation of the programme.
- 7.3.12** The shelters should affiliate with the National Shelter Movement Network where good practices, concerns, challenges and gaps can be addressed in a uniform manner in order to seek solutions in reviewing their policies. Accessibility of clients to social workers should be included.
- 7.3.13 The Department of Justice and Constitutional Development** should make the Victims Charter available to shelters and assist social workers, (as and when needed), regarding application for a protection order and/or maintenance. Further support that should be requested, is with court dates and preparing the victim for court.
- 7.3.14** A suggestion/complaint Box should be established in the shelters, where victims can raise anonymous concerns or express their appreciation on certain issues. Such opinions may help the staff at the shelter to improve services.

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Appendices

Appendix A. Admission and shelter intake form

The pre-admission screening phase.

At this stage the service provider screens the details to establish if the victim meets their criteria as reflected in the shelter policy.

Specific outcome: To gather the personal details of the victim to enable the service provider to open a file

Complete the inception form at the shelter

Date of admission: _____ File number: _____ Surname: _____

Date of arrival at shelter: _____

Total number of family members admitted: _____

Name, age and gender of all the members of the family admitted at the shelter:

Name				
Age				
Gender				

Language preferred: _____

Referred by whom: ✓ Whichever is applicable

Police	Self	Other shelter	Justice official	Family	Leader in community
Other: Specify					

Contact name and number of referrer person:

Name: _____ Tel number: _____

Main request from the referrer:

In case of an emergency, contact:

Name & Surname:

Relationship:

Any other information applicable to the admission:

I complete this form in my capacity as: (mark appropriate block with an 'x')

Social worker	Volunteer	Manager at shelter	Housemother	Other: Specify
---------------	-----------	--------------------	-------------	----------------

Name: _____

Surname: _____

Date: _____

Appendix B. General assessment

Specific outcome: To summarise the personal circumstances of the victim of violence and to develop a plan of action in conjunction with the victim

GENERAL INFORMATION PERTAINING TO THE WOMAN

Surname: _____

Name/s as on ID: _____

Date of birth: _____

ID number/s: Adult and their children _____

Name and ID number of perpetrator: _____

(if available)

Marital Status: Whichever is applicable

At present, prior to the admission

(complete the table below to indicate the status of the relationship between the woman and the perpetrator)

Married	Divorced	Widow	Estranged	Cohabit	Unmarried
Duration	Duration	Duration	Duration	Duration	Duration

Level of education of the abused victim and her children

✓ Whichever is applicable

Family member (Name)	Illiterate	Primary school	Secondary school	Matric	Graduate/ Diploma	Technical qualifications	Unknown

Details of the children (of the victim) in the shelter

Age groups	Gender, name & grade	Disability	Other

In years							
	Boy/s	Girl/s	Grade	Physical	Mental	Chronic	Acute
0-1 y							
1-3 y							
3-6y							
6-8y							
8-10y							
10-12y							
12-14y							
14-16y							
16-18y							

Address:

Home:

Work:

Telephone number/s: _____

Brief description of what happened immediately prior to admission:

2.	Stomach pains	Yes	No
3.	Shortness of breath	Yes	No
4.	Sleeping disorders	Yes	No

Is the victim pregnant? Yes No

Any emotional symptom/s?

1.	Sadness	Yes	No
2.	Crying	Yes	No
3.	Worrying	Yes	No
4.	Nervousness	Yes	No
5.	Loss of interest	Yes	No

GENERAL INFORMATION PERTAINING TO THE VICTIM'S FINANCIAL SITUATION

Receive grant/s ✓ Whichever is applicable

Yes No

If yes, which grant? ✓ Whichever is applicable

- Child support grant
- Old age pension
- Disability grant
- Maintenance

Source of income of the victim and amount per month: _____

Any other information that is considered to be of importance and which is not covered in the questionnaire:

EVALUATION BY INTAKE SOCIAL WORKER/MANAGER

Primary problem/s

Secondary problem/s

Plan of Action for the social worker

1. _____
2. _____
3. _____
4. _____
5. _____

Plan of Action for the victim

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

Appendix C. Needs assessment

The social worker should establish the immediate and long term needs of the victim of abuse as adapted from United States (2008).

This table can be adjusted by the service providers to suit their own requirements. Needs differ from day to day and therefore this needs assessment should be used and updated at regular intervals during the intervention with the victim of abuse.

Needs of victims of abuse

No	Needs	Immediate needs	Medium term needs	Long term needs	Remarks
1.	SAFETY				
1.1	Protection order				
1.2	To recover personal belongings				
1.3	Housing/shelter				
1.4	Transitional housing				
2.	NUTRITION				
	Food				
	Specify:				
3.	CLOTHING AND TOILETRIES				
4.	RAPE KIT				
4.1	Forensic evidence				
4.2	Affidavit				

	(Assist the victim and review evidence)				
5.	CHILD/REN OF THE VICTIM				
5.1	Child/ren in need of alternative care				
5.2	Mother will be able to take care of her own children within the shelter				
5.3	REFER TO:				
5.3.1	Medical doctor				
5.3.2	Psychologist				
5.3.3	Police				
5.3.4	Clerk of the court				
5.3.5	Legal advisor/services				
5.3.6	Clinic: Substance abuse treatment				
5.3.7	Identification of the type (s) of substance				
5.3.8	Duration of abuse				
5.3.9	Establish the need for detoxification				
5.3.10	Court: Court preparation				
6.	TRANSPORT NEEDS				
6.1	Taxi				
6.2	Bus				

6.3	Shelter transport				
6.4	Train				
7.	RELATIONSHIPS				
7.1	Family members: Mother/father/ brother/sister/ Extended family members				
7.2	Priest/pastor/ traditional leader				
7.3	Self				
7.3.1	Others:				
8.	Life skills				
8.1	Self care				
	Other:				
8.2	Education- School (adult)				
8.3	Adult Basic Educational Training (ABET)				
8.4	Early Childhood Development				
8.5	School-going children				
8.6	School clothes				
8.7	School books				
8.8	Bookcase				

	Other:				
9.	Career path				
9.1	Job training/ Employment				
9.2	Job placement				
9.3	Child care				
9.4	Reintegration into community				

Date completed:

Name of service provider:

Appendix D. Admission support

The staff at the shelter should be educated about their role and availability. They should support and assist the victims and their children in order to make them feel welcome at the centre.

Specific outcome: To introduce the victim to the rules prevailing at the shelter. The victim needs to comply with these rules in order to contribute to the smooth running of the shelter and to clarify any uncertainties

Familiarize the victim with the rules of the shelter

Following the introduction and explanation of the rules, the victim should be required to sign the document, confirming her/his understanding and acceptance thereof. Handle any uncertainties pertaining to the rules of the shelter as adapted from Living Waters (2009) Sisters Incorporated (2006:29) and NISSA Institute for Women's Development (2005).

Researcher suggests that the following issues should be covered in the written rules of the shelter:

- ✓ Introduction to staff members at the shelter
- ✓ Conditions regarding the duration of stay at the shelter
- ✓ Management of visitors
- ✓ Firearms
- ✓ Conflict situations and resolution thereof
- ✓ Dispute regulations
- ✓ Daily/weekly programme with schedule of activities
- ✓ Daily/weekly menu with time schedule
- ✓ Parent responsibility of children during their stay at the shelter
- ✓ Anonymity regarding the location of the shelter to members of the family or extended family members
- ✓ Domestic activities at the shelter during the duration of their stay, e.g. cleaning, cooking, washing of dishes/clothes and preparation of meals and gardening/landscaping
- ✓ Weekly house meetings to discuss the week's activities and what is expected for the following week
- ✓ Cover counselling sessions where and when and with whom as well as therapeutic group work sessions, as well as group activities
- ✓ Financial contribution if the victim is employed
- ✓ The issue of care kits (clothing and toiletries)
- ✓ Taxi/bus funds to clinic, schools, hospitals, magistrate offices, counselors and legal services

- ✓ Manage telephone calls
- ✓ Library services/games
- ✓ Information about all emergency services must be displayed close to the phone (manager of the shelter/hospital/fire brigade)
- ✓ Policy on secondary admissions to the shelter
- ✓ Security
- ✓ Policy for instant dismissal:
 - Theft – if you find the money/item stolen on/with the resident
 - Drinking any liquor or drunk on the premises
 - Drugs
 - Physical violence

Appendix E. Referral letter (Example)

The referral letter should reflect the organisation/department's logo with the contact details of the service provider eg name, telephone number etc (Example)

Enquiries: Ms Z Komura

Tel: 012 312 7568

Fax: 012 312 7563

The Commissioner
South African Police Service
Poynton Building
Church Street
Pretoria
0001

Dear Commissioner

SUPPORT: ALLEGED VICTIM OF DOMESTIC VIOLENCE

Please be informed that Ms/Mrs/Mr.....needs your intervention onin order for her/him to lodge a complaint and to obtain protection from the alleged perpetrator whose details are as follows:

Name:.....

Address:

.....

.....

Contact details:.....

Your co-operation is highly appreciated.

Ms Z Komura

Social work Registration number:..... Date:

Appendix F. TERMS OF REFERENCE: PROVINCIAL VEP CO-ORDINATORS

The Provincial Victim Empowerment Co-ordinators is the lead department for VEP in their perspective provinces. They report back to the National Department of Social Development's VEP Management Forum every quarter. According to the National Policy Guidelines for Victim Empowerment (2009:18 - 19), the Provincial Victim Empowerment Co-ordinators are responsible for the management of the Provincial Victim Empowerment Management Forums and Local Victim Empowerment Forums. The Provincial Victim Empowerment Management Forums include the following responsibilities:

Provincial Victim Empowerment Management Forums

- "Co-ordinate victim empowerment support services in the province;
- Develop Victim Empowerment Strategic Plans;
- Initiate new programmes and amend the existing services based on the needs of victims;
- Budget for sustainable funding to strengthen victim empowerment services within the government and NPO sectors;
- Facilitate accredited training of professionals and volunteers;
- Collect data for management and research purposes;
- Hold regular inter-departmental and inter-sectoral meetings to identify and address breakdowns in co-ordination and communication and to share best practices;
- Initiate crime prevention campaigns;
- Address the delivery of integrated services to victims;
- Submit quarterly and annual progress reports to the National Victim Empowerment Management Forum and to provincial Heads of Departments;
- Consolidate a Provincial Resource Directory of Services;
- Keep abreast of the latest developments in victim empowerment."

Local Victim Empowerment Forums

- "Ensure provision of direct trauma support and assistance to victims of crime and violence;

- Develop referral networks and procedures to ensure effective referral of victims to appropriate agencies;
- Provide training to upgrade and develop services in line with standards set by the provincial management forum;
- Keep monthly statistics as indicators of service delivery;
- Provide information on crime prevention and support services available to the community."

Individual service providers must be encouraged to network with all community groups and organisations that assist victims of crime and violence.

Partnerships

Partnership between various government departments and civil society organisations on service delivery to victims of crime and violence holds the key to the success of the integrated Victim Empowerment Programme. Guided by this Policy, each department or entity is expected to develop its own policy and strategies to address the needs of victims. Such strategies should be co-ordinated within the department or entity and between relevant departments. This is to ensure a holistic approach to service delivery, thus ensuring optimal use of the limited resources available.

Service delivery should be based on the following key areas of co-ordination:

- Programmes and services: Development of practice guidelines manuals
- Governance and management: Establishment of intradepartmental and interdepartmental forums
- Training and human resource development to capacitate with knowledge and skills
- Facilitating the availability of financial resources
- Marketing and creating awareness of programmes and services as well victimization-related issues
- Establishing partnerships (public/private, public/public, public/NPO);

- Facilitating advocacy and mobilization
- Conducting research, monitoring and evaluation on victim empowerment-related initiatives

Services and supporting policies as well as practice guidelines - still to be provided and developed - include, but are not limited to:

- Crisis centre/trauma counselling
- Probation services
- Diversion of youth offenders and perpetrators of less serious offences for community sentencing or family group conferencing in partnership with relevant diversion NPOs
- Developing a strategy for shelters for women and their children who are victims of domestic violence
- Establishing shelters for victims of domestic violence
- Establishing One-stop Crisis Centres within a single facility to render immediate, urgent multi-disciplinary services to victims of crime and violence and to prevent re-victimization through inaccessible and nonco-ordinated services;
- Promoting social cohesion and social reintegration
- Training victim empowerment practitioners on victim empowerment and trauma support
- Providing support services to victims who appeared before the Truth and Reconciliation Commission (in particular, families involved in the location, exhumation and re-burial of people killed during the struggle against apartheid)
- Providing forums for engaging men and boys in the prevention of gender based violence
- Participating in government initiatives for care and support to the following categories of victims: human trafficking and other serious crimes; child abuse; abuse of older persons; abuse of people with disabilities and victims of sexual assaults and domestic violence

- Publishing and regularly updating the National Resource Directory of Services for Victims of Violence
- Providing technical and financial support to NPOs
- Conducting campaigns to create awareness of victimization-related issues, focusing on prevention and services available

Appendix G: Indemnity form

I, _____

(Print your name in block capitals)

agree to voluntarily accept the assistance provided and be accommodated in _____(name of shelter), and I understand that the care and assistance that will be provided to me by the shelter will be limited to the provision of (i) accommodation, (ii) food, (iii) basic necessities, (iv) necessary transportation. I understand that the assistance described in (b) above is for a limited, period (state time period)_____ months only from the date of this agreement, and that the shelter is under no obligation to provide me with any additional assistance whatsoever other than those listed above in paragraph (b);

I further agree that for the duration of time that I am accommodated at the shelter, I will abide by the rules and regulations of the shelter.

I hereby certify that I have been informed of all house rules and agree to comply with them.

I hereby acknowledge that, in the event of any staff or volunteer/s of _____(name of shelter) consenting to supervise my children at my request during my absence from the shelter for any reason whatsoever, the provisions of this indemnity form apply in the event of accident or injury, however caused, to such supervised children.

I acknowledge that I understand temporary residence at the _____(name the shelter) and I understand that I may be asked to leave the shelter within 24 hours, if I or my children break the shelter rules after being cautioned or otherwise threaten the well-being of other residents or staff.

I agree for myself as well as for my children that, in the event of personal injury, loss or death during my stay in the _____(name the shelter) cannot in any way be held liable or responsible.

I will not share or disseminate any information relating to the location of the shelter.

I understand that I am free to exit the shelter at any time.

I hereby certify that I have read and fully understand the contents and effects of this Indemnity form, and my signature is evidence of my having read this document or that it has been read to me, and my understanding of its contents and effects.

Signed

Signed (for shelter as witness)

Date

Place

Adopted from Padayachee (1997:103-104)

Appendix H: Exit Form

To be completed by the social worker on duty

Surname: _____ Name: _____

Address upon departure: _____

Time: _____

Length of stay: _____

Status of departure: Return to:

Home _____

Rental accommodation _____

Friends _____

Relatives _____

Other _____

Follow-up contact with the social worker, if needed:

YES or NO

Name and telephone number of counsellor was given to the survivor of abuse
and the National Stop Gender Violence Toll free Helpline

0800 150 150

YES or NO

Signed by:.....	Signed by:.....
Capacity of:	Survivor:.....
Date:.....	Date:.....

Adopted from Padayachee (1997:110)

Annexure I. Development opportunities

Specific outcome: To encourage service providers at shelters to explore a variety of programmes based on the needs of victims in the shelters

There are certain themes which can be dealt with in groupwork sessions, as adapted from Living Waters(1997), Institute for Women’s Development (2005) and Minimum Standards for Shelters (2003). Some of the themes could be:

- ❖ Employment preparation: Practical application, mentorship, training and computer training
- ❖ Sheltered employment: Income generating sustainable projects, business outsource centre, earning an income while learning a skill
- ❖ Integrated life skills development training: Life skills in HIV and AIDS, nutrition, alcohol and drugs, business skills including computer and financial training and psychological skills including conflict management and communication
- ❖ Skills training workshops: Pottery, woodwork, arts and crafts, sewing, poetry, needlework, gardening, music, beadwork, etc
- ❖ To engage in self defence classes
- ❖ Further education
- ❖ Community involvement.

Appendix J.

BASIC CONDITIONS OF EMPLOYMENT ACT, 1997: POPULAR SUMMARY

This is a popular summary of the most important sections of the Basic Conditions of Employment Act, 1997. Workers must be able to see a summary in the official languages that are spoken at their workplaces.

1. WHO IS THIS ACT FOR?

The Act applies to all workers and employers, except members of the National Defence Force, National Intelligence Agency, South African Secret Service and unpaid volunteers working for charities. This Act must be obeyed even if other agreements are different.

2. WORKING TIME

This section does not apply to senior managers (those who can hire, discipline and dismiss), sales staff who travel and workers who work less than 24 hours a month.

2.1 Ordinary hours of work

- A worker must **NOT** work more than:
- 45 hours in any week
- Nine hours a day, if a worker works five days or less a week
- Eight hours a day, if a worker works more than five days a week.

2.2 Overtime

If overtime is needed, workers must agree to do it and they may not work more than three hours overtime a day or ten hours overtime in a week. Overtime must be paid at 1,5 times the workers' normal pay or by agreement receive payment for time-off.

More flexible working time can be negotiated if there is a collective agreement with a registered trade union. For example, this can allow for more flexible hours for working

mothers and migrant workers. A worker may agree to work up to twelve (12) hours in a day and work fewer days in a week. This can help working mothers and migrant workers to have a longer weekend. A collective agreement may permit the hours of work to be averaged over a period of up to four months. A worker, who is bound by such an agreement, cannot work more than an average of 45 ordinary hours a week and an average of five hours of overtime a week over the agreed period. A collective agreement for averaging has to be re-negotiated every year.

2.3 Meal breaks and rest periods

A worker must have a meal break of 60 minutes after five hours work. A written agreement may decrease this to 30 minutes and do away with the meal break, if the worker works for less than six hours a day. A worker must have a daily rest period of 12 continuous hours and a weekly rest period of 36 continuous hours, which, unless otherwise agreed, must include Sunday.

2.4 Sunday work

A worker, who sometimes works on a Sunday, must receive double pay. A worker who normally works on a Sunday, must be paid at 1,5 times the normal wage. There may be an agreement for paid time-off instead of overtime pay.

2.5 Night work

Night work is unhealthy and can lead to accidents. Workers working between 18:00 at night and 06:00 in the morning, must receive extra pay or be able to work fewer hours for the same amount of money. Transport must be available, but not necessarily provided by the employer.

Workers who usually work between 23:00 and 06:00 in the morning must be made aware of the health and safety risks. They are entitled to regular medical check-ups, paid for by the employer. They must be moved to a day shift, if night work develops into a health problem.

All medical examinations must be kept confidential.

2.6 Public holidays

Workers must be paid for any public holiday that coincides with a working day. Work on a public holiday is by agreement and paid at double the rate. A public holiday is exchangeable by agreement.

3. LEAVE

3.1 Annual leave

A worker can take up to 21 continuous days' annual leave or by agreement, one day for every seventeen (17) days worked or one (1) hour for every seventeen (17) hours worked. Leave must be taken not later than six months after the end of the leave cycle. An employer can only pay a worker instead of giving leave, if that worker leaves the job.

3.2 Sick leave

A worker can take up to six weeks' paid sick leave during a 36 months' cycle. During the first six months a worker can take one day's paid sick leave for every 26 days worked. An employer may want a medical certificate before paying a worker who is sick for more than two days at a time, or more than twice in eight weeks.

3.3 Maternity leave

A pregnant worker can take up to four continuous months of maternity leave. She can start leave any time from four weeks before the expected date of birth, OR on a date a doctor or midwife says is necessary for her health or that of her unborn child. She also may not work or six weeks after the birth of her child, unless declared fit to do so by a doctor or midwife. A pregnant or breastfeeding worker is not allowed to perform work that is dangerous to her or her child.

3.4 Family responsibility leave

Full time workers, employed for longer than four months, can take three days paid family responsibility leave per year. This is on request when the worker's child is born or sick or for the death of the worker's spouse or life partner, parent, adoptive parent, grandparent, child, adopted child, grandchild or sibling. An employer may want proof that this leave was needed.

4. JOB INFORMATION AND PAYMENT

4.1 Job information

Employers must give new workers written information about their job and working conditions. This includes a description of any relevant council or sectoral determination and a list of any other related documents.

4.2 Keeping records

Employers must keep a record of at least:

- The worker's name and job
- Time worked
- Money paid
- Date of birth for workers under eighteen (18) years old

4.3 Payment

An employer must pay a worker:

- In South African currency
- Daily, weekly, fortnightly or monthly
- In cash, cheque or direct deposit

4.4 Payslip information

Each payslip must include:

- Employer's name and address
- Worker's name and job
- Period of payment
- Worker's pay
- Amount and purpose of any deduction made from the pay
- Actual amount paid to the worker

If needed to add up the worker's pay, the payslip must also include:

- Ordinary pay rate and overtime pay rate
- Number of ordinary and overtime hours worked during that period of payment
- Number of hours worked on a Sunday or public holiday during that period
- Total number of ordinary and overtime hours worked in the period of averaging, if there is an averaging agreement

4.5 Approved deductions

An employer may not deduct any money from a worker's pay unless:

- That worker agrees in writing
- The deduction is required by law or permitted in terms of a law, collective agreement, court order or arbitration award

4.6 Adding up wages

Wages are based on the number of hours normally worked. Monthly pay is four and 1/3 times the weekly wage.

5. TERMINATION OF EMPLOYMENT

5.1 Notice

A worker or employer must give notice to end an employment contract of not less than:

- One week, if employed for four weeks or less
- Two weeks, if employed for more than four weeks but not more than one year
- Four weeks, if employed for one year or more
- Notice must be in writing, except from a worker who cannot write

Workers who stay in an employer's accommodation, must be given one month's notice of termination of the contract or given alternative accommodation until the contract is lawfully terminated. An employer giving notice does not stop a worker from challenging the dismissal in terms of the Labour Relations Act or any other law.

5.2 Severance pay

An employer must pay a worker, who is dismissed due to the employer's operational requirement, equal to at least one week's severance pay for every year of continuous work with that employer.

5.3 Certificate of service

When a job ends, a worker must be given a certificate of service.

6. CHILD LABOUR AND FORCED LABOUR

It is against the law to employ a child under fifteen (15) years old.

Children under 18 may not do dangerous work or work meant for an adult.

7. VARIATION OF BASIC CONDITIONS OF EMPLOYMENT

7.1 Bargaining Council

A collective agreement concluded by a bargaining council can be different from this law, as long it does not:

- Lower protection of workers in terms of health and safety and family responsibilities
- Lower annual leave to less than two weeks
- Lower maternity leave in any way
- Lower sick leave in any way
- Lower protection of night workers
- Allow for any child labour or forced labour

7.2 Other agreements

Collective agreements and individual agreements must follow the Act.

7.3 The Minister

The Minister of Labour may make a determination to vary or exclude a basic condition of employment. An employer or employer organisation can also do this on application.

8. SECTORAL DETERMINATIONS

Sectoral determinations may be made to establish basic conditions for workers in a sector and area.

9. EMPLOYMENT CONDITIONS COMMISSION

This Act makes provision for the Employment Conditions Commission to advise the Minister of Labour.

10. MONITORING, ENFORCEMENT AND LEGAL PROCEEDINGS

Labour inspectors must advise workers and employers on their labour rights and obligations. They inspect, investigate complaints, question people and inspect, copy and remove records. An inspector may serve a compliance order by writing to the Director-General of the Department of Labour, who will then look at the facts and agree, change or cancel the order.

This decision can be challenged in the Labour Court. Workers may not be treated unfairly for demanding their rights in terms of this Act.

11. GENERAL

It is a crime to:

- Hinder, block or try to wrongly influence a labour inspector or any other person obeying this Act
- Obtain or try to obtain a document by stealing, lying or showing a false or forged document
- Pretend to be a labour inspector or any other person obeying this Act
- Refuse or fail to fully answer any lawful question asked by a labour inspector or any other person obeying this Act
- Refuse or fail to obey a labour inspector or any other person obeying this Act

Appendix K. Questionnaire A-1

Questionnaire to Provincial Victim Empowerment Co-ordinators

(Nine provinces)

Name of shelter:

Address:

Dear Colleague

SURVEY ON SHELTERS FOR VICTIMS OF ABUSE IN SOUTH AFRICA - NOVEMBER 2008

This letter serves to request your participation in the completion of the questionnaire attached.

The researcher is employed in the national Department of Social Development, Pretoria and is enrolled for her Degree in D-Phil in Social Work at UNISA. This questionnaire forms part of the doctoral research.

The purpose of the survey is to determine how the provincial department registers shelters for victims of abuse. The information requested from Provincial VEP co-ordinators will be collated and will give further direction to the development of Guidelines for a Shelter Service Delivery Model for Victims of Abuse.

Please fax your completed form, on or before 14 March 2008, for attention Ms Joan Groenewald, to 012 323 3733. If you need any further information or encounter any uncertainties, please do not hesitate to contact me at Tel: 012 312 7568 (w) Cell: 082 447 3634.

Your endeavour in serving vulnerable groups, such as abused women and children, is highly appreciated.

Kind regards

Joan Groenewald

DEPUTY DIRECTOR: VICTIM EMPOWERMENT PROGRAMME

DATE: 29 February 2008

QUESTIONNAIRE A - 1

**REGISTRATION OF SHELTERS FOR VICTIMS OF ABUSE
PROVINCIAL VICTIM EMPOWERMENT CO-ORDINATORS**

**PLEASE PRINT AND SEND YOUR COMPLETED
QUESTIONNAIRE TO:**



→ Ms Joan Groenewald to Fax: 012 323 3733 – Room N 725

PROVINCE: ✓ Whichever is applicable

Eastern Cape	Free State	Gauteng	KwaZulu- Natal	Limpopo
Mpuma- langa	North West	Northern Cape	Western Cape	

A1	
<i>Registration information of the Victim Empowerment Programme Co-ordinator per province</i>	
1	Name of department
2	Physical address of department

Town:		Code:
3	Postal address	
Town:		Code:
4	<u>Contact details</u>	
4.1	Telephone number: (Land line)	
4.2	Cell number:	
4.3	E-mail address:	
<p>Working definition: According to the Department of Social Development's Policy Framework and Strategy for Shelters for Victims of Domestic Violence (2003:5), a shelter is a residential facility providing short-term intervention in a crisis situation (two weeks up to approximately six months as the need dictates). This intervention includes meeting basic needs (protection, food, clothing), as well as support, counselling and skills development, amongst others. The intervention further advocates the rights of the victim and strengthening of the victim's capacity.</p>		
A2		
<i>Information on the registration of shelters <u>for victims of abuse</u></i>		
1 Does your Department register shelters?		
✓ Whichever is applicable	Yes	No

2 If yes, what are the required procedures in your province for registration of shelters?

2.1

2.2

2.3

2.4

2.5

2.6

2.7

3 *On what basis does your department regard a shelter as not registered?*

3.1

3.2

3.3

3.4	
3.5	
3.6	

4 What measures are in place to assist the applicant (refer to 4.6) to meet the department's requirement/s for registration? (Are they regarded as registered or not registered?)	
4.1	
4.2	
4.3	
4.4	

5. How many shelters are registered in your province?		
Number of known shelters:.....		
Please provide a list of your registered shelters		
✓ Whichever is applicable	Yes	No

A 3		
<i>Compliance with other legislative frameworks</i>		
3.1 Does your department require that shelters register in compliance with the Nonprofit Organisations Act, 71 of 1997?		
✓ Whichever is applicable	Yes	No

3.2 Do you agree or disagree that the National Welfare Act, 100 of

1978 was assigned to provinces in 1996?		
✓ Whichever is applicable	Agree	Disagree
3.3 If you agree, what is the status quo of the Act (3.2) in your province?		
3.4 What is the name of your Provincial Act that replaces the National Welfare Act?		
Name of Act:		
Number of Act:		
Date of proclamation:		
3.5 Is there a provincial welfare board in your province?		
✓ Whichever is applicable	Yes	No
3.6 If yes, what are the board's core functions		
3.6.1		
3.6.2		
3.6.3		
3.6.4		
3.6.4.1 Please provide the contact name and number of the Secretary or Chairperson of the Board for further enquiries		
Name:		
.....		
Contact number:		
.....		
3.7 Is there any provision for shelters to be registered according to the Welfare Organisations Act?		
Yes:		
No:		
3.8 According to your understanding, what is the difference between a registered welfare organisation and a shelter?		
Welfare Organisation		
Shelter		

A4			
<i>Subsidization matters pertaining to shelters</i>			
4.1 Does your province have a financial policy pertaining to shelters?			
✓ Whichever is applicable	Yes	No	
4.2 If yes, what does the policy entail regarding the criteria for funding for shelters for NGOs?			
4.2.1			
4.2.2			
4.2.3			
4.3 If no, what criteria are applied by your department to fund the shelters?			
✓ Whichever is applicable	(a) Seed funding (<i>once-off amount per year</i>)	(b) Per unit (<i>per beneficiary per day – per month-</i>)	(c) Other measures
4.3.1 <u>Seed funding</u>			
What monies did you contribute for the following periods?			
2004	2005	2006	2007
R	R	R	R
For how many beneficiaries	For how many beneficiaries	For how many beneficiaries	For how many beneficiaries
No=	No=	No=	No=
4.3.2 Cost per unit?			
What amount did your province contribute towards the running of a shelter? (<i>example: 20 women per month @ R10 per day</i>)			
2004	2005	2006	2007
R	R	R	R
4.3.1 If other (refer to 4.3. (c)measures are applicable, please reflect them below			
4.4 According to your perception, does your province need a criteria for funding for shelters?			
✓ Whichever is applicable	Yes	No	
4.5 <i>Accountability</i>			
4.5.1 What procedures are in place to monitor the spending of the			

monies allocated to the shelter/s in your province?		
4.5.1.1		
4.5.1.2		
4.5.1.3		
4.5.1.4		
A5		
5.1 <i>Social work services at shelters</i>		
5.1.1 Do you think a full time social worker is necessary at a shelter?		
✓ Whichever is applicable	Yes	No
5.1.1.1 If yes, please motivate why?		
5.1.1.2 If no, please motivate why?		

A6

6.1 <i>Any other information on shelters</i>
You are welcome to indicate any other concerns or contributions in relation to the registration and running of shelters for victims of abuse in South Africa. Contributions can be taken into consideration in the research while developing guidelines for a shelter service delivery model for victims of abuse.
6.1.1 Concern:
6.1.2 Contribution:
6.1.3 Concern:
6.1.4 Contribution:
6.1.5 Concern:
6.1.6 Contribution:

Thank you for taking the time to complete this questionnaire.

**Kindly fax back to: Joan Groenewald (012) 312 7370 or post to PO Box 36781,
Menlo Park 0102**

Mrs JJ Groenewald

Date: 29 February 2008

Appendix L. Questionnaire B-1

Questionnaire to shelter managers

Name:

Fax:

Tel:

Dear Dr/Ms/Mr/Pastor.....

RESEARCH SURVEY: SHELTERS FOR VICTIMS OF ABUSE IN SOUTH AFRICA - OCTOBER 2008

This letter serves to request your participation in the completion of the attached questionnaire which is based on a literature review on shelters for victims of abuse.

The researcher is employed in the National Department of Social Development (Pretoria) and is enrolled for the D Phil Degree in Social Work at UNISA. This questionnaire forms part of the doctoral research and is an extension of the research by the present researcher on The Evaluation of the Programmes of Shelters for Victims of Abuse in Gauteng Province, completed in 2006 as part of an MA degree.

For the purposes of this study, a shelter model refers to a residential facility that provides accommodation and services to victims of abuse within a developmental, holistic and integrated context. The aim is to restore and enhance the psychosocial well-being of the victim.

The purpose of the survey is to determine how the shelter that is managed by the organisation functions, review management issues, funding and intervention methods, eg programmes and services for the victims. The questionnaire comprises sections which predominantly require a Yes or No answer, with a short motivation related to your answer. On receipt of the information, it will be collated by the researcher. The results will give further direction to the development of guidelines

for a shelter service delivery model for victims of abuse, in line with the Department of Social Development Service Delivery Model, 2006.

Please e-mail or fax your completed questionnaire on or before 15 November 2008, for attention Ms Joan Groenewald, to 012 323 7541. If you need any further information or experience any uncertainties, please do not hesitate to contact me at (012) 312 7568 (w); cell 082 447 3634.

Your endeavour in serving vulnerable groups, such as abused women and children, is highly appreciated.

Kind regards

Joan Groenewald

DEPUTY DIRECTOR: VICTIM EMPOWERMENT PROGRAMME

DATE: 22 OCTOBER 2008

Appendix L. Questionnaire B-1

Questionnaire to shelter managers

MANAGEMENT OF SHELTERS FOR VICTIMS OF ABUSE

PLEASE write your answers in print or complete it electronically AND SEND YOUR COMPLETED QUESTIONNAIRE TO:

→ ☺Ms Joan Groenewald to Fax: 012 323 7541 – Room N 727

OR e-mail: joan.Groenewald@socdev.gov.za OR POST THE COMPLETED QUESTIONNAIRE TO PO BOX 36781, MENLO PARK 0102

PROVINCE: ✓ Location of your shelter

Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo
Mpumalanga	North West	Northern Cape	Western Cape	

A1 <i>Registration information of the Shelter</i>
A1.1 Name of shelter:
A1.2 Registration number, if applicable:
A1.3 Physical address of shelter: (researcher will keep it confidential)

Town:	Code:
A1.4 Postal address:	
Town:	Code:
A1.5 Contact details	
A1.5.1 Telephone number: (Land line)	
A1.5.2 Fax number:	
A1.5.3 Cell number:	
A1.5.4 E-mail address:	
<p>The following working definition will enable the receiver to have a clear understanding of the matter under research, which is: A shelter for victims of abuse is " a residential facility providing short-term intervention in a crisis situation (two weeks up to approximately six months as the need dictates). This intervention includes meeting basic needs (protection, food, clothing), as well as support, counseling and skills development, amongst others. The</p>	

intervention further advocates the rights of the victim and strengthening of the victim's capacity".

(Resource: Policy Framework and Strategy for Shelters for Victims of Domestic Violence 2003:5)

A2

Background information on the establishment of your shelter for victims of abuse

A2.1

Please provide me with the background on how and when the shelter was established.

A2.2

Please provide me with one or two paragraphs on how and when you became involved in the shelter - if you were not the founder member (or one of them) of the shelter.

A2.3

What would you change in your approach if you should be required to establish a new shelter?

A2.4

Which challenges do you face in the management of the shelter?

A3
Management
 Please indicate the composition of the executive board members in respect of race and qualification

Table 1
Composition of Board members

(Qualification: A member of the community with a passion for victims of abuse, teacher, nurse, social worker, medical doctor, accountant, etc.)

Member	In which capacity	Temporary	Full time
Chairperson			
Vice Chairperson			
Treasurer			
Secretary			
Manager of shelter			
Any other staff at the shelter that forms part of executive management?			

A3.1

Duration of stay at the shelter. How long do you allow a victim of abuse to stay at your shelter? (Tick the appropriate one/s)

Table 2

WEEKS	✓ YES	× NO
0-1 week		
2-3 weeks		
4-5 weeks		
6-7 weeks		
8-9 weeks		
10-11 weeks		
12-13 weeks		
14-15 weeks		
16-18 weeks		
19-20 weeks		
21-22 weeks		
23-24 weeks		
Other: (please specify)		

A3.2

Gender: Who do you accommodate? (Tick the appropriate one)

Table 3

SHELTER POLICY TO ACCOMMODATE VICTIMS IN THE SHELTER	✓ YES	× NO
Women		
Men		
Do you accommodate a parent with children?		
Other: (eg Children without an adult?)		

A3.3

Specify the ages of children which the shelter can accommodate

Table 4

AGE	✓ YES	× NO
0-3 years		
4-6 years		
7-9 years		

10-12 years		
13-14 years		
15-16 years		
17-18 years		
Other: (please specify)		

A3.4

Do you provide for the educational programmes for children during the duration of their stay in the shelter?

Table 5

Programme	✓ YES	×NO	Please specify (eg at the shelter or at a service point in the community)
Early Childhood Development Programme (ECD)			
School going programme			
School holiday programme			

A3.5

Services at shelter: Which services do you offer to the victims? (Tick the appropriate ones)

Table 6

<u>SERVICES</u>	✓ YES	× NO
Do you utilize the services of a psychologist? (Professional help in overcoming the emotional trauma)		
Do you utilize the services of a social auxiliary worker?		
Debriefing: For women or men individually		
For children individually		
<u>Counselling:</u>		

Individual counselling for women (to deal with emotional issues)		
Group session for women (to learn from one others experiences and support one another)		
Group therapy sessions for the children (to work through their feelings and the impact of the abuse)		
Family therapy sessions for the women and children (to enable the woman to address feelings in such a manner that the children understand and vice versa)		
<u>Does the counselling services cover the following?</u>		
-Loss of own home environment?		
-Parenting skills? (eg empowering the victim to take care of emotional/physical needs of their child/ren)		
-Myths surrounding gender-based violence		
o Only poor women, uneducated and black women are abused		
o Batterers are mentally ill		
o Battered women deserve to be beaten. They provoke their beating by nagging, or other annoying behaviour		
o Battered women enjoy it, are crazy or mentally ill		
o Children need their fathers even if they are violent		
Other:		
-Cycle of violence		
o Tension-building phase		
o Incident occurs		
o Making-up phase		
Other: (if any)		
-Reasons for women to justify remaining in the same abusive situation		
- <u>Physical symptoms</u> that victims may experience in a domestic violence relationship		
- <u>Psychological</u> symptoms that victims may experience in a domestic violence relationship		
Other: (if any)		
-Victim's Rights		

- (Legislation that supports victims' rights)		
Other: (if any)		
Recreational programmes		
Please specify:		
✓		
✓		
✓		
✓		
Para-legal advice:		
-maintenance		
-child support grants		
-interdicts		
-divorce		
-protection orders		
Other: (Please specify)		
Communication strategies		
-conflict resolution		
-building of self-esteem		
Other: (if any)		
Exit programme		
-Reintegration into society		
-Development of a safety plan		
-Contact numbers of professional service providers in the community		
- Follow-up calls or visits		

Other: (if any)

**A3.6
Social Services**

A3.6.1

**Does the services of a social worker form part of your staff component?
(Circle the appropriate Yes or No indicated below)**

Yes

No

A3.6.2

If yes, is it:

- A full time social worker

OR

- Part time social worker

Please motivate your answer:

A3.6.3

**Are you of the opinion that the services of a full time social worker is necessary
at your shelter?**

If yes, why?

If no, why not?

A3.7

How many victims of abuse can be accommodated in your shelter?

Table 7

VICTIMS	NUMBER	ROOMS	TOILET/S	BATH/S	SHOWERS
Women					
Men					
Children					
Total					

A3.8

Does the shelter have guidelines and policies in place?

Table 8

FORMS/POLICIES/GUIDELINES	✓ YES	× NO
Intake form for victim		
Exit form		
Indemnity form		
House rules		
Staff- job descriptions		
Duty list for victims of abuse		
Daily Menu		
Weekly Menu		
Individual Development Plan for each victim		
First Aid Kit		
Fire Extinguisher		
Medical care services/clinic/sister		
Display all important telephone numbers next to the telephone		
Housemother		
A bed and cupboard for each victim		
A private room for interviews/counselling sessions		
Other: (Please specify)		

**A3.9
Monitoring and Evaluation**

**A3.9.1
Do you utilize a tool (eg questionnaire or Interview) to determine how the victims of abuse perceived the services at the shelter?**

Yes OR No

**A3.9.2
If yes, please provide a copy of the questionnaire or interview format**

Questionnaire attached or not attached

Table 8 Monitoring and Evaluation

QUESTION	YES ✓	NO x
<p>A3.9.1.1 Does your service at the shelter to the victims of abuse cover aspects that they think impact negatively on the dignity of the victims?</p>		
<p>If yes, please specify:</p> <p>If no, please specify:</p>		
<p>A3.9.1.2 Do you interview the victims of abuse in privacy to ensure confidentiality?</p>		

If yes, please specify: (eg private facilities for interviews)

If no, please motivate:

A3.9.1.3

Do you explain the victims' rights to them in a manner and language which they understand?

If yes, please specify:

If no, please motivate:

A3.9.1.4

Do you inform the victims of their rights in relation to options with regard to services and programmes?

If yes, please motivate:

If no, please motivate:

A3.9.1.5

Do victims of abuse confirm that they were assisted in making application to the legal aid board?

If yes, please motivate:

If no, please motivate:

A3.9.1.6

Do victims of abuse confirm that they are aware of their right to legal advice in a language and in a manner which they understand?

If yes, please motivate:

If no, please motivate:

A3.9.1.7

Do victims of abuse confirm, where a legal representative has been appointed, that they were given an opportunity to consult with the legal representative before the plea, trial or inquiry commenced?

If yes, please motivate:

If no, please motivate:

A3.10

Minimum Standards for the shelters

A3.11.1

**Are you aware of the Minimum Standards for Shelters for Victims of Abuse?
(Circle the appropriate one below)**

YES or NO

If yes, how do you perceive the Minimum Standards for Shelters?
Please motivate your answer.

If no, would you like a copy?

YES or NO

A3.11

Department of Social Development Integrated Service Delivery Model

Are you aware of the Service Delivery Model of the Department of Social Development?

Yes:.....

If yes, since when?

No:.....

If no, would you like a copy of the Service Delivery Model?

A3.12

Financial resources

A3.12.1

How much funding do you need per month to run your shelter effectively?

Table 9

EXPENDITURE	FUNDS NEEDED	For how many staff members?
Staff salaries	R	
Stipends	R	
Groceries	R	
Toiletries	R	
Medication	R	
Maintenance	R	
Skills training	R	
Security	R	
Total	R	
Other financial costs: (Please specify)		

--

A3.12.1.1

Please indicate the unit cost for your shelter to accommodate one victim per day and per month

Unit cost per day: R.....
 Unit cost per month: R.....

A3.12.2

Funds received from the Department of Social Development

3.12.2.1

What amount did you receive in the past three years from the provincial department of Social Development for the running of your shelter, if any?

Table 10

2005	2006	2007
R	R	R

A3.12.2.2

Criteria for funding

Table 11

Which criteria did the department apply to fund your shelter?

(a) Seed funding (once-off amount)	(b) Per unit (per beneficiary per day; per month)	(c) Other measures (please specify)
<p>Unknown: Yes/No</p>		

A3.12.2.3
Source of income

What is your main source of income for the last two years.

Table 12

SOURCE OF INCOME	YES	NO
Donor funding		
Fundraising in community		
Fundraising (lottery, etc)		
Government funds		

A3.12.2.4
Do you agree or disagree?

I am rendering services to the most vulnerable people in South Africa on behalf of Government. (Circle the applicable one below)

AGREE or DISAGREE

If disagree, please motivate your answer.

If agree, does that imply that the Government should put measures in place to purchase my services?

Yes

No

A3.13

From your valuable experience in working with victims of abuse at shelters, what would you like to see covered in a shelter model for victims of abuse which is not covered in the questionnaire?

A3.13.1 _____

A3.13.2 _____

A3.13.3 _____

A3.13.4 _____

A3.13.5 _____

THANK YOU
JOAN GROENEWALD
E-MAIL: joan.Groenewald@socdev.gov.za
Fax: 012 312 7541
Cell: 082 447 3634

Appendix M. QUESTIONNAIRE C-1
QUESTIONNAIRE FOR PILOTING PHASE TO SOCIAL WORKERS IN SHELTERS

GUIDELINES FOR A SHELTER SERVICE DELIVERY MODEL FOR VICTIMS OF ABUSE

Questionnaire C-1 serves as an evaluation tool for the two participating shelters in the pilot phase in order to determine the feasibility of the guidelines for a shelter service delivery model for victims of abuse, that commenced during May 2009. (See Chapter 6) The proposed model was amended for social service professions to guide programmes during intervention with victims in shelters.

PILOTING: MONITORING AND EVALUATION TOOL FOR SERVICE PROVIDERS ON THE SHELTER MODEL FOR VICTIMS OF ABUSE IN SOUTH AFRICA

Working definition

A shelter for victims of abuse is " a residential facility providing short-term intervention in a crisis situation (two weeks up to approximately six months as the need dictates). This intervention includes meeting basic needs (protection, food, clothing), as well as support, counseling and skills development, amongst others. The intervention further advocates the rights of the victim and strengthening of the victim's capacity". (Resource: Policy Framework and Strategy for Shelters for Victims of Domestic Violence 2003:5)

SERVICES AND PROGRAMMES

This section must be completed by the social worker.

This tool comprises of four parts, namely Services, Programmes, Monitoring and Evaluation Tool and the usefulness of the Appendixes. These form part of the registration procedures of the victim in the shelter, as reflected in the model starting from the intake phase. The first section will deal with services. Please answer the questions as honestly as possible to enable researcher to identify the gaps, successes and challenges. Just mark the appropriate rate below with an **X**.

Circle the number in each row that you score the section. Translate the number to a percentage (%) as follows:

5 = 100%, 4 = 80%, 3 = 60%, 2 = 40% and 1 = 20%

This section comprises off 5 elements to monitor and evaluate. This is connected to the % as indicated in each row. Therefore calculate the % in each row as follows:

- X= don't know
 5= 100% Absolutely important
 4= 80% Important
 3= 60% Somewhat important
 2= 40% Somewhat useful
 1= 20% Limited use
 0= 0% Not at all necessary

Add points together in each row and convert to % by dividing the total by 5. For example: Total 500 points divided by 5, equals 100%.

The data illustrate that you perceived the elements under services as absolute important.

The scores X=don't know and O=not at all necessary are elements for researcher to improve on the services as and when indicated by participants.

Section A. Services		
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>
1. Counselling services	0 <i>Not at all</i> = <i>necessary</i>	
	1 <i>Limited</i> = <i>use</i>	
	2 <i>Somewhat</i> = <i>useful</i>	
	3 <i>Somewhat</i> = <i>important</i>	
	4 <i>Important</i> =	
	5 <i>Absolutely</i> = <i>important</i>	
	X <i>Don't</i> = <i>know</i>	

Comments (if any)																
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
2. Intervention with the victim of abuse	<table border="1"> <tr> <td>0</td> <td>Not at all = <i>necessary</i></td> </tr> <tr> <td>1</td> <td>Limited = <i>use</i></td> </tr> <tr> <td>2</td> <td>Somewhat = <i>useful</i></td> </tr> <tr> <td>3</td> <td>Somewhat = <i>important</i></td> </tr> <tr> <td>4</td> <td>Important =</td> </tr> <tr> <td>5</td> <td>Absolutely = <i>important</i></td> </tr> <tr> <td>X</td> <td>Don't = <i>know</i></td> </tr> </table>	0	Not at all = <i>necessary</i>	1	Limited = <i>use</i>	2	Somewhat = <i>useful</i>	3	Somewhat = <i>important</i>	4	Important =	5	Absolutely = <i>important</i>	X	Don't = <i>know</i>	
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4	Important =															
5	Absolutely = <i>important</i>															
X	Don't = <i>know</i>															
Comments (if any)																

<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
<p>3.</p> <p>Working with the family members and significant others</p>	<table border="1"> <tr> <td data-bbox="898 331 946 432">0</td> <td data-bbox="946 331 1090 432"><i>Not at all = necessary</i></td> </tr> <tr> <td data-bbox="898 432 946 533">1</td> <td data-bbox="946 432 1090 533"><i>Limited = use</i></td> </tr> <tr> <td data-bbox="898 533 946 633">2</td> <td data-bbox="946 533 1090 633"><i>Somewhat = useful</i></td> </tr> <tr> <td data-bbox="898 633 946 734">3</td> <td data-bbox="946 633 1090 734"><i>Somewhat = important</i></td> </tr> <tr> <td data-bbox="898 734 946 835">4</td> <td data-bbox="946 734 1090 835"><i>Important =</i></td> </tr> <tr> <td data-bbox="898 835 946 936">5</td> <td data-bbox="946 835 1090 936"><i>Absolutely = important</i></td> </tr> <tr> <td data-bbox="898 936 946 1032">X</td> <td data-bbox="946 936 1090 1032"><i>Don't = know</i></td> </tr> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>	3	<i>Somewhat = important</i>	4	<i>Important =</i>	5	<i>Absolutely = important</i>	X	<i>Don't = know</i>	
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<p>Comments (if any)</p>																
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
<p>4.</p> <p>Common reactions amongst counsellors in working with victims of abuse</p>	<table border="1"> <tr> <td data-bbox="898 1738 946 1839">0</td> <td data-bbox="946 1738 1090 1839"><i>Not at all = necessary</i></td> </tr> <tr> <td data-bbox="898 1839 946 1939">1</td> <td data-bbox="946 1839 1090 1939"><i>Limited = use</i></td> </tr> <tr> <td data-bbox="898 1939 946 2047">2</td> <td data-bbox="946 1939 1090 2047"><i>Somewhat = useful</i></td> </tr> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>									
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<p>5.</p> <p>Ice-breakers</p>	<table border="1"> <tbody> <tr> <td>0</td> <td><i>Not at all = necessary</i></td> </tr> <tr> <td>1</td> <td><i>Limited = use</i></td> </tr> <tr> <td>2</td> <td><i>Somewhat = useful</i></td> </tr> <tr> <td>3</td> <td><i>Somewhat = important</i></td> </tr> <tr> <td>4</td> <td><i>Important =</i></td> </tr> <tr> <td>5</td> <td><i>Absolutely = important</i></td> </tr> <tr> <td>X</td> <td><i>Don't = know</i></td> </tr> </tbody> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>	3	<i>Somewhat = important</i>	4	<i>Important =</i>	5	<i>Absolutely = important</i>	X	<i>Don't = know</i>	
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Comments (if any)																

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Section B comprises of Programmes at the shelter for victims of abuse

The second section will deal with programmes at the shelter, directed at victims of abuse, to enable the victims to grow through their loss and pain to self efficiency. Please answer the questions as honestly as possible to enable researcher to identify the gaps, successes and challenges in the programmes. Just mark the appropriate rate index below with an **X**.

Circle the number in each row that you score the section. Translate the number to a percentage (%) as follows:

5 = 100%, 4 = 80%, 3 = 60%, 2 = 40% and 1 = 20%

This section comprises off 11 elements to evaluate. This is connected to the % as indicated in each row. Therefore calculate the % in each row as follows:

- X= don't know
- 5= 100% Absolutely important
- 4= 80% Important
- 3= 60% Somewhat important
- 2= 40% Somewhat useful
- 1= 20% Limited use
- 0= 0% Not at all necessary

Add points together in each row and convert to % by dividing the total by 11. For example:
Total 1,100 points divided by 11, equals 100%.

The data illustrate that you perceived the elements under services as absolute important.

The scores X=don't know and O=not at all necessary are elements for researcher to improve on the programmes as and when indicated by participants.

Section B. Programmes																
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
1. Different phases of the mourning process	<table border="1"> <tr> <td>0</td> <td>Not at all = necessary</td> </tr> <tr> <td>1</td> <td>Limited = use</td> </tr> <tr> <td>2</td> <td>Somewhat = useful</td> </tr> <tr> <td>3</td> <td>Somewhat = important</td> </tr> <tr> <td>4</td> <td>Important =</td> </tr> <tr> <td>5</td> <td>Absolutely = important</td> </tr> <tr> <td>X</td> <td>Don't = know</td> </tr> </table>	0	Not at all = necessary	1	Limited = use	2	Somewhat = useful	3	Somewhat = important	4	Important =	5	Absolutely = important	X	Don't = know	
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<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
2. Different forms of domestic violence	<table border="1"> <tr> <td>0</td> <td>Not at all = necessary</td> </tr> <tr> <td>1</td> <td>Limited = use</td> </tr> <tr> <td>2</td> <td>Somewhat = useful</td> </tr> <tr> <td>3</td> <td>Somewhat</td> </tr> </table>	0	Not at all = necessary	1	Limited = use	2	Somewhat = useful	3	Somewhat							
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3. Myths surrounding gender-based violence	<table border="1"> <tbody> <tr> <td>0</td> <td><i>Not at all</i></td> </tr> <tr> <td>=</td> <td><i>necessary</i></td> </tr> <tr> <td>1</td> <td><i>Limited</i></td> </tr> <tr> <td>=</td> <td><i>use</i></td> </tr> <tr> <td>2</td> <td><i>Somewhat</i></td> </tr> <tr> <td>=</td> <td><i>useful</i></td> </tr> <tr> <td>3</td> <td><i>Somewhat</i></td> </tr> <tr> <td>=</td> <td><i>important</i></td> </tr> <tr> <td>4</td> <td><i>Important</i></td> </tr> <tr> <td>=</td> <td></td> </tr> <tr> <td>5</td> <td><i>Absolutely</i></td> </tr> <tr> <td>=</td> <td><i>important</i></td> </tr> <tr> <td>X</td> <td><i>Don't</i></td> </tr> <tr> <td>=</td> <td><i>know</i></td> </tr> </tbody> </table>	0	<i>Not at all</i>	=	<i>necessary</i>	1	<i>Limited</i>	=	<i>use</i>	2	<i>Somewhat</i>	=	<i>useful</i>	3	<i>Somewhat</i>	=	<i>important</i>	4	<i>Important</i>	=		5	<i>Absolutely</i>	=	<i>important</i>	X	<i>Don't</i>	=	<i>know</i>	
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<p>4.</p> <p>The cycle of violence and victim's rights</p>	<table border="1"> <tr> <td data-bbox="898 667 946 768">0</td> <td data-bbox="946 667 1090 768"><i>Not at all = necessary</i></td> </tr> <tr> <td data-bbox="898 768 946 869">1</td> <td data-bbox="946 768 1090 869"><i>Limited = use</i></td> </tr> <tr> <td data-bbox="898 869 946 969">2</td> <td data-bbox="946 869 1090 969"><i>Somewhat = useful</i></td> </tr> <tr> <td data-bbox="898 969 946 1070">3</td> <td data-bbox="946 969 1090 1070"><i>Somewhat = important</i></td> </tr> <tr> <td data-bbox="898 1070 946 1171">4</td> <td data-bbox="946 1070 1090 1171"><i>Important =</i></td> </tr> <tr> <td data-bbox="898 1171 946 1272">5</td> <td data-bbox="946 1171 1090 1272"><i>Absolutely = important</i></td> </tr> <tr> <td data-bbox="898 1272 946 1368">X</td> <td data-bbox="946 1272 1090 1368"><i>Don't = know</i></td> </tr> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>	3	<i>Somewhat = important</i>	4	<i>Important =</i>	5	<i>Absolutely = important</i>	X	<i>Don't = know</i>	
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<p>5.</p> <p>Power and control wheel</p>	<table border="1"> <tr> <td data-bbox="898 1872 946 1973">0</td> <td data-bbox="946 1872 1090 1973"><i>Not at all = necessary</i></td> </tr> <tr> <td data-bbox="898 1973 946 2009">1</td> <td data-bbox="946 1973 1090 2009"><i>Limited</i></td> </tr> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited</i>											
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6. Communication strategies	<table border="1"> <tbody> <tr> <td>0</td> <td><i>Not at all = necessary</i></td> </tr> <tr> <td>1</td> <td><i>Limited = use</i></td> </tr> <tr> <td>2</td> <td><i>Somewhat = useful</i></td> </tr> <tr> <td>3</td> <td><i>Somewhat = important</i></td> </tr> <tr> <td>4</td> <td><i>Important =</i></td> </tr> <tr> <td>5</td> <td><i>Absolutely = important</i></td> </tr> <tr> <td>X</td> <td><i>Don't = know</i></td> </tr> </tbody> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>	3	<i>Somewhat = important</i>	4	<i>Important =</i>	5	<i>Absolutely = important</i>	X	<i>Don't = know</i>	
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<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
7. Childcare	<table border="1"> <tr> <td>0</td> <td><i>Not at all = necessary</i></td> </tr> <tr> <td>1</td> <td><i>Limited = use</i></td> </tr> <tr> <td>2</td> <td><i>Somewhat = useful</i></td> </tr> <tr> <td>3</td> <td><i>Somewhat = important</i></td> </tr> <tr> <td>4</td> <td><i>Important =</i></td> </tr> <tr> <td>5</td> <td><i>Absolutely = important</i></td> </tr> <tr> <td>X</td> <td><i>Don't = know</i></td> </tr> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>	3	<i>Somewhat = important</i>	4	<i>Important =</i>	5	<i>Absolutely = important</i>	X	<i>Don't = know</i>	
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<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
<p>8.</p> <p>Group work with children who were exposed to gender-based violence</p>	<table border="1"> <tr> <td>0 =</td> <td><i>Not at all necessary</i></td> </tr> <tr> <td>1 =</td> <td><i>Limited use</i></td> </tr> <tr> <td>2 =</td> <td><i>Somewhat useful</i></td> </tr> <tr> <td>3 =</td> <td><i>Somewhat important</i></td> </tr> <tr> <td>4 =</td> <td><i>Important</i></td> </tr> <tr> <td>5 =</td> <td><i>Absolutely important</i></td> </tr> <tr> <td>X =</td> <td><i>Don't know</i></td> </tr> </table>	0 =	<i>Not at all necessary</i>	1 =	<i>Limited use</i>	2 =	<i>Somewhat useful</i>	3 =	<i>Somewhat important</i>	4 =	<i>Important</i>	5 =	<i>Absolutely important</i>	X =	<i>Don't know</i>	
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<p>Comments (if any)</p>																
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>														
<p>9.</p> <p>Processes of choice: When an act of domestic violence is committed</p>	<table border="1"> <tr> <td>0 =</td> <td><i>Not at all necessary</i></td> </tr> <tr> <td>1 =</td> <td><i>Limited use</i></td> </tr> <tr> <td>2 =</td> <td><i>Somewhat useful</i></td> </tr> </table>	0 =	<i>Not at all necessary</i>	1 =	<i>Limited use</i>	2 =	<i>Somewhat useful</i>									
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	<table border="1"> <tr> <td data-bbox="895 232 954 331">3 =</td> <td data-bbox="954 232 1102 331"><i>Somewhat important</i></td> </tr> <tr> <td data-bbox="895 331 954 389">4 =</td> <td data-bbox="954 331 1102 389"><i>Important</i></td> </tr> <tr> <td data-bbox="895 389 954 488">5 =</td> <td data-bbox="954 389 1102 488"><i>Absolutely important</i></td> </tr> <tr> <td data-bbox="895 488 954 600">X =</td> <td data-bbox="954 488 1102 600"><i>Don't know</i></td> </tr> </table>	3 =	<i>Somewhat important</i>	4 =	<i>Important</i>	5 =	<i>Absolutely important</i>	X =	<i>Don't know</i>			
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<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>										
10. Exit Strategy	<table border="1"> <tr> <td data-bbox="895 1572 954 1671">0</td> <td data-bbox="954 1572 1102 1671"><i>Not at all = necessary</i></td> </tr> <tr> <td data-bbox="895 1671 954 1769">1</td> <td data-bbox="954 1671 1102 1769"><i>Limited = use</i></td> </tr> <tr> <td data-bbox="895 1769 954 1868">2</td> <td data-bbox="954 1769 1102 1868"><i>Somewhat = useful</i></td> </tr> <tr> <td data-bbox="895 1868 954 1966">3</td> <td data-bbox="954 1868 1102 1966"><i>Somewhat = important</i></td> </tr> <tr> <td data-bbox="895 1966 954 2036">4</td> <td data-bbox="954 1966 1102 2036"><i>Important</i></td> </tr> </table>	0	<i>Not at all = necessary</i>	1	<i>Limited = use</i>	2	<i>Somewhat = useful</i>	3	<i>Somewhat = important</i>	4	<i>Important</i>	
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Comments (if any)		
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>
11. Development opportunities	<input checked="" type="checkbox"/> 0 <i>Not at all</i> = <i>necessary</i> <input type="checkbox"/> 1 <i>Limited</i> = <i>use</i> <input type="checkbox"/> 2 <i>Somewhat</i> = <i>useful</i> <input type="checkbox"/> 3 <i>Somewhat</i> = <i>important</i> <input type="checkbox"/> 4 <i>Important</i> = <input type="checkbox"/> 5 <i>Absolutely</i> = <i>important</i> <input checked="" type="checkbox"/> X <i>Don't</i> = <i>know</i>	
Comments (if any)		

The third section will deal with monitoring and evaluation of programmes and services from the viewpoint of the shelter manager and client satisfaction on the effective and efficiency of the tools. Please answer the questions as honestly as possible on the usefulness of the tools. (see Chapter 6, page 288 - 298) Just mark the appropriate rate index below with an

Section C Monitoring and Evaluation Tool

Circle the number in each row that you score the section. Translate the number to a percentage (%) as follows:

5 = 100%, 4 = 80%, 3 = 60%, 2 = 40% and 1 = 20%

This section comprises off 5 elements to monitor and evaluate. This is connected to the % as indicated in each row. Therefore calculate the % in each row as follows:

- X= don't know
- 5= 100% Absolutely important
- 4= 80% Important
- 3= 60% Somewhat important
- 2= 40% Somewhat useful
- 1= 20% Limited use
- 0= 0% Not at all necessary

Add points together in each row and convert to % by dividing the total by 2. For example:
Total 160 points divided by 2, equals 80%.

The data illustrate that you perceived the elements under Monitoring and Evaluation tool as important.

The scores X=don't know and O=not at all necessary, are elements for researcher to improve on the services as and when indicated by participants.

Section C Monitoring and Evaluation Tool		
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>
<p>1. Usefulness of the monitoring and evaluation tool for shelters?</p>	<p>0 Not at all = necessary</p>	
	<p>1 Limited = use</p>	
	<p>2 Somewhat = useful</p>	
	<p>3 Somewhat = important</p>	
	<p>4 Important =</p>	
	<p>5 Absolutely = important</p>	
	<p>X Don't = know</p>	
<p>Comments (if any)</p>		
<i>Question</i>	<i>Please Rate</i>	<i>Rating result for researcher</i>
<p>2. Usefulness monitoring and evaluation tool for victims?</p>	<p>0 Not at all = necessary</p>	
	<p>1 Limited = use</p>	
	<p>2 Somewhat = useful</p>	
	<p>3 Somewhat = important</p>	

	<table border="1"> <tr> <td>4</td> <td><i>Important</i></td> </tr> <tr> <td>=</td> <td></td> </tr> <tr> <td>5</td> <td><i>Absolutely important</i></td> </tr> <tr> <td>=</td> <td><i>important</i></td> </tr> <tr> <td>X</td> <td><i>Don't know</i></td> </tr> <tr> <td>=</td> <td><i>know</i></td> </tr> </table>	4	<i>Important</i>	=		5	<i>Absolutely important</i>	=	<i>important</i>	X	<i>Don't know</i>	=	<i>know</i>	
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5	<i>Absolutely important</i>													
=	<i>important</i>													
X	<i>Don't know</i>													
=	<i>know</i>													
Comments (if any)														

Section D comprises of all the forms (referred to as Appendixes) to be utilized in the shelter guidelines for victims of abuse. Just mark the appropriate rate index below with an **X**.

This section comprises off 9 elements to evaluate. This is connected to the % as indicated in each row. Therefore calculate the % in each row as follows:

-
- X= don't know
 - 5= 100% Absolutely important
 - 4= 80% Important
 - 3= 60% Somewhat important
 - 2= 40% Somewhat useful
 - 1= 20% Limited use
 - 0= 0% Not at all necessary

Add points together in each row and convert to % by dividing the total by 9. For example: Total 540 points divided by 9, equals 60%.

The data illustrate that you perceived the elements under Appendixes as somewhat important.

The scores X=don't know and O=not at all necessary, are elements for researcher to improve on the services as and when indicated by participants.

Section D Appendixes																
Question	Please Rate	Rating result for researcher														
1. Admission	<table border="1"> <tr> <td>0</td> <td>Not at all = necessary</td> </tr> <tr> <td>1</td> <td>Limited = use</td> </tr> <tr> <td>2</td> <td>Somewhat = useful</td> </tr> <tr> <td>3</td> <td>Somewhat = important</td> </tr> <tr> <td>4</td> <td>Important =</td> </tr> <tr> <td>5</td> <td>Absolutely = important</td> </tr> <tr> <td>X</td> <td>Don't = know</td> </tr> </table>	0	Not at all = necessary	1	Limited = use	2	Somewhat = useful	3	Somewhat = important	4	Important =	5	Absolutely = important	X	Don't = know	
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1	Limited = use															
2	Somewhat = useful															
3	Somewhat = important															
4	Important =															
5	Absolutely = important															
X	Don't = know															
Comments (if any)																
Question	Please Rate	Rating result for researcher														
2. General assessment	<table border="1"> <tr> <td>0</td> <td>Not at all = necessary</td> </tr> <tr> <td>1</td> <td>Limited = use</td> </tr> <tr> <td>2</td> <td>Somewhat = useful</td> </tr> <tr> <td>3</td> <td>Somewhat = important</td> </tr> </table>	0	Not at all = necessary	1	Limited = use	2	Somewhat = useful	3	Somewhat = important							
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<p>4.</p> <p>Admission support</p>	<table border="1"> <tr> <td data-bbox="898 331 946 432">0</td> <td data-bbox="946 331 1090 432"><i>Not at all</i> = <i>necessary</i></td> </tr> <tr> <td data-bbox="898 432 946 533">1</td> <td data-bbox="946 432 1090 533"><i>Limited</i> = <i>use</i></td> </tr> <tr> <td data-bbox="898 533 946 633">2</td> <td data-bbox="946 533 1090 633"><i>Somewhat</i> = <i>useful</i></td> </tr> <tr> <td data-bbox="898 633 946 734">3</td> <td data-bbox="946 633 1090 734"><i>Somewhat</i> = <i>important</i></td> </tr> <tr> <td data-bbox="898 734 946 835">4</td> <td data-bbox="946 734 1090 835"><i>Important</i> =</td> </tr> <tr> <td data-bbox="898 835 946 936">5</td> <td data-bbox="946 835 1090 936"><i>Absolutely</i> = <i>important</i></td> </tr> <tr> <td data-bbox="898 936 946 1032">X</td> <td data-bbox="946 936 1090 1032"><i>Don't</i> = <i>know</i></td> </tr> </table>	0	<i>Not at all</i> = <i>necessary</i>	1	<i>Limited</i> = <i>use</i>	2	<i>Somewhat</i> = <i>useful</i>	3	<i>Somewhat</i> = <i>important</i>	4	<i>Important</i> =	5	<i>Absolutely</i> = <i>important</i>	X	<i>Don't</i> = <i>know</i>	
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<p>5.</p> <p>Referral letter</p>	<table border="1"> <tr> <td data-bbox="898 1469 946 1570">0</td> <td data-bbox="946 1469 1090 1570"><i>Not at all</i> = <i>necessary</i></td> </tr> <tr> <td data-bbox="898 1570 946 1671">1</td> <td data-bbox="946 1570 1090 1671"><i>Limited</i> = <i>use</i></td> </tr> <tr> <td data-bbox="898 1671 946 1771">2</td> <td data-bbox="946 1671 1090 1771"><i>Somewhat</i> = <i>useful</i></td> </tr> <tr> <td data-bbox="898 1771 946 1872">3</td> <td data-bbox="946 1771 1090 1872"><i>Somewhat</i> = <i>important</i></td> </tr> <tr> <td data-bbox="898 1872 946 1973">4</td> <td data-bbox="946 1872 1090 1973"><i>Important</i> =</td> </tr> <tr> <td data-bbox="898 1973 946 2002">5</td> <td data-bbox="946 1973 1090 2002"><i>Absolutely</i></td> </tr> </table>	0	<i>Not at all</i> = <i>necessary</i>	1	<i>Limited</i> = <i>use</i>	2	<i>Somewhat</i> = <i>useful</i>	3	<i>Somewhat</i> = <i>important</i>	4	<i>Important</i> =	5	<i>Absolutely</i>			
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<p>6.</p> <p>Indemnity form</p>	<table border="1"> <tr> <td>0 <i>Not at all</i> = <i>necessary</i></td> </tr> <tr> <td>1 <i>Limited</i> = <i>use</i></td> </tr> <tr> <td>2 <i>Somewhat</i> = <i>useful</i></td> </tr> <tr> <td>3 <i>Somewhat</i> = <i>important</i></td> </tr> <tr> <td>4 <i>important</i> =</td> </tr> <tr> <td>5 <i>Absolutely</i> = <i>Important</i></td> </tr> <tr> <td>X <i>Don't</i> = <i>know</i></td> </tr> </table>	0 <i>Not at all</i> = <i>necessary</i>	1 <i>Limited</i> = <i>use</i>	2 <i>Somewhat</i> = <i>useful</i>	3 <i>Somewhat</i> = <i>important</i>	4 <i>important</i> =	5 <i>Absolutely</i> = <i>Important</i>	X <i>Don't</i> = <i>know</i>	
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Question	Please Rate	Rating result for researcher							

<p>7.</p> <p>Exit form</p>	<table border="1"> <tr> <td>0</td> <td><i>Not at all</i> = <i>necessary</i></td> </tr> <tr> <td>1</td> <td><i>Limited</i> = <i>use</i></td> </tr> <tr> <td>2</td> <td><i>Somewhat</i> = <i>useful</i></td> </tr> <tr> <td>3</td> <td><i>Somewhat</i> = <i>important</i></td> </tr> <tr> <td>4</td> <td><i>Important</i> =</td> </tr> <tr> <td>5</td> <td><i>Absolutely</i> = <i>important</i></td> </tr> <tr> <td>X</td> <td><i>Don't</i> = <i>know</i></td> </tr> </table>	0	<i>Not at all</i> = <i>necessary</i>	1	<i>Limited</i> = <i>use</i>	2	<i>Somewhat</i> = <i>useful</i>	3	<i>Somewhat</i> = <i>important</i>	4	<i>Important</i> =	5	<i>Absolutely</i> = <i>important</i>	X	<i>Don't</i> = <i>know</i>	
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<p>Comments (if any)</p>																
<p>Question</p>	<p>Please Rate</p>	<p>Rating result for researcher</p>														
<p>8.</p> <p>Development opportunities</p>	<table border="1"> <tr> <td>0</td> <td><i>Not at all</i> = <i>necessary</i></td> </tr> <tr> <td>1</td> <td><i>Limited</i> = <i>use</i></td> </tr> <tr> <td>2</td> <td><i>Somewhat</i> = <i>useful</i></td> </tr> <tr> <td>3</td> <td><i>Somewhat</i> = <i>important</i></td> </tr> <tr> <td>4</td> <td><i>Important</i> =</td> </tr> <tr> <td>5</td> <td><i>Absolutely</i> = <i>important</i></td> </tr> <tr> <td>X</td> <td><i>Don't</i></td> </tr> </table>	0	<i>Not at all</i> = <i>necessary</i>	1	<i>Limited</i> = <i>use</i>	2	<i>Somewhat</i> = <i>useful</i>	3	<i>Somewhat</i> = <i>important</i>	4	<i>Important</i> =	5	<i>Absolutely</i> = <i>important</i>	X	<i>Don't</i>	
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Comments (if any)																
Question	Please Rate	Rating result for researcher														
<p>9.</p> <p>Basic Conditions of Employment Act, 1997: Popular Summary</p>	<table border="1"> <tr> <td><input type="checkbox"/> 0</td> <td><i>Not at all = necessary</i></td> </tr> <tr> <td><input type="checkbox"/> 1</td> <td><i>Limited = use</i></td> </tr> <tr> <td><input type="checkbox"/> 2</td> <td><i>Somewhat = useful</i></td> </tr> <tr> <td><input type="checkbox"/> 3</td> <td><i>Somewhat = important</i></td> </tr> <tr> <td><input type="checkbox"/> 4</td> <td><i>Important =</i></td> </tr> <tr> <td><input type="checkbox"/> 5</td> <td><i>Absolutely = important</i></td> </tr> <tr> <td><input checked="" type="checkbox"/> X</td> <td><i>Don't = know</i></td> </tr> </table>	<input type="checkbox"/> 0	<i>Not at all = necessary</i>	<input type="checkbox"/> 1	<i>Limited = use</i>	<input type="checkbox"/> 2	<i>Somewhat = useful</i>	<input type="checkbox"/> 3	<i>Somewhat = important</i>	<input type="checkbox"/> 4	<i>Important =</i>	<input type="checkbox"/> 5	<i>Absolutely = important</i>	<input checked="" type="checkbox"/> X	<i>Don't = know</i>	
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<input checked="" type="checkbox"/> X	<i>Don't = know</i>															
Comments (if any)																
<p><i>Thank you for assisting researcher in the refining of the guidelines for a shelter service delivery model. Please forward the completed questionnaire to Ms Joan Groenewald at Fax: 012 312 7541 or e-mail to:</i></p> <p><i>Joan.Groenewald@socdev.gov.za</i></p>																

Appendix N. List of shelters in South Africa (Population Framework) (N=96)

Shelter	Number in province	Province	Name of shelter	Location	Contact details
Eastern Cape Province (EC)					
1	1	EC	Addo Elderly Abused Home	Addo	041 457 1466
2	2	EC	Burgersdorp Safe House	Burgersdorp	078 669 6459
3	3	EC	Com Edu Centre	Zwelitsha	040 654 3394
4	4	EC	Eluxolweni Safe House	Grahamstown	078 187 8494
5	5	EC	Ethembeni Elderly Abused Home	Port Elizabeth	041 457 2304
6	6	EC	Humansdorp Safe House	Humansdorp	084 665 0719
7	7	EC	Ikhwezi Safe House	Cathcart	045 843 1394
8	8	EC	Khuseleka Support Centre	Lady Frere	073 241 2121
9	9	EC	Living Waters	East London	043 722 7096
10	10	EC	Mother of Hope	Port Elizabeth	041 585 4265
11	11	EC	The Haven	Port Elizabeth	041 5814310
12	12	EC	Nobuhle Outreach Centre	Nelson Mandela Metro	074 344 7737
13	13	Eastern Cape	Umtata Women's Support Centre	Umtata	040 654 3394
14	14	Eastern Cape	Uncedo Loomama	Motherwell	041 585 4265
Free State Province (FS)					
15	1	FS	Bethlehem Child Welfare	Bethlehem	58 303 0222/4701/

					0430
16	2	FS	Bolokanang Shelter	Petrusburg	082 212 0202
17	3	FS	Gold Fields Family Advice Organisation (GFAO)	Welkom	057 396 6153 072 144 7171
18	4	FS	Kamohelo Haven (CPAA)	Thaba - Nchu	051 873 2194 073 166 7915
19	5	FS	Philani Shelter	Trompsburg	072 158 4353 082 307 9205
20	6	FS	Serobe Shelter	Bloemfontein	051 436 6860
21	7	FS	Sivile Victim Support Centre	Smithfield	051 683 0188 076 027 2830
22	8	FS	Sizanani Shelter	Sasolburg	016 976 0029
23	9	FS	Tshireletso Shelter	Koffiefontein	072 853 6461
24	10	FS	Thusanang Advice Centre Shelter	Witsieshoek	058 713 6074
25	11	FS	Tumahole Victim Support Centre	Parys	056 819 8881 073 645 9283
26	12	FS	Virginia Child Welfare	Virginia	057 212 6273
Gauteng Province (G)					
27	1	G	Amcare	Alberton	011 869 5256 082 449 5210
28	2	G	A Re Ageing	Bekkersdal	011 692 1945 072 7006 988
29	3	G	Bella Maria	Vanderbijlpark	016 428 1740 083 788 8747

30	4	G	Bethany	Bertrams	011 614 3245 082 462 6495
31	5	G	Beth Shan	Pretoria West	012 3273005 083 290 1968
32	6	G	Bombani	Alexandra Township	083 953 5714
33	7	G	Dichaba Dikopane	Tembisa	011 925 5512 073 607 5651
34	8	G	Eldorado Park Women's Group: Women Against Women Abuse (WAWA)	Eldorado Park	011 945 6433
35	9	G	Frieda Hartley Shelter for Women	Yeoville	011 648 6005 082 888 8331
36	10	G	Jewish Community Services – Shalom Bayit (Only for Jewish victims)	Johannesburg	011 486 1900
37	11	G	Leratong Place of Love	Springs	011 363 1368/9 083 273 9603
38	12	G	Mali-Martin Polokegong Centre	Bronkhorstspuit	013 935 8032 083 684 7737
39	13	G	Mercy House	Capital Park, Pretoria	012 329 6682
40	14	G	Mother's Nest	Brakpan	011 817 2666 079 251 0867 072 191 4700
41	15	G	NISSA Institute for Women's Development	Lenasia	011 854 5804 083 298 8672
42	16	G	People Against Human Abuse (PAHA)	Sunnyside & Mamelodi West	012 805 7416 082 746 7522
43	17	G	People Opposing Women Abuse (POWA)	Berea Johannesburg <u>Satellite branches</u> Kathorus,	011 642 4345 084 677 3564 24 hour helpline 083 765 1235

				Soweto, Sebokeng & Florida	
44	18	Gauteng	Polokego West Rand	Krugersdorp	011 665 1725 082 967 0383
45	19	Gauteng	Potters House	Pretoria	012 320 2123 082 978 902
46	20	Gauteng	Riet Family Guidance Centre	Randfontein	011 693 3344 083 400 1630
47	21	Gauteng	Usindiso Ministries	Kensington, Johannesburg	011 334 1143
48	22	Gauteng	Women Against Community Abuse (WACA)	Zone 1, Garankuwa	012 700 0511 012 703 8689 078 617 6152
KwaZulu-Natal Province (KZN)					
49	1	KZN	Ester House	Pietermaritzbur g	033 345 2818 072 713 1285
50	2	KZN	Ekuzambeni Crisis Centre	Claremont	031 711 0586
51	3	KZN	Ethembeni Crisis Care Centre	KWaNdengezi	031 704 6860
52	4	KZN	KERR House Durban Hospice for Women	Durban	031 303 2912
53	5	KZN	Mater Dei Home	Sydenham	031 207 1256
54	6	KZN	Mater Vitae Home	Wentworth	031 461 4086
55	7	KZN	Newcastle Crisis Center	Newcastle	034 315 3389
56	8	KZN	Open Door Crisis Center	Pinetown	031 709 2679

			(Ikhaya Lethamba)		
57	9	KZN	Safecare	Wentworth	031 903 4426
58	10	KZN	Sinethemba Shelter	Ifafa Beach	039 977 8220
59	11	KZN	The Haven	Pietermaritzburg	031 394 0228 072 713 1285
60	12	KZN	The Sahara	Phoenix	031 539 4094
61	13	KZN	Trauma Centre – Interfellowship Compassionate Ministries	Wentworth	079 296 8354
Limpopo Province (LIM)					
62	1	LIM	Huis Wees Gerus Suid-Afrikaanse Vroue- Federasie	Lephalale	014 763 2990
63	2	LIM	Absa House	Seshego	015 223 9300
64	3	LIM	Child Welfare Society	Polokwane	015 297 3326
65	4	LIM	Far North Network on Family Violence	Thohoyandou	015 962 4578 082 647 6390
66	5	LIM	Levubu VEP	Levubu	079 229 0257 082 994 5396
67	6	LIM	Maroela Huis Suid-Afrikaanse Vroue Federasie	Phalaborwa	015 781 5305 083 628 3846
68	7	LIM	Tipfuxeni Community Counselling Centre	Elim (Waterval)	015 516 6877 083 982 6335
Mpumalanga Province (MPU)					
69	1	MPU	Badplaas Shelter	Badplaas	017 844 1101

					076 124 7195
70	2	MPU	Masisikumani	Malelane	013 780 3078
71	3	MPU	Middelburg Victim Support Centre	Middelburg	013 243 2732
Northern Cape Province (NC)					
72	1	NC	Ethembeni Community Centre	De Aar	053 631 4397
73	2	NC	Gamagara Crises Centre	Khathu	072 501 0392 078 493 2661
74	3	NC	Tamar Shelter Society	Kimberley	053 832 1954 072 770 7713
North West Province (NW)					
75	1	NW	Grace Help Centre	Mooiooi, Brits	014 574 3476 072 348 6526
Western Cape Province (WC)					
76	1	WC	Atlone House of Strength	Paarl	021 862 9983 082 777 3999
77	2	WC	Bonne Esperance	Philippi	021 691 8664 083 981 1648
78	3	WC	Carehaven	Gatesville	021 638 5511 082 990 4579
79	4	WC	Buiten Nur	Wynbers	021 797 9770
80	5	WC	Carehaven	Gatesville	021 638 5511
81	6	WC	Cravenby Care Haven	Cravenby	021 933 3477
82	7	WC	Creating Effective Families Shelter	Mossel Bay	044 691 1411

83	8	WC	Dusk to Dawn Haven	Ravensmead	021 931 3622 073 444 1823
84	9	WC	Eerste Begin Shelter	Worcester	023 347 8140 083 535 1980
85	10	WC	Geneva	Eerste River	021 904 9912
86	11	WC	Heavens Shelter House	Newwoodlands	021 376 4423 073 205 9807
87	12	WC	IRFSA Institute	Welcome Estate	021 638 5578 084 616 1822
88	13	WC	Malibongwe Women's Shelter	Oudtshoorn	082 224 5482
89	14	WC	Phambili BPW Women's Shelter	George	044 875 1551 071 196 5699
90	15	WC	Place of Hope	Lansdowne	021 697 2019 074 648 7669
91	16	WC	Saartjie Baartman One Stop Centre	Gatesville	021 633 5287 072 146 2135
92	17	WC	Selby Lodge	Maitland	021 511 6510
93	18	WC	Sisters Incorporated	Clareinch	021 797 4190
94	19	WC	St Anne's	Woodstock	021 448 6792 084 701 4822
95	20	WC	Stellenbosch Safe Houses	Stellenbosch	021 883 2574 079 689 0453
96	21	WC	United Sanctuary Against Abuse	Atlantis	021 572 8662

					078 483 8166
Total 96	96	96	96	96	

Shelter number 8 and 66 provides only short term accommodation from one night to seven nights.

Appendix O. One-stop Service Centers for Victims of Abuse in South Africa – October 2009

(N=9)

Province	NO	Type of services	Name	Location	Tel/Cell numbers
Eastern Cape	1	One –stop centre with a shelter	*Ezibeleni One Stop Centre <i>(Government shelter)</i>	Ezibeleni	072 128 7185
Eastern Cape	2	One –stop centre with a shelter	*Kwanobuhle Outreach Centre <i>(Government shelter)</i>	Uitenhage	041 978 1499
Gauteng	3	One –stop centre with a shelter	*Ikhaya Lethemba One-stop Centre <i>(Government shelter)</i>	Braamfontein	011 242 3000 083 286 7948
Mpumalanga	4	Unknown	*Amazing Grace <i>(Government shelter)</i>	Malelane	013 790 0423
Mpumalanga	5	Unknown	*Leseding Outreach Centre <i>(Government shelter)</i>	Leseding (Witbank)	013 986 8740
Mpumalanga	6	One –stop centre with a shelter	*Louieville Women Support Centre <i>(Government shelter)</i>	Louieville	013 710 0105
Northern	7	One-stop and can	*Bopanang One Stop	Upington	054 332

Cape		provide accommodation	Centre <i>(Government shelter)</i>		1857
North West	8	One-stop centre and can provide accommodation	*Vryburg One Stop centre (Government shelter)	Vryburg	018 388 1518
Western Cape	9	One-stop	*Mitchells Plain One Stop Centre for Women and Children <i>(Government shelter)</i>	Mitchells Plain	021 397 3613 072 942 1413
Total 9	9	9	9	9	

The projections are to establish one, One-stop Centre in the following provinces during 2009 – 2010 Financial Year in partnership with the United Nations Office on Drugs and Crime to counteract violence against women and children.

- Gauteng Province
- KwaZulu-Natal Province
- Limpopo Province