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## **TERMINAL EVALUATION REPORT**

**PROJECT NUMBER: SAF/98/R72**

**PROJECT TITLE: Establishment of a One-Stop Centre to counteract  
Violence against Women**

**Northern Cape  
South Africa**

**Report of the evaluation team**

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**LIST OF ACRONYMS:**

CBO	-	Community Based Organisation
FBO	-	Faith Based Organisation
FCS	-	Family Violence, Child Abuse and Sexual Offences Unit of the South African Police Services
NGO	-	Non Governmental Organisation
NICRO	-	National Institute for Crime and Rehabilitation of Offenders
NUD*IST	-	Non numerical Unstructured Indexing Searching and Theory Building
NUNV	-	National United Nations Volunteer
SANCA	-	South African National Council for Alcohol and Drug Abuse
SAPS	-	South African Police Services
STI	-	Sexually Transmitted Infection
UNODC	-	United Nations Office on Drugs and Crime
UNODC/ROSA		United Nations Office on Drugs and Crime/Regional Office South Africa

## **EXECUTIVE SUMMARY**

South Africa has a high crime rate with frequent incidences of rape and domestic violence. At the same time South African authorities face difficulties dealing with these issues and, as a result, many women, not only suffer the consequences of gender-based violence, but also experience secondary abuse.

Towards the end of the 1990s the United Nations Office on Drugs and Crime (UNODC) established a regional office in Pretoria, South Africa, and built strong links with the relevant Governmental agencies in an effort to address the issue of drugs and crime in the Southern African region. This provided an ideal opportunity for the UNODC to respond to the recommendations of the UN Special Rapporteur on Violence against Women and to initiate a project to address the issue of gender-based violence in South African. Consequently, with funding provided by the Austrian Government, the UNODC established two One-Stop Centres to counteract violence against women.

These Centres were situated in the provinces of Mpumalanga and the Eastern Cape. At the completion of this project, in August 2002, funds remained available and, with permission from the Austrian Government and a recommendation by the South African Minister of Social Development, it was agreed to extend the project to a third province, the Northern Cape. Consequently, a Centre was established in Upington, South Africa in 2003. The area was chosen due to there being a high level of crime, particularly domestic violence and women and child abuse (see Hamber, & Lewis, 1997; Louw & Shaw, 1997; Cullinan, 2000; Mistry et. al, 2001; SAPS data provided by Crime Information Analysis Centre, 2004 and Institute of Security Studies, 2005). Apart from the high crime levels and reported cases of women and child abuse there was also a lack of services in the region.

The Centre initially began functioning in October 2003 from the offices of the Department of Social Development in Uppington and eventually moved into its own premises in February 2004, which was then occupied by 3 staff members. These staff members comprised of a professional social worker, who managed the Centre, a National United Nations Volunteer (NUNV), who is a trained counsellor, as well as an administrative assistant.

In the initial stages of the project, negotiations were entered into between the National and Provincial offices of the Department of Social Development and the UNODC and a number of objectives, with accompanying activities and outcomes, were set for the Centre. Based on lessons learned through the Mpumalanga and Eastern Cape Centres a Steering and Advisory Committee was formed to assist with the management of the Centre.

The objectives set were listed as being to:

- Develop a multi-disciplinary victim empowerment service & strategies
- Provide safety mechanisms for victims & liaise with other service providers
- Provide gender-sensitivity training for local personnel
- Provide programmes for the community with a focus on males
- Develop a data collection system on the nature and extent of gender-based violence

After initial frustrations in securing premises and equipment, including transport, the Centre finally occupied its new premises in February 2004 and became a functional facility. By end December 2004, 286 clients had been attended to at the Centre and the Centre had accommodated 25 clients. The Centre had also embarked on an outreach programme at schools and within the prisons and had successfully co-ordinated the 16 Days of Activism on No Violence Against Women, a United Nations campaign.

On evaluation, it was found that the Centre had met most of its objectives and that it was running well and was providing a multi-disciplinary victim empowerment service to clients which included overnight crisis accommodation and care for victims of gender-based abuse. Although safety plans had been developed for clients it was established that security at the Centre was inadequate. The Centre had been somewhat successful in co-ordinating the efforts of other role players in addressing gender-based violence but it was found that not all role players showed the same degree of commitment at all levels in this regard. The Centre was unable to provide gender-sensitivity training for local personnel due to a lack of materials. A data collection system was developed, however, use of this system was restricted due to limited computer skills and the lack of a network system.

The evaluation found that certain lessons were learnt. Firstly, that it is important, not only to negotiate objectives at a National and Provincial level, but that these objectives should also be negotiated at a Regional level. It was also realized that, not only is it important to gain the commitment of all role players across all organisational levels but that this should be supported by means of a protocol. A further lesson concerns the focus of the project where it was found that it is important to initially limit this focus, both in terms of geographical area and range of services offered.

A number of recommendations emerged from the evaluation. Firstly careful and urgent attention must be given to the transfer of staff from the UNODC payroll to that of the Department of Social Development. If this is not done swiftly and sensitively it could jeopardize the short-term sustainability of the project due to the high level of uncertainty and stress that it will cause amongst the staff of the Centre.

Stakeholders, such as SA Police Services, Justice, Correctional Services and Health recommended that, in the future, consideration should be given to

operating Bopanang as a control Centre in the area. In this regard attention should be given to the co-ordination of the efforts of all other key players in the field of gender-based violence and the setting up and administering of crisis centres strategically placed within the various communities. To achieve this the evaluators recommend that serious consideration be given to the development of a protocol or memorandum of understanding that would guide the actions of all role players in respect of dealing with cases of gender-based violence. In this sense the Thuthuzela Care Centres and the Ikhaya Lethemba Centre could serve as best practice models as these Centres have managed to have most role-players based at the Centres.

It is also recommended that careful and urgent consideration be given to the issue of security at the Centre's premises as this was found to be totally inadequate considering the high risk of violence such a facility regularly deals with. It is understood that the re-zoning certificate has only been issued for a 2-year period and that this creates uncertainty affecting any short-term investment in the property but the question of security of staff and clients must remain paramount and must be adequately dealt with. It is also advised that once the Centre is better established consideration be given to providing an economic empowerment element at the Centre. In this manner an opportunity may be created for women to gain skills, become more self-efficient and build their self-esteem thus helping to break the cycle of gender-based violence.

In conclusion, it was noted that the Centre was generally functioning well. This is an extremely important benefit in an area with a high level of alcohol abuse, crime and domestic violence, and with few facilities available to address these issues. In this sense, the larger community benefited in that, not only was there a professionally staffed facility to which they could refer cases of gender-based violence, but the Centre also engaged in much needed outreach work amongst communities in the broader area around Upington. This outreach work is vital as a medium to long-term strategy to reduce gender-based violence in the region.

At a more specific level, there was also an important benefit for victims of gender-based violence. In this regard, the Centre provides a safe facility for victims to turn to at times of need with professional staff available to assist them to work through their trauma. Consequently we believe that the Centre has the potential to be sustainable and deliver a much-needed service in the region, over both the short- and long-term.

## **INTRODUCTION**

### **1.1 Background and context**

The United Nations Office on Drugs and Crime (UNODC), with headquarters in Vienna was established in 1997 to fight illicit drugs and international crime. The UNODC is funded through voluntary contributions, largely from Governments, and has become a global leader in its field.

Towards the end of the 1990s the UNODC established a regional office in Pretoria, South Africa, and built strong links with the relevant Governmental agencies in an effort to address the issue of drugs and crime in the southern African region. Towards this end particular emphasis was placed on reducing drug trafficking and on prevention and rehabilitation programmes, as well as on organized crimes such as money laundering and, more recently, on human trafficking.

South Africa has a high crime rate with frequent incidences of rape and domestic violence (SAPS data provided by Crime Information Analysis Centre, 2004 and Institute of Security Studies, 2005). Simultaneously, the police services and justice systems are seriously under-resourced in terms of manpower, skills and facilities, and are often unable to effectively deal with the many cases of gender-based violence that occur in the country (Hamber and Lewis, 1997; Seletswane, 2002; van Dijk, 1996). This has, in turn, frequently resulted in abused women suffering secondary victimization through the inadequate criminal justice system and having little or no support in assisting them to recover from their traumatic experiences (Hamber and Lewis, 1997; Seletswane, 2002; van Dijk, 1996). For more information in this regard see the report of the Joint Monitoring Committee on the Improvement of Quality of Life and Status of Women (Report on Violence Against Women, May, 2002). Considering these facts, the establishment and maintenance of one-stop centres, aimed at addressing these high levels of

violence against women is of high priority. Accordingly it is against this background that the one-stop centre to counteract violence against women was established in Upington, a town in the Northern Cape Province of South Africa. The Centre, depicted in figure 1, was named the Bopanang One-Stop Centre, which means to “build each other” in Setswana. The main objective of the Centre is to eradicate violence against women and children by acting as a victim safe house and support system, while at the same time providing gender sensitive training to other support services such as S A Police Services, Justice, Correctional Services, Health, Social Development and Education, as well as to the community.

**Figure 1: The Bopanang One-Stop Centre to counteract Violence against Women**



The Upington project was initiated by the UNODC after setting up two similar projects in South Africa – one in Mpumalanga and one in the Eastern Cape. When the previous projects

ended, there were still funds left over. This was as a result of the interest that was earned due to the delay in starting the two initial centres as well as the fact that the Dollar had been stronger than anticipated, giving a more favourable exchange rate. Approval was obtained from Austria, the donor country, to use this surplus money to finance the development of a further Centre. After negotiations with the National Department of Social Development, Upington in

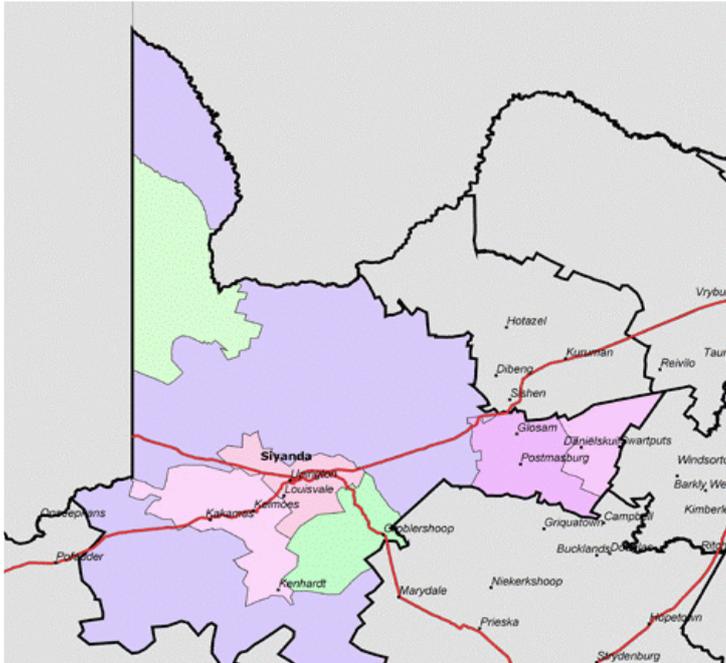
the Northern Cape Province was identified as the target area for this Centre by the National Minister of Social Development, Dr Zola Skweyiya,

Crime is extremely high in the Northern Cape and alcohol plays a major part in this crime (Hamber, & Lewis, 1997; Louw & Shaw, 1997; Cullinan, 2000; Mistry et al, 2001; SAPS data provided by Crime Information Analysis Centre, 2004 and Institute of Security Studies, 2005). Hamber and Lewis point out that “ *...in the Northern Cape the overwhelming majority of cases of murder showed no planning or motive and that alcohol and family disputes played a dominant role (CIAC, 1997). Thus, there is an increasing need to focus on violence in the interpersonal setting as one of the major concerns with regard to violent crime in South Africa.*” Hamber and Lewis also indicate that incidents of assault are higher in the Northern Cape than anywhere else in the country. Considering this, as well as the fact that “*Police members dealing with victims often do not regard rape and domestic violence as crimes, while the police have traditionally used inappropriate crisis intervention techniques that avoid arrest and seek to reconcile the assailant and the victim....Where the police and courts do respond, action is generally ineffective, and guided by vague and inconsistent policies.*” (Jackson, 1997, p.1-2). All these facts make it all the more important to address gender-based violence on a holistic basis in the Northern Cape Province.

### **The region and its people**

The Northern Cape, the province in which the Centre is situated, is the largest province in South Africa with a landmass of 361,830km<sup>2</sup> covering approximately 30% of the country. Notwithstanding the fact that it occupies the largest area of South Africa, the Northern Cape has the smallest population of 822 727 (Stats SA, 1996), or 18% of the entire South Africa population. The province has experienced a population decline of 2.1% since 1996, resulting in a decline in the population density from 2.32 to 2.27 persons per km<sup>2</sup>. A map of the area is illustrated in figure 2.

**Figure 2. Map of the Northern Cape Province**



Source: [http://www.demarcation.org.za/info\\_1.aspx?type=District&Prov=Northern%20Cape&code=DC8](http://www.demarcation.org.za/info_1.aspx?type=District&Prov=Northern%20Cape&code=DC8)

According to Statistics South Africa (1996), the majority of the people in the Northern Cape are coloured. These are people formally classified as neither black nor white under the former Population Registration Act, and being mainly of a mixed race descent. Coloured people represent approximately 51.5% of

the total population, while blacks, whites and Asians (mainly of Indian descent) represent 35.8%, 12.4% and 0.3% respectively. The home language of approximately 69% of the people in the area is Afrikaans with other principal languages being Setswana 19,9 and IsiXhosa 6,3%. The 1996 statistics were used as although the 2001 statistics are available for most of the country the 2001 statistics for the Northern Cape will, according to Stats SA, only be available in March 2005

(see <http://www.statssa.gov.za/census01/HTML/c2001primtables.asp>).

Considering the socio-economic situation in the Northern Cape, it is apparent that the most significant challenge is the reduction of poverty as most other socio-economic challenges stem directly from poverty. Other critical social issues are a backlog in basic needs such as water, sanitation and housing, whilst access to health, employment, education and social services needs attention. Alcohol abuse is also a serious problem amongst both males and females in the

region. Access to recreation is extremely limited, leaving people to seek recreation or opportunities to socialize in taverns or shebeens. Figure 3 illustrates a scene in the township of Paballelo in the Upington area

**Figure 3: A street scene in the Township of Paballelo**



As it is primarily within the family that relationships between genders are shaped, such negative issues, as discussed above, are likely to place pressure on the family environment resulting in the formation of problematic attitudes

amongst males who suffer a high degree of unemployment often resulting in a low level of self-esteem (Nathoo in Seletswane, 2002). Just as problematic in such environments is the extremely low opportunity for employment amongst women. This frequently exacerbates the situation, as in many cases, the only chance for a woman to break the cycle of violence will be for her to become self-supporting and she has little chance of achieving this in an area such as the Siyanda District, the region in which the Centre operates.

In an effort to address the Growth and Development Strategy of the region, a focus has been placed on economic sectors. This includes agriculture and agro-processing, fishing and mariculture, mining and minerals processing, transport and tourism, and manufacturing.

Upington, the town in which the Bopanang Centre is situated, has a population of approximately 79 000 people and covers an area of 30 901 hectares of which

3642 hectares are developed. Upington is one of the main economic centres in the Northern Cape with an emphasis on karakul sheep farming and dried fruit, and is the most northerly wine producing area in South Africa. The region also produces table grapes, grown under strictly controlled conditions and irrigated from the nearby Orange River system, for the lucrative export market. The climate of the area and controlled growing systems employed, allows for the early production of fruit. This opportunity has resulted in a number of financially successful farmers but has done little to alleviate poverty amongst the local community as these farmers mainly use migrant labour brought in from the North West Province.

The town of Upington is also relatively close to the Au-grabies Falls National Park (120 km) and other national parks and consequently also serves as a tourist centre. According to the town's Information Office "Upington is regarded as the fastest growing town in the Northern Cape." The area in which Upington is situated is the Siyanda District Municipality located in the northern section of the North Cape Province (illustrated in fig 2.). This District shares its northern border with Botswana and its western border with Namibia and consists of 6 Local Municipalities namely: Mier; !Kai !Garieb; Khara Hais; Tsantsabane, !Kheis and Kgatelopele. Upington is the district municipal capital where the municipal government is located. The region encompasses a geographical area of about 103 771.45 km<sup>2</sup>. The Bopanang Centre serves this region and beyond, with boundaries stretching to towns as far away as Rietfontein in the north, Kenhardt in the south, Kakamas in the west and Kathu in the east. Other towns in the vicinity served by the Centre include Keimoes (40 km), Kakamas (81 km) and Olifantshoek (140 km).

## 1.2 Purpose and Objective of the Evaluation

The purpose of the evaluation is to determine whether the project has achieved its intended objectives listed in the project evaluation terms of reference document. These in turn, are based on the project document, conceptualized and signed by the Government and UNODC/ROSA as being to:

- Develop multi-disciplinary victim empowerment services and strategies
- Provide safety mechanism for the victims and liaise with other service providers
- Provide gender-sensitivity training for the local personnel
- Provide gender sensitivity programmes for the community with a focus on males
- Develop data collection system on the nature and extent of gender-based violence

The evaluation also assessed the impact that the project has had on the lives of the direct beneficiaries who are the women and children victims of gender-based violence. In addition, the study assessed the activities and outputs of the project listed in the project evaluation terms of reference document as the:

- Establishment of a One Stop Centre
- Employment of professional staff for the Centre
- Ensuring full utilization of the Centre
- Provision of an overnight shelter or care facilities
- Provision of gender-sensitive training of local police, prosecutors, courts, and correctional services officers to equip them with skills to handle gender-based violence.
- Recruitment of men as counsellors and volunteers
- Provision of counselling to men and boys who have engaged in gender-based violence

- Setting up a user-friendly data collection and monitoring system for victims and perpetrators who have utilized the services of the Centre

In an attempt to achieve these activities and outputs an executing modality was employed which will be considered below.

### **1.3 Executing Modality/Management Arrangements**

From initiation the United Nations Office on Drugs and Crime (UNODC) ran the project in accordance with a set of pre-determined objectives negotiated with the National Office of the Department of Social Development. Although these objectives were discussed at both a National and Provincial level it appears that Centre management and staff, as well as local representatives of the Department of Social Development, had no input with regard to these objectives and consequently did not necessarily agree that all these objectives were entirely appropriate or achievable in what is a rather unique environment. Although the UN project development process involves consultation on a broad political level with national stakeholders it is likely that this *modus operandi* could have a mildly negative effect on local role players which may only surface once it becomes difficult to achieve certain of these objectives.

It is understood that Centre staff *per se* could not be involved in the initial discussions regarding the objectives, as they would only have been recruited once the project became operative

As this was the third Centre to be initiated lessons learned from the previous two guided certain decisions as well as some of the objectives for this Centre. One of the differences was the decision to have a Steering Committee consisting of representatives of other Governmental Departments (Health, Education, Safety and Liaison, Justice, etc.). The representatives from the Government Departments were all drawn from the sections that had gender as their focal

point, and were generally on a Director or Deputy Director level. The Steering Committee also had representation from the UNODC, the Advisory Committee as well as the Centre Manager. The Steering Committee was set up to function as a vehicle for Government ownership and responsibility and would pave the way for certain decisions such as the seconding of staff to the Centre.

As with the other two Centres an Advisory Committee was established, consisting of local representatives from the various Government departments as well as NGOs, CBOs and FBOs from the area. The Provincial Director in the Department of Social Development chairs this Committee. The Advisory Committee meets every two months and is concerned with the day-to-day running of the Centre. Minutes of these meetings are sent to the UNODC.

The Centre was supervised from a distance, with the Centre manager reporting to UNODC personnel located in Pretoria, some 850 km from Upington. The distance, combined with budgetary challenges, prevented regular face-to-face contact between Centre staff and UNODC personnel. At the onset of the project, representatives from the UNODC/ROSA traveled to Upington to train staff on UN modes of operation and provided staff with administrative and financial guidelines. In the absence of daily face-to-face contact, UNODC/ROSA representatives kept daily contact with Centre staff via telephone and email. Despite this, during the implementation stage, certain administrative problems were experienced, some of which had a serious impact on staff morale and the Centre's ability to function at an optimal level. These problems will be elaborated on further in the report.

#### **1.4 Scope of the Evaluation**

The evaluation focuses on the outputs, outcomes and impact of the project activities as outlined in the project document. As delineated in the request for

quotation document this includes the identification of lessons learnt and recommendations, and other findings in the following areas:

- An analysis of how efficiently programme planning and implementation were carried out, as well as assessing the managerial support and co-ordination mechanisms used by UNODC to support the project.
- The role played by the Project Steering Committee in the implementation of the project
- The role played by the Advisory Committee in the implementation of the project
- Problems and challenges encountered during implementation
- Whether the project activities/programmes addressed the identified needs/problems (relevance)
- Whether the intended results have been achieved, and if not, whether there has been some progress made towards their achievement.
- Whether the project had any impact on beneficiaries, particularly women and children
- Whether the project activities are likely to continue without future donor funding (sustainability).

The period covered is October 2003 to January 2005 with specific emphasis on the geographical area of Upington in the Northern Cape Province and its surrounds.

### **1.5 Evaluation Methodology**

The methodology applied took the form of a multifaceted approach with the use of triangulation (Brewer and Hunter, 1989; Patton, 1990:10-12; Burgess, 1994:ix; Nau, 1995 and Flick, 1998) as a data collection technique. An attempt was made to transcend the technocratic-participatory divide in social assessments identified

by Taylor et al (1990: 32-39) by involving some community representatives in the execution of the research.

Although the initial intention was to utilize both a quantitative and qualitative component the scoping exercise highlighted the sensitive and vulnerable nature of this research and an alternative method, more suited to the situation, was sourced and employed. In this sense it was decided not to use self-administered questionnaires for a host of reasons such as the extremely small data base available, disempowerment of many respondents, very wide dispersment of respondents, vulnerability of respondents and likely manipulation by others as some of the reasons. It is also for this reason that it was decided not to interview clients. Accordingly it was decided to use appreciative inquiry as a more appropriate methodology and to apply this to all groups each of whom experienced some degree of vulnerability during this investigation.

As Bushe (1998:1) points out “Appreciative Inquiry is a form of action research that attempts to help groups, organizations and communities create new generative images for themselves based on an affirmative understanding of their past. ... The four principles Cooperrider and Srivasta lay down for appreciative inquiry are that action research should *begin with appreciation*, should be *applicable*, should be *provocative*, and should be *collaborative*. The basic process of appreciative inquiry is to begin with a grounded observation of the ‘best of what is’, then through vision and logic collaboratively articulate ‘what might be’, ensuring the consent of those in the system to ‘what should be’ and collectively experimenting with ‘what can be’.”

In this manner data was collected using the following methods:

- A scoping exercise was undertaken in order to identify, confirm and secure the participation of all stakeholders.
- Demographic information was accessed from Statistics South Africa.
- A document review of all project documentation was undertaken.

- Information was gathered by means of focus groups and structured interviews (see annexure 2).

Qualitative data collected by means of focus groups was transcribed, categorised, coded, captured and analysed by means of the qualitative software programme Non numerical Unstructured Indexing Searching and Theory building, commonly referred to as **Nud\*dist**. Based on this methodology an analysis of the major findings will now be discussed.

## **2. MAJOR FINDINGS**

On assessment the general impression gained was that, despite a number of frustrations of both an administrative and operational nature, over what is a relatively short period of time, the UNODC/ROSA has been successful in setting up and running a Centre to counteract violence against women in the Upington region. This is a region in which there is, due to high levels of family violence and gender-based crime driven by alcohol abuse, a high need for such a facility. In this sense, it was noted that the Bopanang One-Stop Centre to counteract violence against women was generally functioning well and is clearly of benefit to both communities in and around Upington and, more specifically to, victims of gender-based violence.

In respect of the larger community, not only is there a professionally staffed facility to which they can refer cases of gender-based violence, but the Centre also engaged in much needed outreach work within the communities in the broader area around Upington. This outreach work is vital, as a medium to long-term strategy aimed at reducing gender-based violence in the region and without the Centre this important work would be sorely lacking in the area. On a more specific level, there is also an important benefit of the Centre for victims of gender-based violence. In this regard, the Centre provides a safe facility for victims to turn towards at times of need with professional staff available to

counsel and assist these victims in working through their traumatic experiences. Again, if the Centre was not there, these victims would have nowhere to turn for help.

Considering the original difficulties faced in setting up the Centre and the accomplishments over what is a relatively short period, in our opinion the future potential of the Centre appears optimistic.

The major findings of this assessment will be discussed below under various categories. This will commence with an overall performance assessment of the project, which will consider the attainment of the project objectives, project results and outputs, as well as the implementation and institutional and management arrangements of the project.

## **2.1 Overall Performance Assessment**

Prior to embarking on the overall performance assessment it is necessary to deal with certain limitations. Firstly the Centre has not been running for a long enough period and has a relatively small client base making it rather difficult to indicate any clear trends. Nevertheless, some assessment can be made in respect of the general performance of the Centre between October 2003 and January 2005.

A perusal of the monthly performance reports tends to illustrate a gradual progression from a period of initial frustration and low service delivery, while negotiating basic resources, through to a period of higher delivery, illustrated in the December 2004 progress report, with 26 cases receiving attention that month and the continuation of the 16 Days of Activism on No Violence Against Women. As table 1 illustrates, in October 2003, 6 clients were seen by the Centre while in January 2005, 38 direct clients were seen. The most clients seen by the Centre was 39 in February 2004 and the least 0 in March 2004.

**Table 1: Number of Clients seen on a Monthly Basis**

<b>Month</b>	<b>Clients seen</b>
October 2003	6
November 2003	9
December 2003	17
January 2004	26
February 2004	39
March 2004	0
April 2004	10
May 2004	16
June 2004	20
July 2004	15
August 2004	16
September 2004	5
October 2004	28
November 2004	15
December 2004	26
January 2005	38
<b>TOTAL</b>	<b>286</b>

Another indication of the progression is given in table 2, which illustrates that 15 clients were accommodated at the Centre during December 2004 and 5 clients were accommodated in January 2005.

**Table 2: Number of Clients Accommodated**

<b>Month</b>	<b>Clients accommodated</b>
July 2004	2
August 2004	2
September 2004	1
December 2004	15
January 2005	5
<b>TOTAL</b>	<b>25</b>

There are two aspects that had a serious impact on the overall performance. The first relates to the vast area that the Centre serves and the long distances between towns and communities in this area. These long distances mean that

resources are widely spread and a great deal of time is spent traveling. The second concerns a lack of involvement amongst certain role players. For example, constables, particularly at the more remote police stations, do not always appropriately deal with cases of gender-based violence and may only refer incidents of rape to the Centre while ignoring other incidents of gender-based violence, particularly domestic violence. This is a phenomenon identified by other researchers, for instance see van Dijk, (1996). It is clear that the Prosecutor in the Sexual Offences Court has extreme difficulty in securing convictions often due to the inefficient handling of cases by SAPS due to an array of reasons. According to the Prosecutor, the forensic nurse is not always brought in early enough resulting in missed opportunities to collect vital evidence. Having dealt with the more general issues specific attention can now be turned toward the attainment of the Centre's objectives.

## **2.2 Attainment of Objectives**

The United Nations Office on Drugs and Crime (UNODC) and the National Office of the Department of Social Development together with the Provincial Department of Social Development negotiated the following five objectives for the Centre:

- Develop a multi-disciplinary victim empowerment service & strategies
- Provide safety mechanisms for victims & liaise with other service providers
- Provide gender-sensitivity training for local personnel
- Provide programmes for the community with a focus on males
- Develop a data collection system on the nature and extent of gender-based violence

In order for the researchers to collect information in respect of each of these objectives a collection sheet was developed that highlighted each objective as well as the outputs and activities required by each of these objectives (see

annexure 3). Data was collected from a range of stakeholders (see annexure 2) by means of a data collection sheet (see annexure 3) and was coded and analyzed by means of the qualitative software programme Non numerical Unstructured Indexing Searching and Theory building, commonly referred to as **Nud\*dist**. The findings are now discussed under each objective

**Objective 1: Develop a multi-disciplinary victim empowerment service & strategies.**

In this regard the Centre has been set up and is functional. Staff have been employed and the Centre is managed by a qualified and experienced social worker. A roster for after hours work has been developed and is being used. This roster has been supplied to stakeholders such as the various Police Stations. If women and children require shelter volunteers are available to assist with cooking and care. By attending various workshops/seminars on issues such as gender-based violence, training skills, victim empowerment as well as women and child abuse the skills of staff members have been developed. Exposure at various meetings, and at the workshops and seminars as listed above, has also led to staff developing their networking skills. A forensic nurse is available on the premises to assist with medical needs, in figure 4 the examination room used by the nurse is illustrated.

Although the aim is to have all role players operate from the Centre, at this stage this is not happening and seems unlikely to happen in the near future. Despite expectations to the contrary, the FCS unit has no representative operating from the Centre and has no immediate plans to change this. Currently they are having their premises upgraded and foresee that they will operate from these premises rather than the Centre.

**Figure 4: Examination room used by the forensic nurse**



The Centre manager and the NUNV provide counselling and, although the NUNV may not be professionally qualified, she has been trained in counselling skills. Legal assistance is available through the Legal Aid Board with whom a working

agreement exists. Home visits are carried out. All of this has made a positive impact on the plight of women and children in the area.

### **Challenges**

While evaluating this objective various challenges were noted. Services are not available at all times from the Centre. For instance legal aid is not always available. Overnight crisis accommodation is limited with 2 adult beds and a bunk bed for children as depicted in figure 5. Liaison with SAPS, particularly constables on desk duty at police stations is limited and at times problematic. Liaison with Justice is also limited.

**Figure 5: Accommodation available for clients at the Centre**



**Objective 2: Provide safety mechanisms for victims & liaise with other service providers**

Safety plans have been developed for each client and overnight crisis accommodation is available. Where services are not available referrals are made to other facilities. The Centre has involved other role players in work to address gender-based violence. For instance a number of different role players interacted during the campaign for 16 Days of Activism on No Violence Against Women.

**Challenges**

Again certain challenges in obtaining this objective were noted. Firstly, the Centre has only operated for a short period. Secondly, although safety plans may have been developed for each client there is a serious concern about the physical security at the Centre's premises. The premises are not secure and

over the 3 days of our visit there was only one security guard on duty. The security guard also has a very limited means of protecting the Centre, clients and staff from any form of aggression, or communicating with other protection services where necessary. The issue of security at the Centre needs special attention, as it is a high priority. Although the Centre has interacted with various role players these interactions have largely been at an operational level and there is a need for attention to be given to developing relationships at a more senior level.

### **Objective 3: Provide gender-sensitivity training for local personnel**

This objective was not achieved due to a lack of training material. It was initially envisaged that the Department of Social Development would provide the material. However, it was then established that the National Institute for Crime and Rehabilitation of Offenders (NICRO) would be the experts on this. As they are an NGO it was felt that they would not be prepared to just hand over the material. Plans have been made to source training material in the future.

### **Challenges**

The major challenges in this regard are that training material is not available and that there is a need for buy-in and to form relationships with more senior Governmental officials in the Province.

### **Objective 4: Provide programmes for the community with a focus on males**

In respect of objective 4, life skills programmes were done with grade 7 learners, both male and female, and positive feedback was received. Programmes were also run for Correctional Services and work is being done with perpetrators on an individual basis. Arrangements have been made to expand the programme in

schools through the training of teachers in an effort for the Centre to reach out to more learners.

### **Challenges**

Once again, certain challenges were observed in respect of objective 4. For instance, the Centre needs to attract more male volunteers to act as positive role models. However, it is often difficult to encourage males to act in this capacity. The fact that the area serviced by the Centre is so widely dispersed also results in logistical problems.

### **Objective 5: Develop data collection system on the nature and extent of gender-based violence**

This objective has been achieved to some degree. Although a data collection programme is available at the Centre, it is not effectively utilized. At the time of our visit statistics had to be manually sourced and provided.

### **Challenges**

The UNODC point out that there are two reasons for the data collection programme being ineffective. Firstly, although Centre staff were trained on the data collection system, the problem seems to lie in the tedious nature of the data capturing process. Secondly, as some computers are still running on an old operating system the computer network has not as yet been installed making the transfer of data from one computer to another rather difficult. The old operating systems are in the process of being upgraded and the network should soon be installed. At the time of our visit, one computer had a defective diskette drive causing further frustrations. There is a lack of knowledge amongst staff in interpreting the results. This leads to a situation where inputting data may not be seen as a high priority.

The above is an outline of the achievements of specific objectives, together with challenges faced in respect of each of these objectives. Attention will now be turned towards the achievement of project results and outputs at a more general level.

### **2.3 Achievement of Project Results and Outputs**

Over the period assessed the following outputs were observed. A partnership with other service providers such as Health, Education, the Family Violence, Child Abuse and Sexual Offences (FCS) Unit of SAPS and the Department of Social Development has been established at an operational level. Although these relationships have been developed they do not always function as efficiently as required, often due to restrictions internal to the individual partners. For instance the FCS Unit of SAPS often lack the necessary transport to respond to an incident or to transport a victim to the Centre. There is also a degree of unhappiness amongst other service providers, especially amongst the police in the Rosedale area, that the shelter in Rosedale was closed. There appeared to be a perception (misperception) amongst some stakeholders that the opening of the Bopanang Centre was linked to the closure of the Rosedale shelter.

The forensic nurse, who has only been stationed at the Centre since November 2004 does not have a colposcope which is needed to collect evidence in rape or sexual assault cases. Quotations for the purchase of a colposcope have been obtained and the forensic nurse reports that one will soon be purchased. A relationship has been established with the Children's Forum and the Centre co-ordinated a successful programme for the 16 Days of Activism on No Violence Against Women.

Over the period assessed the Centre faced various challenges such as a prolonged wait for premises as well as an administrative problem with the late

payment of salaries. The issue concerning salaries was serious in that it resulted in staff incurring costs as debit orders were not paid thereby resulting in bank charges. This had a demoralizing effect on staff whose attentions were diverted from the job towards their own financial problems. It is often problems of this nature that lead to family tensions making it difficult for staff to be focused in their daily dealings with clients. It seems that the issues with the late salary payments affected both the Centre manager and the NUNV, although it occurred more frequently with the NUNV. This apparently resulted from a change in the software used for UN payments, as well as other bureaucratic processes, outside the control of the UNODC staff members responsible for this project. Despite their interventions, which entailed numerous attempts to resolve this issue, the problems continued for many months of the project's functioning.

There is insufficient buy-in from all levels of SAPS, and Justice should be involved at a much earlier stage than they currently are. Social workers from the Department of Social Development do not operate after hours and the absence of shelters and places of safety has a negative impact on the other service providers. Finally, the relationship with the Community Corrections programme is stagnant.

## **2.4 Implementation**

There were three major issues that arose during the implementation of this project. Firstly the question of staff salaries needs to be carefully addressed.

Secondly, arrangements pertaining to accommodation, furnishing and equipment frustrated efforts to provide a service as well as to market it. Although premises had been identified two issues delayed gaining access to these premises and allowing clients to use the premises as a safe house. Firstly, access to the premises was delayed, as the previous owner did not want to settle on the offer made. This resulted in the Department of Social Development needing to get

involved with lengthy negotiations. Secondly, as the intention was to offer emergency crisis accommodation at the premises, it was necessary to obtain a re-zoning certificate. This also involved a lengthy process that entailed advertising the intended use of the property and allowing time for neighbours and other interested and affected parties to lodge any objections against the intended use, with the municipal authorities. Based on the outcome of this process a decision could be made by the municipal authorities as to the advisability of issuing a re-zoning certificate. A re-zoning certificate was finally issued after intervention with the Town Council. However, this re-zoning certificate is only valid for a two-year period, after which another application will need to be made.

As a result of these lengthy processes a decision was made to proceed with initiating and marketing services, despite the problem of gaining access to premises. This decision was taken as stakeholders, and the UNODC, felt that, considering the short, 18 month time frame available, it would be better for the Centre to operate from temporary premises rather than to waste time. The Department of Social Development's offer of premises was therefore taken up.

Due to the fact that the staff initially functioned from the Department of Social Development offices, using their equipment, clients frequently confused the functions of Centre staff with those of Social Development employees. They would expect that Centre staff assist them with unrelated issues, becoming frustrated if they were unable to do so. When frustrations of this nature occur at such an early stage in a project and persist for a prolonged period the enthusiasm surrounding the project is often negatively impacted. Although it is both understandable and acceptable that there was a desire and a need to initiate and market the services due to the restrictions of finances and the limited time period in which the UNODC would be involved with this project, in an ideal situation it would be better to first have the necessary infrastructure in place before offering and marketing such a service, particularly if it is a new service.

The keys to the Centre were handed over to the Centre manager on 24 February 2004 and the Centre began to accommodate clients on an overnight basis, from August 2004, when the re-zoning certificate was issued.

Finally, the matter of minor expenses needs to be addressed. To manage the Centre effectively on a day-to-day basis the manager needs easier access to petty cash. A great deal of money is committed to the establishment of such a Centre and it would be a pity to spoil this by not allowing the Centre access to and control of minor expenses. From time to time the Centre makes use of volunteer workers who maintain the garden with an arrangement that they will be paid with a light meal. Some of these workers rely on this meal as their only source of food for the day and these meals are currently being paid out of the pockets of Centre staff due to the need for all expenses to be submitted and approved prior to purchasing.

However, it is understood that these issues are not unique to the Centre but rather are a result the project document not allowing any handling of petty cash. Nevertheless they must to be noted as serious problems, having an impact and needing attention so as not to frustrate future projects.

## **2.5 Institutional and Management Arrangements**

The Centre manager was responsible for the day-to-day running of the Centre and reported to staff of the UNODC. Whereas the Centre managers of the Mpumalanga and the Eastern Cape projects reported to a Project Manager, the weakening Dollar rate resulted in there being insufficient funds to appoint a Project Manager for this Centre. Two UNODC officials took joint responsibility for the Centre. Regular progress reports were submitted to these officials and six visits to the Centre, to attend and hold meetings, took place. Two of these visits occurred in July 2003, before the Centre became operational; one in October 2003, to instruct and train staff; one in early March 2004, to prepare for the

official opening of the Centre; one at the end of March 2004, to participate in the opening of the Centre and one in January 2005, for the hosting of the Steering Committee meeting in Upington.

Certain institutional or management arrangements need consideration. It is an accepted requirement that anyone undertaking counselling, especially with clients who have been traumatized, has regular, ongoing and structured supervision. Although it was accepted by the UNODC that the Department of Social Development, would provide debriefing, it appears that this arrangement was not satisfactory in that it was not regularly and sufficiently structured. It appears that, to some extent, members of the Advisory Committee fulfilled this supervisory function for the Centre manager but on an *ad hoc* or informal basis. No such arrangement was in place for the NUNV who had no regular and structured supervision. This matter needs urgent attention for both existing and future projects.

Although a number of relationships between the Centre and various other stakeholders have been secured, these relationships are often superficial in that they are largely based on personal associations. What is lacking are deeper institutional relationships with other Governmental agencies, particularly formal agreements negotiated at a very senior Provincial level and governed by a protocol, which is understood and followed by all officials. The lack of such protocols as well as senior management understanding and commitment to the project seriously hampers any attempt on the part of the Centre manager to co-ordinate the efforts of a multidisciplinary team, so vital for the success of the Centre. For instance the FCS Unit of SAPS would like to have a closer working relationship with the Centre but their reporting structure at times frustrates this, while the forensic nurse, who reports in to the Department of Health, lacks essential equipment that would best be supplied by Health.

Having dealt with the major findings attention can now be given to the outcomes, impacts and sustainability of the project.

### **3. OUTCOMES, IMPACTS AND SUSTAINABILITY**

Any evaluation of project outcomes, impacts and sustainability must be considered against the historical background of the project and is limited by the fact that, not only has the project been operational for merely 18 months, but apart from this, there have also been a number of obstacles in respect of obtaining premises and securing a re-zoning certificate. Consequently, the Centre had no premises for 5 months and was unable to accommodate clients for 10 of the 18 months.

#### **3.1 Outcomes**

Notwithstanding the frustrations discussed above, the Centre has successfully co-ordinated the 16 Days of Activism on No Violence Against Women. The Centre has also raised awareness, albeit mainly on an operational level, amongst the different role players of the need to work together in a co-ordinated effort to address violence against women. Work undertaken by the Centre at schools has been successful and the Centre manager has arranged to train educators in order to reach a wider community. Indications are that a life skills programme aimed at healthy relationships and awareness of gender violence will become part of the school curriculum in the Uppington region. If this is achieved this would be a major step forward.

The Centre has been established and the overnight shelter is currently available for abused women and children. There is community awareness as the researchers found after approaching a number of residents in the streets of Uppington. Not all residents knew the exact details but the words of one resident encapsulate the general feeling when she said “ .... *yes I would refer a woman*

*who is being abused to the house near the hospital, over the road from the school.*" The resident had a good understanding of where the Centre was as well as its role. In general the feedback from the community is good. However, some reservations were made about the location of the Centre with some people indicating a need for a facility that was available within the various residential areas such as Rosedale, Paballelo Kakamas, etc. There have also been referrals to the Centre by community members.

Arrangements have been made for clients to get legal assistance through the Legal Aid Board and volunteers have been recruited for cleaning the Centre, gardening, IT assistance, caring for clients who are accommodated at the shelter, assisting with administration work and a Chaplain from SAPS provides voluntary pastoral assistance.

The Advisory Committee has become the forum for inter-Government involvement at a grass roots, practical level. There was a general feeling that this had come about at a good time as the Regional Plan of Action had ceased to be relevant. This can be seen as a major achievement of the Centre.

An important outcome is the realization of the fact that many awareness programmes, such as the 16 Days of Activism on No Violence Against Women and Health's programmes on sexually transmitted infections (STIs), if badly planned, could have an unintended negative result. These events tend to bring people together with live entertainment and music. This frequently leads to the use of alcohol and results in rape during and after the event. This is a problem, particularly in a region such as Upington, where there are few organized social activities, little entertainment and a high level of alcohol misuse. A heightened awareness of this problem highlights the need to provide protection for women at such events. The Centre also experienced a positive outcome from these events in that an increased awareness of gender-based violence leads to increased reporting of these incidents.

The major challenges in achieving outcomes are that the target area is far too large, and there is a need for posters and pamphlets in various languages but predominantly in Afrikaans as approximately 69% of the population in this region is Afrikaans speaking. The Centre did, however, produce certain informational materials such as brochures in English and Afrikaans.

### **3.2 Impacts**

The greatest impact of the Centre and its services has been on other service providers where it has provided an opportunity for the various role players to network in their fight against gender-based violence, each from its specialized perspective. If handled properly, and buy-in is obtained from the senior management of these role players, this could eventually lead to the development of a protocol or memorandum of understanding for dealing with gender-based violence that could be applied on a regional basis. Such a protocol is urgently needed and would be highly beneficial. This would assist the various Governmental agencies to identify their roles and indicate how they should optimally interact with each other. Ultimately clients could benefit and this should go a long way towards reducing secondary victimization.

Amongst the community the Centre has created some awareness, albeit limited, of gender-based violence and provides overnight shelter for victims of gender-based violence, both of which are important contributions to the region and must, as such, not be underestimated.

The impact amongst clients is that they are provided with a facility to which to turn if confronted with gender-based violence. The location of the facility, however, has both positive and negative aspects. The Centre provides a safe haven outside of the community where victims can receive assistance within a relaxed atmosphere away from interference from the perpetrator. A positive

aspect is that the positioning of the Centre provides anonymity for the forensic nurse to see sexual assault cases as people within the communities recognize her and her car and link victims with her function thereby compromising their confidentiality.

On the negative side other service providers, in particular SAPS, community members, and clients seem to link the opening of this Centre with the closing of the one in Rosedale. Rosedale was a community run centre that was not sustainable, nevertheless, the feeling amongst some stakeholders was that the Rosedale shelter was more accessible as it was based within the community. Although a number of people commented that the location provides an opportunity for peace, relaxation and security outside the community many others felt that the Centre was inaccessible to clients. The Centre is based in a suburban area of Upington and this particular location was chosen due to its proximity to the hospital and police station, both of which are in relatively easy walking distance, as well as due to the quietness of the area. However, people living in the township areas would need transport to get to the Centre, which is not always a simple matter, notwithstanding the fact that the Centre does transport clients by means of the Centre's motor vehicle as depicted below in figure 6. It must be understood that the issue of accessibility is particularly important in the event of a crisis situation such as violence or rape.

**Figure 6: The Bopanang Centre Motor Vehicle**



### **3.3 Sustainability**

In respect of sustainability the project needs to be evaluated over two stages. The first of these stages is the short-term period of three years during which the Department of Social Development will take over the project from the UNODC and run it in accordance with the agreement between these two institutions formed at the initiation of the project. The second is a longer-term period, after the agreed upon three year period has run its course. At the same time it must be kept in mind that the project is still at what essentially is an exploratory stage.

Over the short-term three-year period, although the Department of Social Development has accepted certain commitments, and is seen by the Centre staff as being their new “home”, there are certain concerns that have been identified that could threaten the stability of the project. A major concern is that the salaries of staff after handover to the Department of Social Development are uncertain.

At the time of undertaking the research the Centre manager was unsure of what level her salary would be at and how this would compromise her position in respect of both her professional progress and her status. The Regional manager of Social Development, to whom the Centre manager will report, was also uncertain of salary and levels and whether the posts would have to be readvertised once the Department of Social Development takes over the project. The National Department of Social Development and Chairperson of the Steering Committee confirmed this lack of clarity. She indicated that, although there is a commitment to the Centre, the appointment of staff would have to occur according to Departmental procedures unless the Provincial Minister of Social Development made a ruling otherwise. The degree of uncertainty is such that it could result in staff of the Centre seeking alternative employment, which has a greater degree of security.

For both short and long term sustainability it is important that the project does not rely too heavily on one particular person and that it takes on an identity of its own. Therefore succession planning for all staff members must be developed and implemented.

Stakeholders report that it is very positive to have the forensic nurse stationed at the Centre. In this regard it is also vitally important that the necessary skills be developed with another nurse as part of a succession plan.

A major concern with regard to sustainability is the fact that the re-zoning certificate has only been issued for a period of two years. Should this certificate not be extended on a permanent basis there is a danger of the services not being sustained.

The question of whether benefits will continue beyond project assistance funding is closely linked to the sustainability of the Centre and the availability of professional resources. If the Centre can be sustained in its current state, and if

professional resources are available at their present level, then, in all likelihood, benefits will be sustained. If the Centre's services are carefully marketed and staff continue to provide a sensitive and professional service, then there is all likelihood that the utilization of the Centre will increase as it is still a very new and largely untested facility within the community. However, bearing in mind the size of the target area many role players indicated that there is a need for at least one additional social worker.

#### **4. LESSONS LEARNED**

Under this heading both the lessons learned during the initial stages of the project and highlighted by means of this evaluation, as well as best practices identified will be discussed.

##### **4.1 Lessons**

A number of lessons were learned during the evaluation process that would be helpful to remember when initiating similar projects. Rather than developing objectives and formulating work plans from a distance a more hands on, stakeholder friendly, approach should be used that will draw on local knowledge and engage a broader base of stakeholders to ensure stakeholder buy-in. Although in terms of the UN procedures objectives are never flexible, the means of achieving these objectives should remain flexible and be revisited on a regular basis with a view of, if necessary, adjusting to best fit the environment and application.

User-friendly administrative systems should be adopted. This will limit minor administrative obstacles, particularly those that affect the timely payment of salaries and expenses.

Accommodation and infrastructure need to be in place before services are marketed, as difficulties concerning accommodation and infrastructure are likely to have a negative effect on service delivery, which in turn, will have a negative impact on the trust the community places in these services.

Commitment and buy-in amongst the various Governmental agencies must be obtained at a senior level and must include a process to ensure that decisions are cascaded down through the appropriate ranks to the operational level. This could be seen as a very important lesson as early buy-in at a senior level will facilitate interaction at lower levels. This could also be accompanied by the development of a protocol or memorandum of understanding.

When embarking on similar projects initial focus should rather be more narrow and only once all required systems are in place and functioning reasonably well should the focus be broadened. This lesson pertains particularly to geographical area but may also apply to the range of services offered. In this sense, the idea is to limit stretching available resources until a clearer picture emerges as to the capacity of those resources.

## **4.2 Best Practices**

There were two issues that emerged as best practice models from this project. The first of these is the interaction that is taking place between the Centre and representatives of the Department of Education as a means of influencing future generations in respect of gender-based violence. During 2004 emphasis was placed on the Grade 7 learners at three Primary Schools. In these life skills programmes 500 learners were reached. From this it was decided that rather than attempting to visit all schools in the Siyanda District, there are 123 of these schools ranging from small farm schools with very few learners, to very large schools with over 1000 learners in attendance, the Centre will now focus on empowering teachers.

As a means of achieving this the Centre manager, together with a representative from Education, will provide life-skills training, with a gender-based violence element to educators who will then pass this on to grade 7 learners. Grade 7 learners have been identified as the target group as it is felt that this group is at the preparation stage, early adolescence and prior to moving to High School, and that they would be at the point where they would derive the most benefit from input regarding acceptable and unacceptable behaviour, relationships, assertiveness, etc. In this regard educators can function as important significant others, particularly in the absence of one or more parents, for children to look up to.

Secondly, the co-ordination of role players, as occurs on the Advisory Committee, could be seen as being best at this point in time particularly when considering the success in co-ordinating these role players during the 16 Days of Activism on No Violence against Women. Although this is highlighted as a best practice that emerged from the project, it must be stressed that in this respect we refer to co-ordination of role players at the operations level, which is the level at which the Centre functions.

### **4.3 Challenges**

A number of challenges or obstacles have already been mentioned in the report and it would be repetitive to go into too much detail here. The major challenges that have had an impact on the project and service delivery will be divided into either structural or practical challenges.

Structural challenges are those challenges that are largely outside of the influence of staff in Upington, such as UN payment arrangements, and are listed as:

- Administrative problems – salary payments, petty cash, acquiring and moving into the premises, re-zoning, etc.
- A very large target area, which dilutes the impact of any outreach programme.
- Lack of active involvement from certain role players across all managerial levels.
- The entire Northern Cape area appears to be grossly under-resourced.

Practical or planning challenges are those challenges that staff in Upington have at least some influence over and are listed as:

- Inadequate security at the Centre.
- Lack of training material with emphasis on Afrikaans.
- Lack of pamphlets and posters to market the Centre, especially in Afrikaans.
- SAPS do not appear to regard domestic violence as a crime or issue that needs to be referred to the Centre. Only rape and indecent assault cases are referred to the FCS Unit and/or the Centre.
- Lack of knowledge regarding the database, as well as using the computer network connections. This has led to a lack of commitment in respect of Objective 5.

Having dealt with these constraints attention will now be given to considering the recommendations.

## **5 RECOMMENDATIONS**

### **5.1 Issues resolved during evaluation**

Although issues and concerns were taken up, to claim that they were resolved would be an overstatement. Whether these issues have been resolved will only become apparent on re-evaluation. It must also be noted that, as independent consultants, resolving issues would be beyond our brief. However, certain issues

came up from the staff and were discussed. These include the fact that, until now, the forensic nurse has not given a copy of the J88 medical form, a form completed when there has been physical abuse, to the Centre staff who are responsible for follow up visits and counselling. The J88 is completed by a medical specialist and provides valuable information regarding the extent of the abuse, which is critical for court proceedings. What was also discussed was the need for both the Centre Manager and the NUNV to have ongoing, structured supervision.

By employing the research method of appreciative inquiry the Centre manager indicated that the evaluation process had stimulated her thoughts in respect of making certain changes. These changes include regular structured supervision, monthly team-building sessions, establishment of support groups and income generating projects, as well as small fundraising initiatives.

## **5.2 Actions/decisions recommended**

The issue of the smooth transfer of staff to the Department of Social Development is of high priority and must be sorted out as a matter of urgency. This is one aspect that, if not corrected, could have a serious impact on the sustainability of the Centre at the crucial time of handover.

Stakeholders interviewed recommend that, in the future, consideration should be given to the possibility of running the Bopanang Centre as a control center coordinating all efforts to address gender-based violence in the area and providing safe facilities to abused women, while establishing crisis centres within the community. In this sense it is envisaged that these small crisis facilities operate along the lines of “first-aid posts” that are attached to the Bopanang Centre and that, after initial crisis intervention, clients are referred for assessment and treatment at the Bopanang Centre.

To achieve this it would be necessary that a protocol, or memorandum of understanding, be generated to identify and guide the roles and activities of all role players. It is recommended that the protocol clearly indicate each step to be followed in dealing with cases of gender-based violence as well as to identify each role player and their responsibility at each stage. In this regard the Thuthuzela care centers (see annexure 4), which have a holistic approach to dealing with rape and the survivors of gender-based violence, can function as a best practice model as can the Ikhaya Lethemba one-stop centre for victims of domestic abuse and sexual violence. In order for the Bopanang Centre to function effectively as a one-stop centre it is important that there is representation of all role-players at the Centre.

An important recommendation relates to the security at the Centre. Notwithstanding the fact that the security specialists of the UNODC and the Department of Social Development have had consultations with each other about the security and have paid a site visit to the Centre, the security situation remains totally inadequate. At this point, the building is not secure and there was only one guard on duty at the time of our visit. The guard also has limited facilities for protection and communication. It is well understood that the re-zoning certificate is only valid for two years, with an option to re-apply, and that this causes uncertainty for the Department of Social Development. With the high degree of uncertainty it is also understood that the Department of Social Development could be reluctant to spend too much on the Centre. However, the issue of security is crucial. It must be remembered that the Centre deals with cases of violence, which carries a high risk for both clients and Centre staff, and responsibility must be taken to ensure that these people are made secure.

Finally, once better established, it is recommended that the Centre consider the possibility of incorporating an economic empowerment element in its work to assist women to learn new skills, become self-sufficient and build self-esteem.

## 6 OVERALL CONCLUSIONS

In conclusion, it was found that the Bopanang Centre has, despite initially being confronted with various frustrations and difficulties, been able to achieve many of the original objectives set out for it. A functional facility exists that can comfortably accommodate a multi-disciplinary victim empowerment service. Apart from this, strategies are being put in place to ensure that there is involvement at the Centre from other service providers such as Health, SAPS Education, Justice and Correctional Services. All of which provide a valuable facility that makes a positive difference to both the communities and victims of gender-based violence in the Upington region.

At this stage, however, it is evident that not all of the above mentioned role players are involved with the Centre to the same degree and that this is an issue that needs further attention. It is suggested, therefore, that serious consideration be given to the development of a protocol or memorandum of understanding to serve as a guide in dealing with cases of gender-based violence. In this regard consideration should be given to the achievements of other models, such as the Thuthuzela care centers and the Ikhaya Lethemba facility.

Although certain mechanisms have been put in place, such as safety plans for each client, the overall security of the facility raises serious concern and needs **urgent** and **immediate** attention. Although liaison occurs between the various service providers this seems to have remained at the operational level and needs to be developed on a vertical level amongst the various service providers. It is important that commitment is obtained from all managerial levels, amongst all service providers to the same degree. It is unsatisfactory that certain service providers are totally committed while others show a limited degree of commitment. For the Centre to be successful a well co-ordinated effort is

necessary that guarantees that all service providers deliver on their obligations in the right place at the right time.

The provision of gender-sensitive training for local personnel was not achieved due to the fact that the relevant training material was not available. This is an issue that needs attention.

Outreach programmes in the communities to create an awareness of the Centre as well as to increase awareness regarding gender-based violence were undertaken. In addition, life skills programmes were run with 500 Grade 7 learners in three different schools. These sessions received positive feedback and arrangements have been made to expand these programmes at schools. What is positive in this respect is that the Centre is empowering educators to help reach a wider community. Work with perpetrators was undertaken on a group level within the prison, as well as on an individual basis from the Centre.

The data collection system that is available it is not utilized to its full potential. Although computer training was provided by the UNODC on the system data capturing is tedious and this needs to be addressed by providing further computer training and through the introduction of a process for ongoing supervision, which will include monitoring the regular collection and capturing of data.

In the short-term the project is sustainable, considering the fact that the Department of Social Development will continue to fund the project for three years. However, a word of caution is given in respect of the salaries and status of Centre staff. If this matter is not rapidly and adequately resolved this may threaten the short-term success of the project. In the long term the project shows every prospect of being sustainable.

The limitations in this evaluation are that the Centre had not been operational for long enough to identify established trends. The area is widely dispersed making it impossible to visit all outlying areas within the budget and time challenges of this evaluation.

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**Annexes**

## Organizations and places visited and persons met

## Organizations and places visited:

Bopanang Centre Upington

Upington Magistrates Court

Upington FCS Unit

Pabalello Township Progress

TcNnship Christanna

HIV/AIDS Centre

Ikhaya Lethemba

Nthabiseng Thuthuzela Centre

## Persons met:

Ms Valerie Syster - Bopanang Centre Manager

Ms Bernadette Ntoba - NUNV

Ms Rummy Kalamore - Bopanang Centre Administrator

Sr VmonicFI Jansen - Forensic Unit of Department of HP. ?lth

Mr Willy Nel - Department of Education

Mr Nampala - Department of Education

Mr Nampala - Correctional Services

Capt. Mervin October - FCS Unit

Insp. Marius Struiwig - FCS Unit

Mr Auden Maharaj - Prosecutor- Sexual Offences Court

Mr Mervin October - Regional Head Siyanda – Department of Social Development

- Ms Michelle Adams - Co-ordinator Probation Services- Department of Social Development
- Dr Tshotsho - National Director- Families and VEP. National Department of Social Development
- Ms Boitumelo Moche -UNODC
- Ms Natalia Ollus - UNODC
- Various citizens (7) - People in the streets/shopping center of Upington

Inputs	Yes	No	Comments
Does the National Department of Social Development provide:			
Liaison & advisory services?			
Chair the steering committee?			
Infrastructure?			
Continuity?			
Security?			
Staffing?			
Does the United Nations Office on Drugs & Crime provide:			
Staffing?			
Travel?			
Equipment?			
Vehicle?			
Furniture?			
Computers?			
Photocopiers?			
TVs?			
Videos?			
Fax machine?			
Basic medical supplies?			
Others specify?			
Operational costs?			
Communication?			
Non-expendable material?			
Light meals for victims?			

Interview/data collection sheet				
Objective 1	Yes	No	Comments	
Develop a multi-disciplinary victim, empowerment service & strategies				
Establish a 24-hour helpline				
Do women and children have access to 24-hour overnight shelter or care facility?				
How is full utilisation of the Centre ensured?				
What strategies have been put in place for out-reach work?				
Employ professional staff for the Centre				
Do women & children have access to professionals? If not, who?				
Do women & children have access to trained staff? If not, who?				
Does the Centre provide a broad range of services to victims of gender based violence such as:			How long did it take	Comments
Counselling?				
Legal?				
Medical?				
Liaise with police?				
Liaise with prosecution & courts?				
Are women & men informed & empowered to make decisions in dealing with the abuse that they have experienced?				
Objective 2	Yes	No	Comments	
Provide safety mechanisms for victims & liaise with other service providers				
Does the Centre provide an overnight shelter for crisis situation?				
Does the Centre facilitate referral to other available shelters? How often?				
What other service providers are involved?				
Objective 3	Yes	No	How often	Comments
Provide gender-sensitivity training for local community				
Does the Centre provide gender sensitive training for local personnel:				
Police officers?				
Prosecutors?				
Local personnel?				
Correctional services?				

Objective 4	Yes	No	Indicate how
Provide programmes for the community with focus on males			
Does the Centre provide programme for the community focusing on males?			
Does the Centre provide counselling to men and boys who have fledged in gender-based violence?			
Does the Centre facilitate the change of PNGor & attitude modification about gender violence?			
Does the Centre facilitate the control of J&R & attitude modification about role & relations?			
Does the Centre influence men & boys to fight against violence & emd abuse?			
Does the Centre provide counselling to men & boys?			
Does the Centre recruit men & boys as counsellors?			
Objective 5	Yes	No	Indicate how
Develop data collection system on the nature & extent of gender based violence			
Has the Centre developed a data collection system?			
How has this assisted in service provision?			
How are perpetrators monitored?			

## Care centres have a holistic approach to dealing with rape and its survivors

Published on the web by Star on November 28, 2003

Improving the investigation of rapes and the treatment of survivors is the aim of the pilot Thuthuzela care centres, of which there are now five in the country. At these multidisciplinary centres, rape survivors can be medically examined, receive counselling, make case statements to police and see prosecutors. The centres are modelled on the original one at Chris Hani Baragwanath Hospital in Soweto, which was officially opened by Justice Minister Penuel Maduna in August

This centre bears the name Nthabiseng in memory of Nthabiseng Lorraine Khumalo, who was gang-raped in June 1994, identified her attackers to the police and was killed by them in her hospital bed. But the centre's history actually goes back to 1992, when there was an outcry by the community over the increasing number of rapes in the Soweto area. Low conviction rates were leading to frustration, anger and vigilante action. Another approach was needed. Various government departments, led by the National Prosecuting Authority (NPA), designed a new anti-rape strategy with civil society. Adopted by parliament last year, it proposed merging police and prosecution services with the Nthabiseng Thuthuzela Centre, which up to then had provided only health care and counselling.

The Thuthuzela model became the blueprint for other such centres. "The model was simple," says Virginia Francis, the project manager for the Thuthuzela care centres. "If we could have the criminal justice system working together under one roof, it would be an ideal system for survivors, one that would change their perception about the criminal justice system as a whole," she says.

In March 1999, the NPA was asked to conduct a study to find out what happened when a rape survivor reported a crime. The research found that there were a number of gaps in the system, including a lack of transportation for survivors to make the necessary trips to doctors, police stations and courts; survivors not being believed; and women not being given enough information about the medical examination and the progress of their cases. "Sometimes the perpetrators would be granted bail without the survivors' knowledge, which posed a threat to them," says Francis.