

Strengthening Multi-Country Collaboration through Training Mohau Makhosane



SVRI Overview

- Initiative of the Global Forum for Health Research
- Launched in 2003 to create a network of committed researchers, policy makers, donors and activists
- Initially hosted by WHO before moving to the Gender and Health Research Unit, Medical Research Council, South Africa (2006)
- Funders: World Bank/GFHR, Ford Foundation, CDC/PEPFAR, William and Flora Hewlett Foundation
- Secretariat: Secretary, Programme Officer, Snr Trainer, Researcher, Administrator
- Coordinating Group: 10 experts from around the world. Selection based on technical expertise, nomination from networks, geographical representation
- Rules and regulations
- Monitoring and evaluation: Monthly meetings & reports; Quarterly meetings exec; Annual meeting & report; SVRI eSurvey



SVRI Aim & Objectives

The SVRI aims to promote research on sexual violence and generate empirical data to ensure sexual violence is recognised as a priority public health problem

- **Increase awareness of sexual violence as a priority public health problem through evidence based communication and information**
- **Strengthen the support and funding base for research on sexual violence**
- **Build capacity in sexual violence research**
- **Improve knowledge of sexual violence internationally to influence policy and service delivery**



Strengthening Responses to Rape – A global project

- Need for a reorientation of health care for SV survivors towards meeting their psychological, social and physical health needs in services staffed by appropriately trained providers.
- Aim is to shift the orientation and perceptions of the role of post rape care from a predominant focus on the collection of medico-legal evidence to the provision of holistic care to meet the short, medium and long term mental and physical health needs of survivors.
- Four Components: partnership, **training**, policy, and research.
 - promote the development of working partnerships among policy makers, service providers and trainers, and women's advocates within countries.
 - develop a vision for strengthened health services and inter-sectoral partnership at a country level
 - provide technical support and guidance for processes in country to develop policy, models of care and inter-sectoral working, and training for health professionals, where appropriate supported by research



Ford Foundation Project

- **Multi-year project:**
 - support countries to develop health sector responses to rape survivors
 - Promote an appropriate & effective interface between police, health & justice sectors
- **Phase 1: promote development of working partnerships among policy makers, service providers, trainers & women advocates**
 - Used SVRI networks and partnerships to establish teams
 - Rwanda, Zimbabwe, Zambia, Uganda, Malawi, Kenya and Nigeria
- **Phase 2 of the project – capacity building through training**
 - Conducted with multi-disciplinary teams: est during phase 1
 - **African Regional Training for Care & Support of Sexual Assault Survivors**



African Regional Training Programme

2 – 13 Feb 2009

Participants by country and sector

Country	Sector				Total
	Health	Police	Legal	NGOs	
Kenya	1	0	2	1	4
Malawi	2	2	1	1	6
Nigeria	3	0	1	0	4
Rwanda	3	0	0	0	3
Uganda	4	0	0	0	4
Zambia	4	1	0	0	5
Zimbabwe	3	1	1	0	5
South Africa	1	0	0	0	1
Total	21	4	5	2	32

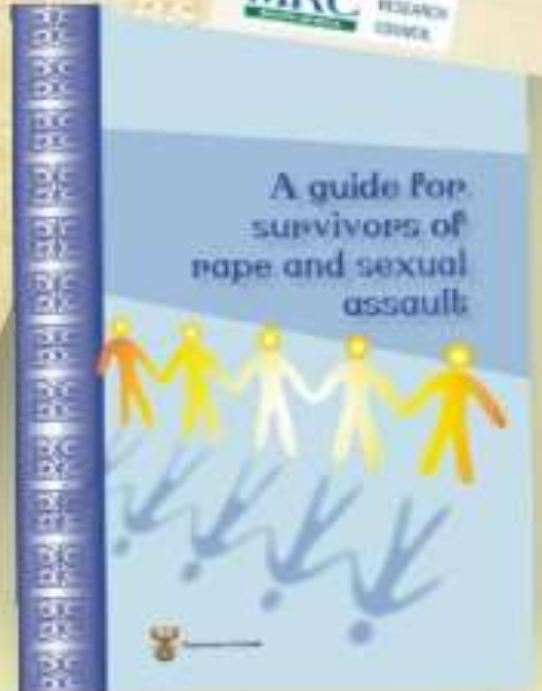
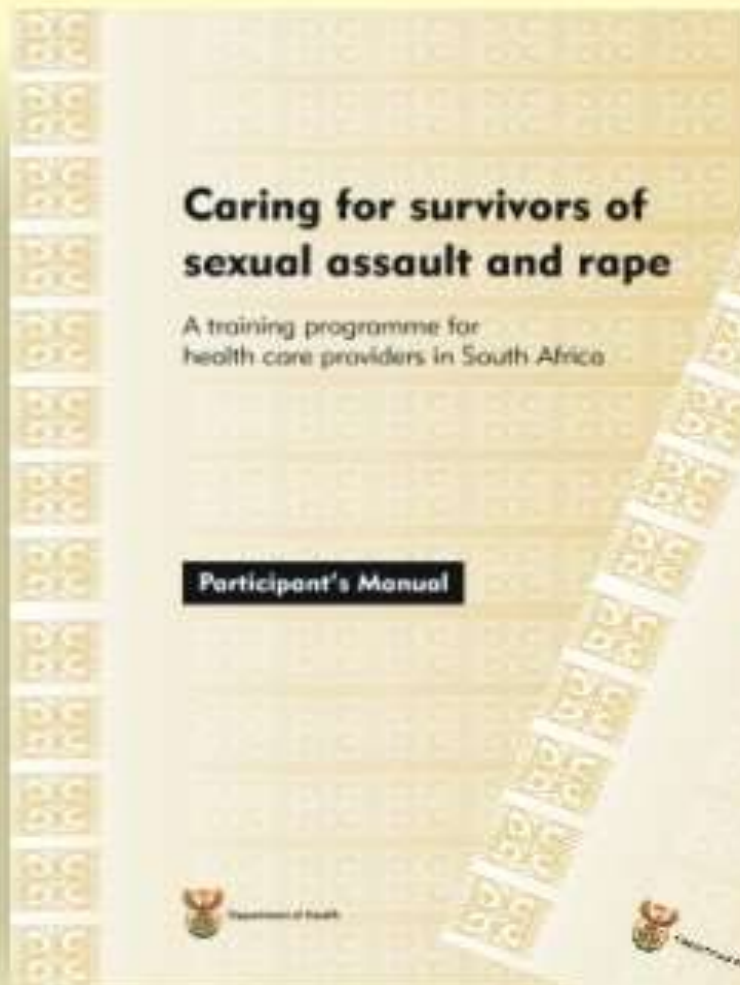


Selection Criteria

Sector	Criteria
Health	<ul style="list-style-type: none">o a medical dr / <i>forensic</i> professional nurseo managing survivors in public health sectoro providing trainingo involved in policy development at senior level in public sector
Justice	<ul style="list-style-type: none">o prosecutor / district attorneyo trains prosecutors
Police	<ul style="list-style-type: none">o senior member of the police serviceo manages family/child portfolioo actively involved in rape/incest/defilement investigations



Evidence-based in-service training on post-rape care



Training methodology

- o **Draws on adult education principles**
 - **Freire – critical reflection**
 - **Small group work**
 - **Case studies**
 - **Role plays**
 - **Videos**
- o **10 days and a practical component**



Structure & content of training

Module 1: Social context of rape in SA

Circumstances, context & magnitude

Sexual Rights

Rape & the Law

Module 2: Initial approach to rape survivor

Communication skills

Taking history & obtaining consent

Module 3: Managing Health problems

Mental Health

Prevention & management of pregnancy, infectious diseases & HIV



Module 4: Examination & Documentation

Medico-legal
examination

Non-genital
injuries

Examining
children

Forensic
evidence

Document-
ation

Module 5: After the initial consultation

Follow up visits

Vicarious
trauma

Giving expert testimony in court

Monitoring & evaluation of service



Developing skills in giving evidence in court



Next steps ...



SVRI initiative



Ford Project:

**Strengthening Responses to Rape –
A Global Project**

- **Training course from 20 - 31 July 2009 with ~45 people held in Harare, Zimbabwe**
 - **Site visit pre training**
- **Another in Rwanda**
 - **Rwamagana District from February 22nd to March 5th, 2010**
 - **co-sponsored by the MOH and its GBV partners**
 - **35 participants including 17 health providers coming from 15 hospitals, 7 partners from the SGBV initiative supported by PEPFAR (ICAP-Columbia University (3), CRS (2), DREW Care International, IntraHealth HCSP) 2 participants from clinical partners (FHI); 6 participants from the MOH/MCH Task Force; 1 participant from TRAC and 1 participant from CNLS, 1 participant from Masaka Health center.**



Lessons Learned

- **Champion needed for success of intersectoral collaboration**
 - **Locally based**
 - **Influential**
 - **Interpersonal skills**
- **Multi sectoral training for comprehensive support of survivors provided by a MDT of professionals in the field**
- **Development of service level agreements setting out responsibilities is important for monitoring progress**
- **Establishing contact with the relevant ministries**
 - **Right people**
 - **Right portfolio**
- **Communication difficult without appropriate technologies**
- **Most countries need mapping: problem, services, resources, skills**
- **Policies, protocols, management guidelines are crucial for program development**
- **Social norms are at the heart of the service**



I THANK YOU!!!!

