SOUTH AFRICAN INTEGRATED PROGRAMME OF ACTION

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Acknowledgements

**Ministries:** The Department of Social Development is the lead Department of the Inter-Ministerial Committee (IMC) on Violence against Women and Children. Other Departments include: Department of Women (DW); Department of Basic Education (DBE); Department of Health (DH); Department of Justice and Constitutional Development (DJ&CD) including the National Prosecutions Authority (NPA); South African Police Services (SAPS); Department of Home Affairs (DHA); Department of Telecommunications and Postal Services (DTPS); and Department of Performance, Monitoring and Evaluation (DPME).

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**Supported by:**

**About DFIDSA**

Preventing Violence against Women and Girls is a global priority for the British Government. In South Africa, DFID supports the Safer South Africa programme, in partnership with the Government, UNICEF, UNFPA and civil society. It also aims to support the work of the National Council Against Gender Based Violence (NCGBV), address the root causes of GBV and mobilise more active and engaged communities to prevent violence.

**About UNICEF**

UNICEF promotes the rights and wellbeing of every child, in everything we do. Together with our partners, we work in 190 countries and territories to translate that commitment into practical action, focusing special effort on reaching the most vulnerable and excluded children, to the benefit of all children, everywhere.

*Date of publishing: August 2014*
In the last 20 years the South African Government has ratified a number of international instruments and developed progressive pieces of national legislation that promote human rights for all. As the supreme law of the country, the Constitution of the Republic of South Africa is built on a culture of reverence for human rights and an identity founded on the values of non-sexism, non-racialism and equality.

The Constitution further guarantees equality and freedom from any form of violence or discrimination, and prohibits gender-based violence (GBV). Other important instruments worth a mention include the Domestic Violence Act, the United Nations Convention on the Rights of the Child (CRC) and the United Nations Convention on the Elimination of all Forms of Violence Against Women (CEDAW).

The 20 Year Review confirms that South Africa is a much better place to live in now than it was in 1994, and highlights the remarkable progress we have made since the dawn of democracy. Evidence in political, social and economic sectors of our society shows that we have made and continue to make progress in ensuring voices of women can be heard through the creation of various structures and the provision of opportunities.

Through Government’s pro-poor policies and programmes, such as school nutrition and social assistance, no-fee schools and other initiatives, we have witnessed improvement in girls’ enrolment and attendance in school, and also increased access to basic services at the household level, resulting in positive outcomes for children and families. Education is a critical force for development and it provides the bedrock for gender equality and women empowerment. The increased participation of women in public life in South Africa is part of our shared vision for building a non-sexist society that promotes the independence of women.

Despite this remarkable progress, much more still needs to be done to address societal and cultural norms, particularly patriarchal attitudes underlying violence against women and children (VAWC). The urgency of addressing these issues and instilling positive values is underlined by the recent spate of terrible violence and sexual offences against women, children and older persons in our society. This violence – unjustifiable and largely preventable – is a major barrier to the full realisation of the human rights of women and children.

It is against this background that Cabinet in 2010 established an Inter-Ministerial Committee (IMC) on Violence made up of Ministers of Social Development; Justice and Constitutional Development; Women, Children and People with Disabilities; Health; Home Affairs; Police, Communications and Basic Education to look into the root causes of VAWC. In addition, Cabinet announced the establishment of a National Council Against Gender-Based Violence (NCGBV).
The membership of this committee clearly shows that addressing VAWC is a societal responsibly that cannot be left to government alone. For this reason, the Integrated Programme of Action (POA) highlights the need to work together across government and with all sectors of our society to prevent and respond to VAWC.

The IMC, through consultation with key stakeholders in the sector, has developed this Integrated National Programme of Action Addressing Violence Against Women and Children (POA:VAWC) in partial fulfilment of its mandate to step up national efforts to stop all forms of abuse of women and children. The POA outlines actions designed to prevent VAWC, to improve the implementation of existing laws and services aimed at victims of violence and to provide adequate support services.

The proposed interventions and programmes in the POA outline an extensive range of existing and new measures aimed at complementing existing initiatives such as the Thuthuzela Care Centres, Sexual Offences Courts and other victim empowerment initiatives.

One such initiative, which is aimed at improving services to women and children who experience violence and abuse, is the establishment of the Gender-Based Violence Command Centre by the Department of Social Development (DSD). This is a 24-hour call centre dedicated to provide support and counselling to victims of gender-based violence. The command centre is aimed at providing immediate psychological assistance and referral to victims affected by gender-based violence, and to assist them in avoiding additional exposure to violence.

The POA also notes the need to pay special attention to cross-cutting strategies aimed at promoting and protecting the rights of persons with disabilities. Social Development, as a lead government department and a key member of the Justice, Crime Prevention and Security (JCPS) Cluster, will coordinate the implementation of the National Programme of Action, in collaboration with all stakeholders.

This POA provides a key platform for accelerating violence prevention and response efforts at all levels. Although it is an ambitious undertaking, I have no doubt, that working together, we will succeed in bringing a solution to one of the most intractable challenges of our times: VAWC.

I would like to take this opportunity to thank my colleagues whose tireless work played a major part in the development and finalisation of this POA. I would also like to thank officials from all departments and civil society organisations who contributed to this work.

Working together, I am confident that we can, indeed, ensure that all people in South Africa are and feel safe.

MS BO DLAMINI, MP
MINISTER OF SOCIAL DEVELOPMENT
REPUBLIC OF SOUTH AFRICA
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Executive summary

The elimination and prevention of all forms of violence against women and children (VAWC) has been established as a national priority by the Government of South Africa. Though the country has been commended for its robust legislative framework to address the scourge of violence, there remains an urgent need for multi-sectoral interventions to prevent, protect against and respond to this scourge.

The high level of VAWC is particularly alarming and continues to have a devastating and lasting effect on survivors. It also harms families across generations, as well as communities, and constitutes one of the key drivers of the HIV epidemic in the country. Violence undermines social and economic development, it reinforces intergenerational cycles of poverty and inequalities, and impedes progress towards achieving the Millennium Development Goals (MDGs), the National Development Plan 2030 (NDP) and the realisation of human rights.

The Government reiterates that VAWC is neither justifiable nor acceptable. With the necessary will and resources, it could be radically reduced, and eventually eliminated.¹ The Government is committed to intensify and accelerate efforts to prevent acts of VAWC, to investigate such acts when they occur and prosecute and punish perpetrators, and to provide redress and relief to the survivors.

This commitment led, in May 2012, to the establishment of a Cabinet-level Inter-Ministerial Committee (IMC) on Violence to address the phenomena of VAWC in South Africa. The IMC is chaired by the Minister of Social Development and is made up of a number of Government Ministers, namely the Ministers of Women, Justice and Constitutional Development; Health; Home Affairs; Police; Telecommunications and Postal Services and Basic Education.

The IMC identified that a more cohesive and strategic approach is required to address the root and underlying causes of violence and to strengthen the systems that respond to it.

The proposed Integrated Programme of Action Addressing Violence Against Women and Children (POA:VAWC) is essential to this effort. It provides comprehensive, multi-sectoral and long-term strategic interventions, emphasising government accountability, for ending violence.

Guided by the key principles of the human rights-based approach, which include inter-sectoral interventions, continuum of services, participation and partnerships, the

¹ United Nations General Assembly (2006) Secretary-General’s In-depth Study on all Forms of Violence Against Women
POA:VAWC seeks to achieve: The elimination of all forms of violence against women and children.

This goal will be achieved through the operation of the three main pillars of the programme: Prevention and Protection, Response, and Care and Support. The specific focus on these three pillars and the rationale behind the programme strategy is the need to shift national programming approaches away from crisis response to prevention and early intervention. In addition, the programme includes a foundation pillar, which is concerned with System Components. Advocacy and communication are seen as an integral part of all pillars.

In order to achieve this goal, the following main objectives were identified.

1. Prevent VAWC from occurring through a sustained strategy for transforming attitudes, practices and behaviours.
2. Respond to violence in an integrated and coordinated manner by ensuring a comprehensive package of services to affected women and children.
3. Ensure provision of long-term care, support and empowerment of survivors of violence.
4. Ensure provision of reintegration and rehabilitation services for perpetrators of violence.
5. Strengthen the system at all levels that prevent and respond to violence to ensure accountable and coordinated action across sectors.

The POA:VAWC is being implemented for five years, from 2013 until 2018, with a review process taking place in 2016. The programme’s proposed interventions are grouped into short-term (12 to 18 months), medium-term (18 to 36 months) and long-term (36 to 60 months) activities to maximise results, achieve quick wins and have the greatest positive impact over the shortest period of time.

It needs to be noted that Cabinet approved the POA:VAWC on 18 September 2013. The document was subsequently adjusted to accommodate changes made by Cabinet in terms of national departments after the elections in May 2014.
Acronyms

AIDS Acquired Immune Deficiency Syndrome
CCPF Child Care and Protection Forum
CEDAW Convention on the Elimination of All Forms of Discrimination Against Women
CHHs Child-headed Households
CJCP Centre for Justice and Crime Prevention
CoGTA Department of Cooperative Governance and Traditional Affairs
CPFs Community Policing Forums
CRC Convention on the Rights of the Child
CRPD Convention on the Rights of Persons with Disabilities
DAC Department of Arts and Culture
DBE Department of Basic Education
DC Department of Communications
DH Department of Health
DHA Department of Home Affairs
DHET Department of Higher Education and Training
DHS Department of Human Settlements
DIRCO Department of International Relations and Cooperation
DJ&CD Department of Justice and Constitutional Development
DPME Department of Performance Monitoring and Evaluation
DPSA Department of Public Service and Administration
DPW Department of Public Works
DSD Department of Social Development
DT Department of Transport
DTPS Department of Telecommunications and Postal Services
DW Department of Women (refers to the Ministry of Women in the Presidency)
ECD Early Childhood Development
FCS Family Violence, Child Protection and Sexual Offences Investigations
FPB Film and Publication Board
GBH Grevious Bodily Harm
GBV  Gender-based Violence
GCIS  Government Communication and Information System
HIV  Human Immunodeficiency Virus
ICT  Information and Communication Technology
IDP  Integrated Development Planning
IJS  Integrated Justice System
IMC  Inter-Ministerial Committee
JCPS  Justice, Crime Prevention and Security
M&E  Monitoring and Evaluation
MDGs  Millennium Development Goals
MMA  Media Monitoring Africa
MRC  Medical Research Council
NASC  National Alliance for Children living and working on the street
NCCPF  National Child Care and Protection Forum
NDP  National Development Plan
NPA  National Prosecuting Authority
PEP  Post Exposure Prophylaxis
POA  Programme of Action
POA:VAWC  Integrated Programme of Action Addressing Violence Against Women and Children
SALGA  South African Local Government Association
SAPS  South African Police Service
SOCs  Sexual Offences Courts
SOCA  Sexual Offences and Community Affairs
TCCs  Thuthuzela Care Centres
VAWC  Violence Against Women and Children
VEP  Victim Empowerment Programme
VOC  Victim of Crime
VSWs  Victim Support Workers
WEGE  Women Empowerment and Gender Equality
WHO  World Health Organisation
1. Introduction

Violence is a challenge in South African society, to the extent that the country has been described as having one of the highest prevalence of violence and violence-related injury in the world. The roots of violence lie in South Africa’s history of apartheid, its socio-economic realities, including extreme inequality – South Africa remains one of the most unequal countries in the world as measured by the Gini coefficient – and discriminatory cultural norms affecting mostly women and children.

The high level of violence against women and children (VAWC) is particularly alarming and continues to have a devastating and lasting effect on survivors. It also harms communities and families across generations, and constitutes one of the key drivers of the HIV epidemic in the country. Violence undermines social and economic development, it reinforces intergenerational cycles of poverty and inequalities, and impedes progress towards achieving the Millennium Development Goals (MDGs), the National Development Plan 2030 (NDP) and the realisation of human rights.

VAWC is neither justifiable nor acceptable. With the necessary political will and appropriate adequate resources, VAWC could be radically reduced, and eventually eliminated. Human rights treaties such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Convention on the Rights of the Child (CRC), as well as the Constitution and laws of South Africa, guarantee women and children the right to live their lives free from violence. Currently, however, significant gaps continue to exist between international standards endorsed by the Government, national laws and policies, and what women and children experience on a day-to-day basis. The challenge now is to translate these standards into reality at the local level and to fully tackle the problem and its root and underlying causes with the necessary political commitment, accountability and resources.

There is an urgent need for national action to protect women and children from all forms of violence. Given this need, guided by South Africa’s legal human rights obligations, the Government is committed to intensifying and accelerating efforts to prevent acts of VAWC. The Government further aims to investigate such acts when they occur, prosecute and punish perpetrators, and to provide redress and relief to the survivors. A more cohesive and strategic approach, which addresses the root and underlying causes of violence and strengthens the systems that respond to it, is therefore required.

3 United Nations General Assembly, op. cit.
The proposed Integrated Programme of Action addressing Violence Against Women and Children (POA:VAWC) is essential to this effort, as it will provide comprehensive, multi-sectoral and long-term strategic interventions while stressing government accountability for ending VAWC. Such a programme will enable all the sectors involved to coordinate and systematise their activities, evaluating and building on initiatives so that approaches remain adaptive and responsive for years to come.

However, the Government acting alone will not be able to produce all the changes needed to address such a serious, prevalent and deeply entrenched problem as VAWC. Realising the long-term vision of all women and children living free from violence in South Africa requires the involvement of all levels and segments of society, including government institutions, civil society organisations, media, businesses, communities, families, men and women, and boys and girls. Everyone has a responsibility to act. For this reason, the POA:VAWC outlines an extensive range of existing and new measures, and highlights the need to work together across government and the community for the prevention of, and response to, violence.
2. Situation analysis

2.1 SCOPE OF THE PROBLEM

VAWC in South Africa is extreme, both in terms of its prevalence and severity. In 2010/11, 63,603 rape and sexual assault cases were recorded. The real level of rape is, however, much higher, because many survivors suffer in silence, often have limited access to justice, or are too disempowered, too intimidated or too fearful of further traumatisation or stigmatisation in the criminal justice system to step forward. On average, only one in 200 rapists is convicted.4

2.1.1 Violence against women

The true extent of violence against women is impossible to measure, as only a small proportion of all acts is reported and investigated. Nevertheless, there is ample national and global evidence that violence against women manifests in a continuum of multiple, interrelated and sometimes recurring forms.5 It can involve physical, sexual, psychological or emotional, and economic abuse and exploitation, and can be experienced in a range of settings across both private and public spheres.

These forms of violence include, but are not limited to, domestic violence, sexual violence by non-partners, marital rape, date rape, stalking, sexual harassment, sexual exploitation, domestic homicides and harmful traditional practices such as forced child marriages and female genital mutilation. Women also experience violence across the course of their lives in different ways and contexts, and many forms of violence are perpetuated against women of all ages. Violence against women can also transcend national boundaries, and available data suggest that South Africa is a source, transit and destination country for women subjected to forced labour and sex trafficking. Traffickers control victims through intimidation and threats, use of force, withholding of passports, debt bondage, and forced use of drugs and alcohol.6

Most forms of violence against women occur at the hands of someone the woman knows, and many are made invisible as part of family or private life or culture. For instance, between 40 per cent and 70 per cent of female murder victims are killed by husbands or boyfriends in South Africa.7 Where women are unprotected, children are equally at risk; child abuse is often correlated with domestic violence.

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4 Ibid.
5 Ibid.
7 United Nations General Assembly, op. cit.
2.1.2 Violence against children

Many children grow up in environments that expose them to violence from a very early age. Their safety is not only compromised in the home, but also in schools, care and justice systems, and on the streets of their communities. Exposure to violence in one setting can influence another setting. For example, in contexts of extreme community violence, there tend to be higher levels of family and school violence.

Sexual abuse, and physical and emotional violence, including bullying, are the most common forms of violence against children. In 2008/09 alone, there were 49,000 registered violent crimes against children.\(^8\)

The role of the mainstream media in helping to expose the levels of violence and offering methods to combat violence is key. Currently children account for just 9% of all news stories.\(^9\) When child abuse is reported, it often focuses on the graphic details but seldom the causes, and while the media often carries suggestions for advice, more needs to be done to encourage reporting and prevention. The media also needs to be continually supported to ensure coverage of children adheres to the highest ethical standards to prevent any secondary trauma that may occur as a result of unethical coverage.

While there are also some initiatives focused on digital media, including by major corporations and supported by the Film and Publication Board (FPB), there is a clear need for children to be skilled in critical media (including online) literacy in order to empower children and to help them to protect themselves from harm through digital media.

Perpetrators are overwhelmingly relatives, friends, acquaintances or neighbours, suggesting that most abuse takes place in or nearby the home. For instance, around one-third of parents report using severe forms of corporal punishment against their children.\(^10\) Physical violence also widely occurs at school despite the ban on corporal punishment. A national study on school violence conducted in 2008 found that 15 per cent of learners, approximately 1.8 million children, had experienced some form of violence while at school. This includes corporal punishment, and cruel and humiliating forms of psychological punishment by educators, as well as gender-based violence and bullying by peers.\(^11\) In urban areas, gang activities also contribute to children’s involvement in and exposure to violent acts.

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A 2010 survey found that 24 per cent of children, aged from seven to 17 years, were involved in economic activities. While very little data are available, there is ample evidence that unaccompanied migrant children are particularly vulnerable to exploitation and abuse. The extent of the plight of this socially excluded group remains largely hidden, as lack of knowledge of South African immigration law and fear of authorities, prevent these children from seeking assistance.

Where child trafficking is concerned, South Africa is considered a source, transit and destination country. Children are trafficked within the country from poor rural areas to urban centres such as Johannesburg, Cape Town, Durban and Bloemfontein, and they are also trafficked internationally. Boys are forced to work in street vending, food service, begging, criminal activities and agriculture; girls are subjected to domestic servitude and sexual exploitation, which can include prostitution and pornography. The creation and distribution of child pornography are increasing at an alarming rate in South Africa, due to improved access to information and communication technology (ICT).

Furthermore, numerous harmful cultural practices – such as ‘ukuthwala’ (the abduction, and forcing into marriage, of young girls) affecting girls between 12 and 15 years of age and the resurgence of ‘virginity testing’ of adolescent girls – represent a form of sexual abuse and a violation of human rights.

However, only a small proportion of acts of violence against children is reported and investigated, and few perpetrators are held to account. Violence is under-reported for various reasons. Very young children lack the capacity to report violence. Children often fear reprisals by perpetrators or interventions by authorities, both of which may worsen their overall situation. In addition, parents may be the perpetrators of violence against their own children, or parents may remain silent when violence is committed by other family members or by powerful members of the community or society.

Sexual offences are often committed against young children

\[
\begin{align*}
29\% \text{ of all sexual offences against children involve children aged 0 - 10 years.}^{16}
\end{align*}
\]

\[
\begin{array}{|c|c|c|}
\hline
\text{Age Group} & \text{Reported cases (2009 - 2010)} \\
\hline
0 - 10 years & 8,061 \\
11 - 14 years & 8,390 \\
15 - 17 years & 10,967 \\
\hline
\end{array}
\]

\[^{12}\text{Statistics South Africa (2010) Survey of Young People}\]
\[^{13}\text{U.S. Department of State, op. cit.}\]
2.1.3 Emerging issues

In addition to the dynamics mentioned above, the South African context highlights a number of key emerging issues related to VAWC. These include:

**Cyber-bullying:** The role of internet, cellular and cyber technologies in violence is garnering increasing attention in the South Africa media, although the issue has yet to receive significant attention from researchers. South Africa is the fourth fastest-growing mobile market in the world, and several high-profile cases in which cell phones have been implicated in violence and bullying suggest that cyber-bullying is likely to become an increasingly important component of the violence dynamic.\(^\text{17}\) Cyber-bullying is not confined to any particular domain, but a study by the Centre for Justice and Crime Prevention (CJCP) revealed that there is a direct relationship between offline and online bullying. The CJCP report for the Department of Basic Education (DBE) noted that 20 per cent of learners had experienced cyber-bullying in 2012. While worrying, this form of violence is still less prevalent than other forms in the school setting.\(^\text{18}\)

**‘Corrective’ rape of lesbians:** Although the Constitution and legal system in South Africa ensure equality, social acceptance is generally lacking, especially outside of urban areas. ‘Corrective’ rape is used as a ‘punishment’ for people who are gay or do not fit traditional gender roles (usually women).\(^\text{19}\) Because women often have less control over their economic situation, which creates economic vulnerability, they have less control over their own sexual activities. Poor black women who live in townships are more likely to become victims of corrective violence, and gay women are more likely to be isolated with little support, which increases their chances of being targeted. Crimes based on sexual orientation are not expressly recognised in South Africa; ‘corrective’ rape reports are not separated from general rape reports. In December 2009, there had been 31 recorded murders of lesbians in South Africa since 1998, but only one had resulted in a conviction.\(^\text{20}\) Under-reporting is high for sexually violent crimes, thus the number of ‘corrective’ rapes is likely to be higher than what is reported.\(^\text{21}\)

**Violence against elderly women:** Rape perpetrated against grandmothers has increased alarmingly, and although the South African Police Service (SAPS) does not keep statistics of crimes perpetrated against the elderly, media reports in recent months paint a bleak picture.

**Albinism and social exclusion:** People with albinism are the most marginalised due to a genetically inherited disorder which makes them look different. They suffer as a result of perpetuated myths which have escalated into abuse and isolated incidences of brutal murder.\(^\text{22}\)

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\(^\text{17}\) Burton, P. (2012) Country Assessment on Youth Violence, Policy and Programmes in South Africa


\(^\text{22}\) Department of Social Development (2013) Youth with Albinism Make Passionate Pleas for Equal Opportunity. Media statement issued on 13 May 2013 on dialogue held in Gugulethu, Cape Town on 11 May 2013
2.2 WOMEN AND CHILDREN WHO ARE MOST VULNERABLE

While violence against women cuts across boundaries of age, race, culture, wealth and geography, there are particular groups of women who are especially prone to be targeted for violence. These include, but are not limited to, women with disabilities; destitute women; women in institutions or in detention; older women; lesbians, bisexual and transgender women; and women living with HIV and AIDS. Migrant and refugee women and children are also disproportionally exposed to violence because they often lack local support structures and family protection.

A recent study conducted in the Eastern Cape, KwaZulu-Natal and Western Cape clearly illustrates the multiple risks and prevalence of violence against women based on their HIV-positive status. In fact, it is well documented that violence against women and HIV are mutually reinforcing. While violence against women exacerbates women’s risks and vulnerabilities to HIV exposure and transmission, a positive HIV status further exacerbates women’s risks and vulnerability to violence, abuse and other rights violations.

Children tend to be vulnerable to violence just by virtue of their age and having less capacity than adults to protect themselves. However, there are certain groups of children that are uniquely vulnerable to violence. These include those living in HIV-affected households; migrant children; children with disabilities; and children living without biological parents or those who are deprived of a family environment, including children living in institutions and detention or in child-headed households (CHHs). About 90,000 children are believed to be living in CHHs, while there are an estimated 3.7 million orphans in South Africa – close to half of them having lost their parents to AIDS-related diseases. There is nothing more traumatic for a child than to see a parent die. Added to this tragedy is the loss of adult guidance and protection. Children without proper adult care are more likely to be abused, exploited and perform poorly at school. This may also result in depression, anxiety and post-traumatic stress disorder. Many orphans and vulnerable children or children abandoned or neglected by their parents slip further into poverty once the family’s main breadwinner stops working or dies. Losing a parent or caregiver or being abandoned often entail an unregistered birth and losing access to social grants, education and healthcare, as well as an increased risk of becoming involved in child labour.

Other risks for children are associated with living and working on the streets, and living in communities where inequality, unemployment and poverty are highly concentrated, such as in the townships and former homelands.

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23 Aids Legal Network (2012) Gender Violence and HIV — Perceptions and Experiences of Violence and Other Rights Abuses against Women Living with HIV in the Eastern Cape, KwaZulu-Natal and Western Cape, South Africa
24 Children’s Institute, University of Cape Town (2012) South African Child Gauge 2012
2.3 CAUSES AND CONTRIBUTING FACTORS

There is no single cause of VAWC; rather, it arises from a complex interplay of personal, situational and socio-cultural factors that combine to cause violence. As illustrated in the figure below and based on the ‘ecological model’, individuals, including children, influence their social environments, their families, communities and wider society. At the same time, the various contexts of the social environment influence one another as well as the individual. Risk factors and protective factors found to be associated with violence occur at these different levels.

Potential risk factors for violence against children include, for example, the age and sex of the child; a breakdown of community and family structures due to apartheid dislocation; parental absence due to HIV and AIDS; alcohol and drug abuse; neighbourhood disadvantage; poor school attachment; influence of the media through, for instance, violence-supportive messaging; migratory patterns; inequality, poverty and unemployment; societal acceptance of violence; harmful social norms, attitudes and practices towards children; impunity for perpetrators of violence; and a high incidence of general violent crime in society.

Potential protective factors may include high self-esteem of the child; stable family units and strong attachment bonds between parents and children; availability of child care facilities; high bonding to school; social support in the community; and pro-social attitudes in society. Protective factors in one setting may compensate for risk in another setting. However, the more risks to which children and women are exposed, the less likely they are to be protected from violence.

The root causes of violence against women lie in historically unequal power relations between men and women, and pervasive discrimination against women in both the public and private spheres. Patriarchal disparities of power, discriminatory cultural norms and economic inequalities serve to deny women’s human rights and perpetuate violence. Within the broad context of women’s subordination, specific causal factors for violence can be identified, which include, for example, the use of violence to resolve conflicts and doctrines of privacy. Individual or family behaviour patterns, including histories of abuse and harmful use of alcohol, have also been correlated with an increased risk of violence.27

Various efforts by civil society to address gender-based violence and research aimed at understanding its causes have largely focused on women, especially in the media. Despite the passage of positive legislation aimed at addressing gender-based and sexual violence, it remains under-resourced, under-utilised, under-capacitated and poorly implemented. The responsibility for the eradication of violence has seemingly been placed in the hands of women through their empowerment. While these shifts in gender relations are crucial and evident, they have inadvertently placed the onus to solve violence on women, leaving men – most commonly the perpetrators of violence – out of the equation, and excluded from the solution. Most strikingly, efforts to understand and reduce violence have generally avoided considering men as the solution themselves.

Construction of gendered identities relies on the gendered messages communicated in the media, as well as on a multitude of environmental influences. As the expression goes, the media does not tell us what to think, but rather what to think about. Media news framing and priming can influence what people think about and arguably how certain issues, including gender roles, are thought about. The pervasiveness and impact of the media, from traditional to online social media, mean that it can be used as a tool towards social change. If men were more frequently exposed to media content that portrayed men positively in caretaking positions, professionally and personally, would the effect be such that men would see their roles as caretakers as more socially acceptable, leading towards de-stigmatisation? In addition, could this shift lead to reduced levels of gender-based violence?

2.4 IMPACT ON WOMEN

Violence against women causes untold misery, cutting lives short and leaving countless women living in pain and fear. It can lead to serious short- and long-term physical, mental, sexual and reproductive health problems for survivors and their children. The fundamental inequality of women in the workplace and society contributes to sexual harassment against women, and although the Employment Equity Act of 1998 requires employers to have provisions that penalise such discriminatory behaviour, it has not impacted on the harassment of women in the non-working environment. The South African Government, through the Protection from Harassment Act of 2011, seeks to address this inconsistency, but the impact of this legislation on reducing this demeaning practice towards women remains to be seen.

27 United Nations General Assembly, op. cit.
Depression is one of the most common consequences of sexual and physical violence against women. Women subjected to violence are more likely to abuse alcohol and drugs, and to report sexual dysfunction, suicide attempts, post-traumatic stress and central nervous system disorders. Physical injuries can include broken bones and chronic health conditions. Reproductive health consequences can include gynaecological problems, sexually transmitted infections, unwanted pregnancies and problems with childbirth.

Studies also reveal clear links between gender inequality, violence against women, and HIV and AIDS. A survey among 1,366 South African women showed that women who were beaten by their partners were 48 per cent more likely to be infected with HIV than those who were not. Furthermore, the national HIV prevalence rate is 13.1 per cent in the male population aged between 15 and 49 years, whereas the prevalence among women aged 15 to 49 years is 22.5 per cent.

Violence against women also harms families and puts children significantly more at risk of health problems, poor school performance, and behavioural and emotional disturbances. These can also be associated with perpetrating or experiencing violence later in life. Harrowingly, violence can destroy the lives of women, but more so, it can take their lives away, with 2,286 women murdered in 2011/2012 which represented 14.6 per cent of contact crimes reported against women.

2.5 IMPACT ON CHILDREN

The consequences of violence against children vary according to its nature and severity. But the short- and long-term repercussions of violence can be devastating. In the most severe cases, it can result in early death.

Research by the Medical Research Council (MRC) from 2009 showed that South Africa had nearly three child homicides per day, with police statistics in 2011/2012 highlighting approximately two child murders per day. This discrepancy does not demonstrate a drop in child homicide, as some child abuse deaths go unreported or are misclassified. However, the impetus of the MRC study served to highlight that child homicides had a ‘distinct age and gender pattern’, with the highest rates for girls (57 per cent) in the zero to four year age group and the highest rates for boys (53 per cent) in the 15 to 17 year age group.

Furthermore, exposure to violence in early childhood can affect the maturing brain. Prolonged exposure in children, whether as victims of, or witnesses to, violence, can disrupt nervous and immune systems and lead to social, emotional and cognitive impairments, as well as behaviours that cause disease, injury and social problems.

29 Department of Health (2011) National HIV and Syphilis Prevalence Survey South Africa 2010
32 Ibid.
33 Ibid.
34 Ibid.
35 Ibid. Page 2
36 Ibid.
Violence can result in health-risk behaviours such as substance abuse and early sexual activity. Related mental health and social problems include anxiety and depressive disorders, impaired performance, memory disturbances and aggressive behaviour. Violence can push children away from their families into living and working on the streets and into engaging in child labour for self-support when cared for by extended or elderly family members.

### 2.6 IMPACT ON FAMILY FUNCTIONING

South Africa is a diverse society with families mirroring the richness of this diversity. Stable, healthy families are at the heart of strong societies. It is within the family environment that an individual’s physical, emotional and psychological development occurs.

Dysfunctional families characterised by conflict, abuse, neglect, fear and misbehaviour of children have the ability to foster and legitimise oppression of certain family members, especially women and children. In the development of the White Paper on Families, key factors affecting families were identified, including poverty, inequality, unemployment, housing, HIV and AIDS, absentee fathers, crime, substance abuse, gender-based violence, teenage pregnancy and moral degeneration. A study conducted by the World Health Organisation (WHO) and John Moores University found that involvement in drug use can increase the risks of being both a victim and/or perpetrator of violence, while experiencing violence can increase the risks of initiating illicit substance abuse. Therefore, in families where the primary caregivers or guardians are prone to excessive substance abuse, family members, especially those who are most vulnerable, are at a higher risk of violence.

Violence and the threat of violence in the home creates fear and destroys normal family functioning. It may, for example, turn family members against each other or create alliances of some against others. One family member may also be blamed for all family problems. In turn, this may deepen and solidify unhealthy dynamics among family members. Violence may cause the family to separate, leaving children abandoned at home with elderly caregivers, or pushing children into living and working on the streets. It is estimated by the National Alliance for Children living and working in the street (NASC) that about 13,275 children are living and working on the streets across South Africa, while figures in the 1990s based on global estimates gave a number between 9,000 and 10,000 for South Africa. The Department of Social Development (DSD) seeks to address this phenomenon through its strategy and guidelines for children living and working on the streets.

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37 Department of Social Development (2013) *White Paper on Families*
38 Ibid.
40 Department of Social Development (2011) *Strategy and Guidelines for Children Living and Working on the Streets*
2.7 SOCIAL AND ECONOMIC COSTS

The social and economic costs of VAWC are enormous and have ripple effects throughout society. The costs of violence against women include the direct costs of services to treat and support abused women and their children, and to bring perpetrators to justice. The indirect costs may include lost employment and productivity, and costs in human pain and suffering. Gender inequality and violence against women also constitute one of the key drivers of the HIV epidemic in South Africa, which continues to be the most affected country in the world in terms of absolute numbers.41

Direct costs of violence against children may include medical care, legal and social welfare services, and alternative care for children without adequate family care. Indirect costs may include possible lasting injury or disability, psychological costs or other impacts on a victim’s quality of life, disruption or discontinuation of education, and productivity losses in the future life of the child. They also include costs associated with the criminal justice system as a result of crimes committed by children who have experienced violence.

In fact, violence places at risk not only children’s health, but also their ability to learn and grow into social, responsible and actively contributing citizens who can create peaceful, non-violent families and communities. In other words, it is a self-perpetuating cycle: social and economic inequalities increase exposure of children to inadequate care and protection. At the same time, inadequate care and protection exacerbate inequity and diminish children’s life chances, further increasing social and economic inequalities. This is particularly relevant for South Africa, which remains one of the most unequal countries in the world, as measured by the Gini coefficient.

The Gini coefficient varies between zero, which reflects complete equality, and one, which indicates complete inequality. In the South African context, the Gini coefficient has for the last two decades remained at a value that is significantly higher than 0.5, which is unacceptably high.

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Overall, VAWC not only violates human rights, but also reinforces intergenerational cycles of poverty and inequalities, and therefore hinders progress towards achieving all of the MDGs and the NDP.

Overview of the main interrelated risk factors as well as the main long-term effects of VAWC in South Africa
3. Integrated Programme of Action Addressing VAWC

The proposed POA:VAWC has been informed by a range of evidence and research findings, stakeholder consultations and relevant reports from government departments, as well as parliamentary feedback on current government plans. The programme provides a framework for a comprehensive and systemic approach to address VAWC, aiming to achieve substantial and lasting change.

3.1 GOVERNMENT POLICY AND RESPONSE

Important progress has been made since the end of apartheid in 1994 in realising the protection of rights of all women and children in South Africa, in accordance with the main human rights treaties ratified by the State, including CEDAW, CRC and the Convention on the Rights of Persons with Disabilities (CRPD).\(^\text{42}\)

New laws and policies, progressive public spending and reorganisation of administrative systems have contributed to accelerating the fulfilment of human rights. For example, over 10 million children are now benefiting from the child support grant, and about 500,000 from the foster care grant, and nearly two million women are benefitting from the old-age pension scheme. Recent changes in government’s response to HIV have also been far-reaching, including state provision of treatment for all HIV-infected infants at government-run health facilities, and provision and care to HIV-positive pregnant women earlier in their pregnancies to prevent new paediatric infections. Near-universal access to primary education has been achieved, and the Government is increasingly focusing on improving the quality of education. In addition, issues such as gender empowerment and learners’ rights and responsibilities have been introduced in the curriculum to actively promote a positive culture towards human rights in schools.

The establishment of the National Population Register marked a significant milestone in 2010, ensuring that the first right of the child and the rights of all women and men to be registered would be achieved. South Africa is already very close to universal birth registration, with an estimated 92 per cent of all children under five having their birth registered with the state.\(^\text{43}\) The legislative requirement is that newborn babies must be registered within 30 days after birth. The Department of Home Affairs (DHA) has steadily met this requirement, with the number of newborns registered having increased by

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\(^{42}\) A detailed list of ratified human rights treaties and national legal instruments is included in Annex A

11.2 per cent from 500,524 in 2010/11 to 556,762 in 2011/12. Out of a total of 1,098,138 actual birth registrations (up to 14 years) in 2011/12, the figure for newborn babies registered within 30 days accounts for 51 per cent. The total number of first birth certificates issued during 2011/12 was 1,199,467 compared with 1,091,511 for the 2010/11 financial year, accounting for a 10 per cent growth rate.44

Furthermore, the country has an array of progressive and internationally competitive laws, programmes and policies that are specifically intended to protect women and children from all forms of violence. Key pieces of legislation include the Children's Act No 38 of 2005, the Child Justice Act No 75 of 2008, the Criminal Law (Sexual Offences and Related Matters) Amendment Act No 32 of 2007, the Older Persons Act No 13 of 2006, the Domestic Violence Act No 116 of 1998, and the Films and Publications Amendment Act No 3 of 2009. In addition, the Prevention and Combating of Trafficking in Persons Act No 7 of 2013 aims to protect women and children against trafficking. The Marriage Act No 25 of 196145 states that no boy under the age of 18 years and no girl under the age of 15 years shall be capable of contracting a valid marriage except with the written permission of the Minister of Home Affairs or any officer in the public service authorised thereto.46

The key national policies aimed at protecting women and children against violence include the National Policy Framework on Child Justice and the National Policy Framework on the Management of Sexual Offences, which were tabled in Parliament in 2012.

Further, a number of national committees have been established to monitor the implementation of inter-sectoral national policies. These include the Inter-sectoral Committee on Child Justice and the Inter-sectoral Committee on the Management of Sexual Offences which are tasked by the respective pieces of legislation.

Specific programmes and structures put in place to translate laws and policies into action include, amongst others:

- The establishment of multi-sectoral partnerships such as the National Council on Gender-Based Violence (NCGBV) and the IMC to investigate the root causes of VAWC;
- The Justice, Crime Prevention and Security (JCPS) cluster, the IMC and the National Planning Commission mandated to monitor the implementation of Outcome 3 of the Delivery Agreement titled ‘All People in South Africa are and feel safe’;
- The National Child Care and Protection Forum (NCCPF) tasked with the national monitoring of the implementation of the Children’s Act on an inter-sectoral basis; and
- The National Domestic Violence Inter-sectoral Committee tasked with the national monitoring of the inter-sectoral implementation of the Domestic Violence Act and the National Victim Empowerment Management Forum.

Specific programmes further include the establishment of a Sexual Offences and Community Affairs (SOCA) unit within the National Prosecution Authority (NPA); the nationwide roll-out of hospital-based one-stop Thuthuzela Care Centres (TCCs) for

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45 Marriage Act No 25 of 1961, as amended
46 Ibid, section 26(1)
survivors of sexual violence; the development of a Victim Empowerment Programme (VEP); the introduction of the Victims’ Charter for promoting justice for victims of crime; the establishment of specialised Family Violence, Child Protection and Sexual Offences (FCS) investigation units; the planned reinstatement of Sexual Offences Courts (SOCs); the Khuseleka One Stop Centres and the One Stop Child Justice Centres. At school level, the special programmes include the establishment of an early warning system to identify and report cases of violence, the roll-out of the School Safety Framework which also aims to link schools to local police stations and establish Safe School Committees under the DBE School Safety programme. Various awareness-raising programmes focus on issues such as the prevention of school violence including bullying, rape, sexual assault and child pornography, as well as The ‘Every Day Heroes’ programme and National Child Protection Week which aim to reduce the incidence of child abuse, neglect and exploitation in communities.

While significant work has been undertaken, many of the current efforts and approaches to address VAWC tend to be fragmented and uncoordinated, resulting in insufficient accountability by all stakeholders involved. The National Council on Gender-Based Violence (NCGBV) recognises, for example, the “need for strong political leadership and the meaningful participation of all sectors of civil society in the multi-sectoral national response to gender-based violence”.47 This Council is primarily tasked to ensure a fully coordinated response, both by government and civil society, to address and prevent gender-based violence in the country.

Furthermore, most interventions, while valuable, focus on response services only, and therefore do not sufficiently address the underlying causes of violence to stop VAWC before it occurs. This form of intervention, often termed ‘symptomatic intervention’ or ‘crisis management’ in relation to VAWC, is compounded by a lack of financial, human and technical resources to ensure full implementation of laws and policies and monitor their enforcement.

Acknowledging these bottlenecks, there is now wide recognition among key stakeholders for the need to slightly shift away from responsive programming towards a preventative approach that addresses the root and underlying causes of VAWC in a holistic and coordinated manner. A holistic approach also requires interventions spanning the continuum from prevention and protection to response and long-term care and support.

The proposed POA:VAWC offers a way of moving beyond a reactive approach and provides a framework for a comprehensive and systematic approach, which aims to achieve substantial and lasting change. Putting a stop to the serious, prevalent and deeply entrenched pandemic of VAWC requires strong political will, clear accountability and the allocation of adequate resources and funding, together with the involvement and practical action of all segments and levels of society.

47 National Gender-Based Violence Council (2011) Request for Comments on National Gender-Based Violence Council
A gradual shift needs to take place from the current emphasis on crisis response to a focus on prevention and early intervention.

3.2 GUIDING PRINCIPLES

The following principles will underpin the programme’s approach to working together in the future:

**Human rights-based approach:** The POA:VAWC is guided by the Constitution of South Africa and uses a human rights-based approach to programming directed at building the capacities of rights holders to claim and exercise their rights and of duty bearers to meet their obligations to respect, protect and fulfil those rights. Non-discrimination, gender equality, freedom and security of persons, and the participation of citizens therefore constitute essential aspects of this approach and a crucial part of the POA:VAWC.

**Participation:** The POA:VAWC will solicit the inputs of women, girls, boys, men and the elderly, recognising the value and importance of their participation towards sustainable solutions to the prevention of violence. This is underpinned by the notion of women’s and children’s own resilience and the understanding of them being active participants in their own protection.

**Inter-sectoral:** The POA:VAWC recognises that VAWC is a complex epidemic that affects all South Africans. A complex issue needs a multi-faceted approach based on practical action across the relevant areas of government, with each playing a very specific role. Reflecting this priority status, the POA:VAWC reflects an integrated government approach, linked to existing government agendas and strategies. It will be led by Ministers across a range of portfolio areas at national, provincial and municipality levels.

**Partnership:** The task of reducing the incidence and impact of VAWC will depend on the collaboration, coordination and partnerships between respective tiers of government in partnership with civil society organisations, academic research institutions, business, the media, beneficiaries and all citizens.

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48 Department of Social Development (2013) Draft National Prevention and Early Intervention Strategy
**Continuum of services:** Services and support to women and children and their families will be comprehensive and delivered in a seamless way, spanning the continuum from prevention and protection to response and long-term care and support. The critical objective is to provide a package of comprehensive, integrated and timely services to women and children in order to prevent or reduce the impact of violence in a planned and systematic way.

### 3.3 GOAL AND OBJECTIVES

The overall goal of the POA:VAWC is: **The elimination of all forms of violence against women and children.**

Given the extent and complex nature of VAWC, this goal is underpinned not just by multi-sectoral and coordinated actions over the next five years, but by directions for the future. The programme is an important foundation in a longer journey to realise the long-term vision of all women and children living free from violence in South Africa.

In view of the above, the POA:VAWC contains a set of mutually reinforcing initiatives across the spectrum of (i) Prevention and Protection; (ii) Response; and (iii) Care and Support. Furthermore, specific cross-cutting system components will be developed and strengthened to give effect to the POA:VAWC. These include supportive legislation, policy and institutional frameworks, adequate resources, organisational capacity, and a comprehensive and evolving evidence base.

Within this overall framework, the main objectives of the POA:VAWC will be to:

1. Prevent VAWC from occurring through a sustained strategy for transforming attitudes, practices and behaviours;
2. Respond to violence in an integrated and coordinated manner by ensuring a comprehensive package of services to affected women and children;
3. Ensure provision of long-term care, support and empowerment of survivors of violence;
4. Ensure provision of reintegration and rehabilitation services for perpetrators of violence; and
5. Strengthen the system at all levels that prevent and respond to violence to ensure accountable and coordinated action across sectors.
A holistic approach requires interventions spanning the continuum from prevention and protection to response and long-term care and support. The framework for the POA:VAWC can be visualised in terms of the following diagram which represents the goal of the programme as the roof of a house that is supported by three pillars: (i) Prevention and Protection; ii) Response; and (iii) Care and Support, as well as by a foundational base: (iv) System Components. The continuum of interventions is represented by the broken orange line. The foundational base includes aspects such as legislation and policies, governance and accountability, inter-sectoral collaboration and coordination, capacity-building, human resources and finances, monitoring and evaluation, and research. Advocacy and communication are seen as an integral part of all three pillars.

A visual description of the POA:VAWC framework
3.4 EXPECTED OUTCOMES AND INDICATORS

The following are the expected outcomes to be achieved through the realisation of the main objectives of the programme, and its successes will be measured against key indicators. Each outcome has a number of proposed time-bound interventions.

1. By 2018, a national enabling environment is created to transform attitudes, practices and behaviours leading to women and children living free from violence in line with human rights principles:
   • Percentage of women who indicate that they feel safe as measured by the Victim of Crime (VOC) survey.
   • Percentage of children who indicate that they feel safe as measured by the VOC survey.
   • Percentage of target population (men and boys) who reject VAWC.
   • Number of people registered and aligned to the South African Government’s biometric system.

2. By 2018, women and children at risk and survivors of violence benefit from improved access to comprehensive, integrated and timely support services:
   • Existence of an integrated national toll-free 24/7 helpline and mobile social media platform providing information, advocacy, support and counselling for victims of violence.
   • Percentage of identified children and women at risk who received support services.
   • Percentage of registered survivors of violence who received medical, legal, counselling and/or social services, disaggregated by sex and age.
   • Increased percentage of prosecution and conviction rate for all crimes against women and children, including murder, attempted murder, all sexual offences, common assault and assault grievous bodily harm (GBH).

3. By 2018, increased number of female and child survivors utilising long-term care, support and empowerment services:
   • Number of victim support workers (VSWs) trained and deployed per province.
   • Number of quality safe house models (‘green’ door or ‘white’ door) established per province.
   • Number of halfway houses providing long-term services for effective social reintegration and rehabilitation.
   • Percentage of registered survivors of violence who received long-term care, support and empowerment services.

4. By 2018, an increased number of perpetrators are enrolled in social reintegration and rehabilitation programmes:
   • Percentage of identified perpetrators who are enrolled in a social reintegration and rehabilitation scheme.
5. By 2018, women and children are better protected from violence through a strengthened system with supportive legislative, policy, institutional frameworks, adequate resources, organisational capacity and a comprehensive and evolving evidence base:
   • Number of legislative and policy frameworks related to violence reviewed and amended.
   • Existence of one designated lead structure in government to direct collaboration and coordination across sectors.
   • Existence of a national human resource strategy for social service professionals, linked to a costed action plan.
   • Existence of a national information management system to collect, record and analyse data on VAWC.

3.5 KEY INTERVENTIONS

Based on research, stakeholder consultations and recommendations, a range of key interventions have been identified, in line with the objectives of the POA:VAWC.

Prevention and Protection

Prevention and protection are at the core of the POA:VAWC with emphasis on addressing the root and underlying causes of VAWC to stop it before it occurs. A specific focus will therefore be placed on transforming attitudes, practices and behaviours to ensure that all South Africans reject VAWC. This will involve actions across different environments and targeting a range of groups, including local communities and schools, as well as working with individuals, particularly men and boys.

   • Support ongoing communication campaigns and community mobilisation to address VAWC.
   • Scale-up the ‘Every Day Heroes Prevention Programme’ in 1,300 wards through a community mobilisation or dialogues approach and use of community radio stations, with the support of the Government Communication and Information System (GCIS).
   • Increase awareness through community dialogues on harmful cultural and traditional practices, such as ‘ukuthwala’.
   • Provide support to strengthen and capacitate families, especially in relation to parenting responsibilities to decrease the vulnerability of children to abuse, neglect and exploitation.
   • Prioritise safety in urban and rural municipality planning to enable local government to play an active role in the planning and implementation of violence prevention programmes. This will include the establishment of safe parks, sport and recreational facilities and firearm-free zones, clearing bushy areas, and providing adequate lighting, including on buses and in taxi ranks, streets, public toilets, marketplaces, clubs and taverns and along pathways to and from schools.
• Develop a national prevention strategy linked to a planned violence root cause analysis and inclusive of all existing government strategic frameworks following the three-pronged approach – violence, gender-based violence and violence against children.

• Carry out systematic and evidence-based awareness-raising and advocacy (for example, UNiTE’s Orange Day Campaign and Soul City’s television series) to address the underlying causes of VAWC and to promote positive, respectful and non-violent behaviour.

• Strengthen school-based and after-school programmes to promote human rights, gender equality and peaceful conflict resolution, including in relation to peer-to-peer violence, and interpersonal relationships.

• Roll out training programmes targeting provincial trainers and school-based officials and all relevant stakeholders on the prevention and management of bullying in schools.

• Implement the National School Safety Framework at provincial, district and school-based level.

• Expand life skills and life orientation programmes with the aim of enhancing boys’ and girls’ knowledge and awareness of, on gender relationships and how they relate to their rights and safety.

• Develop, strengthen and roll out positive parenting courses through early childhood development (ECD) programmes to promote healthy childhood development and positive, non-violent parenting.

• Roll out community dialogues and mobilisation to engage local authorities and civil society organisations in promoting non-violent communities.

• Sensitise journalists and other media professionals regarding VAWC through best practices guidelines and ongoing training, specifically on how to portray VAWC in the media without causing further harm to victims and contributing to levels of secondary victimisation.

• Establish a national police outreach programme to be implemented in schools and local communities to encourage and assist survivors of violence to report incidents to the police.

• Mainstream VAWC into policy initiatives targeting associated factors such as alcohol and drug abuse, access to firearms and socio-economic inequalities.

• Establish a structured programme for the safe transportation of children, including children with disabilities, to and from school utilising pedestrian crossing officers.

• Improve timely issuing of papers that identify undocumented children who have entered the borders of South Africa in line with section 32 of the Refugees Act (No 130 of 1998).

• Educate communities on inter-country diversity and an appreciation for human rights to prevent ethnocentricity of citizens.

• Conduct a study to look at the relationship between unaccompanied children and trafficking.
Response:

A comprehensive, integrated system will provide consistent, coordinated and timely support services to women and children who have been victims of violence. Emergency physical and mental health care, safe accommodation, counselling and access to justice are all essential to enable survivors to escape and recover from violence.

- Establish a coordinated and integrated national toll-free 24/7 helpline and effective helpline service utilising the existing helpline architecture.
- Link online counselling platforms to helpline services through Mxit and cooperation with the telecommunications sector.
- Put in place panic buttons and location-specific services using mobile technology, such as ‘please call me’ facilities.
- Establish and operationalise a national command or response centre to allow for effective national monitoring, coordination and intervention in cases.
- Strengthen coordination and eliminate duplication of prevention and early intervention programmes, including neighbourhood watches and sector policing, and prevention of substance abuse.
- Ensure access to justice for women and children, especially for those with disabilities, through legal empowerment utilising VSWs and other community workers, targeting 1,300 identified wards.
- Develop and implement one integrated service model to provide expert services to survivors and a more effective response from the criminal justice system, targeting the identified 1,300 wards. The establishment and inter-sectoral operation of these centres must be informed by a legal framework so as to ensure sustainable joint accountability.
- Link and strengthen all existing services (1,132 police stations, more than 1,000 health facilities, social work services and shelters) through weekly case management forums that deal with criminal cases and provide for early intervention.
- Re-establish sexual offences courts (SOCs) guaranteeing timely and efficient handling of cases of VAWC.
- Strengthen and scale up existing family courts for early intervention and effective response to child protection cases.
- Harmonise, streamline and link expert services (176 FCS units, 253 dedicated health facilities for cases involving violence against children, 52 TCCs, four Khusuleka One-Stop centres and SOCs) and ensure coordinated roll-out of one-stop services making use of the existing dedicated capacity.
- Develop one model for one-stop services centres and plan the roll-out of these centres in an integrated manner, with provision for increased human, financial and infrastructural capacity and resources.
- Mobilise communities, making use of ward committees, community development workers, community policing forums and community safety forums, to undertake local programmes to protect women and children, according to established guidelines, through (i) local shelters, safe houses, after-school care centres and year-round
recreational programmes; (ii) neighbourhood watches; (iii) community patrol projects; (iv) community based alert systems (such as whistles or vuvuzelas) (v) street and block committees, and (vi) develop guidelines for the functioning of community safety and policing forums.

- First-line protection of children in child-headed households (CHHs) conducted through family visits by social workers, which will include doing assessments and deciding on interventions.
- Awareness-raising among parents and caregivers on violence through the FPB.
- Cyber-safety addressed through the life orientation manual in schools.

Care and Support:

Actions under this pillar aim to prioritise the safety, well-being and long-term empowerment of women and children, while ensuring the accountability and rehabilitation of perpetrators to reduce re-offending.

- Improve the provision of aftercare services.
- Review the current parole system.
- Establish and/or reinforce infrastructures such as shelters for women, boarding facilities for children (in rural and peri-urban areas), safe houses, the allocation of low-cost housing for women and safe transportation.
- Recognition for specialisation in the field of child protection and victim empowerment in government services to ensure effective and efficient service delivery to families, women and children at risk.
- Address social inequalities and income inequities by increasing poverty eradication programmes and improving job creation opportunities for women and youth.
- Recruit, train and deploy victim support workers (VSWs) in nine provinces to offer door-to-door psychosocial support, safety advice, referral services, and facilitate access to action and peer support groups.
- Harmonise, regulate and scale up the provision of the provincial safe house model (‘green’ door/white’ door).
- Develop 52 state-capacitated halfway houses using the Khuseleka model through a mapping process with linkages to existing FCS units, TCCs and other one-stop response services.
- Empower survivors of violence through long-term life skills and social and economic programmes to reduce their vulnerability and build on their resilience.
- Develop and strengthen statutory and non-statutory rehabilitation programmes for perpetrators of violence.
System Components:

The strengthening of the system is vital to the realisation of the objectives of the POA:VAWC to ensure sustainable long-term impact on the lives of women and children, and underpins the overall goal to eliminate violence.

- Use of retired professionals (for example, nurses, social workers and teachers), and community development workers, and upscaling of the Isibindi Model as a vehicle to carry the anti-violence campaign.
- Establish a national baseline for VAWC.
- Review and harmonise all legislation relating to VAWC.
- Provide institutional support, including staffing norms, effective utilisation of existing staff and retention mechanisms.
- Establish a national M&E system.
- Establish an integrated information management system and data sharing portals for effective reporting, programming, monitoring and evaluation.
- Develop national indicators on VAWC.
- Establish a national research and knowledge hub on VAWC.
- Provide pre-service and in-service training for all court personnel, SAPS members, social service professionals and intermediaries on legislation related to VAWC, mindful of people with disabilities.
- Conduct a diagnostic review of violence programming and carry out research on root and underlying causes of violence, as well as emerging issues related to VAWC.

3.6 TIMEFRAME AND WAY FORWARD

The duration of the POA:VAWC will be five years, from 2013 until 2018, with a review process in 2016. Interventions can be grouped into short-term (12 to 18 months), medium-term (18 to 36 months) and long-term (36 to 60 months) activities.

Milestones and costing for the POA:VAWC will need the input of all departments and institutions.
4. Monitoring and evaluation

The main coordinating national body for the implementation of the POA: VAWC will be the Department of Social Development (DSD). Individual key action areas will be managed by the relevant ministries and departments.

A distinction will be made between situation monitoring (that is, monitoring progress towards achieving national goals to which the POA: VAWC contributes) and performance monitoring (that is, M&E of the activities of the POA: VAWC work plan).

Monitoring of the overall progress for women and children will be conducted through collection and analysis of data on their situation, including those who are most disadvantaged, through planned national surveys, subject-specific studies and surveys, and regular statistics from government and non-governmental sources. The Ministry of Women in the Presidency (also referred to as the Department of Women) will take the lead in such processes.

Progress towards planned results will be measured through annual reviews, a mid-term review and specific assessments. Performance monitoring will be conducted jointly by Department of Women (DW) and the Department of Social Development (DSD).

4.1 RESULTS AND RESOURCES FRAMEWORK

The implementation plan is outlined as follows:

The costing of the implementation plan is still to be completed.
PILLAR 1: PREVENTION AND PROTECTION

<table>
<thead>
<tr>
<th>Objective: Prevent violence against women and children from occurring through a sustained strategy for transforming attitudes, practices and behaviours.</th>
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</thead>
<tbody>
<tr>
<td>Outcome: By 2018, a national enabling environment is created to transform attitudes, practices and behaviours, leading to women and children living free from violence in line with human rights principles.</td>
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</tbody>
</table>
| Indicators: Percentage of women who indicate they feel safe as measured by the victim of crime (VOC) survey  
Percentage of children who indicate they feel safe as measured by the VOC survey  
Percentage of target population (men and boys) who reject violence against women and children  
Number of people registered and aligned to the South African Government’s biometric system |

<table>
<thead>
<tr>
<th>Key Interventions (Short-, Medium-, Long-term)</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
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</thead>
</table>
| 1. All departments to support ongoing communication campaigns and carry out systematic, evidence-based awareness-raising and advocacy (e.g. through 16 Days of Activism, Child Protection Week, Orange Day and TV programmes, such as Soul City) to address underlying causes of VAWC and promote positive, respectful and non-violent behaviour. | Number of communities reached through dialogues and awareness campaigns | DSD  
DBE  
DH  
DW  
DJ&CD  
NPA  
DHA  
SAPS | Annual reports from government departments | Campaigns ongoing | Communities identified by January 2014 | 3 Child Protection Week programmes, 16 Days of Activism campaigns, 3 Women’s Month programmes conducted in 1,300 wards by December 2016 | All campaigns completed and evaluated as planned by March 2018 |
<table>
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<tbody>
<tr>
<td>2. DSD to scale up 'Every Day Heroes Prevention Programme' in 1,300 wards through community mobilisation and dialogues, and community radio stations with the support of GCIS.</td>
<td>Number of communities reached through dialogues and campaigns</td>
<td>DSD</td>
<td>Annual reports from government departments</td>
<td>Campaigns ongoing</td>
<td>50 communities mobilised for the scaling up of the 'Every Day Heroes Prevention Programme' in 9 provinces by March 2015</td>
<td>All campaigns completed as planned by March 2018</td>
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<tr>
<td>3. DSD, DW and other departments to increase awareness through community dialogues on harmful cultural and traditional practices (such as 'ukuthwala').</td>
<td>Number of community dialogues held on harmful cultural and traditional practices</td>
<td>DSD</td>
<td>Annual reports from government departments</td>
<td>Number of campaigns conducted by departments</td>
<td>Communities identified per district area in all provinces by June 2014</td>
<td>One community dialogue held in one region in all provinces by December 2016</td>
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<td>Stakeholders</td>
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<td>4. DW and other departments to hold dialogues on issues including child killings and violence against children with disabilities.</td>
<td>Number of dialogues held on child killings and violence against children with disabilities</td>
<td>DSD</td>
<td>Annual reports from government departments</td>
<td>Number of dialogues conducted by departments</td>
<td>Communities at high risk for child killings identified and dialogues planned by October 2014</td>
<td>Evaluation report on interventions on child killings made in communities by March 2018</td>
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<td>5. DSD, including Women’s Ministry and other departments to conduct advocacy campaigns on legislation, such as the Traditional Courts Bill, WEGE Bill and others.</td>
<td>Number of communities reached through advocacy campaigns on various legislation</td>
<td>DSD, DW, DJ&amp;CD</td>
<td>Annual reports from government departments</td>
<td>Campaigns ongoing</td>
<td>10 communities identified and advocacy campaigns conducted by March 2015</td>
<td>3 advocacy campaigns done in each province by December 2016</td>
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<tr>
<td>6. DHA and other departments to educate communities on inter-country diversity and appreciation for human rights to prevent ethnocentricity of citizens.</td>
<td>Number of communities reached on inter-country diversity</td>
<td>DHA, DIRCO, NPA, DSD, DW, DJ&amp;CD</td>
<td>Annual reports from government departments</td>
<td>Educational campaigns in communities ongoing</td>
<td>9 communities identified in 9 provinces and educated on inter-country diversity by March 2015</td>
<td>2 educational campaigns conducted per province by December 2016</td>
</tr>
<tr>
<td>7. Provide support to strengthen and capacitate families, especially in relation to parenting responsibilities to decrease the vulnerability of children to abuse, neglect and exploitation.</td>
<td>Number of families reached through family preservation services and parenting programmes</td>
<td>DSD, DBE, DH, DHA</td>
<td>Annual reports from government departments</td>
<td>Standardised family and parenting programmes for different age cohorts in place</td>
<td>2 family preservation services and parenting programmes for different age cohorts considering language and culture developed in provinces by December 2014</td>
<td>Relevant departments and a number of civil society organisations trained on family preservation services and two parenting programmes rolled out in all districts by June 2016</td>
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<tr>
<td>8. Expand life skills and life orientation programmes aimed at enhancing knowledge and awareness, particularly of girls, on issues related to rights and safety.</td>
<td>Percentage completion of the development of the revised life orientation programme</td>
<td>DBE DSD DH DHA (FPB)</td>
<td>Annual reports from government departments</td>
<td>Life orientation manual in place</td>
<td>50% of the review, revision and endorsement by December 2014</td>
<td>80% of the revised life orientation programme operational at 3% of sample schools by December 2015</td>
</tr>
<tr>
<td>9. Encourage parents, guardians and caregivers to register children for birth certificates in order to obtain social grants.</td>
<td>Number of children registered for birth certificates</td>
<td>DHA DSD DW DBE DH SAPS DJ&amp;CD</td>
<td>Progress received bi-annually from government departments</td>
<td>Awareness campaigns ongoing</td>
<td>2 awareness campaigns per province conducted in all provinces by March 2015</td>
<td>4 awareness campaigns per province conducted in all provinces by March 2016</td>
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<td>All district areas in provinces educated on birth registration campaigns by March 2018</td>
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</tbody>
</table>
### Key Interventions (Short-, Medium-, Long-term)

<table>
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<tr>
<th>10. Prioritise safety in the planning (IDP) processes of municipalities</th>
<th>Indicators</th>
<th>Responsible Party</th>
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<th>2018 (Target)</th>
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<tbody>
<tr>
<td></td>
<td>Number of safety programmes successfully implemented</td>
<td>SALGA Local Government (Municipalities)</td>
<td>Annual reports from SALGA on local municipalities and from departments</td>
<td>Safety initiatives currently planned</td>
<td>Danger spots within communities identified through local government structures and implementation plan approved by March 2015</td>
<td>Safety measures implemented to reduce vulnerability by March 2016</td>
<td>60% of the safety implementation plan rolled out in 1 district in 9 provinces by March 2018</td>
</tr>
</tbody>
</table>

- Prioritise safety in the planning (IDP) processes of municipalities to enable local government, private sector and communities to play an active role in violence prevention programmes (e.g. improve establishment of safe parks and sport and recreational facilities; ensure firearm-free zones; clear up bushes; provide adequate measures to prevent public drinking; provide adequate lighting, including on buses, streets and pathways, and at taxi ranks, public toilets, marketplaces, clubs and taverns).
### Key Interventions (Short-, Medium-, Long-term)

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<tr>
<td>11. Develop a national prevention strategy linked to the planned violence root cause analysis and inclusive of all existing government strategic frameworks following the three-pronged approach: violence; GBV and violence against children.</td>
<td>New integrated violence prevention strategy developed</td>
<td>DSD, DW, JCPS, Social clusters</td>
<td>Endorsed prevention strategy</td>
<td>No national prevention strategy in place to address the root causes of VAWC</td>
<td>Draft prevention strategy for consultation ready by March 2015</td>
<td>Consolidated prevention strategy approved by March 2016</td>
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<tr>
<td>12. Strengthen school-based and after-school programmes to promote human rights, gender equality and peaceful conflict resolution, including peer-to-peer violence, such as cyber-bullying.</td>
<td>Number of school-based programmes developed to reach out to learners</td>
<td>DBE, DSD, DH, DJ&amp;CD, DW, DHA (FPB)</td>
<td>Annual reports from government departments</td>
<td>Various school-based programmes in existence</td>
<td>1 programme on cyber-bullying fully integrated into school-based prevention programmes by December 2014</td>
<td>1 cellular phone awareness game against sexual violence developed by DBE and operational by December 2015</td>
</tr>
<tr>
<td>Key Interventions (Short-, Medium-, Long-term)</td>
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<tr>
<td>13. DHA (FPB) initiate outreach and awareness-raising campaigns on cyber-crime and child pornography to create awareness and educate children, parents and caregivers to prevent abuse and sensitise law enforcement agencies to respond effectively.</td>
<td>Number of relevant awareness-raising campaigns on cyber-crime and child pornography conducted in communities</td>
<td>DHA (FPB) DTPS DSD DW DJ&amp;CD DBE SAPS DH</td>
<td>Annual reports from government departments</td>
<td>Awareness-raising campaigns conducted in provinces</td>
<td>10 awareness-raising campaigns held in communities and law enforcement agencies in 5 provinces by March 2015</td>
<td>50 awareness-raising campaigns held in communities and law enforcement agencies in all provinces by March 2018</td>
</tr>
<tr>
<td>14. Strengthen partnerships around cyber-crime and child pornography issues with relevant and related stakeholders in order to expand market coverage and competitive capability.</td>
<td>Percentage completion of the development of joint partnership activity plan</td>
<td>DHA (FPB) DTPS DSD DBE DH</td>
<td>Annual reports from government department</td>
<td>Existing joint partnership activities identified</td>
<td>20% of the development of strategic and annual joint activity plans by December 2014</td>
<td>70% of the implementation of the strategic plan by December 2015</td>
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<tr>
<td>15. DHA (FPB) to develop classification systems that are responsive to technological advancements.</td>
<td>Number of audits and compliance inspections on physical and online distribution platforms</td>
<td>DHA (FPB) DTPS</td>
<td>Annual reports from government department</td>
<td>Random compliance inspections initiated</td>
<td>Inspection plan finalised by December 2014</td>
<td>50% of audits and inspections achieved by December 2016</td>
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<tr>
<td>16. DHA (FPB) to develop a co-regulatory system with industry to better protect children from exposure to mature and inappropriate content across all platforms, including internet.</td>
<td>Signed agreements with industry on co-regulation Percentage achievement of approved online classification and labelling of content, including an online compliance monitoring strategy</td>
<td>DHA (FPB)</td>
<td>Annual reports from government department</td>
<td>Inadequate self-regulatory environment and lack of internet regulation</td>
<td>Consultations with industry completed by June 2015</td>
<td>Draft regulatory framework developed by June 2016</td>
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<td>17. Link online counselling platforms to helpline services through social media, e.g. Mxit, and develop cooperation with the telecommunications sector.</td>
<td>Percentage completion of development and implementation of harmonised online counselling platforms to reach out to women and children</td>
<td>DC DSD DW</td>
<td>Annual reports from government departments</td>
<td>Various online counselling platforms in place</td>
<td>30% completion of the plan for service delivery by a government and non-profit organisation forum by December 2014 Drafted plan for service delivery by government and non-profit organisation forum by December 2014</td>
<td>75% completion of the harmonisation of online counselling services by December 2016</td>
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<td>18. Sensitise journalists and other media professionals regarding VAWC through best practice guidelines and ongoing training.</td>
<td>Guidelines developed</td>
<td>DC GCIS MMA DHA (FPB)</td>
<td>Annual reports from government departments</td>
<td>No best practices or guidelines in place</td>
<td>Establish a forum to bring media industry and government together, and develop draft guidelines by December 2014</td>
<td>Guidelines approved and training and awareness-raising completed by December 2015</td>
</tr>
<tr>
<td>19. Establish a national police outreach programme to be implemented in schools and local communities to encourage and assist survivors of violence to report to the police.</td>
<td>Existence of police outreach programme in schools</td>
<td>SAPS DBE DHET Civilian Secretariat for Police CoGTA</td>
<td>Quarterly and annual reports from departments and stakeholders</td>
<td>10,000 schools reached by the police outreach programmes in all provinces</td>
<td>2,000 schools reached by SAPS by March 2015</td>
<td>2,000 schools reached by SAPS by March 2016</td>
</tr>
<tr>
<td>20. Strengthening partnerships on the prevention and the provision of intervention services in response to VAWC.</td>
<td>Targeting different structures within various sectors to solicit partnerships in addressing violence</td>
<td>DSD SAPS DW DBE DHET Civilian Secretariat for Police CoGTA</td>
<td>Signed partnerships through memoranda of understanding and reports on progress made from different departments</td>
<td>Commitments pledged by different sectors e.g. SAFA, Athletics SA, other sporting bodies, private sector and faith-based organisations</td>
<td>10 formalised partnerships with different organisations on fighting violence by December 2014</td>
<td>10 additional organisations partnering in the fight against violence by March 2016</td>
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<td>21. <strong>Building systems</strong> that involve all sectors, public, private and civil society, to deal with violence.</td>
<td>Inclusive inter-sectoral forum on VAWC</td>
<td>DSD SAPS DJ&amp;CD DH DW DBE DHA NPA</td>
<td>Annual reports from government departments</td>
<td>Different departmental structures working on initiatives to deal with VAWC</td>
<td>Desktop review conducted on mandates of the various departments and recommendations approved by March 2015</td>
<td>Alignment of the different structures to the coordinating structure of the POA:VAWC by March 2016</td>
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<tr>
<td>22. <strong>Mainstream VAWC into policy initiatives</strong> by targeting associated factors such as alcohol and drug abuse, access to firearms and socio-economic inequalities.</td>
<td>Number of policies and initiatives relating to VAWC mainstreamed</td>
<td>DSD DW SAPS DJ&amp;CD DH DC DAC</td>
<td>Annual reports from government departments</td>
<td>All existing VAWC policies</td>
<td>Policies and initiatives identified by December 2014</td>
<td>Identified policies mainstreamed by March 2016</td>
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<tr>
<td>23. <strong>Establishment of scholar patrol teams</strong> at deserving schools through partnership with Road Safety Traffic Management Corporation.</td>
<td>Percentage completion and roll-out of a safe transportation programme for children</td>
<td>DT DBE</td>
<td>Annual reports from government departments</td>
<td>No safe transport programme in place</td>
<td>30% of the safe transport programme developed by December 2014</td>
<td>70% of the safe transport programme rolled out to sample areas by June 2016</td>
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<td><strong>24. Improve issuing of identification documents for undocumented children who have entered the borders of South Africa in line with section 32 of the Refugees Act (No 130 of 1998).</strong></td>
<td>Number of girls and boys issued with documentation in line with section 30 of the Refugees Act</td>
<td>DHA, DSD</td>
<td>Annual reports from government departments</td>
<td>Review of timelines for issuing documents</td>
<td>One workshop per province conducted with stakeholders that are dealing with unaccompanied minors by March 2018</td>
<td>New timelines operational by March 2018</td>
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<tr>
<td><strong>25. Conduct a study to look at the relationship between unaccompanied minors and trafficking.</strong></td>
<td>Completed study on the relationship between unaccompanied minors and child trafficking</td>
<td>DHA, DSD, DJ&amp;CD, SAPS, DIRCO</td>
<td>Study available</td>
<td>No study available on relationship between unaccompanied minors and trafficking</td>
<td>Terms of reference advertised and partner identified by January 2015</td>
<td>Recommendations incorporated into policy positions on unaccompanied minors by March 2018</td>
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## PILLAR 2: RESPONSE

**Objective:** Respond to violence in an integrated and coordinated manner by ensuring a comprehensive package of services to affected women and children.

**Outcome:** By 2018, women and children at risk and survivors of violence benefit from improved access to comprehensive, integrated and timely support services.

**Indicators:**
- Percentage of identified children and women at risk who received support services
- Percentage of registered survivors of violence who received medical, legal, counselling and/or social services disaggregated by sex and age
- Increased percentage of prosecution and conviction rates for all crimes against women and children (murder, attempted murder, all sexual offences, common assault and assault GBH)

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<tr>
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<tbody>
<tr>
<td>1. Establish a <strong>coordinated and integrated national toll-free 24/7 helpline</strong> and effective helpline service utilising existing helplines.</td>
<td>Number of helplines in place</td>
<td>DSD</td>
<td>Annual reports from government department</td>
<td>Numerous helplines providing services</td>
<td>Coordination meeting held with civil society and telecommunication companies by September 2014</td>
</tr>
<tr>
<td>2. Put in place <strong>panic buttons and location-specific services through mobile technology</strong> and ‘please call me’ service to reflect GBV information.</td>
<td>Existence of panic button and ‘please call me’ service</td>
<td>DSD</td>
<td>Annual reports from government department</td>
<td>Absence of the ‘please call me’ and national panic button scheme</td>
<td>‘Please call me’ programme established with telecommunication company by September 2014</td>
</tr>
</tbody>
</table>
### Key Interventions (Short-, Medium-, Long-term)

<table>
<thead>
<tr>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>National command centre operational by March 2018</td>
<td></td>
</tr>
</tbody>
</table>

#### 3. Establish and operationalise a national command or response centre (similar to NatJoints under SAPS).

- **Indicators**
  - Existence of national command or response centre

- **Means of Verification**
  - Annual reports from government department

- **Milestone**
  - Interdepartmental group established and national command centre launched by March 2015

- **Responsible Party**
  - DSD

- **Means of Verification**
  - Absence of national command centre

- **Milestone**
  - Funds allocated for operation by April 2016

- **Responsible Party**
  - DSD

- **Means of Verification**
  - Interdepartmental group established and national command centre launched by March 2015

- **Milestone**
  - All police stations engaged by December 2015

- **Responsible Party**
  - SAPS

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - DBE

- **Means of Verification**
  - Lack of coordination in early prevention programme

- **Milestone**
  - All police stations engaged by December 2015

- **Responsible Party**
  - DH

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - DJ&CD

- **Means of Verification**
  - Lack of coordination in early prevention programme

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - Helplines

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

#### 4. Strengthen coordination and avoid duplication of prevention and early intervention programmes, including neighbourhood watch and sector policing.

- **Indicators**
  - Number of early intervention programmes providing services

- **Means of Verification**
  - Quarterly and annual reports indicating the extent of implementation of sector policing

- **Milestone**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Responsible Party**
  - SAPS

- **Means of Verification**
  - Number of early intervention programmes providing services

- **Milestone**
  - All police stations engaged by December 2015

- **Responsible Party**
  - DSD

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - DBE

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - DH

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - DJ&CD

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

- **Responsible Party**
  - Helplines

- **Means of Verification**
  - Database on the linking of neighbourhood watch and policing forums to local police stations by December 2014

- **Milestone**
  - Coordinated neighbourhood watch and policing forums programmes implemented by March 2018

#### 5. Ensure access to justice for women and children, especially those with disabilities, through legal empowerment utilising victim support and other community workers, targeting the identified 1,300 wards.

- **Indicators**
  - Number of women and children reached through legal empowerment programmes

- **Means of Verification**
  - Annual reports from government departments

- **Milestone**
  - Roll-out of VSWs to reach 600 wards by December 2014

- **Responsible Party**
  - DSD

- **Means of Verification**
  - Annual reports from government departments

- **Milestone**
  - Roll-out of VSWs to reach an additional 700 wards by March 2016

- **Responsible Party**
  - DJ&CD

- **Means of Verification**
  - Annual reports from government departments

- **Milestone**
  - VSWs providing legal empowerment in 1,300 wards by March 2018

- **Responsible Party**
  - VSWs
<table>
<thead>
<tr>
<th>Key Interventions (Short-, Medium-, Long-term)</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Link and strengthen all existing services (1,132 police stations, more than 1,000 health facilities, social work services and shelters) through weekly case management forums.</td>
<td>Case management programme developed</td>
<td>DSD DH SAPS NPA</td>
<td>Annual reports from government departments</td>
<td>Case management programme not in place</td>
<td>Number of NPA case management forums in place</td>
<td>60% of case management forums in place by December 2016</td>
<td>100% of case management forums in place by March 2018</td>
</tr>
<tr>
<td>7. Re-establish sexual offences courts to ensure timely, sensitive and effective handling of cases of sexual VAWC.</td>
<td>80 sexual offences courts operating</td>
<td>DJ&amp;CD NPA DSD SAPS DH DCS</td>
<td>Annual reports from government departments</td>
<td>9 dedicated sexual offences courts</td>
<td>34 sexual offences courts operating by March 2015</td>
<td>57 sexual offences courts operating by March 2016</td>
<td>80 sexual offences courts operating by March 2018</td>
</tr>
<tr>
<td>8. Strengthen and upscale existing family courts to link up with the OSCs to reduce turnaround times in the finalisation of cases of VAWC.</td>
<td>Percentage completion of upgraded family courts operating</td>
<td>DJ&amp;CD NPA DSD SAPS DH DCS</td>
<td>Annual reports from government departments</td>
<td>5 operating family courts</td>
<td>Revised family courts blueprint developed and approved by March 2015</td>
<td>50% of existing family courts upgraded according to the revised blueprint by March 2016</td>
<td>100% of existing family courts upgraded by March 2018</td>
</tr>
<tr>
<td>Key Interventions (Short-, Medium-, Long-term)</td>
<td>Indicators</td>
<td>Responsible Party</td>
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<tr>
<td>9. Harmonise, streamline and link expert services (176 FCS Units, 253 dedicated health facilities for cases of violence against children, 52 TCCs, 4 OSCs, SOCs) to ensure a coordinated roll-out of one stop services, making use of the existing dedicated capacity.</td>
<td>Percentage completion of the development of a legal framework to develop a new model for OSCs, including the SOCs and family courts</td>
<td>DSD DJ&amp;CD NPA SAPS DH DCS</td>
<td>Annual reports from government departments</td>
<td>Relevant pieces of legislation, policies, blueprints and models SOCs mapping completed</td>
<td>Mapping of existing OSCs and family courts by September 2014 Draft legal framework for OSCs and family courts finalised by December 2014</td>
<td>Legal framework for OSCs and family courts approved by December 2015 Guidelines for the integrated establishment and operations of OSCs and courts developed by March 2016</td>
<td>A new model for OSCs that is linked to SOCs and family courts planned, rolled out and operational by March 2018</td>
</tr>
<tr>
<td>10. Develop and implement one integrated service model to provide expert services to survivors and a more effective response from the criminal justice system, through the following short and longer-term interventions:</td>
<td>Number of women and children utilising one stop services Number of one stop services operating at clinic level</td>
<td>SAPS DH DSD NPA DJ&amp;CD DHA</td>
<td>Quarterly and annual reports on the establishment of case management forum</td>
<td>Not established</td>
<td>Services and case management forums linked to 400 police stations by December 2014</td>
<td>Services and case management forums linked to 800 police stations by December 2015</td>
<td>Services and case management forums linked to all police stations by March 2018</td>
</tr>
</tbody>
</table>

i. Link and strengthen all existing services (1,132 police stations, 1,000+ health facilities, social work services and shelters) through weekly case management forums;

ii. DHA to facilitate the efficient access to documentation where necessary for processing cases at the one stop centres or any other access to services for survivors of violence.
<table>
<thead>
<tr>
<th>Key Interventions (Short-, Medium-, Long-term)</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
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<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mobilise communities, using ward committees, community development workers and CCPFs to undertake programmes to protect women and children, according to established guidelines, through:</td>
<td>Number of communities reached by violence prevention initiatives</td>
<td>SAPS CoGTA Municipalities, DSD DW</td>
<td>Quarterly and annual reports from SAPS and CPF structures</td>
<td>1,300 wards identified</td>
<td>Guidelines for community forums on violence prevention by December 2014</td>
<td>400 wards mobilised by March 2016</td>
<td>All wards mobilised by March 2018</td>
</tr>
<tr>
<td>i. Local shelters, safe houses, after-school care centres and year round recreational programmes;</td>
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<td>ii. Neighbourhood watches;</td>
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<td>iii. Community patrol projects;</td>
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<tr>
<td>iv. Community based alert systems (whistles or vuvuzelas);</td>
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<tr>
<td>v. Street and block committees;</td>
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<tr>
<td>vi. Develop guidelines for policing forums.</td>
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</tr>
<tr>
<td>Assessment of children in CHHs through visits by social service professionals.</td>
<td>Number of CHHs reached through assessments by social service professionals</td>
<td>DSD</td>
<td>Annual report received from DSD</td>
<td>Ongoing assessments of children in CHHs by social service professionals</td>
<td>40% of children assessed on the CHHs register by social service professionals by March 2015</td>
<td>60% of children assessed on the CHHs register by social service professionals by March 2016</td>
<td>All CHHs assessed on the CHH register and receiving services by March 2018</td>
</tr>
<tr>
<td>DHA to coordinate documentation for members of child and youth headed households where identity document or birth certificates are not available.</td>
<td>Number of identity documents issued to CHHs</td>
<td>DHA</td>
<td>Annual report received from DHA</td>
<td>No baseline available</td>
<td>Identity documents issued to children in 30% of CHHs by March 2015</td>
<td>Identity documents issued to children in 60% of CHHs by March 2016</td>
<td>All children identified in CHHs received identity documents by March 2018</td>
</tr>
</tbody>
</table>
**PILLAR 3: CARE AND SUPPORT**

**Objective:** Ensure provision of long-term care, support and empowerment of survivors of violence.

**Outcome:** By 2018, increased number of female and child survivors utilising long-term care, support and empowerment services.

**Indicators:**
- Number of victim support workers trained and deployed per province
- Number of quality safe house models (‘green’ door/’white’ door) established per province
- Number of halfway houses providing long-term services for effective social reintegration and rehabilitation
- Percentage of registered survivors of violence who received long-term care, support and empowerment services

<table>
<thead>
<tr>
<th>Key Interventions (Short-, Medium-, Long-term)</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Improve the provision of aftercare school services.</td>
<td>Number of children benefiting from aftercare school services</td>
<td>DSD, DBE</td>
<td>Annual reports from government departments</td>
<td>Various aftercare school services</td>
<td>Identification and linking of schools to aftercare services by December 2014</td>
<td>Implement plan on aftercare school services by June 2015</td>
<td>Aftercare school services attached to all schools by March 2018</td>
</tr>
<tr>
<td>2. Establish new and strengthen existing infrastructure, that is, shelters, low cost housing for women, boarding facilities for children (in rural and peri-urban areas) and safe houses and transport for women and children.</td>
<td>Number of women and children benefiting from infrastructural improvements</td>
<td>DPW, DSD, DW, DT</td>
<td>Annual reports from government departments</td>
<td>Various shelters in operation</td>
<td>Mapping of all the necessary infrastructure by March 2015</td>
<td>Develop an implementation plan with budget allocation for infrastructure improvement and/or establishment by March 2016</td>
<td>Improved and increased infrastructure by March 2018</td>
</tr>
<tr>
<td>Key Interventions (Short-, Medium-, Long-term)</td>
<td>Indicators</td>
<td>Responsible Party</td>
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<tr>
<td>3. Recognition for specialisation in the field of CP and VEP in government services to assist effective and efficient service delivery to families, women and children at risk.</td>
<td>Number of specialisation fields in CP and VEP established</td>
<td>DSD DJ&amp;CD DH SAPS DBE</td>
<td>Annual reports from government departments</td>
<td>Develop a document on specialisation of all relevant fields in CP and VEP by March 2015</td>
<td>Legal framework on the implementation of the identified specialised fields approved by December 2016</td>
<td>Training of specialists in the approved fields by March 2018</td>
<td></td>
</tr>
<tr>
<td>4. Address social inequalities and income inequities by increasing poverty eradication programmes and improving job creation opportunities for women and youth.</td>
<td>Number of women and children reached through poverty alleviating programmes</td>
<td>DSD DTI DPW DAC</td>
<td>Annual reports from government departments</td>
<td>Inter-departmental task team established to map out programmes by March 2015</td>
<td>Costed implementation plan for up scaling identified programmes by March 2016</td>
<td>Harmonised programmes reaching targeted beneficiaries by March 2018</td>
<td></td>
</tr>
<tr>
<td>5. Recruit, train and deploy VSWs in 9 provinces, to offer door to door psychosocial support, safety advice, referral services and facilitate access to action and peer support groups.</td>
<td>Number of VSWs actively providing services</td>
<td>DSD DH</td>
<td>Annual reports from government departments</td>
<td>Limited number of VSWs in operation</td>
<td>VSW recruitment scaled up by March 2015</td>
<td>500 VSWs trained on victim support services by 2016</td>
<td>VSWs providing services in all provinces in 1,300 wards by March 2018</td>
</tr>
<tr>
<td>Key Interventions (Short-, Medium-, Long-term)</td>
<td>Indicators</td>
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<tr>
<td>6. Harmonise, regulate and scale up the provision of the provincial safe house model ('green' door/white' door).</td>
<td>Number of safe houses registered and regulated</td>
<td>DSD SAPS DJ&amp;CD DH</td>
<td>Annual reports from government departments</td>
<td>Various safe houses in operation</td>
<td>Best practice safe house models identified and documented by December 2014</td>
<td>Costed implementation plans on safe house models approved by March 2016</td>
<td>Standardised and approved model used by all safe houses by March 2018</td>
</tr>
<tr>
<td>7. Scale up to 52 state capacitated halfway houses using Khuseleka model with linkages to existing TCCs and other one-stop response services.</td>
<td>Number of halfway houses capacitated providing services</td>
<td>DSD DJ&amp;CD NPA DH SAPS</td>
<td>Annual reports from government departments</td>
<td>5 Khuseleka safe house centres</td>
<td>Mapping completed on the existing halfway houses on the Khuseleka model by December 2014</td>
<td>Operational budget allocated and 30% halfway houses capacitated on the Khuseleka model by April 2016</td>
<td>80% of the halfway houses capacitated on the Khuseleka model by March 2018</td>
</tr>
<tr>
<td>8. Empower survivors of violence through long-term life skills, social and economic programmes to reduce their vulnerability and build on their resilience.</td>
<td>Number of survivors benefiting from economic programmes</td>
<td>DSD DW</td>
<td>Annual reports from government departments</td>
<td>Various programmes currently in existence</td>
<td>Best practice models developed for scale up of existing programmes by April 2015</td>
<td>Best practice programmes scaled up in 4 provinces by April 2016</td>
<td>Best practice programmes scaled up in 5 provinces by March 2018</td>
</tr>
<tr>
<td>9. Develop new and strengthen existing statutory and non-statutory rehabilitation programmes for perpetrators of violence and review the current parole system.</td>
<td>Number of perpetrators utilising rehabilitation programmes</td>
<td>DCS DSD DJ&amp;CD SAPS</td>
<td>Annual reports from government departments</td>
<td>Various programmes currently in operation</td>
<td>Rehabilitation programmes for perpetrators of violence reviewed by June 2014</td>
<td>30% of the revised rehabilitation programmes for perpetrators of violence implemented by March 2016</td>
<td>60% of the revised rehabilitation programmes for perpetrators of violence implemented by March 2018</td>
</tr>
</tbody>
</table>
## FOUNDATION: SYSTEM COMPONENTS

**Objective:** Strengthen the system at all levels that prevent and respond to violence to ensure accountable and coordinated action across sectors.

**Outcome:** By 2018, women and children are better protected from violence through a strengthened system with supportive legislative, policy, institutional frameworks, adequate resources, organisational capacity and a comprehensive and evolving evidence base.

**Indicators:**
- Number of legislative and policy frameworks related to violence reviewed and amended
- Existence of one designated lead structure in government to direct the collaboration and coordination across sectors
- Existence of a national human resource strategy for social service professionals, linked to a costed action plan linked to a costed action plan
- Existence of a national information management system to collect, record and analyse data on violence against women and children

<table>
<thead>
<tr>
<th>Key Interventions (Short-, Medium-, Long-term)</th>
<th>Indicators</th>
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<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Revise national, provincial and local government protocols on addressing cases of VAWC to increase effectiveness and efficiency.</td>
<td>Number of protocols reviewed and amended</td>
<td>DJ&amp;CD, DSD, DW, CoGTA, DH, DBE, SAPS, DHA</td>
<td>Annual reports from government departments</td>
<td>Provincial protocols identified for amendment by December 2014</td>
<td>National protocols developed by December 2015</td>
<td>National protocols implemented by sector in all provinces by March 2018</td>
<td></td>
</tr>
<tr>
<td>Key Interventions (Short-, Medium-, Long-term)</td>
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<tr>
<td>2. Automation of classification processes and effective implementation, including compliance monitoring.</td>
<td>Number of classification and compliance monitoring reports</td>
<td>DHA (FPB)</td>
<td>Annual reports from government department</td>
<td>Classification process not automated</td>
<td>Percentage of automation of classification processes completed by June 2015 Bi-annual progress reports received by March 2015</td>
<td>Legal framework on the classification processes and compliance reviewed and amended by June 2016 Automation of classification processes tested by June 2016 Relevant stakeholders capacitated on the automation of classification process by December 2016</td>
<td>Classification process fully automated by March 2018</td>
</tr>
<tr>
<td>3. Establish an integrated management system across departments for planning, budgeting, M&amp;E and reporting.</td>
<td>Existence of an integrated management system</td>
<td>DJ&amp;CD SAPS NPA DBE DH DHA</td>
<td>Annual reports from government departments</td>
<td>IJS and JCPS structures in place Absence of integrated management system</td>
<td>Inter-departmental task team recommendations for management system developed by December 2014</td>
<td>Integrated system developed and tested by March 2016</td>
<td>Integrated management system operational by March 2018</td>
</tr>
</tbody>
</table>
### Key Interventions (Short-, Medium-, Long-term)

<table>
<thead>
<tr>
<th>4. Establish and implement an M&amp;E system for POA:VAWC</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Existence of M&amp;E system for POA:VAWC</td>
<td>DSD, DW, DPME, DHA, SAPS, DBE, DH, DJ&amp;CD</td>
<td>Results of POA:VAWC available on an annual basis</td>
<td>No results from POA:VAWC</td>
<td>Establish M&amp;E task team for implementation of POA:VAWC by June 2014</td>
<td>Midterm report submitted to IMC:VAWC by March 2016</td>
<td>Long term report on outcomes of POA:VAWC submitted by March 2018</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Finalise agreement on the integration of the two national registers (National Register for Sex Offenders and the National Child Protection Register).</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreement on functional national offender registers</td>
<td>DSD, DJ&amp;CD</td>
<td>Approved agreement in place</td>
<td>National Register for Sex Offender and Child Protection Register</td>
<td>Position on the two registers in place by December 2014</td>
<td>Legal framework on the two registers amended by December 2016</td>
<td>Harmonised and functional offenders registers by March 2018</td>
<td></td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>6. Develop an inter-sectoral training policy and minimum norms and standards to ensure uniform implementation of women and child protection matters.</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inter-sectoral training policy developed to address norms and standards related to women and child protection matters</td>
<td>DSD, DBE, DJ&amp;CD, DW, DHA, DH, SAPS, NPA</td>
<td>Progress reports from government departments</td>
<td>Absence of inter-sectoral training policy</td>
<td>Interdepartmenental task team established to develop an inter-sectoral training policy by October 2014</td>
<td>Inter-sectoral training policy approved by March 2016</td>
<td>Inter-sectoral training protocol operationalised by March 2018</td>
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<table>
<thead>
<tr>
<th>7. Provide institutional support for effective implementation of norms and standards, utilisation of existing staff and retention mechanisms.</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>Milestone</th>
<th>2018 (Target)</th>
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<tbody>
<tr>
<td>Existence of human resources programme on utilisation of existing staff</td>
<td>DPSA, SAPS, DSD, DH, DBE, DJ&amp;CD, NPA</td>
<td>Half yearly progress reports from government departments</td>
<td>Existing staff recruitment and retention mechanism in place</td>
<td>Institutional support mechanism developed by July 2015</td>
<td>Institutional support mechanism approved by October 2016</td>
<td>Institutional support mechanism implemented by March 2018</td>
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<tr>
<td>Key Interventions</td>
<td>Indicators</td>
<td>Responsible Party</td>
<td>Means of Verification</td>
<td>2013 (Baseline)</td>
<td>Milestone</td>
<td>Milestone</td>
<td>2018 (Target)</td>
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<td>8. Use of retired professionals (nurses, social workers,</td>
<td>Existence of human resources programme for retired professionals</td>
<td>DPSA, SAPS, DSD,</td>
<td>Half yearly progress reports from</td>
<td>No programme in</td>
<td>Programme for retired professionals and community development workers</td>
<td>Programme for retired professionals and community development workers</td>
<td>Programme for retired professionals and community development workers</td>
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<td>teachers etc.) and community development workers to carry</td>
<td></td>
<td>DH, DBE, DJ&amp;CD,</td>
<td>government departments</td>
<td>in place</td>
<td>developed by June 2015</td>
<td>approved by December 2016</td>
<td>implemented in different departments by March 2018</td>
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<td>out anti-violence campaigns.</td>
<td></td>
<td>NPA</td>
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<td>9. Ensure that VAWC programmes address social inequalities</td>
<td>Existence of poverty eradication programmes that address VAWC</td>
<td>DSD CoGTA, DPW,</td>
<td>Annual reports from government</td>
<td>Various poverty</td>
<td>Identification of poverty programmes by December 2014</td>
<td>Strengthen and integrated poverty eradication programmes by December 2016</td>
<td>Integrated poverty eradication programmes implemented by March 2018</td>
</tr>
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<td>and income inequities.</td>
<td></td>
<td>DW, DHA, DAC, DHA,</td>
<td>departments</td>
<td>alleviation</td>
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<td></td>
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<td>DHS, DT, DPW</td>
<td></td>
<td>programmes in</td>
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<tr>
<td>10. Establish a national research and knowledge hub for</td>
<td>Existence of operational information and knowledge hub</td>
<td>DSD DPME, SAPS,</td>
<td>Centralised information available</td>
<td>Absence of</td>
<td>Desktop on all research on VAWC conducted by June 2015</td>
<td>Research and information knowledge hub tested for 6 months by June 2016</td>
<td>Research information and knowledge hub in place by March 2018</td>
</tr>
<tr>
<td>VAWC, including M&amp;E of the situation.</td>
<td></td>
<td>DHA, DSD DBE, DJ&amp;CD,</td>
<td>on research and knowledge in the</td>
<td>national research and knowledge hub on VAWC</td>
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<td></td>
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<td>DH, NPA</td>
<td>sector</td>
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</table>
### Key Interventions

<table>
<thead>
<tr>
<th>Key Interventions (Short-, Medium-, Long-term)</th>
<th>Indicators</th>
<th>Responsible Party</th>
<th>Means of Verification</th>
<th>2013 (Baseline)</th>
<th>Milestone</th>
<th>2018 (Target)</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Provide <strong>pre-service, and in-service training on all legislation</strong> related to VAWC, including persons with disabilities, for all relevant departments and stakeholders.</td>
<td>Number of people from departments and other stakeholders trained</td>
<td>DJ&amp;CD SAPS DSD DH Other departments Civil society organisations</td>
<td>Training programme in place Number of people trained</td>
<td>Number of people from different departments as well as stakeholders trained</td>
<td>Develop a pre-service and in-service training programme by June 2015</td>
<td>Training of trainers programme provided to all national departments by June 2016</td>
</tr>
<tr>
<td>12. Conduct a <strong>root cause analysis study and a diagnostic review</strong> of VAWC.</td>
<td>Publication of root cause analysis study Publication of diagnostic review</td>
<td>DSD DPME DBE DH SAPS NPA DJ&amp;CD DW DHA</td>
<td>Published root cause analysis study and a diagnostic review of VAWC VAWC desk review</td>
<td>Root cause analysis study conducted by September 2014 Diagnostic review conducted by December 2014</td>
<td>Study on root cause analysis discussed, analysed and presented to the IMC:VAWC with a plan to address outcomes by March 2015 Diagnostic review discussed, analysed and presented to the IMC:VAWC with a plan to address outcomes by June 2015</td>
<td>Recommendations resulting from the 2 studies implemented by March 2018</td>
</tr>
</tbody>
</table>
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Department of Health (2011) National HIV and Syphilis Prevalence Survey South Africa 2010


Department of Social Development (2011) Strategy and Guidelines for Children Living and Working in the Streets

Department of Social Development (2013) Draft National Prevention and Early Intervention Strategy

Department of Social Development (2013) White Paper on Families

Department of Social Development (2013) Youth with Albinism Make Passionate Please for Equal Opportunity. Media statement issued on 13 May 2013 on dialogue held in Gugulethu, Cape Town on 11 May 2013


National Gender-Based Violence Council (2011) *Request for Comments on National Gender-Based Violence Council*


South African Police Service (2011) *Crime Situation in South Africa*


Statistics South Africa (2010) *Survey of Young People*


United Nations General Assembly (2006) *Secretary-General’s In-depth Study on all Forms of Violence Against Women*


ANNEX A: NATIONAL AND INTERNATIONAL LEGAL INSTRUMENTS

National legal instruments

- Alteration of Sex Description and Sex Act No 49 of 2003
- Basic Conditions of Employment Act No 75 of 1997
- Birth and Deaths Registration Act No 51 of 2002
- Child Justice Act No 75 of 2008
- Children’s Act No 38 of 2005
- Constitution of the Republic of SA 1996
- Correctional Services Act No 111 of 1998
- Criminal Law (Sexual Offences and Related Matters) Amendment Act No 32 of 2007
- Criminal Procedure Act No 51 of 1977
- Domestic Violence Act No 116 of 1998
- Draft Women Empowerment and Gender Equality (WEGE) Bill
- Employment Equity Act No 55 of 1998
- Employment of Educators Act No 76 of 1988
- Films and Publications Amendment Act No 3 of 2009
- Immigration Act No 13 of 2002
- Maintenance Act No 99 of 1998
- Marriage Act No 25 of 1961
- National Health Act No 61 of 2003
- Older Persons Act No 13 of 2006
- Prevention and Combating of Trafficking in Persons Act No 7 of 2013
- Promotion of Equality and Prevention of Unfair Discrimination Act No 4 of 2000
- Protection from Harassment Act No 17 of 2011
- Refugees Act No 130 of 1998
- South African Schools Act No 84 of 1996
- Traditional Courts Bill

International legal instruments

- African Charter on the Rights and Welfare of the Child
- Beijing Declaration and Platform for Action, 1995
- Convention No 182 on the Worst Forms of Child Labour
- Convention on the Elimination of All Forms of Discrimination Against Women, 1995
- Convention on the Rights of the Child
- Convention on the Status of Women
- Hague Convention on International Child Abduction
- Optional Protocol on Trafficking of Human and Body Parts
- Optional Protocol to the UN Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Pornography
- Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, 2000
- UN Convention on the Rights of Persons with Disabilities
ANNEX B: MANDATE, ROLES AND RESPONSIBILITIES OF KEY STAKEHOLDERS

Department of Social Development (DSD)
The Department is responsible for:

- Leading programmes on victim empowerment and reporting to the stakeholder community on victim empowerment issues;
- Providing prevention and early intervention programmes;
- Implementing the Children’s Act and coordinating programmes through the NCCPF;
- Strengthening and supporting non-government organisations and civil society organisations;
- Coordinating victim empowerment programmes with JCPS by providing care and protection to all vulnerable groups and all victims of crime and violence;
- Diagnostic evaluation of VAWC and providing intervention on continuum of services; and
- Coordinating advocacy and awareness programmes in urban and rural populations.

Department of Basic Education (DBE)
The Department is responsible for:

- Creating safe schools by giving support to learners, educators and parents;
- Developing and providing relevant training material;
- Empowering and educating learners about issues of GBV through curricula; and
- Training educators in GBV.

Department of Health (DH)
The Department is responsible for:

- Reporting child abuse, neglect and exploitation to the National Child Protection Register
- Providing HIV testing and counselling, which includes providing post exposure prophylaxis (PEP) to victims of rape;
- Collecting medical evidence especially in response to rape cases;
- Providing comfort packs for rape victims;
- Providing research support through to the MRC;
- Conducting epidemiological research;
- Developing an evidence base and developing national indicators;
- Giving national indicators with regard to rape, assault and femicide through the MRC;
- Providing primary health care through school nurses; and
- Running prevention programmes and social mobilisation campaigns regarding awareness on PEP.

Ministry of Women in the Presidency, or Department of Women (DW)
Note: The responsibilities of the former Department of Women, Children and People with Disabilities (DWCPD) were split, according to an announcement by President Jacob Zuma, in May 2014. Women’s issues became the responsibility of the Ministry of Women in the Presidency, and issues relating to children and people with disabilities fall under the Department of Social Development (DSD).
The Department is responsible for:

- Providing advocacy, which also includes conducting research, building an evidence base and reporting to national, regional and international bodies on various issues, including violence;
• Providing oversight on matters concerning VAWC;
• Coordinating all departments with regard to gender-based violence;
• Offering M&E and an oversight thereof;
• Being accountable for all matters concerning women, children and people with disabilities;
• Monitoring of services to women and children; and
• Promoting the realisation and fulfilment of the rights of women and children across all sectors (including women and children with disabilities).

Department of Justice and Constitutional Development (DJ&CD)
The Department is responsible for:
• Leading the JCPS cluster and ensuring the coordinated implementation of Outcome 3 of the Delivery Agreement;
• Reviewing and amending relevant pieces of legislation;
• Administration of courts;
• Re-establishment of SOCs;
• Coordinating the improvement of the criminal justice system;
• Tabling in annual reports progress with regard to the inter-sectoral implementation of the Criminal Law (Sexual Offences and Related Matters) Amendment Act, 2007 and the Child Justice Act, 2008; and
• Coordinating advocacy and public education programmes to promote and protect the rights of women and children.

National Prosecuting Authority (NPA)
The Authority is responsible for:
• Responding to the violation of rights, prosecution and convictions;
• Continued establishment of TTCs and the management of their operations;

Department of Home Affairs (DHA)
The Department is responsible for:
• Providing some form of identity to the population through the population registry;
• Registering deaths, biometry and documentation;
• Providing response interventions through available data sources, such as biometrics, DNA and identity numbers;
• Preventing the use of fraudulent identity by supplying all persons with a document of identification; and
• Guarding against trafficking, and the filming and publication of individuals on pornographic websites.

South African Police Service (SAPS)
The SAPS is responsible for:
• Crime prevention, proactive policing and crime combating actions targeting VAWC, other vulnerable groups and associated risk factors;
• Law enforcement, in particular targeting contributing factors to VAWC (for example, illegal trade in liquor and drug trafficking);
• Investigating all reported crime and making use of specialised investigation units (such as the FCS unit) for cases involving VAWC;
• Ensuring that the police provide a victim-friendly service (for example, through the use of victim-friendly rooms and facilities at police stations, ensuring police members
are trained in victim empowerment, and establishing working arrangements with other local service providers to ensure coordinated service to victims);

• Working with other departments on prevention programmes like the Safe Schools programme (with the DBE) targeting risk factors for school safety, including addressing substance abuse and bullying, and raising awareness on children’s rights and responsibilities. School safety programmes also ensure that police stations are aware of risk factors to school safety to allow targeted police responses (for example, police patrols or law enforcement operations);

• Giving support to community policing forums (CPF) and work with CPFs to raise awareness of victim’s rights and GBV, and enhance police service delivery;

• Establishing youth desks at police stations with a focus on involving young people in community safety programmes; and

• Providing specialised investigation services through the establishment and strengthening of FCS units.

Department of Telecommunications and Postal Services (DTPS)

Note: According to an announcement by President Jacob Zuma, in May 2014 the responsibilities of the former Department of Communication (DOC) will now be covered by the renamed Department of Telecommunications and Postal Services (DTPS).

The Department is responsible for:

• Developing ICT policies and legislation that create conditions for an accelerated and shared growth of the South African economy, which positively impacts on the well-being of all our people and is sustainable;

• Ensuring the development of robust, reliable, secure and affordable ICT infrastructure that supports and enables the provision of a multiplicity of applications and services to meet the needs of the country and its people;

• Contributing to the development of an inclusive information society which is aimed at establishing South Africa as an advanced information-based society in which information and ICT tools are key drivers of economic and societal development;

• Contributing to e-skilling the nation for equitable prosperity and global competitiveness

• Strengthening the Independent Communications Authority of South Africa (ICASA), in order to enable it to regulate the sector in the public interest and ensure growth and stability in the sector;

• Enhancing the capacity of, and exercise oversight over, State Owned Enterprises (SOE’s) as the delivery arms of Government; and

• Fulfilling South Africa’s continental and international responsibilities in the ICT field.

National Inter-Ministerial Committee (IMC) Addressing Violence Against Women and Children (VAWC)

The IMC is responsible for:

• Facilitating, coordinating, collaborating and synergising the implementation of the POA:VAWC;

• Developing, where needed, and reviewing all existing policies that impact on addressing the issues of VAWC;

• Ensuring the availability of the required financial and human resources to oversee and implement the integrated POA:VAWC;

• Guiding and directing the process of ensuring that services get to victims and survivors, as well as perpetrators of VAWC;

• Establishing relationships with other existing national coordinating structures on services to women and children;
• Consulting and establishing partnerships with a wide range of relevant service providers and stakeholders on integrated services to women and children;
• Facilitating the establishment of inter-departmental structures and/or mechanisms at a provincial and municipal level to ensure the implementation and monitoring of the POA:VAWC based on provincial and local needs; and
• Supporting, monitoring and evaluating the implementation of the POA:VAWC at national, provincial and local levels.

The Role of Civil Society
• The non-profit sector plays a major role in providing support to victims or survivors of violence, as well as support to the perpetrators of violence through advocacy and awareness-raising, as well as care and support initiatives. Civil society organisations across South Africa, which are located within communities, are well placed to provide services, particularly in areas of prevention and protection.

The Role of Businesses
• Partnerships will be sought with businesses to ensure an integrated approach that will support efforts to provide more effective services and to maximise the impact of anti-crime initiatives. Businesses play a vital role in forums for the exchange of information and knowledge, and to interact with government at the required levels in order to achieve their goals of reducing VAWC. These partnerships will be established in accordance with government legislation and policies.

The Role of Research Institutions
• Partnerships will be sought with research institutions to ensure an integrated approach that:
  (i) Builds the evidence base on the scope of GBV, with particular focus on rape, assault and murder, in different settings, and supports the national effort to document and measure this violence and its consequences;
  (ii) Strengthens research and research capacity to assess interventions to address VAWC; and
  (iii) Develops technical guidance for evidence-based VAWC.