THE COPPERBELT MODEL OF INTEGRATED CARE FOR SURVIVORS OF RAPE AND DEFILEMENT
Aim of the project

Multi-Sectoral Comprehensive Response to Sexual Gender Based Violence
Steps undertaken

A) Involvement of stakeholders from the Beginning:

A series of meetings with various stakeholders
B) Understand the problem(s) and its impact

a) Conduct survey

b) Share Key findings
Sharing Key findings

- Most survivors of sexual assault were young
- Most assault survivors who looked for police help or hospital assistance did so well within EC’s window of effectiveness
- Police were the first point of institutional contact for virtually all women seeking assistance
Key findings shared

- Police provision of EC could benefit from 10 to 50 percent of all assault victims who reported to them.
- Over half of all assault cases taken to court resulted in the conviction of the perpetrator.
Interventions

Based on identified gaps and taking advantage of available policies
The intervention comprised two parts

- Provision of EC at selected “first points of contact” (FPC) to victims who might not otherwise receive it within 72 hours of unprotected sex;
- Enhancing the capacity of FPC’s to offer EC through strengthened information dissemination and community outreach
Shared Key Intervention results

- Police can provide EC to survivors of sexual assault
- Collaboration between Police and health care and community providers can increase quality of services resulting in increased reporting.
- Multisectorial approach appears to increase the chances of survivors of RD having access to criminal justice.
- Services were not comprehensive
Challenge

No guidelines for provision of services hence current study has initiated the development protocols:

1. Medical management services
2. Facilitation through Police Services to Criminal justice
3. Psychosocial support
Activities carried out

- Baseline survey has been conducted
- Meetings /workshops with various levels of stakeholders
Lessons learned

The current study has realized that:

- Multisectorial approach demands time
- Limited expertise on SGBV counseling and referral services
Partners

- MoH
- ZPS
- GIDD
- ZASPCAN
- Catholic Diocese
- Population Council

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