Strengthening Multi-Country Collaboration through Training
Mohau Makhosane
SVRI Overview

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

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

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

- Need for a reorientation of health care for SV survivors towards meeting their psychological, social and physical health needs in services staffed by appropriately trained providers.

- Aim is to shift the orientation and perceptions of the role of post rape care from a predominant focus on the collection of medico-legal evidence to the provision of holistic care to meet the short, medium and long term mental and physical health needs of survivors.

- Four Components: partnership, training, policy, and research.
  - promote the development of working partnerships among policy makers, service providers and trainers, and women’s advocates within countries.
  - develop a vision for strengthened health services and inter-sectoral partnership at a country level
  - provide technical support and guidance for processes in country to develop policy, models of care and inter-sectoral working, and training for health professionals, where appropriate supported by research
Ford Foundation Project

- **Multi-year project:**
  - Support countries to develop health sector responses to rape survivors
  - Promote an appropriate & effective interface between police, health & justice sectors

- **Phase 1:** promote development of working partnerships among policy makers, service providers, trainers & women advocates
  - Used SVRI networks and partnerships to establish teams
  - Rwanda, Zimbabwe, Zambia, Uganda, Malawi, Kenya and Nigeria

- **Phase 2 of the project – capacity building through training**
  - Conducted with multi-disciplinary teams: est during phase 1
  - **African Regional Training for Care & Support of Sexual Assault Survivors**
# Participants by country and sector

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### Selection Criteria

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<th>Sector</th>
<th>Criteria</th>
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| Health | o a medical dr / *forensic* professional nurse  
o managing survivors in public health sector  
o providing training  
o involved in policy development at senior level in public sector |
| Justice | o prosecutor / district attorney  
o trains prosecutors |
| Police | o senior member of the police service  
o manages family/child portfolio  
o actively involved in rape/incest/defilement investigations |
Evidence-based in-service training on post-rape care
Training methodology

- Draws on adult education principles
  - Freire – critical reflection
  - Small group work
  - Case studies
  - Role plays
  - Videos
- 10 days and a practical component
Structure & content of training

Module 1: Social context of rape in SA
- Circumstances, context & magnitude
- Sexual Rights
- Rape & the Law

Module 2: Initial approach to rape survivor
- Communication skills
- Taking history & obtaining consent

Module 3: Managing Health problems
- Mental Health
- Prevention & management of pregnancy, infectious diseases & HIV
Module 4: Examination & Documentation

- Medico-legal examination
- Non-genital injuries
- Examining children
- Forensic evidence
- Documentation

Module 5: After the initial consultation

- Follow up visits
- Giving expert testimony in court
- Vicarious trauma
- Monitoring & evaluation of service
Developing skills in giving evidence in court
Next steps ...

SVRI initiative
Ford Project:
Strengthening Responses to Rape –
A Global Project

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

- Champion needed for success of intersectoral collaboration
  - Locally based
  - Influential
  - Interpersonal skills

- Multi sectoral training for comprehensive support of survivors provided by a MDT of professionals in the field

- Development of service level agreements setting out responsibilities is important for monitoring progress

- Establishing contact with the relevant ministries
  - Right people
  - Right portfolio

- Communication difficult without appropriate technologies

- Most countries need mapping: problem, services, resources, skills

- Policies, protocols, management guidelines are crucial for program development

- Social norms are at the heart of the service
I THANK YOU!!!!