

Zivikele Training – Gender Based Violence and HIV/AIDS Project in South Africa

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Executive Summary

The effective and efficient combating of Gender Based Violence (GBV) is an area of great concern and importance to the South African government. It is for this reason that Zivikele Training initiated the HIV/AIDS and GBV project in 2006. The mission of Zivikele Training is to provide complementary service in capacity building of professional persons in order to adequately respond to victims and survivors of GBV in South Africa. The purpose of the project is to contribute to an improved health care worker, police and legal response to cases of GBV. In attaining this purpose it will allow women, men and children to access their constitutional right of administrative action and justice.

The approach to the evaluation is a combination of both objectives-oriented approach and consumer-oriented approach. The focus is on action research through the use of both quantitative and qualitative instruments such as focus group discussions and interviews. The aim is to determine the extent to which Zivikele Training has been able to achieve its set objectives, while identifying areas where possible recommendations could increase the effective and efficient functioning of the organisation.

The research population included the employees of Zivikele Training, their partners in training and accreditation, including Trainco Consulting, the delegates involved in training and the training facilitators. Focus group discussions were held with representatives from different training groups in Gauteng (Department of Health), Western Cape (South African Police Service), Eastern Cape (Child Welfare South Africa) and KwaZulu Natal (South African Police Service). A total of 21 training delegates participated in the focus group discussions held in the four provinces mentioned above. The findings of the research can be summarised as follows:

- **Development of training material:** After extensive research into national and international programmes addressing GBV, Zivikele Training decided to propose the standards prescribed by the World Health Organisation as training material. In almost all cases, this material was supplemented by additional material provided by Zivikele Training, the facilitators, additional speakers and/or relevant customer departments.
- **Training:** The training philosophy proposed by Zivikele Training is inter-sectoral in nature and has proven to be a great strength for the project. Since the material was not accredited, the training also did not have a prescribed format. Different customer departments used different formats, proposed different material and used different methods for facilitation. As awareness of the programme increased, its standards for delivery became more formal (more comprehensive feedback and reporting templates). Because of the non-accreditation, delegates were also not formally assessed and received, in most instances, certificates of attendance – either through Zivikele Training or through their government department. Course facilitators were experts in the areas and this highlighted Zivikele Training's ability to identify the appropriate partner in the successful delivery of their product.
- **Reference material:** Posters depicting occurrences of GBV within communities have been developed and Zivikele Training is in the process of distributing these posters to police stations and Thuthuzela Centres. Through this initiative community members are able to identify appropriate contact persons in the care and counselling of victims of GBV.
- **Web-based assistance:** The Zivikele Training website has been developed and is maintained through a contracted resource. The website has been developed as a link between individuals and Zivikele Training partners. The website offers links to organisations and persons active in the health and welfare industry, including NGOs, while also providing links to all participating government departments. A note of caution is that the website cannot be used as additional educational tool, since

most rural communities targeted for HIV/AIDS and GBV interventions would have difficulty in accessing the product.

- Accreditation of material: Zivikele Training has contracted Trainco Consulting to develop all materials, apply for accreditation, implement a quality management system, guide and support learners, assess learners and ensure moderation of the programme. Trainco Consulting has the infrastructure in place to ensure the successful roll-out of the accredited programme and Zivikele Training is awaiting notification of accreditation from the Health and Welfare Sector Education and Training Authority.
- Monitoring and evaluation: Zivikele Training has maintained meticulous financial and administrative records and all mechanisms to ensure sound governance have been put in place.

The recommendations are based on the general observations drawn from the discussions with the research population and include the following short, medium and long term recommendations:

Recommendation 1: Sustain the current partnerships and ensure annual renewal and evaluation of all current memorandums of understanding and formal agreements.

Recommendation 2: Ensure that facilitators are aware of the target audience well in advance to enable them to contact departmental training coordinators to obtain departmental information such as annual reports and strategic plans.

Recommendation 3: The marketing of training interventions used to increase awareness of the project among NGOs and government departments should include prescriptive guidelines for the selection of delegates.

Recommendation 4: Zivikele Training should familiarise itself with the quality criteria set by the H&WSETA to ensure appropriate external moderation of the project.

Recommendation 5: Zivikele Training should already ensure that the appropriate infrastructure is in place to service the rest of the contract.

Recommendation 6: Provision should be made for submitting an additional funding proposal for delegates requiring RPL while identifying a possible partner for the formal assessment of these delegates

Recommendation 7: Zivikele Training should endeavour to distribute posters to all key departments within the sectors already involved in care and counselling of GBV victims, including police stations, provincial hospitals and local clinics, magistrate offices and welfare offices.

Recommendation 8: Zivikele Training should initiate talks with the respective South African professional medical practitioners associations to ensure mutual recognition of course accreditation.

Recommendation 9: Zivikele Training could expand its current project by enabling an accredited service provider to develop a full qualification in GBV.

Gender Based Violence is recognised as a cross-cutting issue needing an integrated response. Zivikele Training proposes this integrated response through its multi-sectoral approach to training and education. This multi-sectoral approach is further enhanced through the web-based access to multiple stakeholder information. Violence against women, men and children is an area of great concern and a comprehensive plan of action needs to be developed to ensure appropriate and comprehensive response at national, provincial and local levels of operation. Since government does not have the capacity to address this challenge comprehensively, Zivikele Training could be used as vehicle through which collaboration and cooperative government might be realised.

1. Introduction

UNESCO (1999) defines gender based violence (GBV) as:

- physical, sexual and psychological violence occurring in the family;
- physical, sexual and psychological violence occurring within the general community; and
- physical, sexual and psychological violence perpetrated or condoned by the State.

Gender based violence at all levels within the above definition concerns women's sexuality, reproductive capacity and their right to decide over their own bodies. The violence occurs because of a perceived unequal power relationship and while gender based violence affect both male and female, it affects women disproportionately. In today's society gender based violence also extends to issues of trafficking and harmful traditional practices. In the submission made to donor agencies Zivikele Training identified its mission as providing complementary service in capacity building of professional persons in order to adequately respond to victims and survivors of GBV in South Africa. The purpose of the project is to contribute to an improved health care worker, police and legal response to cases of GBV. In attaining this purpose it will allow women, men and children to access their constitutional right of administrative action and justice.

The mid-term review is used as a yardstick to determine the extent to which Zivikele Training has reached its objectives as set out in their proposal documents and logistical frameworks to donors. The purpose of their project is to contribute to an improved health care worker, police and social worker responses to cases of gender-based violence. In attaining this purpose, Zivikele Training proposes to ensure that women, men and children receive effective and efficient response to their constitutional right of fair administrative action and justice. The project is based on the principle of inter-sectoral collaboration, with the main focus departments including the Departments of Health, Welfare, Justice and the South African Police Service. Direct beneficiaries to the project include health care workers, police officers, social workers and public prosecutors. Indirectly, the community becomes the recipient of a more responsive, effective and efficient, inter-sectoral reaction to GBV.

The mid-term review will evaluate the activities of Zivikele Training for the period January 2006–November 2007. The activities will be divided into the following discussion areas:

- Development of training material
- Training
- Reference material
- Web-based assistance
- Accreditation of material
- Monitoring and evaluation

2. Background

Zivikele Training was established in January 2006 and is registered with the Department of Social Development as a non-profit organisation. Zivikele Training has received exemption from taxes and duties from the South African Revenue Service and also received approval as a public benefit organisation. The emphasis of this non-profit organisation is to ensure the skilling and empowerment of public sector departments for a more effective and efficient management of victims of HIV/AIDS and GBV.

The Constitution of Zivikele Training, accepted in 2006, states that the organisation is a legal entity able to exist separately from its members and changes in membership profile, while maintaining the right to own property and other possessions necessary for the effective functioning of the organisation. The organisation is managed by a management committee comprising not less than five (5) office-bearers elected annually during the Annual General Meeting. Currently, the management committee comprises four permanent staff members, while also maintaining a network of outsourced resources or contracts. The Chairperson is the senior project manager responsible for all ministerial and provincial partnerships. The Vice-Chairperson is the financial manager responsible for financial control and ensuring appropriate governance. The National Project Coordinator ensures the development of material, enables training and facilitates inter-sectoral collaboration. An administrative officer is responsible for the daily administration of the organisation, while an external auditor and accounting officer has also been appointed (on contract).

Any two (2) members attending the Annual General Meeting may determine the policies of the organisation. The Constitution of Zivikele Training sets out the duties, obligations, rights, powers and procedures as applicable to those involved in the activities of the organisation. The Department of Social Welfare has approved this Constitution with NPO number 047-771-NPO.

The organisation shares its physical premises with a variety of other organisations in order to keep their administrative costs at a minimum. The philosophy of the organisation is to ensure that the maximum amount of resources is spent on the delivery of their products and not on ensuring an elaborate administrative framework.

The Department of Provincial and Local Government (DPLG) is the custodian department through which initial support was established. The DPLG, as custodian ministry for the 16 days of Activism against Women and Child Abuse, is the most appropriate platform through which political support for the activities to combat HIV/AIDS and GBV may be gained. Zivikele Training has also maintained a number of formal agreements with non-governmental organisations (NGOs) and government departments to ensure the best possible product. Government departments involved in the delivery of the Zivikele Training product include the Departments of Justice, Health, Social Welfare and the South African Police Service. Alignment with the products developed by Child Welfare South Africa also ensures a wider area for implementation and empowerment.

Within the following 18 months Zivikele Training will ensure the accreditation of their training material through the Health and Welfare Sector Education and Training Authority (H&WSETA). Coupled with this, Zivikele Training will establish a database of trained facilitators and assessors able to service the rest of the contract with the accredited material. The long term vision driving Zivikele Training is to build communities for self-reliance. Their emphasis is skills development with a particular focus on the combating of HIV/AIDS and GBV within communities.

3. Research Design

The primary purpose of the research is to determine the current project implementation status. Secondary purposes include increasing and promoting learning, thereby positively impacting programme improvement. The purpose of evaluation should fulfil a three-fold role. Firstly, to gather information that would provide a framework for the improvement of future programmes (formative role). Secondly, judgements will be made based on the programme's value in terms of its total effects (summative role) and thirdly, a learning role, in order to ensure that challenges identified during the implementation of a programme are not duplicated.

The approach to the evaluation is a combination of the following two (2) approaches, namely:

- Objectives-oriented approach focusing on an evaluation of the goals and objectives of the Project in order to establish the major outcomes of the Project; and
- Consumer-oriented approach aimed at improving the products or services delivered by the Project.

The focus is on action research since it joins up practitioners with researchers in a research partnership. Emphasis here is on ongoing improvement of practice by the practitioners themselves based on the recommendations and conclusions made by the researchers. A variety of both quantitative and qualitative instruments were used, including interviewing and the use of focus group discussions for both training delegates and facilitators. The scope of the focus group discussions, developed to interview the delegates involved in the GBV Training, included the following aspects (Annexure A):

- biographical information and sector representation;
- course expectations, duration, content and assessment;
- course facilitation methods and facilitator profile; and
- strengths and weaknesses of course and suggested improvements.

The focus group questions developed to interview the training facilitators addressed aspects such as (Annexure B):

- biographical data and sector representation;
- facilitation background and courses facilitated;
- expectations expressed by Zivikele Training with regard to course content, facilitation, assessment and feedback;
- knowledge of target audience;
- perceptions regarding the structure for and material used in the course;
- proposals for the improvement of training provided; and
- sustainability of the training sponsored by Zivikele Training.

The research population included the employees of Zivikele Training, their partners in training and accreditation, including Trainco Consulting, the delegates involved in training and the training facilitators. Focus group discussions were held with representatives from different training groups in Gauteng (Department of Health), Western Cape (South African Police Service), Eastern Cape (Child Welfare South Africa) and KwaZulu Natal (South African Police Service). A total of 21 training delegates participated in the focus group discussions held in the four provinces mentioned above.

Separate interviews were also conducted with seven course facilitators ranging from police officers, prosecutors, forensically trained medical staff and social workers to independent facilitators active in the field of HIV/AIDS and GBV. Three of the facilitators were independently employed and trained facilitators, while the others were facilitators working within specific government departments including the South African Police Service, Child Welfare South Africa and the Department of Health.

All delegates in the focus group discussions and interviews expressed their willingness to participate in the evaluation and their enthusiasm for the positive results emanating from the experience. Biographical data relating to the course delegates who participated in the focus group discussions are provided for in Annexure C.

4. Project Achievements and Challenges

Some of the achievements of Zivikele Training include:

- ability of Zivikele Training to increase awareness with regard to the importance of correct forensic evidence gathering and the provision of comprehensive care and counselling to victims of HIV/AIDS and GBV;
- increase awareness and education of those involved in the care and counselling of victims of HIV/AIDS and GBV, including police officers, nurses, doctors, prosecutors, social workers and volunteers;
- provide training in the form of workshops and conferences to those involved in HIV/AIDS and GBV activities in all South African provinces;
- assist in the destigmatisation of HIV/AIDS and GBV and creating safe environments for training delegates to discuss their own experiences and become empowered through their involvement in the training programme;
- changed the mindset of multiple sector delegates with regard to the role that each sector plays in the combating of HIV/AIDS and GBV;
- brought multiple sectors together in the formulation of more comprehensive plans of action in the combating of HIV/AIDS and GBV;
- managed to distribute educational material to multiple sectors;
- established a national network of service providers, trainers and subject experts;
- identified appropriate partners in the delivery of training programmes. The emphasis on inter-sectoral collaboration has been one of the most positive spin-offs derived from the training. In some cases, as with the Western and Eastern Cape, the training has led to the establishment of GBV forums and plans of action detailing the collaborative nature of addressing HIV/AIDS and GBV within communities;
- enhanced project sustainability through the continuous efforts in establishing formal partnerships with multiple sectors;
- proposed a solution-oriented approach to the current skills shortage experienced by those involved in the combating of HIV/AIDS and GBV. This contribution is made with no cost to the state while establishing sound relationships with government departments and their respective ministries; and

- developed material that addresses the different inter-sectoral components involved in the comprehensive care and counselling of victims of HIV/AIDS and GBV.

One of the key challenges for the sustainability of Zivikele Training is the accreditation of its course material. The challenge does not only present itself in the delivery of non-accredited material and subsequent value to the delegates, but much more in the process involved in obtaining accreditation for newly established programmes. Training and education in South Africa have to comply with the requirements set forth by the South African Qualifications Authority. A National Qualifications Framework (NQF) has been proposed according to which all qualifications offered by registered service providers are to be judged. The NQF is divided into a number of levels and each level is assigned a standard. Sector Education and Training Authorities (SETAs) have been created to ensure the appropriate registration and quality assurance of formal programmes. The challenge has been great in determining which SETA to accredit the material developed by Zivikele Training with. Due to the inter-sectoral nature of the content of the programme both the Safety and Security SETA (SASSETA) as well as the Health and Welfare SETA (H&WSETA) could possibly be used in the accreditation of the material. However, internal functioning of SETAs is often problematic and slow response timeframes have caused major setbacks in the delivery of project. Zivikele Training decided to approach an already accredited service provider, Trainco Consulting, for assistance with regard to the development of SETA accredited material. This relationship has been a very positive force in the functioning of Zivikele Training. The material developed by Trainco Consulting is currently in its final approval stage with the H&WSETA and the intent is to have the material accredited by the end of March 2008 for roll-out immediately afterwards.

The information gathered from focus group discussions and particularly, interviews with facilitators have led to the realisation that Zivikele Training provides logistical support and gathers multi-disciplinary partners to assist in established training programmes and contribute towards such initiatives with donor funds it secured. As was the case in both Gauteng and the Eastern Cape, the agencies driving workshop interventions or conference, in the absence of public sector resource allocations, utilised Zivikele Training to achieve desired training objectives. Due to the fact that good plans were devised by these agencies, Zivikele Training's involvement was kept to the minimal level. While Zivikele Training representatives attended the training interventions (conferences), it afforded its public sector partners to drive the learning process, providing substantial latitude for the province to use its own material, topics covered, facilitators selected or participant represented. There is a sense that the training interventions were successful due to Zivikele Training's ability to offer funding to support stakeholders and creating an enabling environment. The method of training delivery and material provided was the product of negotiation between Zivikele Training and government. Should the training material developed by Zivikele Training become accredited, the standards can be prescribed and will be an intended and planned positive by-product of their support.

Zivikele Training used the first year to gather information on material available within the provinces. This approach meant they knew there would be limited course outcomes, thus feedback and reporting would not carry the weight it normally should. Templates for reporting and feedback have evolved continuously showing the willingness of Zivikele Training to better its own product over time, and the unfortunate reality is that much training has already been done without its impact being formally assessed. This may be recognised as part of the process of product evolution along the path of attaining accreditation.

In becoming an accredited service provider and offering accredited material much of the above challenges will be positively addressed and Zivikele Training is in the process of accrediting material developed by Trainco Consulting. The plan is to start the roll-out of the accredited material in 2008, and the first assessors training for this has already taken place in November 2007.

Another challenge in education and training is in the selection of appropriate delegates for training. Turnover in the affected sectors is extremely high and continuity is sometimes threatened because of the abnormal attrition rates. The result of this is that retraining becomes a major focus area and plans have to be made to ensure that sectors are trained on a continuous basis, in order to make provision for newly employed staff to also become skilled in the care and counselling of victims of GBV. The multi-sectoral, multi-disciplinary approach that Zivikele Training is advancing should get government buy-in and public sector should drive this as a business process with potential for cross populating skills.

5. Findings

5.1 Development of Training Material

During 2006 Zivikele Training decided to focus on the following topics to be covered through their training, including:

- Forensics and evidence;
- Crime scene management;
- Giving evidence in court;
- Coordination of case preparation;
- Victim empowerment; and
- HIV/AIDS support and impact.

These topics were divided into four broad areas of discussion, including managing the case, managing the evidence, managing the victim and managing HIV/AIDS and other related diseases.

Determining the NQF level and standard of material have been problematic. No material had existed for this inter-sectoral approach and although some unit standards did exist, none would have provided an adequate comprehensive framework for the proposed content. Unit standards were also offered on various NQF levels, ranging from levels 1–7. The decision was taken to identify the most appropriate material available and to embark on the development of new material that would be submitted for accreditation to a SETA and possible registration of a new qualification in the future.

The material developed for use during the training interventions, for the period under review, was decided upon after extensive research regarding existing international and national course content. A consultant from Monash University was appointed to conduct the research and upon reporting to Zivikele Training the decision was made to use the standards prescribed by the World Health Organisation (WHO). The material was supplemented with the relevant legislation and protocols, including the Child Protection Act, Domestic Violence Act, Sexual Offences Act and other documentation provided by NGOs active in the field and practice of HIV/AIDS and GBV.

5.2 Training

Enabling training is a main focus area for Zivikele Training. For the period September 2006–June 2007, 2434 delegates were trained in 52 different training interventions. Observations regarding the training philosophy, course content and structure, facilitation and feedback will now be discussed.

5.2.1 Training philosophy

Zivikele Training follows a comprehensive, inter-sectoral approach in the provision of training. The strength of Zivikele Training lies in its ability to identify the appropriate partners in any given province and gaining entry into the activities of the province through their partnerships. In doing so Zivikele Training has established sound relationships with the Department of Health, the South African Police Service, the Department of Justice and Child Welfare South Africa.

This inter-sectoral approach has proven to be very effective and meaningful to the training delegates. All delegates in the focus group discussions expressed their gratitude at being given the opportunity to establish sound networks with other government departments in order to combat HIV/AIDS and GBV in a more comprehensive manner.

5.2.2 Course content and structure

The course content and structure has differed from group to group. Zivikele Training promotes a three-day training programme and in some instances this model has been followed. In other provinces, including Gauteng, the format has been more conference style. Course manuals also differ from group to group and Zivikele Training has not provided a standardised manual applicable to all training, although the standards set by the WHO are provided as basis for training. The following observations from interviews with course facilitators offer some clarity on the above statements:

- The Department of Health in Gauteng had a 10-day Workshop which was sponsored 100% by Zivikele Training. The course material was a combination of material provided by Zivikele Training and the Department of Health. All facilitators (speakers) were invited by the Department of Health and the presentations included some cases and interactive sessions, but were mainly lectures provided by invited speakers.
- At the Chris Hani Baragwanath Hospital the format of the course was a one-day conference sponsored by Zivikele Training. Although Zivikele Training made the WHO standards available to delegates, the material distributed mainly included presentations made by speakers and material provided by the Department of Health. Both speakers and delegates were invited by the registered nurse organising the conference. Representatives from Zivikele Training attended the Conference together with fourth year medical students, nurses, specific NGOs, delegates from security services and social workers.
- Child Welfare South Africa in the Eastern Cape held four-day training workshops sponsored by Zivikele Training. The facilitators used had among them more than 20 years experience in the field and experience as facilitators/trainers. Child Welfare South Africa has developed its own training material and used this during the workshops. Workshop delegates were also invited by Child Welfare and representatives from Zivikele Training attended the workshops.
- The course presented in Manenberg was a five-day workshop comprising facilitators/speakers from the South African Police Service, Departments of Justice and of Health (Thuthuzela Centre). Material provided by Zivikele Training was supplemented with additional material supplied by the facilitators/speakers. The workshop culminated in the drafting of a plan of action, which has led to the establishment of a GBV forum for Manenberg and Mitchell's Plain.
- In all other cases facilitators maintained the three-day training model. Facilitators were recruited by Zivikele Training and Zivikele Training also had input into course material and selection of additional speakers.

All training interventions were delivered in English and only in the Eastern Cape was language sometimes described as a barrier. However, the diversity of facilitators allowed delegates to interact in their language of choice. This illustrates the importance of using a facilitator that is a native to the area and one who would understand the dynamics of an identified community.

Zivikele Training was only marginally involved in the selection of course delegates. In most instances the selected government department targets a specific community or group of persons for participation. Targeted recruitment has the advantage of ensuring that the most appropriate delegates participate in the training intervention. This is a practice followed in most government departments, where a training coordinator would receive the information regarding training initiatives and then promote this throughout the department. Individual line managers would then nominate their subordinates to attend the training. However, due to the particular functional nature of GBV training, it is important that training enhances the daily functioning of delegates.

Delegates did state that they would appreciate the training to have a wider impact, that more people should be involved and that not only volunteers (as was the case with the South African Police Service in the Western Cape) become involved. Zivikele Training sends out invitations for participation through NGOs and Community Police Forums. Zivikele Training relies on their partners to successfully identify the most appropriate delegates for participation in their training interventions. The response to these invitations has been very positive and Zivikele Training tries to limit the number of course delegates to 25–30 per course.

5.2.3 Course facilitation and feedback

Since all delegates involved in training are adults, the principles of adult education are used by facilitators. Emphasis is on interaction and in most cases role-plays were used by facilitators to illustrate a particular scenario. All delegates indicated that they found their facilitators to be open, approachable, friendly and knowledgeable about their areas of expertise. Since all groups included delegates from a variety of sectors, subject experts added great value to the quality of the training intervention. The subject expert then also becomes the contact person within that given sector through which more formal relationships could be established once training has been concluded.

Facilitators are not provided with facilitators' guides or presentations to be used during the course. The reason for this is that since course material is supplemented with additional notes, speakers/facilitators often use their own material in the presentation of the course. A broad guideline in terms of topics to be covered is provided and facilitators are asked to provide formal feedback in the form of a training report at the end of the programme. However, a template for reporting has only recently been developed and invited speakers who only participate in a session or two are not asked to provide formal feedback. In the case of more than one facilitator/speaker, the course organiser is asked to submit a general feedback report regarding the profile of delegates, topics covered and logistical arrangements.

As to the topics covered, in most instances the emphasis is determined by the profile of the group. Course content is customised according to the needs of the group. Because of a lack of standardised accredited material, this model is possible and delegates stated that they were given exposure to a broad range of topics, including the conceptualisation of GBV, policies regarding GBV, HIV/AIDS and GBV, child abuse and GBV and the interdisciplinary nature of forensic evidence. The material covered through the WHO Standards include topics such as the management of survivors and victims, medico-legal aspects of GBV in South Africa, protocols affecting medical practitioners in circumstances of GBV, SAPS and Justice system – law affecting adults and children in GBV, forensic evidence gathering steps to follow, forensic test-kits contents, availability and supplies, role-plays between service providers, sharing of best practices and national/provincial approaches to GBV. Some delegates stated that they would appreciate more information regarding substance abuse and its impact on HIV/AIDS and GBV.

All training delegates stated that they attended the training because it would add value to their current positions. In the case of the police officers and medical staff no basic training is provided in obtaining and presenting of forensic evidence and this training succeeded in providing them with the basic understanding of their role and contribution with regards to the provision of comprehensive counselling and care to the victims of HIV/AIDS and GBV. Delegates also stated that providing accreditation

for the training would assist in their own formal development and be relevant to their future career prospects.

All delegates stated that they had received information as to the basic nature of the training content but were not given any specific topics or pre-course material in preparation for their participation in the training initiative.

What has been of great value to the delegates was the database of delegates, which was provided as part of the course manual. Because the delegates hail from different sectors involved in GBV, the database offers delegates the opportunity to interact and network with resource persons outside their immediate environment. The creation of Thuthuzela Centres also offers victims a more comprehensive service since it acts as a one-stop centre for the care and counselling of victims. In some instances course delegates were unaware of the existence of such Centres and through the training were given the opportunity to increase the quality of their care and counselling to victims of GBV.

In most cases delegates were provided with Certificates of Attendance. Delegates were not formally assessed, but since the programme was not accredited, this was not a matter of great concern to the delegates. Delegates did identify the accreditation of the course as crucial to the sustainability of the programme.

At the end of each training intervention delegates were asked to provide formal feedback. With the first courses offered Zivikele Training provided a basic feedback form, which has since been developed more extensively, and is now a standard practice during all training interventions. In some cases the departments involved still require delegates to complete their own standardised feedback forms and these forms have also been made available to Zivikele Training, for record keeping purposes. All delegates were unanimous in stating that the training added value and was time well spent.

5.3 Reference Material

The principle behind providing reference material is to ensure access to additional information to all those involved in HIV/AIDS and GBV. Zivikele Training has established a database of additional material and intends to make this material available, although the format of access is still being discussed.

What Zivikele Training has managed to produce are posters depicting the nature and location of GBV within communities. These posters then also provide the public with the names of key contact persons within the community able to assist those who witnessed the crime and those who want to report such a crime. A second poster shows a flowchart visually identifying the steps to successful reporting and conviction of offenders. These posters were displayed at the Manenberg Police Station and the Thuthuzela Centre of the provincial hospital.

Delegates stated that having access to additional information would be very valuable although most of them would not necessarily have day-to-day access to Internet facilities. A possible suggestion could be made for providing additional material on a CD to distribute during the course and the intention is to have this practice implemented when the roll-out of the accredited course commences.

5.4 Web-based Assistance

Zivikele Training has developed its own website and this is regularly updated by an outsourced resource/contract. The website may be used to distribute additional information or provide contact information regarding delegates who have attended the training. It should be kept in mind that the website has not been used extensively as an educational resource and mention should also be made that in most rural communities access to computers and the Internet is very limited.

The website currently addresses three important functional areas, including programme profile, network information and participating institutions. Links are provided to a very broad network of people active in almost all fields relating to non-governmental health and welfare activities. The network links also provide names of contact persons within provinces able to assist in a very wide functional area. The extent of Zivikele Training's network extends far beyond HIV/AIDS and GBV and this once again shows Zivikele Training's strength in building active partnerships. Links to the participating institutions' websites are also provided, including links to the Departments of Health, Welfare, Justice and the South African Police Service.

5.5 Accreditation of Material

Zivikele Training has maintained a very strong relationship with Trainco Consulting, a registered SASSETA service provider. The CEO of Trainco Consulting is also an accredited assessor and will be used extensively during the roll-out of the accredited material. Zivikele Training started their relationship with Trainco Consulting in 2006 and a formal Memorandum of Understanding (MoU) spells out the roles and responsibilities of each organisation. As such Trainco Consulting is responsible for:

- aligning and creating training material for accreditation with the elected SETA;
- developing course material according to outcomes based education methodologies and SETA ETQA requirements;
- making available to Zivikele Training all materials, courses, training facilities and manpower as necessary for the success of ventures under the MoU;
- ensuring the successful implementation of the objectives including the sharing of expertise, material, resources, innovations, facilities, research, skills and assistance in becoming a leading role player in the development and continued upgrading of the training standards and system under the NQF; and
- maintaining the quality assurance of training delivery according to the accreditation criteria set by the respective SETA.

In addition to the mutual sharing of training resources, material, facilities, research and skills, Zivikele Training has the obligation to:

- fund the research and development initiatives; and
- market training interventions as a non-profit organisation.

During the period under review accreditation could not be achieved and some of the challenges in building a relationship with a SETA have already been discussed. The intention is to have the material accredited by the end of March 2008 where after roll-out can begin. Currently three Assessors are available in-house to Zivikele Training with a planned January 2008 course for eight facilitators (previously known as train-the-trainer) at NQF level 5. Zivikele Training has an agreement with the South African Police Service in KwaZulu Natal to access 24 of the provincial assessors, whom Zivikele Training assisted in accrediting via an outside accreditation body working through the SETA (Inkwazi Training and the Assessment College). A November 2007 assessors training took place which was seen as the train-the-trainer initiatives aimed at ensuring assessors are made available for future accredited course roll-out.

The accredited material is pitched at level 3 of the NQF (Further Education and Training level) and offers successful delegates 5 credits towards a formal qualification. A complete qualification has not been developed although the 5 credit module could be recognised within other formal qualifications

within the H&WSETA and SASSETA. Portability of credits is a challenge but this is beyond the control of Zivikele Training since different SETAs have to formally recognise each others' qualifications to ensure portability.

5.6 Monitoring and Evaluation

Zivikele Training is managed by a Management Committee. The Committee must report to all members during an Annual General Meeting. Since its inception Zivikele Training has maintained meticulous financial records and all financial statements are drafted by an accountant and externally audited on an annual basis. This is prescribed by the Department of Social Welfare, where Zivikele Training is registered, and is also a prerequisite for donor funding.

Apart from meticulous financial records, all meetings are minuted and records are kept of all communication with partners, contracted resources and stakeholders. Both the internal and external monitoring and evaluation structures are sound and in place.

5.7 General Observations

Each SETA acts as a Education and Training Quality Assurance body (ETQA) responsible for accrediting providers, promoting quality among providers, monitoring provision, evaluating assessments and registering assessors, certification of learners and maintaining a provider and learner database, recommending new standards or qualifications to the National Standards Body and submitting reports to the South African Qualifications Authority. In achieving the above the ETQA has established a number of criteria against which service providers are to be evaluated. The criteria have also been chosen in the evaluation of the material developed and used by Zivikele Training. The criteria can be summarised as follows:

- A body applying for accreditation must be registered as a provider.
- A body applying for accreditation must have a recognised quality management system.
- A body applying for accreditation must be able to achieve the desired outcomes, using resources and procedures considered by the ETQA as needed to develop, deliver and evaluate learning programmes which culminate in registered standards or qualifications.
- A body applying for accreditation must have the necessary financial, administrative and physical resources.
- A body applying for accreditation must have policies and practices in place for learning entry, guidance and support.
- A body applying for accreditation must have the policies and practices for the management of assessment which includes an appeals system.
- A body applying for accreditation must have the necessary reporting procedures in place.

Using the above criteria the following general observations can be made regarding the functioning of Zivikele Training for the period January 2006–November 2007:

- Zivikele Training is registered as a non-profit organisation and not as an education and training service provider. However, this is not seen as a possible obstacle, since the view of Zivikele Training is that they will not be involved as actual implementers of training and education, but rather as enablers in ensuring appropriate training and education opportunities are identified and utilised. Furthermore, Zivikele Training aims to change their NPO status to that of a Section 21 Company under the Companies Act depending on the growth of the organisation and their programmes.

- The quality management system (QMS) utilised for the provisioning of training and education is a system developed in collaboration with Trainco Consulting. The system is also maintained by Trainco Consulting, who remains responsible for the design and development of learning programmes, the offering of learning guidance, support and learning pathways and the registration and certification of learners. Information regarding the delegates who have already been trained is also captured in the QMS although their information has not been sent to the SETA, since the programme was not accredited. The challenge lies in providing these delegates with the opportunities to have their learning recognised through formal assessment (a Recognition of Prior Learning (RPL) process). Should these delegates want their learning to be assessed, additional funding will have to be sourced to provide for this extensive RPL process. Currently, the delegates who have finished their training with Zivikele Training will not receive the possible benefits of possible credits.
- Zivikele Training will not be responsible for the development, delivery or evaluation of learning programmes, but will remain accountable to all stakeholders regarding the outcome of the training and education programmes. Zivikele Training will provide for the enabling environment through which assessors will be trained, facilitators identified and training delivered. Results of assessments will be kept and Zivikele Training endeavours to become the quality assurors of the programmes offered in its name.
- Currently Zivikele Training is funded through donor funding, but does not foresee this as an obstacle to successful training and education. Once the proposed material becomes accredited, delivery can become the responsibility of any registered service provider. Zivikele Training will offer its variety of learning resources as support to ensure the success of the product. Currently, Zivikele Training operates on sound governance principles and submits audited financial reports to all its donors. Zivikele Training also shares accredited training facilities with Trainco Consulting in Cape Town.
- All matters relating to learners (their registration, guidance, support and assessment) will be done through Trainco Consulting using their own QMS to ensure appropriate communication with the relevant SETA.

6. Recommendations

6.1 Short- and Medium Term Recommendations

Short and medium term recommendations are intended to address obstacles within the next 18 months. Recommendations are made with regard to the ability of Zivikele Training to achieve the outcomes and objectives stated in their proposals and logical frameworks submitted to donor agencies.

The training philosophy of Zivikele Training is to ensure a comprehensive response to HIV/AIDS and GBV. This comprehensive response is dependent on their ability to identify the appropriate partners. Zivikele Training has been hugely successful in identifying the appropriate partners for both the delegates to training interventions as well as additional resources in the delivery of these training interventions. *The recommendation is to sustain the current partnerships and ensure annual renewal and evaluation of all current memorandums of understanding and formal agreements.*

The customisation of the training has been a positive aspect and very possible because the training was not accredited. However, with the accreditation of the material, customisation might become limited. *The recommendation is that Zivikele Training should ensure that facilitators are aware of the target audience well in advance (at least one week notice) to enable them to contact departmental training coordinators to obtain departmental*

information such as annual reports and strategic plans. Since groups might be mixed (from different sectors), facilitators would need to be adaptable and customisation of group activities and role-plays should be a prerequisite. Facilitators should also receive facilitators' guides which will provide them with general guidelines as to context, content and time management.

With the accreditation of the training programme selection of delegates also becomes an important issue of consideration. Currently, much of the selection is left to the discretion of the relevant department. However, Zivikele Training should prescribe requirements for delegates to ensure that these delegates obtain the maximum benefit intended by the programme. *The recommendation is that when marketing of the training interventions is done, to increase awareness of the project among NGOs and government departments, prescriptive guidelines for the selection of delegates should be specifically stated.* By being prescriptive Zivikele Training ensures that the most appropriate delegate is identified and future career development for a delegate might, indirectly, be addressed.

The future roll-out of the accredited training programme is a very positive initiative for Zivikele Training. As such Zivikele Training will be responsible for evaluating the activities set out in their Memorandum of Understanding with Trainco Consulting. Trainco Consulting is the accredited service provider and developer of the material and will also be responsible for the delivery and quality assurance of the product. In terms of the delivery of the programme, Zivikele Training will identify a pool of accredited assessors to be put at the disposal of Trainco Consulting. Zivikele Training will offer logistical and administrative support to ensure the successful delivery of the programme. Zivikele Training will also act as external moderator in ensuring that the standard of the project is maintained. *The recommendation is that Zivikele Training should familiarise itself with the quality criteria set by the H&WSETA to ensure appropriate external moderation/evaluation of the project.*

Most of the recommendations regarding assessment and certification hinge on the accreditation of the training programme. Zivikele Training, through Trainco Consulting, have submitted all documentation necessary for accreditation to the H&WSETA and are awaiting their response. Since the approval of the accreditation does not depend on Zivikele Training, *the recommendation is that Zivikele Training should ensure that the appropriate infrastructure is in place to service the rest of the contract.* This means that Zivikele Training should ensure that enough assessors are trained and accredited, training facilities are available, training material and supporting documentation (such as additional reference material, facilitators' guides, feedback templates and reporting templates) is in place.

Providing additional material in the form of reference material or web-based assistance would definitely enhance the quality of the project. Currently, posters depict occurrences of GBV within communities and these have been distributed to some police stations and Thuthuzela Centres. Posters, also, provide for a flow-chart detailing the process and procedure involved in the reporting of cases of GBV. These posters contain information of contact persons within the police, social welfare and justice sectors and could possibly become an incredible resource tool if distributed nationally. Through identifying the contact persons, Zivikele Training will also be able to identify the appropriate persons in all sectors through which to implement their accredited training programme. *The recommendation is that Zivikele Training should endeavour to distribute posters to all key departments within the sectors already involved in the comprehensive care and counselling of GBV victims, including police stations, provincial hospitals and local clinics, magistrate offices and social welfare offices.*

An area of concern is the formal recognition which could be awarded for delegates who have already attended the non-accredited training. Zivikele Training has stated their intention of submitting all delegates to a process for the Recognition of Prior Learning. However, the realistic impact of this intention could have a possible resource implication on both the infrastructure and budget of the organisation. *The recommendation is that Zivikele Training should make provision for submitting an additional funding proposal to delegates requiring RPL while identifying a possible partner for the formal assessment of these delegates.* The names

of the delegates cannot be submitted to the H&WSETA without appropriate assessment and moderation of the process. This might however, be more of a long-term objective for Zivikele Training.

6.2 Long Term Recommendations

The long term recommendations concern the possible growth of the project. The importance of sustaining their partnerships is of the utmost significance to the future initiatives of Zivikele Training. The target audience who currently benefit from their training include health care workers, social workers and police officers. Some of the delegates, such as medical staff and social workers, are registered with professional associations. An integral part of their annual renewal includes keeping abreast of new developments within their chosen expert areas. As such, participating in accredited courses could provide them with the necessary points to renew their professional membership. Thus, the accreditation of the course could aid in their professional development. However, whether accreditation on NQF level 3 is sufficient for these professional associations is a matter for further negotiation. *The recommendation is that Zivikele Training should initiate talks with the respective South African medical practitioners' associations to ensure mutual recognition of course accreditation.*

Growth in the project could also be achieved through the introduction of a full qualification in GBV. This means that Zivikele Training should conduct research into the feasibility of such a specialised qualification. Possibly, the qualification could be introduced in either the justice or health sector, but the emphasis in both sectors would differ vastly. Since Zivikele Training proposes only to remain an enabler for training and education, *the recommendation is that Zivikele Training could expand its current project by enabling an accredited service provider to develop a full qualification in GBV.*

7. Conclusion and Further Research

Gender Based Violence is recognised as a cross-cutting issue needing an integrated response. Violence against women, men and children is an area of great concern and a comprehensive plan of action needs to be developed to ensure an appropriate response at national, provincial and local levels of operation. Since government does not have a capacity to address this challenge comprehensively, Zivikele Training could be used as vehicle through which collaboration and cooperative government are realised. Zivikele Training should be commended for their commitment towards capacity building within the South African governmental structures. Their emphasis on an inter-sectoral approach to GBV might just ensure that the respective government departments involved in the care and counselling of victims of HIV/AIDS and GBV establish collaborative forums which become more responsive to the needs of their communities.

Since Zivikele Training proposes to create self reliant communities in the long term, additional research might be required to determine the impact of training in GBV within communities in order to ensure the establishment of an appropriate social construct able to respond to a violent free society. Violence against women, men and children is a complex issue and requires the use of wide variety of initiatives, programme and policies which could assist in the care and counselling of victims of GBV. Additional research might evaluate the appropriateness of strategies which will address the following:

- sensitising agents of socialisation such as the family, schools and the media;
- advocacy of gender equality policies in organisations and the promotion of a rights based approach to planning and programming within organisational context;

- institutionalisation and implementation of gender equality policies in organisations; and community based interventions and individual activism.

Advocacy for the involvement of multiple sectors to address and combat HIV/AIDS and GBV will continue to be an area of importance in South Africa. As the Zivikele Training project grows, the need for resources and capacities will become clearer. The cross-cutting nature of HIV/AIDS and GBV and its impact on millions of citizens unable to enjoy their basic rights have become increasingly more evident and Zivikele Training's response of a multi-sectoral approach is a step in the right direction.

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Annexure A

Focus Group Interview Schedule

Question 1

Which sector do you represent?

Health	
Security (Police and National Prosecution)	
Social Welfare	
Other:	

Question 2

Think back to when you first heard about the course – what were your expectations regarding the course?

Job related – assist in current position/ adds value to current position	
Formal development – assist in future	
Personal interest	
Other	

Question 3

Did you have a clear understanding of what the course was about – where did you get the information?

Zivikele Training	
Department	
Other	

Question 4

How long was the course? What was the format of the course?

Question 5

Did you receive any material in the period before the course started?

Yes	
No	

Pre-course assignment? Yes/No

Question 6

What material did you receive on the day the course started?

Question 7

What topics were covered?

Topics according to Zivikele Training Manual	
Topics according to own Manual	

Topics decided upon by facilitator	
Topics customized to group	

Question 8

Are there any other topics you would suggest for a course like this?

Question 9

What methods of facilitation were used – did you participate in any practical activities?

Which practical activities?

Group work & presentations	
Role play	
Multimedia: DVDs	
Other	

Question 10

Has the facilitator been open and approachable and knowledgeable of the topics?

Yes	
No	

Question 11

Were you comfortable with the language the course was offered in?

Yes	
No	
If no, why not?	

Question 12

What changes would you make to improve the course?

Question 13

Was it time well spent attending the course – in what way is your life different because of your participation in the course?

Question 14

Were you asked to provide feedback? Formally or informally?

Formal	
Informal	

Annexure B

Facilitator Interview Schedule

Question 1

Which sector do you represent?

Health & Welfare	
Security Services (Police and National Prosecution)	
Education	
Other:	

Question 2

How many years experience do you have in your sector?

0–5 years	
6–10 years	
11+years	

Question 3

Who do you work for?

--

Question 4

What position do you occupy?

--

Question 5

Tell us how you became involved with the course?

How were you recruited to become a facilitator at Zivikele Training?

Question 6

What is your background in facilitation?

Question 7

How often do you facilitate courses?

Once a month	
Twice a month	
It's my full-time employment	

Question 8

Do you only facilitate courses addressing Gender Based Violence?

Yes	
No	

Question 9

What other courses do you facilitate?

Question 10

Who was your main contact in terms of the planning and organizing of the course?

Question 11

Did you meet the representatives from Zivikele Training before the course to discuss what was expected from you?

Yes	
No	

Question 12

Did you know who the target audience would be attending the course?

Yes	
No	

Question 13

What material did you use for the facilitation of the course?

Zivikele Training Material only	
Other	
Combination of above	

Question 14

How do you feel about the structure of the course – schedule, duration, start and end times?

Question 15

What are your comments on the material used, training topics covered etc?

Question 16

What facilitation methods did you use throughout the course?

Question 17

Did you use any assessment methods for the course?

Question 18

Did you submit an evaluation report – to whom?

Question 19

Would you say the following proposals will increase Zivikele's quality of training?

Accreditation of training material	
Additional curriculum development	
Providing reference material	
Offering web-based assistance	
Other	

Question 20

Would you want to sustain your relationship with Zivikele Training?

Yes	
No	

Question 21

Do you think the work of Zivikele Training on GBV is sustainable?

If yes, why?
If no, why?

Annexure C

Biographical data of course delegates

Figure 1: Sector representation

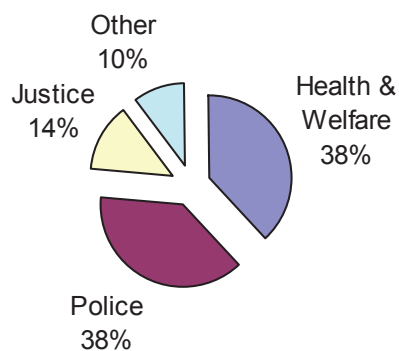


Figure 2: Gender

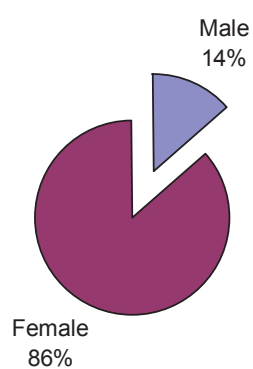


Figure 3: Age

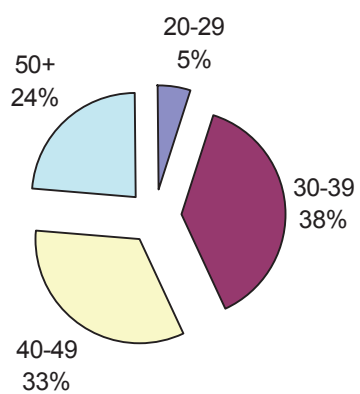


Figure 4: Race

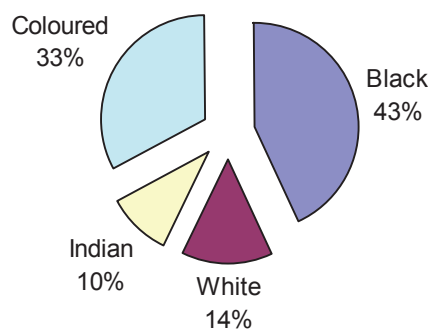
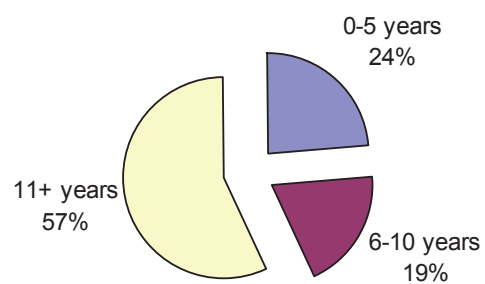


Figure 5: Years experience in the sector



Annexure Terms of Reference

What Should the Evaluation Examine?

The evaluation should examine and make findings on the work of Zivikele Training has done in the government's response to victims of gender-based violence (GBV):

- what Zivikele Training has achieved and not achieved during its existence
- continue operating successfully, meet its objectives and grow.

Internal effectiveness

- the factors that have been important in Zivikele Training successes and failures
- Zivikele Training operational systems including its structure, financial systems,
- Setas
- fundraising mechanisms, communications, research, human resources

Who Should Conduct the Evaluation?

An independent evaluator should be contracted.

What Should the Evaluation Produce?

The output of the evaluation should be a report that is written in a clear style. Zivikele Training and the Embassies of the Netherlands and Sweden, Pretoria should have an opportunity to review the final draft of the report. If disputes over the final text arise between the evaluator and Zivikele Training these should be noted in the final document.

The precise layout of the final report must be determined by the evaluator

Guidelines:

The executive summary should describe the purpose of the evaluation, key findings and recommendations. This should be followed by a brief history of Zivikele Training, its major accomplishments and setbacks. Then there should be chapters describing structure and strategies, past, present and future. This should be followed by chapters examining clinics, finances, funding and operations.

Each of the above chapters after the executive summary should contain findings and recommendations. A concluding chapter examining the lessons learnt and the future of Zivikele Training should also be produced. The entire report should be brief, perhaps 20 to 30 pages at most.

How Should the Evaluation be Conducted?

The evaluation should be conducted over two months (February and March 2006) followed by a one month write-up period (April). The evaluator should start off at Zivikele Training office by interviewing key staff. The service provider should be interviewed. The recipient of the services, should also be included in the study. It is not necessary to visit all service points a sample will do. Based on these discussions, a final evaluation plan should be formulated and submitted to the Embassies and Zivikele Training for approval.

The report should be produced using 12 point Arial on A4.

The findings and recommendations should be written up and the final draft sent to Zivikele Training and the Embassies for review.

Guide:

1. Introduction

Scope of the evaluation

Methodology and evaluation profile

2. Context

3. Project profile

4. Evaluation findings

Achievements and challenges

Organisational strategy

Programmes

Funding

Relationships

- Health professionals

- Government

- Private sector

Structure

Systems

- Financial

- Human resources

- Communication

- Administration

- Planning, monitoring and evaluation

Human Capital: Leadership

Human Capital: Staff

- Staff recruitment

- Staff job descriptions

- Staff development

- Staff management

Organisational culture

- Values

- Work ethic

- Gender relations

- People with AIDS

- Learning and change

5. Conclusion

Relevance

Effectiveness

Efficiency

Sustainability

6. Recommendations

Short term

Medium term

Long term

Elements of each term:

Strategy

Programmes

Funding

Relationships

Structure

Systems

Staffing

Culture

The project

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